



# 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



**WASTELINE  
ENGINEERING, INC.**

**P.O. Box 421  
208 South Front Street  
Aledo, Texas 76008  
817-441-1300 p  
817-441-1033 f  
[www.wasteline-eng.com](http://www.wasteline-eng.com)**

**Peaster Independent School District  
Plain Language Summary**

Peaster Independent School District (CN600623094) operates Peaster ISD WWTP #1 (RN102078045), an activated sludge process facility operating in extended aeration mode. The facility is located 3602 Harwell Lake Road, in Parker County, Texas 76088.

Peaster Independent School District is requesting a renewal of their existing wastewater permit to discharge 36,000 gallons per day of treated domestic wastewater.

Discharges from the facility are expected to contain five-day Carbonaceous Biochemical Oxygen Demand, total suspended solids, and ammonia nitrogen. Domestic wastewater is treated by an activated sludge process plant and the treatment units include an aeration basin, final clarifier, sludge digester, and chlorine contact chamber.



# TEXAS COMMISSION ON ENVIRONMENTAL QUALITY



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

PERMIT NO. WQ0013589001

**APPLICATION.** Peaster Independent School District Public Facility Corporation, 3600 Harwell Lake Road, Weatherford, Texas 76088, has applied to the Texas Commission on Environmental Quality (TCEQ) to renew Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0013589001 (EPA I.D. No. TX0107981) to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 36,000 gallons per day. The domestic wastewater treatment facility is located at 3602 Harwell Lake Road, in Parker County, Texas 76088. The discharge route is from the plant site to a stock pond; thence to an unnamed tributary of Dry Creek; thence to Dry Creek; thence to Rock Creek; thence to Brazos River Below Possum Kingdom Lake. TCEQ received this application on July 11, 2024. The permit application will be available for viewing and copying at Peaster Administrative Building, 3600 Harwell Lake Road, Weatherford, in Parker County, Texas prior to the date this notice is published in the newspaper. The application, including any updates, and associated notices are available electronically at the following webpage:

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

<https://gisweb.tceq.texas.gov/LocationMapper/?marker=-97.862222,32.866944&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 county-wide mailing list and to those who are on the mailing list for this application. That notice will contain the deadline for submitting public comments.**

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

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

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

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

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

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

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

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

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

Further information may also be obtained from Peaster Independent School District Public Facility Corporation at the address stated above or by calling Mr. Bobby McCune, Director of Operations, at 817-341-5000.

Issuance Date: August 6, 2024



# WASTELINE ENGINEERING, INC.

PO Box 421 · 208 South Front Street Aledo, Texas 76008  
(817) 441-1300 phone · (817) 441-1033 fax  
www.wasteline-eng.com

**RECIPIENT:**

Executive Director  
Applications Review and Processing Team (MC148)  
Texas Commission on Environmental Quality  
12100 Park 35 Circle  
Austin, Texas 78753  
5122392435

## LETTER OF TRANSMITTAL

DATE

July 3, 2024

TIME:

2:52 PM

CLIENT:

Peaster Independent School District

PROJECT:

Permit Renewal

Project #

22417

PO Number

NA

Cc: file

WE ARE SENDING YOU VIA:

☐ 1<sup>ST</sup> CLASS USPS☒ OVERNIGHT DELIVERY☐

HAND DELIVERED

☒ COPY OF LETTER☐ PLANS☐ SPECIFICATIONS☒ PRINTS☐ SHOP DRAWINGS☐ CHANGE ORDER☐ SAMPLES☒ OTHER

QTY.	DATE	DESCRIPTION
1	7/3/24	ORIGINAL APPLICATION FOR RENEWAL OF TCEQ DOMESTIC WATER PERMIT
3	7/3/24	COPIES OF APPLICATION FOR RENEWAL

**THESE ARE TRANSMITTED AS CHECKED BELOW:**☒ As Requested☒ For Review and Comment☐ For Your Information☐ For Review and Bid☒ For Your Action☐ For Your Approval☐ Approved with Changes☐ Approved as Noted☐ Resubmit [#] Copies for Approval☐ For Bids Due [date / year]☐ OTHER**REMARKS:**

Applications Team,

Please find enclosed one (1) original application for renewal of TCEQ Domestic Wastewater Permit, in addition three (3) copies of said application. If you require any additional information to aid in your review, please feel free to contact our office.

EMAIL: jface@wasteline-eng.com

SIGNED:

JEREMY FACE, WASTELINE ENGINEERING, INC.



# WASTELINE ENGINEERING, INC.

July 3, 2024

Texas Commission on Environmental Quality  
PO Box 13087  
Austin, Texas 78711-3087

**Attn: Applications Team**  
Wastewater Permits Section (MC 148)  
Water Quality Division

**Re: Application to Renew Permit No. WQ0013589001 (EPA I.D. No. TX0107981  
Issued to Peaster Independent School District  
CN600623094; RN102078045  
Parker County, Texas**

Application Team:

On behalf of **Peaster Independent School District**, we submit for your review and acceptance one (1) original and three (3) copies of an application to renew permit **WQ0013589001** to discharge, deposit, or dispose of domestic waste within the State of Texas. A check in the amount of \$315.00 has been forwarded under separate cover.

Should you have any questions or comments concerning this document and its contents, please do not hesitate to contact this office.

Thanking you in advance for your prompt attention to this matter, we remain,

Very truly yours,  
**WASTELINE ENGINEERING, INC.**  
TX Registered Engineering Firm #F-1669

Savannah Resendiz

cc: **Peaster Independent School District**



**DOMESTIC WASTEWATER PERMIT APPLICATION  
CHECKLIST****Complete and submit this checklist with the application.**APPLICANT NAME: Peaster Independent School DistrictPERMIT NUMBER (If new, leave blank): WQ00 13589001**Indicate if each of the following items is included in your application.**

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

**For TCEQ Use Only**

Segment Number \_\_\_\_\_ County \_\_\_\_\_  
Expiration Date \_\_\_\_\_ Region \_\_\_\_\_  
Permit Number \_\_\_\_\_



# DOMESTIC WASTEWATER PERMIT APPLICATION ADMINISTRATIVE REPORT 1.0

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

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

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

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

Minor Amendment (for any flow) \$150.00 ☐

### Payment Information:

Mailed      Check/Money Order Number: 004873  
Check/Money Order Amount: \$315.00  
Name Printed on Check: Peaster Independent School District General Operating Funds

EPAY      Voucher Number: Click to enter text.

Copy of Payment Voucher enclosed?      Yes ☐

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

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

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

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

- ☒ Active      ☐ Inactive



- c. Check the box next to the appropriate permit type.
- ☒ TPDES Permit
  - ☐ TLAP
  - ☐ TPDES Permit with TLAP component
  - ☐ Subsurface Area Drip Dispersal System (SADDS)
- d. Check the box next to the appropriate application type
- ☐ New
  - ☐ Major Amendment with Renewal
  - ☐ Major Amendment without Renewal
  - ☒ Renewal without changes
  - ☐ Minor Amendment with Renewal
  - ☐ Minor Amendment without Renewal
  - ☐ Minor Modification of permit
- e. For amendments or modifications, describe the proposed changes: Not applicable
- f. For existing permits:
- Permit Number: WQ00 13589001
- EPA I.D. (TPDES only): TX 0107981
- Expiration Date: October 7, 2024

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

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

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

Peaster Independent School District

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

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

CN: 600623094

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: Dr.

Last Name, First Name: Pittman, Kendra

Title: Superintendent

Credential: Click to enter text.

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

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

Not applicable

*(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. Attachment 1

## 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: McCune, Bobby  
Title: Director of Operations Credential: Click to enter text.  
Organization Name: Peaster Independent School District  
Mailing Address: 3600 Harwell Lake Road City, State, Zip Code: Weatherford, TX 76088  
Phone No.: 817-341-5000 E-mail Address: bmcune@peaster.net  
Check one or both: ☒ Administrative Contact ☐ Technical Contact
- B. Prefix: Mr. Last Name, First Name: Breisch, Glenn  
Title: Click to enter text. Credential: Professional Engineer  
Organization Name: Wasteline Engineering, Inc.  
Mailing Address: P.O. Box 421 City, State, Zip Code: Aledo, TX 76008  
Phone No.: 817-441-1300 E-mail Address: gbreisch@wasteline-eng.com  
Check one or both: ☐ Administrative Contact ☒ Technical Contact

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

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

- A. Prefix: Mr. Last Name, First Name: McCune, Bobby  
Title: Director of Operations Credential: Click to enter text.  
Organization Name: Peaster Independent School District  
Mailing Address: 3600 Harwell Lake Road City, State, Zip Code: Weatherford, TX 76088  
Phone No.: 817-341-5000 E-mail Address: bmcune@peaster.net

B. Prefix: Mr. Last Name, First Name: Breisch, Glenn  
Title: Click to enter text. Credential: Professional Engineer  
Organization Name: Wasteline Engineering, Inc.  
Mailing Address: P.O. Box 421 City, State, Zip Code: Aledo, TX 76008  
Phone No.: 817-441-1300 E-mail Address: gbreisch@wasteline-eng.com

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

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

Prefix: Mr. Last Name, First Name: McCune, Bobby  
Title: Director of Operations Credential: Click to enter text.  
Organization Name: Peaster Independent School District  
Mailing Address: 3600 Harwell Lake Road City, State, Zip Code: Weatherford, TX 76088  
Phone No.: 817-341-5000 E-mail Address: bmccune@peaster.net

## 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: McCune, Bobby  
Title: Director of Operations Credential: Click to enter text.  
Organization Name: Peaster Independent School District  
Mailing Address: 3600 Harwell Lake Road City, State, Zip Code: Weatherford, TX 76088  
Phone No.: 817-341-5000 E-mail Address: bmccune@peaster.net

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

### A. Individual Publishing the Notices

Prefix: Mr. Last Name, First Name: McCune, Bobby  
Title: Director of Operations Credential: Click to enter text.  
Organization Name: Peaster Independent School District  
Mailing Address: 3600 Harwell Lake Road City, State, Zip Code: Weatherford, TX 76088  
Phone No.: 817-341-5000 E-mail Address: bmccune@peaster.net



**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: McCune, Bobby

Title: Director of Operations

Credential: Click to enter text.

Organization Name: Peaster Independent School District

Mailing Address: 3600 Harwell Lake Road City, State, Zip Code: Weatherford, TX 76088

Phone No.: 817-341-5000

E-mail Address: bmcune@peaster.net

**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: Peaster Administrative Building

Location within the building: Front Desk

Physical Address of Building: 3600 Harwell Lake Road

City: Weatherford, TX 76088

County: Parker

Contact (Last Name, First Name): Reception

Phone No.: 817-341-5000 Ext.: Click to enter text.

**E. Bilingual Notice Requirements**

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

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

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

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

☐ Yes

☐ No

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

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

☐ Yes

☐ No

3. Do the students at these schools attend a bilingual education program at another location?
- ☐ Yes      ☐ No
4. Would the school be required to provide a bilingual education program but the school has waived out of this requirement under 19 TAC §89.1205(g)?
- ☐ Yes      ☐ No
5. If the answer is **yes** to **question 1, 2, 3, or 4**, public notices in an alternative language are required. Which language is required by the bilingual program? [Click to enter text.](#)

**F. Plain Language Summary Template**

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

**Attachment:** 2

**G. Public Involvement Plan Form**

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

**Attachment:** Not applicable

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

- A. If the site is currently regulated by TCEQ, provide the Regulated Entity Number (RN) issued to this site. **RN** 102078045

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

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

Peaster ISD WWTP

- C. Owner of treatment facility: Peaster Independent School District

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

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

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

Last Name, First Name: Applicant

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

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

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

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

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

Phone No.: [Click to enter text.](#)

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

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

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



E. Owner of effluent disposal site:

Prefix: Click to enter text.

Last Name, First Name: Click to enter text.

Title: Click to enter text.

Credential: Click to enter text.

Organization Name: Click to enter text.

Mailing Address: Click to enter text.

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

Phone No.: Click to enter text.

E-mail Address: Click to enter text.

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

**Attachment:** Click to enter text.

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

Prefix: Click to enter text.

Last Name, First Name: Click to enter text.

Title: Click to enter text.

Credential: Click to enter text.

Organization Name: Click to enter text.

Mailing Address: Click to enter text.

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

Phone No.: Click to enter text.

E-mail Address: Click to enter text.

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

**Attachment:** Click to enter text.

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

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

☒ Yes ☐ No

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

Click to enter text.

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

☒ Yes ☐ No

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

Click to enter text.

City nearest the outfall(s): Peaster

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

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

☐ Yes ☒ No

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

- ☐ Authorization granted      ☐ Authorization pending

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

**Attachment:** Click to enter text.

- D. For all applications involving an average daily discharge of 5 MGD or more, provide the names of all counties located within 100 statute miles downstream of the point(s) of discharge: Not applicable

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

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

- ☐ Yes      ☐ No

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

Click to enter text.

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

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

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

Click to enter text.

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

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

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

- ☐ Yes      ☒ No

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

- ☐ Yes      ☐ No      ☒ Not Applicable

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

Click to enter text.



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

☐ Yes ☒ No

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

D. Do you owe any fees to the TCEQ?

☐ Yes ☒ No

If yes, provide the following information:

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

Amount past due: [Click to enter text.](#)

E. Do you owe any penalties to the TCEQ?

☐ Yes ☒ No

If yes, please provide the following information:

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

Amount past due: [Click to enter text.](#)

## Section 13. Attachments (Instructions Page 33)

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

- ☐ Lease agreement or deed recorded easement, if the land where the treatment facility is located or the effluent disposal site are not owned by the applicant or co-applicant.
- ☐ Original full-size USGS Topographic Map with the following information:
  - Applicant's property boundary
  - Treatment facility boundary
  - Labeled point of discharge for each discharge point (TPDES only)
  - Highlighted discharge route for each discharge point (TPDES only)
  - Onsite sewage sludge disposal site (if applicable)
  - Effluent disposal site boundaries (TLAP only)
  - New and future construction (if applicable)
  - 1 mile radius information
  - 3 miles downstream information (TPDES only)
  - All ponds.
- ☐ Attachment 1 for Individuals as co-applicants
- ☐ Other Attachments. Please specify: [Click to enter text.](#)

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

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

Permit Number: WQ0013589001

Applicant: Peaster Independent School District

Certification:

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

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

Signatory name (typed or printed): Kendra Pittman

Signatory title: Superintendent

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

(Use blue ink)

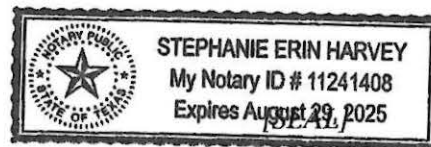
Date: \_\_\_\_\_

Subscribed and Sworn to before me by the said Kendra Pittman

on this 13 day of June, 2024.

My commission expires on the 23 day of August, 2025.

Stephanie Erin Harvey  
Notary Public



Parker  
County, Texas





## 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): 0.036

2-Hr Peak Flow (MGD): 0.144

Estimated construction start date: Not Applicable

Estimated waste disposal start date: Approximately 2000-2001

#### 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): 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.

#### D. Current Operating Phase

Provide the startup date of the facility: Existing Phase – Approximately 2000 - 2001

### 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.

This application is for an activated sludge wastewater treatment facility operating in extended aeration mode. The treatment facility consists of one single operational phase, consisting of two identical treatment unit trains including: aeration basin, clarifier, aerobic digester, and chlorinator. The treated effluent will be piped and discharged into a stock pond, thence to an unnamed tributary of Dry Creek, Thence to Rock Creek, Thence to Brazos River Below Possum Kingdom Lake in Segment No. 1206.

## 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)
Attachment 4		

## C. Process Flow Diagram

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

**Attachment:** 5

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

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

- Latitude: 32°52'04"N
- Longitude: 97°53'07"W

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

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

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

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



**Attachment: 6**

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

The wastewater treatment facility will serve the Peaster Independent School District.

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

**Collection System Information**

Collection System Name	Owner Name	Owner Type	Population Served
Peaster ISD System	Peaster ISD	Publicly Owned	Pre-k - 12th
		Choose an item.	
		Choose an item.	
		Choose an item.	

**Section 4. Unbuilt Phases (Instructions Page 45)**

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

☐ Yes ☒ No

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

☐ Yes ☐ No

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

Click to enter text.

**Section 5. Closure Plans (Instructions Page 45)**

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

☐ Yes ☒ No

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

☐ Yes ☒ No

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

Click to enter text.

## Section 6. Permit Specific Requirements (Instructions Page 45)

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

### A. Summary transmittal

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

☒ Yes ☐ No

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

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

Click to enter text.

### B. Buffer zones

Have the buffer zone requirements been met?

☒ Yes ☐ No

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

The buffer zone requirements have been met through ownership.

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

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

☐ Yes ☒ No

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

Click to enter text.

### D. Grit and grease treatment

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

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

☐ Yes ☒ No

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

#### 2. Grit and grease processing

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

Click to enter text.

#### 3. Grit disposal

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

☐ Yes ☐ No

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



Describe the method of grit disposal.

Click to enter text.

#### 4. Grease and decanted liquid disposal

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

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

Click to enter text.

### E. Stormwater management

#### 1. Applicability

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

☐ Yes ☒ No

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

☐ Yes ☒ No

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

#### 2. MSGP coverage

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

☐ Yes ☐ No

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

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

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

☐ Yes ☐ No

#### 3. Conditional exclusion

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

☐ Yes ☐ No

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

Click to enter text.

**4. Existing coverage in individual permit**

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

☐ Yes ☐ No

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

Click to enter text.

**5. Zero stormwater discharge**

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

☐ Yes ☐ No

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

Click to enter text.

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

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

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

☐ Yes ☐ No

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



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

[Click to enter text.](#)

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

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

Does the facility discharge in the Lake Houston watershed?

☐ Yes ☒ No

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

[Click to enter text.](#)

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

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

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

☐ Yes ☒ No

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

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

[Click to enter text.](#)

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

##### 2. Acceptance of septic waste

Is the facility accepting or will it accept septic waste?

☐ Yes ☒ No

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

☐ Yes ☐ No

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

☐ Yes ☐ No



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

Click to enter text.

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

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

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

☐ Yes ☒ No

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

Click to enter text.

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

Is the facility in operation?

☒ Yes ☐ No

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

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

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

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

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

\*TPDES permits only

†TLAP permits only

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

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

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

Facility Operator Name: Jack DoyleFacility Operator's License Classification and Level: Class C WastewaterFacility Operator's License Number: ww0074257



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

### B. WWTP's Biosolids Treatment Process

Check all that apply. See instructions for guidance.

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

### C. Biosolids Management

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

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

#### Biosolids Management

Management Practice	Handler or Preparer Type	Bulk or Bag Container	Amount (dry metric tons)	Pathogen Reduction Options	Vector Attraction Reduction Option
Disposal in Landfill	Off-site Third-Party Handler or Preparer	Bulk	0.015	Class B: PSRP Aerobic Digestion	Option 8: Unstabilized sludge is $\geq 90\%$ solids
Choose an item.	Choose an item.	Choose an item.		Choose an item.	Choose an item.
Choose an item.	Choose an item.	Choose an item.		Choose an item.	Choose an item.

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

#### D. Disposal site

Disposal site name: Village Creek

TCEQ permit or registration number: WQ0010494013

County where disposal site is located: Tarrant

#### E. Transportation method

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

Name of the hauler: Americas Best Pumping

Hauler registration number: 23048

Sludge is transported as a:

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

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

#### A. Beneficial use authorization

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

☐ Yes ☒ No

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

☐ Yes ☐ No

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



☐ Yes ☐ No

## B. Sludge processing authorization

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

Sludge Composting	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Marketing and Distribution of sludge	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Sludge Surface Disposal or Sludge Monofill	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Temporary storage in sludge lagoons	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

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

☐ Yes ☐ No

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

Does this facility include sewage sludge lagoons?

☐ Yes ☒ No

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

### A. Location information

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

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

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

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

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

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

Click to enter text.

## B. Temporary storage information

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Provide the following information:

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

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

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

## C. Liner information

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

☐ Yes ☐ No

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

[Click to enter text.](#)

#### D. Site development plan

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

[Click to enter text.](#)

Attach the following documents to the application.

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

#### E. Groundwater monitoring

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

☐ Yes ☐ No

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

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



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

### A. Additional authorizations

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

☐ Yes ☒ No

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

Click to enter text.

### B. Permittee enforcement status

Is the permittee currently under enforcement for this facility?

☐ Yes ☒ No

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

☐ Yes ☒ No

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

Click to enter text.

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

### A. RCRA hazardous wastes

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

☐ Yes ☒ No



**B. Remediation activity wastewater**

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

☐ Yes ☒ No

**C. Details about wastes received**

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

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

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

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

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

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

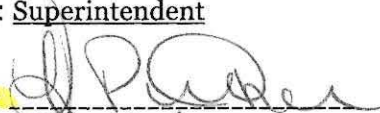
The following certification statement shall be signed and submitted with every application. See the Signature Page section in the Instructions, for a list of designated representatives who may sign the certification.

### CERTIFICATION:

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

Printed Name: Kendra Pittman

Title: Superintendent

Signature: 

Date: 6/13/24

# 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 **no**, proceed to Section 2. If **yes**, 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:** [Click to enter text.](#)

### Section 2. Discharge into Tidally Affected Waters (Instructions Page 64)

Does the facility discharge into tidally affected waters?

☐ Yes ☒ No

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

#### A. Receiving water outfall

Width of the receiving water at the outfall, in feet: [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).

[Click to enter text.](#)

#### 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: A stock pond.

#### A. Receiving water type

Identify the appropriate description of the receiving waters.

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

Surface area, in acres: Approximately 0.70 acres

Average depth of the entire water body, in feet: Approximately 6 feet

Average depth of water body within a 500-foot radius of discharge point, in feet:  
Not applicable

- ☐ Man-made Channel or Ditch
- ☐ Open Bay
- ☐ Tidal Stream, Bayou, or Marsh
- ☐ Other, specify: Click to enter text.

#### B. Flow characteristics

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

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

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

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

### C. Downstream perennial confluences

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

None

### D. Downstream characteristics

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

☐ Yes ☒ No

If yes, discuss how.

[Click to enter text.](#)

### E. Normal dry weather characteristics

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

Water body appeared to be in a natural state, typical of stock ponds of this size in the area.  
Water was semi-turbid, somewhere in between turbid and clear, water clarity discolored.

Date and time of observation: 2024.03.06

Was the water body influenced by stormwater runoff during observations?

☐ Yes ☒ No

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

### A. Upstream influences

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

☐ Oil field activities

☐ Urban runoff

☐ Upstream discharges

☒ Agricultural runoff

☐ Septic tanks

☐ Other(s), specify: [Click to enter text.](#)

## B. Waterbody uses

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

- |                                                |                                                                                  |
|------------------------------------------------|----------------------------------------------------------------------------------|
| <input type="checkbox"/> Livestock watering    | <input type="checkbox"/> Contact recreation                                      |
| <input type="checkbox"/> Irrigation withdrawal | <input type="checkbox"/> Non-contact recreation                                  |
| <input type="checkbox"/> Fishing               | <input type="checkbox"/> Navigation                                              |
| <input type="checkbox"/> Domestic water supply | <input type="checkbox"/> Industrial water supply                                 |
| <input type="checkbox"/> Park activities       | <input checked="" type="checkbox"/> Other(s), specify: <u>private stock tank</u> |

## C. Waterbody aesthetics

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

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





## Attachment Index

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- Attachment 1 – Core Data Form - 10400
- Attachment 2 – Plain Language Summary
- Attachment 3 – Supplemental Permit Information Form
- Attachment 4 – Treatment Units
- Attachment 5 – Flow Diagram
- Attachment 6 – Site Map



WASTELINE  
ENGINEERING, INC.

Attachment 1 – Core Data Form - 10400

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# TCEQ Core Data Form

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

## SECTION I: General Information

<b>1. Reason for Submission</b> (If other is checked please describe in space provided.)		
<input type="checkbox"/> New Permit, Registration or Authorization (Core Data Form should be submitted with the program application.)		
<input checked="" type="checkbox"/> Renewal (Core Data Form should be submitted with the renewal form)		<input type="checkbox"/> Other
<b>2. Customer Reference Number</b> (if issued)	<a href="#">Follow this link to search for CN or RN numbers in Central Registry**</a>	<b>3. Regulated Entity Reference Number</b> (if issued)
CN 600623094		RN 102078045

## SECTION II: Customer Information

<b>4. General Customer Information</b>		<b>5. Effective Date for Customer Information Updates</b> (mm/dd/yyyy)	
<input type="checkbox"/> New Customer		<input checked="" type="checkbox"/> Update to Customer Information	
<input type="checkbox"/> Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)		<input type="checkbox"/> Change in Regulated Entity Ownership	
<i>The Customer Name submitted here may be updated automatically based on what is current and active with the Texas Secretary of State (SOS) or Texas Comptroller of Public Accounts (CPA).</i>			
<b>6. Customer Legal Name</b> (If an individual, print last name first: eg: Doe, John)		<i>If new Customer, enter previous Customer below:</i>	
Peaster Independent School District			
<b>7. TX SOS/CPA Filing Number</b>	<b>8. TX State Tax ID</b> (11 digits)	<b>9. Federal Tax ID</b> (9 digits)	<b>10. DUNS Number</b> (if applicable)
0146986201	32000311541	75-6004402	
<b>11. Type of Customer:</b>		Partnership: <input type="checkbox"/> General <input type="checkbox"/> Limited	
<input type="checkbox"/> Corporation		<input type="checkbox"/> Individual	
Government: <input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Federal <input type="checkbox"/> Local <input type="checkbox"/> State <input checked="" type="checkbox"/> Other		<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Other:	
<b>12. Number of Employees</b>		<b>13. Independently Owned and Operated?</b>	
<input type="checkbox"/> 0-20 <input type="checkbox"/> 21-100 <input checked="" type="checkbox"/> 101-250 <input type="checkbox"/> 251-500 <input type="checkbox"/> 501 and higher		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>14. Customer Role</b> (Proposed or Actual) – as it relates to the Regulated Entity listed on this form. Please check one of the following			
<input type="checkbox"/> Owner <input type="checkbox"/> Operator <input checked="" type="checkbox"/> Owner & Operator <input type="checkbox"/> Other:			
<input type="checkbox"/> Occupational Licensee <input type="checkbox"/> Responsible Party <input type="checkbox"/> VCP/BSA Applicant			
<b>15. Mailing Address:</b>	3600 Harwell Lake Road		
	City	Weatherford	State TX ZIP 76088 ZIP + 4
<b>16. Country Mailing Information</b> (if outside USA)		<b>17. E-Mail Address</b> (if applicable)	
		bmccune@peaster.net	
<b>18. Telephone Number</b>		<b>19. Extension or Code</b>	<b>20. Fax Number</b> (if applicable)



**SECTION III: Regulated Entity Information****21. General Regulated Entity Information** (If "New Regulated Entity" is selected, a new permit application is also required.)
☐ New Regulated Entity
 ☒ Update to Regulated Entity Name
 ☐ Update to Regulated Entity Information

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

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

PEASTER ISD WWTP

**23. Street Address of the Regulated Entity:**

(No PO Boxes)

City

State

ZIP

ZIP + 4

**24. County**

Parker

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

**25. Description to Physical Location:**

APPROXIMATELY 1200 FT SE OF THE INTERSECTION OF FM 2028 AND FM 920 AND APPROXIMATELY 800 FT E OF FM920 IN PARKER COUNTY

**26. Nearest City****State****Nearest ZIP Code**

Peaster

TX

76088

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

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

Degrees

Minutes

Seconds

Degrees

Minutes

Seconds

32

52

8.84

97

51

51.38

**29. Primary SIC Code****30. Secondary SIC Code****31. Primary NAICS Code****32. Secondary NAICS Code**

(4 digits)

(4 digits)

(5 or 6 digits)

(5 or 6 digits)

4952

221320

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

Treatment of domestic wastewater

**34. Mailing**

3600 Harwell Lake Road

**Address:**

City

Weatherford

State

TX

ZIP

76088

ZIP + 4

**35. E-Mail Address:**

bmccune@peaster.net

**36. Telephone Number****37. Extension or Code****38. Fax Number** (if applicable)

( 817 ) 341-5000

( ) -

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

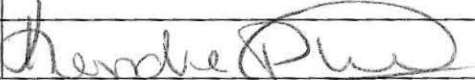
<input type="checkbox"/> Dam Safety	<input type="checkbox"/> Districts	<input type="checkbox"/> Edwards Aquifer	<input type="checkbox"/> Emissions Inventory Air	<input type="checkbox"/> Industrial Hazardous Waste
<input type="checkbox"/> Municipal Solid Waste	<input type="checkbox"/> New Source Review Air	<input type="checkbox"/> OSSF	<input type="checkbox"/> Petroleum Storage Tank	<input type="checkbox"/> PWS
<input type="checkbox"/> Sludge	<input type="checkbox"/> Storm Water	<input type="checkbox"/> Title V Air	<input type="checkbox"/> Tires	<input type="checkbox"/> Used Oil
<input type="checkbox"/> Voluntary Cleanup	<input checked="" type="checkbox"/> Wastewater	<input type="checkbox"/> Wastewater Agriculture	<input type="checkbox"/> Water Rights	<input type="checkbox"/> Other:
	WQ0013589001			

#### **SECTION IV: Preparer Information**

<b>40. Name:</b>	Jeremy Face			<b>41. Title:</b>	Project Manager
<b>42. Telephone Number</b>	<b>43. Ext./Code</b>	<b>44. Fax Number</b>	<b>45. E-Mail Address</b>		
( 817 ) 441-1300		( ) -	jface@wasteline-eng.com		

#### **SECTION V: Authorized Signature**

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

<b>Company:</b>	Peaster Independent School District		<b>Job Title:</b>	Superintendent	
<b>Name (In Print):</b>	Kendra Pittman			<b>Phone:</b>	( 817 ) 341- 5000
<b>Signature:</b>				<b>Date:</b>	6/13/24



WASTELINE  
ENGINEERING, INC.

---

Attachment 2 – Plain Language Summary





WASTELINE  
ENGINEERING, INC.

P.O. Box 421  
208 South Front Street  
Aledo, Texas 76008  
817-441-1300 p  
817-441-1033 f  
[www.wasteline-eng.com](http://www.wasteline-eng.com)

Peaster Independent School District  
Plain Language Summary

Peaster Independent School District (CN600623094) operates Peaster ISD WWTP #1 (RN102078045), an activated sludge process facility operating in extended aeration mode. The facility is located at APPROXIMATELY 1200 FT SE OF THE INTERSECTION OF FM 2028 AND FM 920 AND APPROXIMATELY 800 FT E OF FM920 IN PARKER COUNTY, in Peaster, Parker County, Texas 76088. Peaster Independent School District is requesting a renewal of their existing wastewater discharge permit.

Discharges from the facility are expected to contain five-day Carbonaceous Biochemical Oxygen Demand, total suspended solids, and ammonia nitrogen. Domestic wastewater is treated by an activated sludge process plant and the treatment units include an aeration basin, final clarifier, sludge digester, and chlorine contact chamber.



WASTELINE  
ENGINEERING, INC.

Attachment 3 – Supplemental Permit Information Form

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# TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

## SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

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

**TCEQ USE ONLY:**

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

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

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

Agency Receiving SPIF:

\_\_\_\_ Texas Historical Commission

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

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

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

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

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

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

The following applies to all applications:

1. Permittee: Peaster Independent School District

Permit No. WQ00 13589001EPA ID No. TX 0107981

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

APPROXIMATELY 1200 FT SE OF THE INTERSECTION OF FM 2028 AND FM 920 AND  
APPROXIMATELY 800 FT E OF FM920 IN PARKER COUNTY



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

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

First and Last Name: Bobby McCune

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

Title: Director of Operations

Mailing Address: 3600 Harwell Lake Road

City, State, Zip Code: Weatherford, TX 76088

Phone No.: 817-341-5000 Ext.:

Fax No.:

E-mail Address: bmccune@peaster.net

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

The property is owned by the applicant.

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

The effluent travels from the facility to a stock pond, thence to an unnamed tributary of Dry Creek, thence to Dry Creek, thence to Rock Creek, thence to Brazos River below Possum Kingdom Lake in Segment No. 1206 of the Brazos River Basin.

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

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

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

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

☐ Sealing caves, fractures, sinkholes, other karst features

☐ Disturbance of vegetation or wetlands

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

There is no construction involved with the permit application.

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

The land is currently being used as a k-12 school campus.

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

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

The construction dates of all buildings vary, as this has been the school district's sole campus for several years.

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



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Attachment 4 – Treatment Units



## Major Components

Type of Unit

Number of Units

Size (Depth, Width, Length)

Initial Phase - 0.013 MGD

---

Aeration Basin	2	10' D x 12' W x 30' L
Sludge Holding	2	10' D x 12' W x 8.5' L
Clarifier	2	9' D x 12' W x 8.5' L
Chlorine Contact	2	5.5' D x 12' W x 2.5' L



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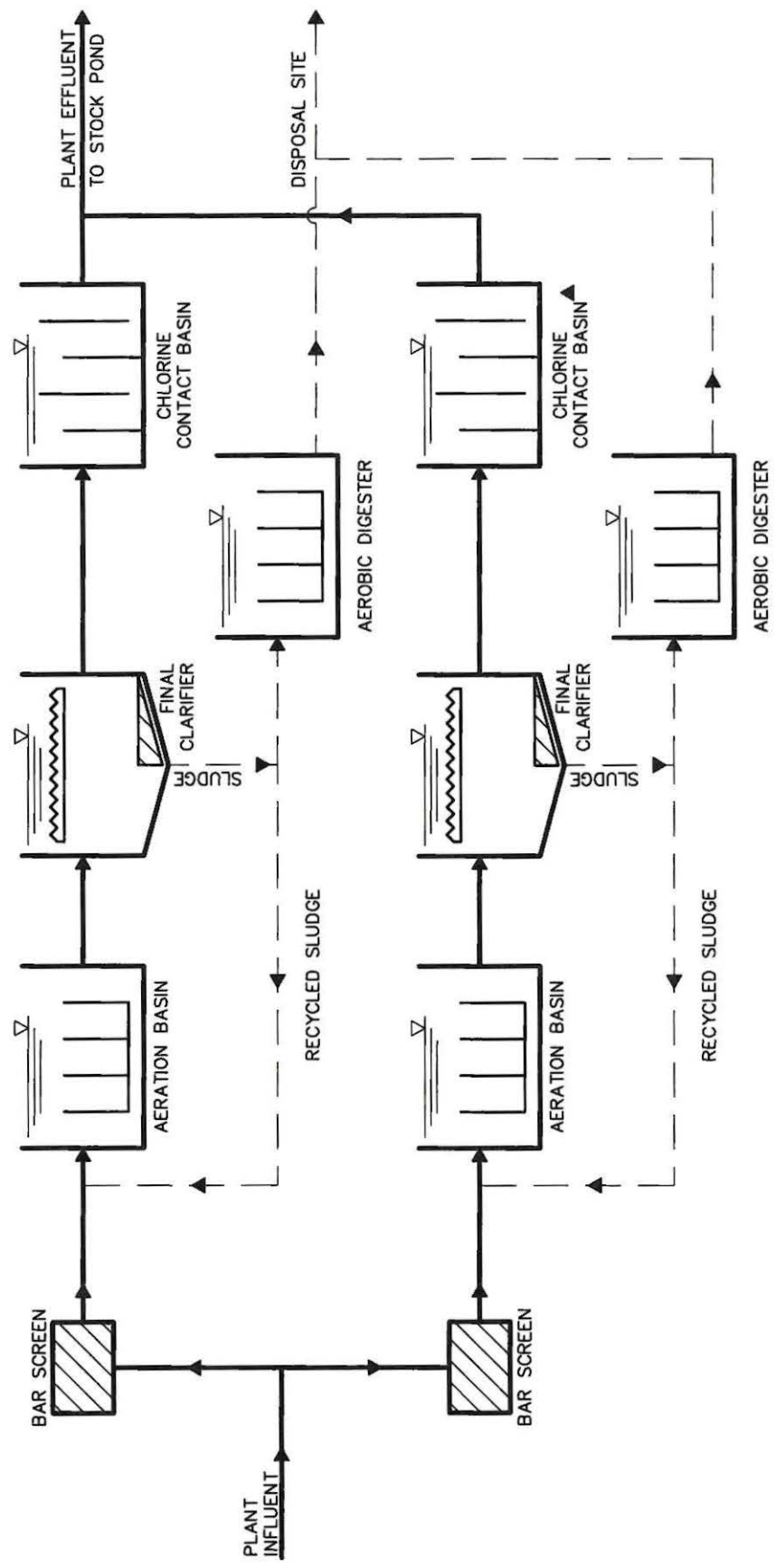
## Attachment 5 – Flow Diagram

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WASTEWATER PERMIT RENEWAL  
FOR  
PEASTER INDEPENDENT SCHOOL DISTRICT  
FLOW DIAGRAM

WASTELINE  
ENGINEERING, INC.  
Texas Registered Engineering Firm #F-1669

Date: June 2024  
Drawn by: J.A.F.  
Designed by: G.B.  
G.B.  
Project Job#: 22417



FLOW DIAGRAM

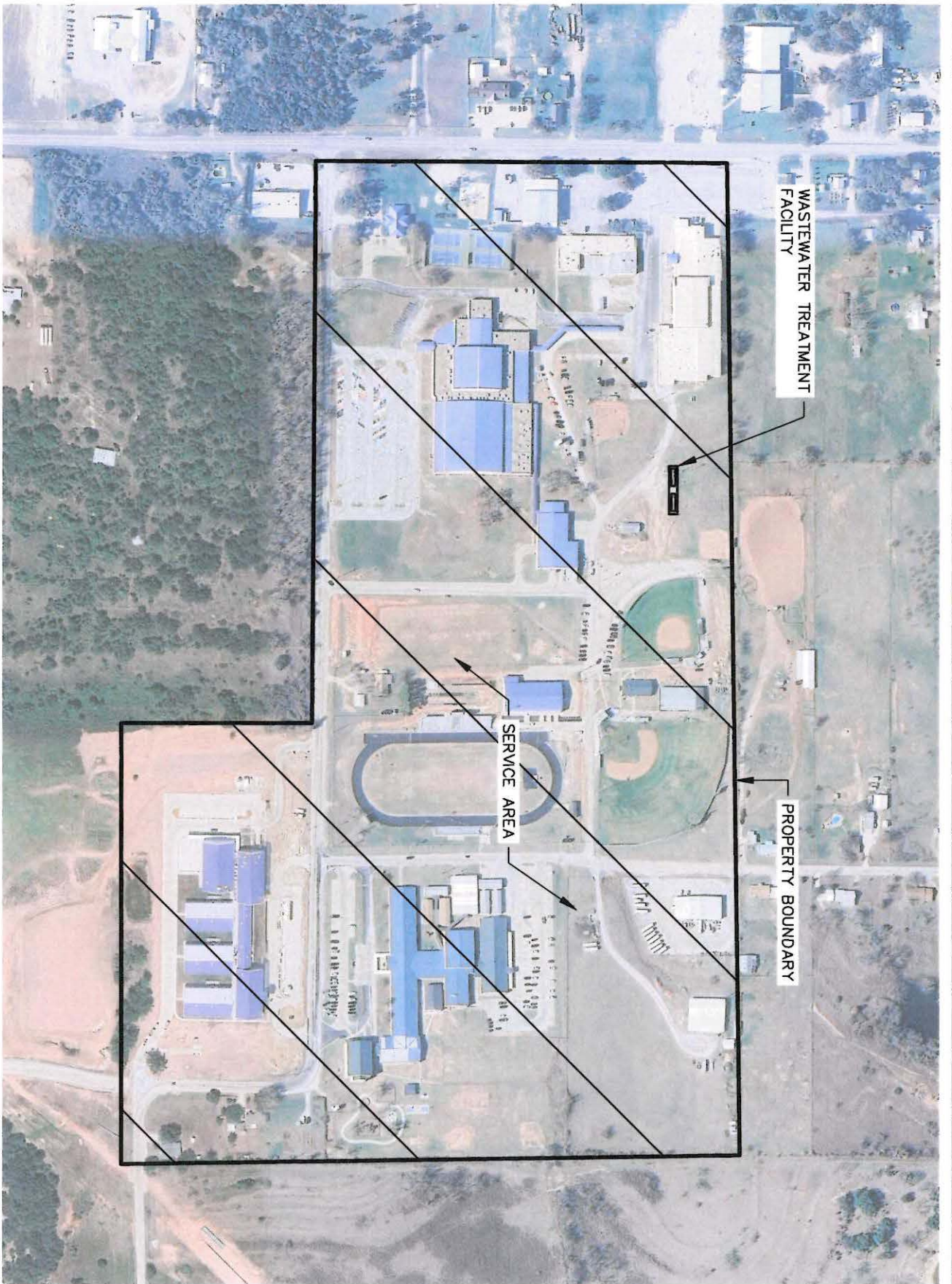




WASTELINE  
ENGINEERING, INC.

## Attachment 6 – Site Map

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WASTEWATER TREATMENT  
FACILITY

PROPERTY BOUNDARY

SERVICE AREA



GRAPHIC SCALE IN FEET

ATTACHMENT  
6.1

WASTEWATER PERMIT RENEWAL  
FOR  
PEASTER INDEPENDENT SCHOOL DISTRICT

SITE DRAWING



WASTELINE  
ENGINEERING, INC.

Texas Registered Engineering Firm #F-1669

Date: July 2024  
 Drawn by: J.A.F.  
 Designed by: G.B.  
 QA: G.B.  
 Project Job#: 22417

## RE: Application to Renew Permit No. WQ0013589001 - Notice of Deficiency Letter

Jeremy Face &lt;jface@wasteline-eng.com&gt;

Wed 7/31/2024 1:26 PM

To: Savannah Jackson &lt;Savannah.Jackson@tceq.texas.gov&gt;

Cc: BOBBY MCCUNE &lt;bmcunc@peaster.net&gt;; ERIN HARVEY &lt;eharvey@peaster.net&gt;; Glenn Breisch &lt;gbreisch@wasteline-eng.com&gt;

1 attachments (280 KB)

Administrative Report - Bilingual Notice.pdf;

Savannah,

Please see attached!

Kind regards,

Jeremy Face

[Wasteline Engineering, Inc.](#)

817-441-1300

208 S Front Street

Aledo, Texas 76008

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Thank you.

---

**From:** Savannah Jackson <Savannah.Jackson@tceq.texas.gov>**Sent:** Tuesday, July 30, 2024 3:19 PM**To:** Jeremy Face <jface@wasteline-eng.com>**Cc:** BOBBY MCCUNE <bmcunc@peaster.net>; ERIN HARVEY <eharvey@peaster.net>; Glenn Breisch <gbreisch@wasteline-eng.com>**Subject:** Re: Application to Renew Permit No. WQ0013589001 - Notice of Deficiency Letter

Good Afternoon,

I have everything I need for my review except for the Bilingual Notice Requirement Section. Since a complete response is due by August 1st, we will have to send out a 2<sup>nd</sup> Notice of Deficiency Letter shortly after. This letter gives 30 days for you to respond completely, so you should have time to find out. Let me know if you have any questions.

Thanks,

**Savannah Jackson**Texas Commission on Environmental  
Quality

Water Quality Division

512-239-4306

[savannah.jackson@tceq.texas.gov](mailto:savannah.jackson@tceq.texas.gov)

---

**From:** Jeremy Face <jface@wasteline-eng.com>**Sent:** Thursday, July 25, 2024 4:30 PM**To:** Savannah Jackson <Savannah.Jackson@tceq.texas.gov>**Cc:** BOBBY MCCUNE <bmcunc@peaster.net>; ERIN HARVEY <eharvey@peaster.net>; Glenn Breisch <gbreisch@wasteline-eng.com>**Subject:** RE: Application to Renew Permit No. WQ0013589001 - Notice of Deficiency Letter

Ms. Savannah Jackson,

Attached, please find our office's response to your comment letter dated July 18, 2024. Should you require anything further for your review, please do not hesitate to contact our office.

Highest regards,

Jeremy Face

[Wasteline Engineering, Inc.](#)

817-441-1300

208 S Front Street

Aledo, Texas 76008

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Thank you.

---

**From:** Savannah Jackson <Savannah.Jackson@tceq.texas.gov>**Sent:** Thursday, July 18, 2024 1:49 PM**To:** [bmcunc@peaster.net](mailto:bmcunc@peaster.net)



8/1/24, 10:11 AM

Mail - Savannah Jackson - Outlook

Cc: Glenn Breisch <[gbreisch@wasteline-eng.com](mailto:gbreisch@wasteline-eng.com)>; Erwin Madrid <[Erwin.Madrid@tceq.texas.gov](mailto:Erwin.Madrid@tceq.texas.gov)>

Subject: Application to Renew Permit No. WQ0013589001 - Notice of Deficiency Letter

Dear Mr. Bobby McCune,

The attached Notice of Deficiency letter sent on July 18, 2024, requests additional information needed to declare the application administratively complete. Please send the complete response to my attention by August 1, 2024.

Thank you,



**Savannah Jackson**

Texas Commission on Environmental  
Quality

Water Quality Division

512-239-4306

[savannah.jackson@tceq.texas.gov](mailto:savannah.jackson@tceq.texas.gov)



# WASTELINE ENGINEERING, INC.

July 25, 2024

Texas Commission on Environmental Quality  
PO Box 13087  
Austin, Texas 78711-3087

**Attn: Ms. Savannah Jackson**  
Applications Review and Processing Team (MC 148)  
Water Quality Division  
Wastewater Permits Section

**Re: Application to Amend Permit No. WQ0013589001**  
**CN600623094; RN102078045**  
**Issued to Peaster Independent School District.**

Ms. Jackson:

We are in receipt of your letter dated July 18th, 2024, and offer the following in response to the items contained therein. Our responses are in the same order as the questions posed.

1. Administrative Report 1.0, Section 8E: The school district's bilingual education coordinator, Dr. Stephens, will be unavailable to confirm the program status, as school has let out for the summer. As soon as the district has opened back up, I will be able to advise your office to the status of the district's bilingual program. Please see attached correspondence with Peaster Independent School District.
2. Administrative Report 1.0, Section 13: A USGS map has been attached.
3. Plain Language Summary: Please be advised that the Central Registry still shows the previously listed description for Physical Location. However, a revised Plain Language Summary has been attached with the requested address and flow information.
4. The Notice of Receipt seems to be complete and accurate.

Hopefully, the above will adequately respond to your inquiries. However, should you have any questions or comments concerning this document and its contents, please do not hesitate to contact this office.

Thanking you in advance for your prompt attention to this matter, we remain,

Very truly yours,

**WASTELINE ENGINEERING, INC.**

TX Registered Engineering Firm #F-1669

Jeremy Face

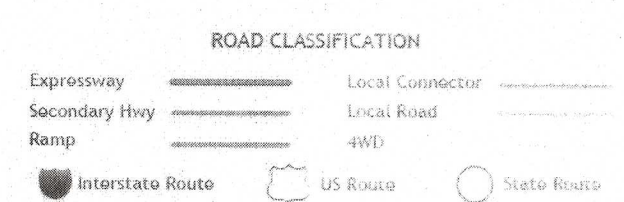
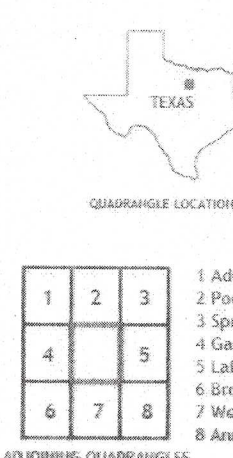
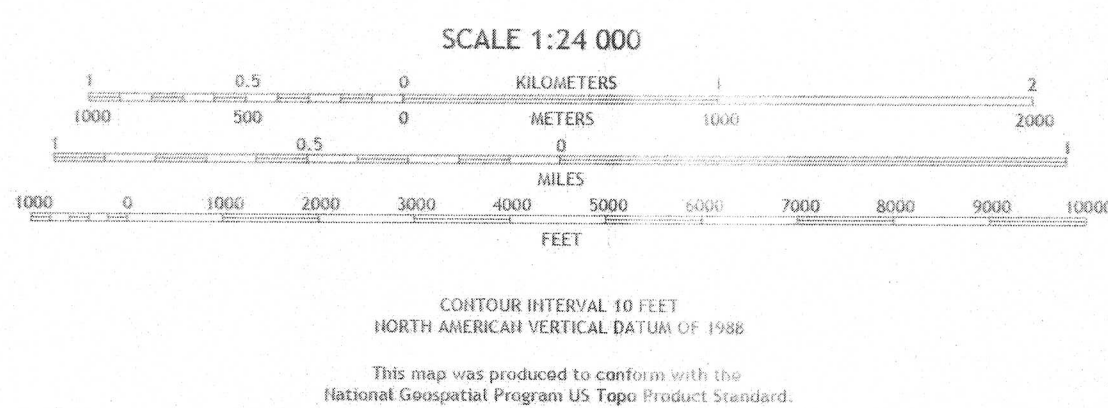
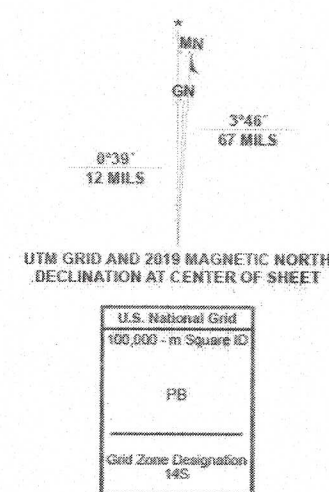
cc: File  
Attachments



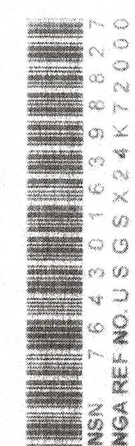


Produced by the United States Geological Survey  
North American Datum of 1983 (NAD83)  
World Geodetic System of 1984 (WGS84). Projection and  
1000-meter grid/Universal Transverse Mercator. Zone 14S  
This map is not a legal document. Boundaries may be  
generalized for this map scale. Private lands within government  
reservations may not be shown. Obtain permission before  
entering private lands.

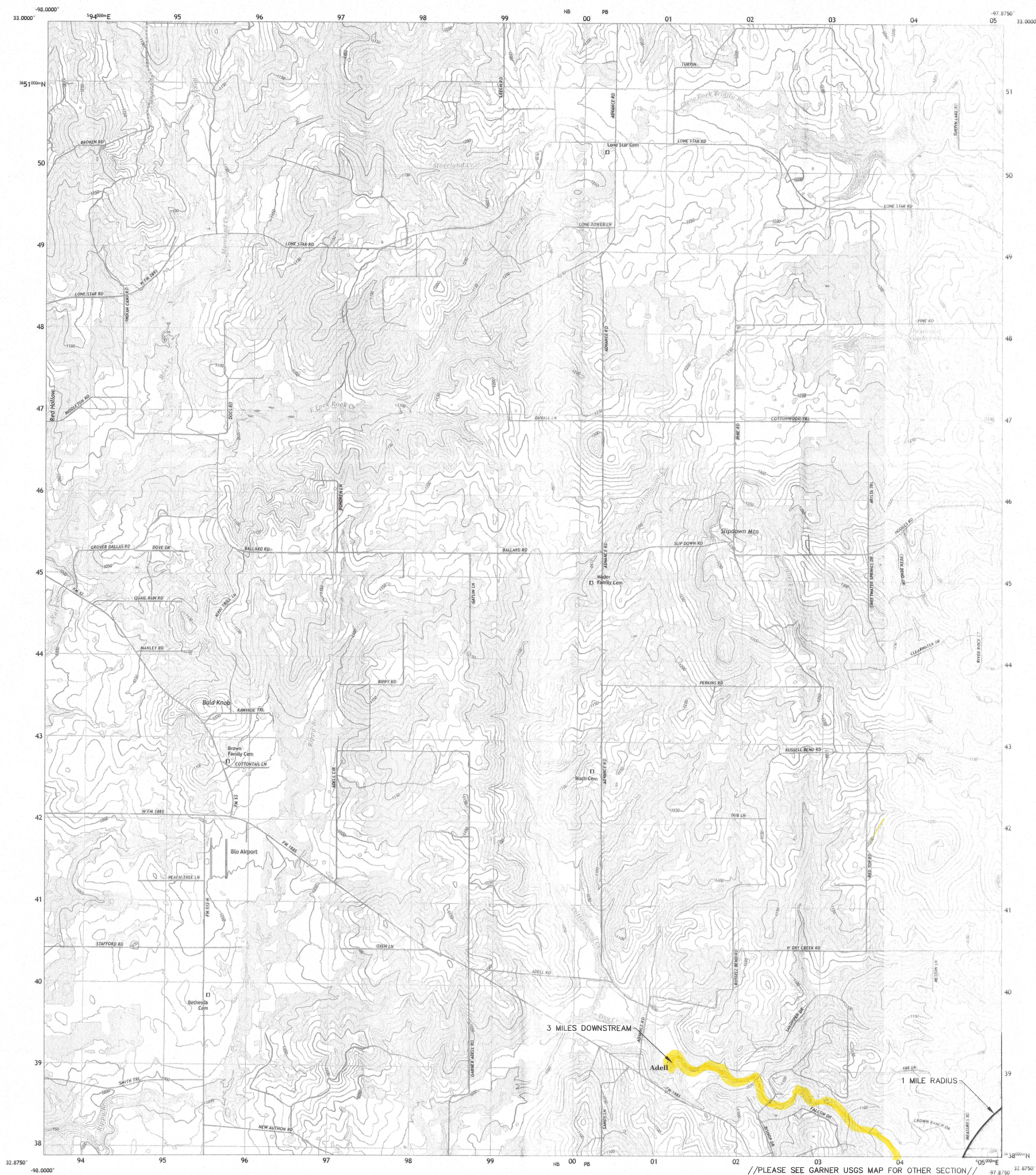
Imagery.....HAIP, September 2016 - November 2016  
Roads.....U.S. Census Bureau, 2015  
Names.....GNIS, 1979 - 2022  
Hydrography.....National Hydrography Dataset, 2000 - 2018  
Contours.....National Elevation Dataset, 2021  
Boundaries.....Multiple sources; see metadata file 2019 - 2021  
Wetlands.....FWS National Wetlands Inventory Not Available



WEATHERFORD NORTH, TX  
2022



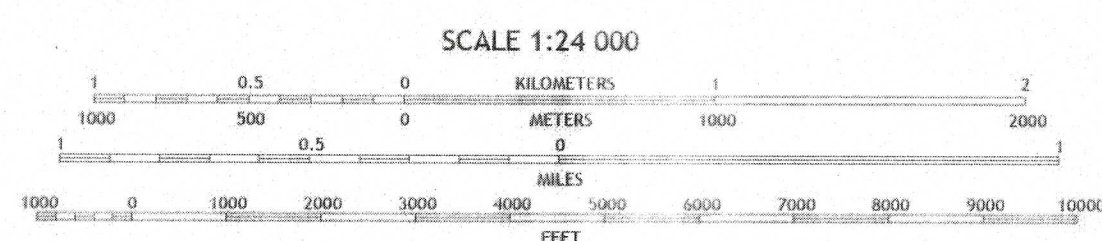
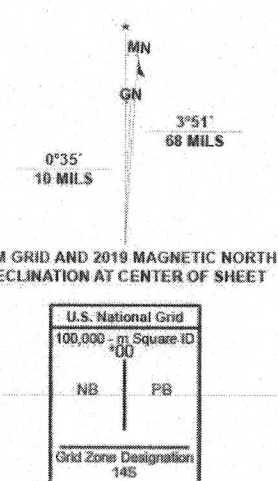




Produced by the United States Geological Survey  
 North American Datum of 1983 (NAD83) Projection  
 World Geodetic System of 1984 (WGS84) 1:500,000-scale  
 Universal Transverse Mercator, Zone 14  
 This map is not a legal document. Boundaries may be  
 generalized for this map scale. Private lands within government  
 reservations may not be shown. Obtain permission before  
 entering private lands.

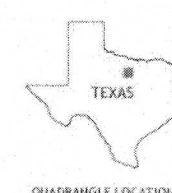
Imagery.....NAIP, September 2004  
 Contours.....U.S. Geological Survey  
 Names.....Bureau of Land Management  
 Hydrography.....National Hydrography Data  
 Contours.....National Elevation Dataset  
 Boundaries.....Multiple sources; see metadata file

Wetlands.....FWS National Wetlands Inventory



CONTOUR INTERVAL 10 FEET  
NORTH AMERICAN VERTICAL DATUM OF 1988







This map was produced to conform with the  
National Geospatial Program US Topo Product Standard.






1	2	3
4		5
6	7	8

1 Porrin  
 2 Gibtown  
 3 Boonsville  
 4 Whitt  
 5 Poolville  
 6 Mineral Wells East  
 7 Garner  
 8 Weatherford North

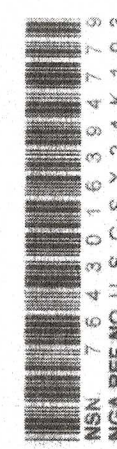
### ROAD CLASSIFICATION

Expressway		Local Connector	
Secondary Hwy		Local Road	
Ramp		4WD	

	Interstate Route		US Route		State Route
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ADILL, TX  
2022

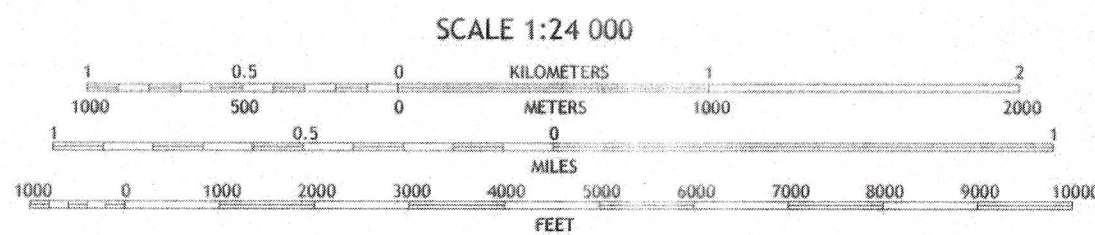
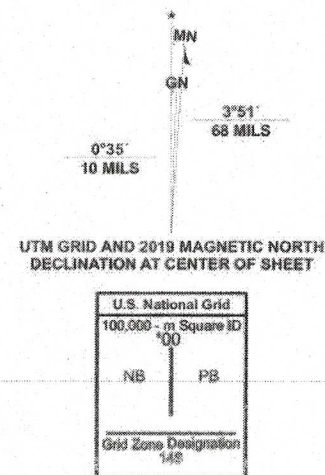






Produced by the United States Geological Survey  
North American Datum of 1983 (NAD83)  
World Geodetic System of 1984 (WGS84). Projection and  
1 000-meter grid/Universal Transverse Mercator, Zone 14S  
This map is not a legal document. Boundaries may be  
generalized for this map scale. Private lands within government  
reservations may not be shown. Obtain permission before  
entering private lands.

Imagery.....NAP, September 2016 - November 2016  
Roads.....U.S. Census Bureau, 2015  
Names.....GNS, 1979 - 2022  
Hydrography.....National Hydrography Dataset, 2000 - 2018  
Contours.....National Elevation Dataset, 2021  
Boundaries.....Multiple sources, see metadata file, 2019 - 2021  
Wetlands.....FWS National Wetlands Inventory, Not Available



CONTOUR INTERVAL 10 FEET  
NORTH AMERICAN VERTICAL DATUM OF 1988  
This map was produced to conform with the  
National Geospatial Program US Topo Product Standard.



1	2	3	1 White
4	5	3 Pottsville	
6	7	4 Mineral Wells East	
		5 Weatherford North	
		6 Brazos East	
		7 Brock	
		8 Weatherford South	

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

GARNER, TX  
2022

NSN 7 643 016 395 560  
NGA REF NO. U.S.G.S. X 24 K 168 7 1



## Jeremy Face

---

**From:** BOBBY MCCUNE <bmcune@peaster.net>  
**Sent:** Wednesday, July 3, 2024 11:19 AM  
**To:** Jeremy Face  
**Cc:** JACK DOYLE  
**Subject:** Re: Wastewater Permit Renewal: Required Documents & Information

Office is closed.

**Bobby McCune**  
Director of Operations  
Peaster ISD  
817-341-5000

Sent from my iPhone, please excuse any misspellings or errors.

On Jul 3, 2024, at 11:08 AM, Jeremy Face <jface@wasteline-eng.com> wrote:

Bobby, I am not sure. The receptionist only told me "Dr. Stephens", is the front office open today?

Regardless of getting the information, I am planning on submitting this week. We will just have to fill in some blanks when the TCEQ asks upon review. Not a huge deal!

**Jeremy Face**  
**Wasteline Engineering, Inc.**  
817-441-1300  
208 S Front Street  
Aledo, Texas 76008

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Thank you.

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**From:** BOBBY MCCUNE <bmcune@peaster.net>  
**Sent:** Wednesday, July 3, 2024 11:06 AM  
**To:** Jeremy Face <jface@wasteline-eng.com>  
**Cc:** JACK DOYLE <jdoyle@peaster.net>  
**Subject:** Re: Wastewater Permit Renewal: Required Documents & Information

Rebecca Stephens?

I don't know who you are talking about. But we need proceed

**Bobby McCune**  
**Director of Operations**  
**Peaster ISD**  
**817-341-5000**

Sent from my iPhone, please excuse any misspellings or errors.

On Jul 3, 2024, at 10:58 AM, Jeremy Face <[jface@wasteline-eng.com](mailto:jface@wasteline-eng.com)> wrote:

Bobby,

I tried reaching out to Dr. Stevens – the ESL Coordinator for Peaster, a while back but have not heard any response from them. Would you have a better way to contact them?

This just has to do with the bilingual notice requirements, a simple yes/no from them is all I really need.

Kind regards,  
**Jeremy Face**  
**Wasteline Engineering, Inc.**  
817-441-1300  
208 S Front Street  
Aledo, Texas 76008

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Thank you.

---

**From:** Jeremy Face  
**Sent:** Tuesday, June 18, 2024 12:51 PM  
**To:** BOBBY MCCUNE <[bmccune@peaster.net](mailto:bmccune@peaster.net)>  
**Cc:** JACK DOYLE <[jdoyle@peaster.net](mailto:jdoyle@peaster.net)>  
**Subject:** RE: Wastewater Permit Renewal: Required Documents & Information



**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: McCune, Bobby

Title: Director of Operations

Credential: Click to enter text.

Organization Name: Peaster Independent School District

Mailing Address: 3600 Harwell Lake Road City, State, Zip Code: Weatherford, TX 76088

Phone No.: 817-341-5000

E-mail Address: bmcune@peaster.net

**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: Peaster Administrative Building

Location within the building: Front Desk

Physical Address of Building: 3600 Harwell Lake Road

City: Weatherford, TX 76088

County: Parker

Contact (Last Name, First Name): Reception

Phone No.: 817-341-5000 Ext.: Click to enter text.

**E. Bilingual Notice Requirements**

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

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

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

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

☐ Yes

☒ No

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

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

☐ Yes

☐ No





**WASTELINE  
ENGINEERING, INC.**

**P.O. Box 421  
208 South Front Street  
Aledo, Texas 76008  
817-441-1300 p  
817-441-1033 f  
[www.wasteline-eng.com](http://www.wasteline-eng.com)**

**Peaster Independent School District  
Plain Language Summary**

Peaster Independent School District (CN600623094) operates Peaster ISD WWTP #1 (RN102078045), an activated sludge process facility operating in extended aeration mode. The facility is located 3602 Harwell Lake Road, in Parker County, Texas 76088.

Peaster Independent School District is requesting a renewal of their existing wastewater permit to discharge 36,000 gallons per day of treated domestic wastewater.

Discharges from the facility are expected to contain five-day Carbonaceous Biochemical Oxygen Demand, total suspended solids, and ammonia nitrogen. Domestic wastewater is treated by an activated sludge process plant and the treatment units include an aeration basin, final clarifier, sludge digester, and chlorine contact chamber.