



Administrative Package Cover Page

This file contains the following documents:

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



Portada de Paquete Administrativo

Este archivo contiene los siguientes documentos:

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

Resumen en lenguaje sencillo

Planta de tratamiento de aguas residuales del Distrito de Servicios Públicos Municipales Consolidados (CN600654966) de Roman Forest (RN102916483). La instalación es un sistema de tratamiento de aguas residuales de lodos activados. La instalación está ubicada en 1602 Athens Street en la ciudad de Roman Forest, condado de Montgomery, Texas, aproximadamente a 1.7 millas al este de la autopista US 59 y 1.2 millas al norte de la intersección de la autopista 59 y FM 1485.

Esta solicitud es para una renovación de la instalación de tratamiento de aguas residuales con una descarga promedio diaria de 700,000 galones por día de aguas residuales domésticas tratadas.

Se espera que las descargas de la instalación contengan demanda bioquímica de oxígeno carbonoso (CBOD5) de cinco días, sólidos suspendidos totales (TSS), nitrógeno amoniacal (NH₃-N) y *Escherichia coli*. Las aguas residuales domésticas son tratadas por una planta de proceso de lodos activados y las unidades de tratamiento incluirán cribado, eliminación de arena, aireación, clarificador, digestores aeróbicos de lodos, equipos de deshidratación de lodos y desinfección, antes de la descarga a la corriente receptora.

Plain Language Summary

Roman Forest Consolidated Municipal Utility District (CN600654966) Wastewater Treatment Plant (RN102916483). The facility is an activated sludge wastewater treatment system. The facility is located at 1602 Athens Street in the City of Roman Forest, Montgomery County, Texas approximately 1.7 miles east of U.S. highway 59 and 1.2 miles north of the intersection of highway 59 and F.M. 1485.

This application is for a renewal of the wastewater treatment facility with a daily average discharge of 700,000 gallons per day of treated domestic wastewater.

Discharges from the facility are expected to contain five-day carbonaceous biochemical oxygen demand (CBOD₅), total suspended solids (TSS), ammonia nitrogen (NH₃-N), and *Escherichia coli*. Domestic wastewater is treated by an activated sludge process plant and the treatment units will include screening, Aeration, clarifier, aerobic sludge digesters, sludge dewatering equipment, and disinfection, before discharge to the receiving stream.

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY



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

PERMIT NO. WQ0013638001

APPLICATION. Roman Forest Consolidated Municipal Utility District, 611 Magnolia Bend, New Caney, Texas 77357, has applied to the Texas Commission on Environmental Quality (TCEQ) to renew Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0013638001 (EPA I.D. No. TX0093220) to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 700,000 gallons per day. The domestic wastewater treatment facility is located at 1602 Athens Drive, in the city of Roman Forest, in Montgomery County, Texas 77357. The discharge route is from the plant site directly to Peach Creek. TCEQ received this application on September 30, 2025. The permit application will be available for viewing and copying at Roman Forest Consolidated Municipal Utility District, Front Desk, 611 Magnolia Bend, New Caney, in Montgomery 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=-95.176,30.17&level=18>

ALTERNATIVE LANGUAGE NOTICE. Alternative language notice in Spanish is available at: <https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications>. El aviso de idioma alternativo en español está disponible en <https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications>.

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

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

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

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

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

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

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

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

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

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

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

Further information may also be obtained from Roman Forest Consolidated Municipal Utility District at the address stated above or by calling Mr. Michael Helfrich, P.E., Senior Project Manager/LJA Engineering, Inc., at 713- 953-5102.

Issuance Date: November 18, 2025

Comisión de Calidad Ambiental del Estado de Texas



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

PERMISO PROPUESTO NO. WQ0013638001

APLICACIÓN. Roman Forest Consolidated Municipal Utility District, 611 Magnolia Bend, New Caney, Texas 77357, ha solicitado a la Comisión de Calidad Ambiental de Texas (TCEQ) la renovación del Permiso No. WQ0013638001 (E.D. N.º TX0093220) autorizar la descarga de aguas residuales tratadas en un volumen que no exceda un flujo promedio diario de 700,000 galones por día. La planta de tratamiento de aguas residuales domésticas está ubicada en 1602 Athens Drive, en la ciudad de Roman Forest, en el condado de Montgomery, Texas 77357. La ruta de descarga es desde el sitio de la planta directamente a Peach Creek. La TCEQ recibió esta solicitud el 30 de septiembre de 2025. La solicitud de permiso estará disponible para su visualización y copia en el Distrito de Servicios Públicos Municipales Consolidados de Roman Forest, Recepción, 611 Magnolia Bend, New Caney, Texas, antes de la fecha de publicación de este aviso en el periódico. La solicitud, incluidas las actualizaciones y los avisos asociados, están disponibles electrónicamente en la siguiente página web: <https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdesapplications>. Este enlace a un mapa electrónico de la ubicación general del sitio o instalación se proporciona como una cortesía pública y no parte de la solicitud o aviso. Para conocer la ubicación exacta, consulte la aplicación. <https://gisweb.tceq.texas.gov/LocationMapper/?marker=-95.176,30.17&level=18>

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

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

OPORTUNIDAD DE UNA AUDIENCIA ADMINISTRATIVA DE LO CONTENCIOSO. Después

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

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

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

La Comisión sólo puede conceder una solicitud de una audiencia de caso impugnado sobre los temas que el solicitante haya presentado en sus comentarios oportunos que no fueron retirados posteriormente. **Si se concede una audiencia, el tema de la audiencia estará limitado a cuestiones de hecho en disputa o cuestiones mixtas de hecho y de derecho relacionadas a intereses pertinentes y materiales de calidad del agua que se hayan presentado durante el período de comentarios.**

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

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

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

También se puede obtener más información en Roman Forest Consolidated Municipal Utility Distrito en la dirección indicada anteriormente o llamando al Sr. Michael Helfrich, P.E., Senior Project Gerente/LJA Ingeniería. Inc., en 713- 953-5102.

Fecha de emisión: 18 de noviembre de 2025

From: [Haley Allen](#)
To: [Abesha Michael](#)
Cc: [Brian French](#); [Michael Helfrich](#)
Subject: Updates - Application to Renew Permit No. WQ0013638001 - Notice of Deficiency Letter
Date: Tuesday, October 14, 2025 11:02:41 AM
Attachments: [image001.png](#)
[image002.png](#)
[Administrative Report 1.0.pdf](#)
[Municipal Discharge New Spanish NORI.pdf](#)
[Plain Language Summary Spanish.pdf](#)
[Municipal Discharge New Spanish NORI.docx](#)

Good morning,

Regarding the Notice of Deficiency for the Roman Forest MUD Wastewater Treatment Facility permit renewal application, I have made the following updates.

1. Section 8, item D. Verify that Roman Forest Consolidated Municipal Utility District Wastewater Treatment Facility is open for public during normal business hours (8-5) and days, a space for a citizen to sit and review documents and have access to copier machines or service. **Roman Forest CMUD WWTF meets all the given criteria and is open to the public during normal business hours.**
2. Section 8, item E5. If the answer is yes to question 1, 2, 3, or 4, public notices in an alternative language are required. This item was left blank. **This item was updated to indicate Spanish as the alternative language. Attached is a copy of the Plain Language Summary in Spanish and the updated copy of the Administrative Report 1.0.**
3. Verify that the relevant portion of the NORI does not include any errors or omissions. **The information has been verified and NORI has been completed. Attached is the Spanish NORI.**

Thank you,

Haley Allen | Environmental Technician
Public Works

O: 409.833.3363 | D: 409.554.8841 | C: 409.926.3764
2615 Calder Avenue, Suite 500, Beaumont, Texas 77702
EMPLOYEE-OWNED. CLIENT FOCUSED.
www.lja.com





TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the application.

APPLICANT NAME: Roman Forest Consolidated Municipal Utility District

PERMIT NUMBER (If new, leave blank): WQ0013638-001

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

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

For TCEQ Use Only

Segment Number _____ County

Expiration Date _____

_____ Region _____

Permit Number _____



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION ADMINISTRATIVE REPORT 1.0

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

Section 1. Application Fees (Instructions Page 26)

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

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

Minor Amendment (for any flow) \$150.00 ☐

Payment Information:

Mailed Check/Money Order Number: 23653
Check/Money Order Amount: \$1,615.00
Name Printed on Check: Roman Forest C.M.U.D.
EPAY Voucher Number: Click to enter text.
Copy of Payment Voucher enclosed? Yes ☐

Section 2. Type of Application (Instructions Page 26)

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

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

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

- ☒ Active ☐ Inactive

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

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

d. Check the box next to the appropriate application type

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

e. For amendments or modifications, describe the proposed changes: [Click to enter text.](#)

f. For existing permits:

Permit Number: WQ00 13638-001

EPA I.D. (TPDES only): TX 0093220

Expiration Date: April 16, 2026

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

Roman Forest Consolidated Municipal Utility District

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

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

CN: 600654966

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

Prefix: Mr.

Last Name, First Name: Patton, Roy

Title: President

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

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

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

Click to enter text.

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

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

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

CN: Click to enter text.

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

Prefix: Click to enter text.

Last Name, First Name: Click to enter text.

Title: Click to enter text.

Credential: Click to enter text.

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

C. Core Data Form

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

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: Helfrich, Michael

Title: Senior Project Manager

Credential: P.E.

Organization Name: LJA Engineering

Mailing Address: 2011 E Broadway, Suite 130 City, State, Zip Code: Pearland, Texas 77581

Phone No.: (713) 657-6013

E-mail Address: mhelfrich@lja.com

Check one or both:

☒

Administrative Contact

☒

Technical Contact

B. Prefix: Mr.

Last Name, First Name: French, Brian

Title: Project Manager

Credential: Click to enter text.

Organization Name: LJA Engineering, Inc.

Mailing Address: 2615 Calder Ave
77702

City, State, Zip Code: Beaumont, TX

Phone No.: 409-554-8972

E-mail Address: bfrench@lja.com

Check one or both: ☒ Administrative Contact
Contact

☒ Technical

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: Buerger, Chris

Title: Plant Operator

Credential: Click to enter text.

Organization Name: Roman Forest Consolidated Municipal Utility District

Mailing Address: 611 Magnolia Bend
77357

City, State, Zip Code: New Caney, Texas

Phone No.: 832-966-1132

E-mail Address: chris@rfcmud.com

B. Prefix: Mr.

Last Name, First Name: Helfrich, Michael

Title: Senior Project Manager

Credential: P.E.

Organization Name: LJA Engineering, Inc.

Mailing Address: 2011 E Broadway, Suite 130
77581

City, State, Zip Code: Pearland, Texas

Phone No.: 713-953-5102

E-mail Address: mhelfrich@lja.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: Mrs.

Last Name, First Name: O'Brien, Chastity

Title: Office Manager

Credential: N/A

Organization Name: Roman Forest Consolidated Municipal Utility District

Mailing Address: 611 Magnolia Bend
77357

City, State, Zip Code: New Caney, Texas

Phone No.: (281) 689-6324

E-mail Address: chastity@rfcmud.com

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

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

Prefix: Mr.

Last Name, First Name: Buerger, Chris

Title: Click to enter text.

Credential: N/A

Organization Name: Roman Forest Consolidated Municipal Utility District

Mailing Address: 611 Magnolia Bend

City, State, Zip Code: New Caney, Texas

77357

Phone No.: (832) 966-1132

E-mail Address: chris@rfcmud.com

Section 8. Public Notice Information (Instructions Page 27)

A. Individual Publishing the Notices

Prefix: Mr.

Last Name, First Name: French, Brian

Title: Project Manager

Credential: Click to enter text.

Organization Name: LJA Engineering, Inc.

Mailing Address: 2615 Calder Avenue, Suite 500
Texas, 77702

City, State, Zip Code: Beaumont,

Phone No.: (409) 554-8972

E-mail Address: bfrench@lja.com

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

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

☒ E-mail Address

☐ Fax

☐ Regular Mail

C. Contact permit to be listed in the Notices

Prefix: Mr.

Last Name, First Name: Helfrich, Michael

Title: Senior Project Manager

Credential: P.E.

Organization Name: LJA Engineering, Inc.

Mailing Address: 2011 E Broadway Suite 130
77581

City, State, Zip Code: Pearland, Texas

Phone No.: (713) 953-5102

E-mail Address: mhelfrich@lja.com

D. Public Viewing Information

If the facility or outfall is located in more than one county, a public viewing place for

each county must be provided.

Public building name: District Office

Location within the building: Front

Physical Address of Building: 611 Magnolia Bend

City: New Caney

County: Montgomery

Contact (Last Name, First Name): Chastity O'Brien

Phone No.: (281) 689-6324 Ext.: Click to enter text.

E. Bilingual Notice Requirements

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

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

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

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

☒

Yes

☐

No

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

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

☒

Yes

☐

No

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

☐

Yes

☒

No

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

☐

Yes

☒

No

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

F. Summary of Application in Plain Language Template

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

Attachment: E

G. Public Involvement Plan Form

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

Attachment: N/A

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

- A. If the site is currently regulated by TCEQ, provide the Regulated Entity Number (RN) issued to this site. RN 102916483

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):

Roman Forest Consolidated Municipal Utility District Wastewater Treatment Plant

- C. Owner of treatment facility: Click to enter text.

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:

Title: Click to enter text.

Credential: Click to enter text.

Organization Name: Roman Forest Consolidated Municipal Utility District

Mailing Address: 611 Magnolia Bend
77537

City, State, Zip Code: New Caney, Texas

Phone No.: (281) 689-6324

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: N/A

Last Name, First Name: N/A

Title: N/A

Credential: N/A

Organization Name: N/A

Mailing Address: N/A

City, State, Zip Code: N/A

Phone No.: N/A

E-mail Address: N/A

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

Attachment: [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: N/A

Last Name, First Name: N/A

Title: N/A

Credential: N/A

Organization Name: N/A

Mailing Address: N/A

City, State, Zip Code: N/A

Phone No.: N/A

E-mail Address: N/A

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

Attachment: [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): Roman Forest

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

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

☐ Yes ☒ No

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

☐ Authorization granted ☐ Authorization pending

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

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

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

Section 11. TLAP Disposal Information (Instructions Page 32)

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

☐ N/AYes ☐ No

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

N/A

- B. City nearest the disposal site: N/A

- C. County in which the disposal site is located: N/A

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

N/A

- E. For **TLAPs**, please identify the nearest watercourse to the disposal site to which rainfall runoff might flow if not contained: N/A

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: WE0013638-001

Applicant: Roman Forest Consolidated Municipal Utility District

Certification:

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

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

Signatory name (typed or printed): Roy Patton

Signatory title: President

Signature: _____ Date: _____

(Use blue ink)

Subscribed and Sworn to before me by the said _____

on this _____ day of _____, 20____.

My commission expires on the _____ day of _____, 20____.

Notary Public

[SEAL]

County, Texas

Resumen en lenguaje sencillo

Planta de tratamiento de aguas residuales del Distrito de Servicios Públicos Municipales Consolidados (CN600654966) de Roman Forest (RN102916483). La instalación es un sistema de tratamiento de aguas residuales de lodos activados. La instalación está ubicada en 1602 Athens Street en la ciudad de Roman Forest, condado de Montgomery, Texas, aproximadamente a 1.7 millas al este de la autopista US 59 y 1.2 millas al norte de la intersección de la autopista 59 y FM 1485.

Esta solicitud es para una renovación de la instalación de tratamiento de aguas residuales con una descarga promedio diaria de 350,000 galones por día de aguas residuales domésticas tratadas.

Se espera que las descargas de la instalación contengan demanda bioquímica de oxígeno carbonoso (CBOD5) de cinco días, sólidos suspendidos totales (TSS), nitrógeno amoniacal (NH₃-N) y *Escherichia coli*. Las aguas residuales domésticas son tratadas por una planta de proceso de lodos activados y las unidades de tratamiento incluirán cribado, eliminación de arena, aireación, clarificador, digestores aeróbicos de lodos, equipos de deshidratación de lodos y desinfección, antes de la descarga a la corriente receptora.

Comisión de Calidad Ambiental del Estado de Texas



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

PERMISO PROPUESTO NO. WQ00

APLICACIÓN. Roman Forest Consolidated Municipal Utility District, 611 Magnolia Bend, New Caney, Texas 77357, ha solicitado a la Comisión de Calidad Ambiental de Texas (TCEQ) la renovación del Permiso No. WQ0013638001 (E.D. N.º TX0093220) autorizar la descarga de aguas residuales tratadas en un volumen que no exceda un flujo promedio diario de 700,000 galones por día. La planta de tratamiento de aguas residuales domésticas está ubicada en 1602 Athens Drive, en la ciudad de Roman Forest, en el condado de Texas, Texas 77357. La ruta de descarga es desde el sitio de la planta directamente a Peach Creek. La TCEQ recibió esta solicitud el 30 de septiembre de 2025. La solicitud de permiso estará disponible para su visualización y copia en el Distrito de Servicios Públicos Municipales Consolidados de Roman Forest, Recepción, 611 Magnolia Bend, New Caney, en el condado de Montgomery, Texas, antes de la fecha de publicación de este aviso en el periódico. La solicitud, incluidas las actualizaciones y los avisos asociados, están disponibles electrónicamente en la siguiente página web: <https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdesapplications>.

Este enlace a un mapa electrónico de la ubicación general del sitio o instalación se proporciona como una cortesía pública y no parte de la solicitud o aviso. Para conocer la ubicación exacta, consulte la aplicación. <https://gisweb.tceq.texas.gov/LocationMapper/?marker=-95.176,30.17&level=18>

[Include the following non-italicized sentence if the facility is located in the Coastal Management Program boundary. The Coastal Management Program boundary is the area along the Texas Coast of the Gulf of México as depicted on the map in 31 TAC §503.1 and includes part or all of the following counties: Cameron, Willacy, Kenedy, Kleberg, Nueces, San Patricio, Aransas, Refugio, Calhoun, Victoria, Jackson, Matagorda, Brazoria, Galveston, Harris, Chambers, Jefferson y Orange.] El Director Ejecutivo de la TCEQ ha revisado esta medida para ver si está de acuerdo con los objetivos y las regulaciones del Programa de Administración Costero de Texas (CMP) de acuerdo con las regulaciones del Consejo Coordinador de la Costa (CCC) y ha determinado que la acción es conforme con las metas y regulaciones pertinentes del CMP.

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

AVISO ADICIONAL. El Director Ejecutivo de la TCEQ ha determinado que la solicitud es administrativamente completa y conducirá una revisión técnica de la solicitud. Después de completar la revisión técnica, el Director Ejecutivo puede preparar un borrador del permiso y

emitirá una Decisión Preliminar sobre la solicitud. **El aviso de la solicitud y la decisión preliminar serán publicados y enviado a los que están en la lista de correo de las personas a lo largo del condado que desean recibir los avisos y los que están en la lista de correo que desean recibir avisos de esta solicitud. El aviso dará la fecha límite para someter comentarios públicos.**

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

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

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

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

La Comisión sólo puede conceder una solicitud de una audiencia de caso impugnado sobre los temas que el solicitante haya presentado en sus comentarios oportunos que no fueron

retirados posteriormente. **Si se concede una audiencia, el tema de la audiencia estará limitado a cuestiones de hecho en disputa o cuestiones mixtas de hecho y de derecho relacionadas a intereses pertinentes y materiales de calidad del agua que se hayan presentado durante el período de comentarios.**

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

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

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

También se puede obtener más información en Roman Forest Consolidated Municipal Utility Distrito en la dirección indicada anteriormente o llamando al Sr. Michael Helfrich, P.E., Senior Project Gerente/LJA Ingeniería. Inc., en 713- 953-5102.

Fecha de emisión: *[Date notice issued]*



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the application.

APPLICANT NAME: Roman Forest Consolidated Municipal Utility District

PERMIT NUMBER (If new, leave blank): WQ0013638-001

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

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

For TCEQ Use Only

Segment Number _____ County

Expiration Date _____

Region _____

Permit Number _____



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION ADMINISTRATIVE REPORT 1.0

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

Section 1. Application Fees (Instructions Page 26)

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

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

Minor Amendment (for any flow) \$150.00 ☐

Payment Information:

Mailed Check/Money Order Number: 23653
Check/Money Order Amount: \$1,615.00
Name Printed on Check: Roman Forest C.M.U.D.
EPAY Voucher Number: Click to enter text.
Copy of Payment Voucher enclosed? Yes ☐

Section 2. Type of Application (Instructions Page 26)

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

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

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

- ☒ Active ☐ Inactive

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

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

d. Check the box next to the appropriate application type

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

e. For amendments or modifications, describe the proposed changes: [Click to enter text.](#)

f. For existing permits:

Permit Number: WQ00 13638-001

EPA I.D. (TPDES only): TX 0093220

Expiration Date: April 16, 2026

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

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

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

Roman Forest Consolidated Municipal Utility District

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

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

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

CN: 600654966

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

Prefix: Mr.

Last Name, First Name: Patton, Roy

Title: President

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

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

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

Click to enter text.

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

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

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

CN: Click to enter text.

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

Prefix: Click to enter text.

Last Name, First Name: Click to enter text.

Title: Click to enter text.

Credential: Click to enter text.

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

C. Core Data Form

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

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: Helfrich, Michael

Title: Senior Project Manager

Credential: P.E.

Organization Name: LJA Engineering

Mailing Address: 2011 E Broadway, Suite 130 City, State, Zip Code: Pearland, Texas 77581

Phone No.: (713) 657-6013

E-mail Address: mhelfrich@lja.com

Check one or both:



Administrative Contact



Technical Contact

B. Prefix: Mr.

Last Name, First Name: French, Brian

Title: Project Manager

Credential: Click to enter text.

Organization Name: LJA Engineering, Inc.

Mailing Address: 2615 Calder Ave
77702

City, State, Zip Code: Beaumont, TX

Phone No.: 409-554-8972

E-mail Address: bfrench@lja.com

Check one or both: ☒ Administrative Contact
Contact

☒ Technical

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: Buerger, Chris

Title: Plant Operator

Credential: Click to enter text.

Organization Name: Roman Forest Consolidated Municipal Utility District

Mailing Address: 611 Magnolia Bend
77357

City, State, Zip Code: New Caney, Texas

Phone No.: 832-966-1132

E-mail Address: chris@rfcmud.com

B. Prefix: Mr.

Last Name, First Name: Helfrich, Michael

Title: Senior Project Manager

Credential: P.E.

Organization Name: LJA Engineering, Inc.

Mailing Address: 2011 E Broadway, Suite 130
77581

City, State, Zip Code: Pearland, Texas

Phone No.: 713-953-5102

E-mail Address: mhelpfrich@lja.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: Mrs.

Last Name, First Name: O'Brien, Chastity

Title: Office Manager

Credential: N/A

Organization Name: Roman Forest Consolidated Municipal Utility District

Mailing Address: 611 Magnolia Bend
77357

City, State, Zip Code: New Caney, Texas

Phone No.: (281) 689-6324

E-mail Address: chastity@rfcmud.com

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

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

Prefix: Mr. Last Name, First Name: Buerger, Chris
Title: Click to enter text. Credential: N/A
Organization Name: Roman Forest Consolidated Municipal Utility District
Mailing Address: 611 Magnolia Bend City, State, Zip Code: New Caney, Texas
77357
Phone No.: (832) 966-1132 E-mail Address: chris@rfcmud.com

Section 8. Public Notice Information (Instructions Page 27)

A. Individual Publishing the Notices

Prefix: Mr. Last Name, First Name: French, Brian
Title: Project Manager Credential: Click to enter text.
Organization Name: LJA Engineering, Inc.
Mailing Address: 2615 Calder Avenue, Suite 500 City, State, Zip Code: Beaumont,
Texas, 77702
Phone No.: (409) 554-8972 E-mail Address: bfrench@lja.com

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

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

- ☒ E-mail Address
☐ Fax
☐ Regular Mail

C. Contact permit to be listed in the Notices

Prefix: Mr. Last Name, First Name: Helfrich, Michael
Title: Senior Project Manager Credential: P.E.
Organization Name: LJA Engineering, Inc.
Mailing Address: 2011 E Broadway Suite 130 City, State, Zip Code: Pearland, Texas
77581
Phone No.: (713) 953-5102 E-mail Address: mhelfrich@lja.com

D. Public Viewing Information

If the facility or outfall is located in more than one county, a public viewing place for

each county must be provided.

Public building name: District Office

Location within the building: Front

Physical Address of Building: 611 Magnolia Bend

City: New Caney

County: Montgomery

Contact (Last Name, First Name): Chastity O'Brien

Phone No.: (281) 689-6324 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. Summary of Application in Plain Language Template

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

Attachment: E

G. Public Involvement Plan Form

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

Attachment: N/A

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

- A. If the site is currently regulated by TCEQ, provide the Regulated Entity Number (RN) issued to this site. RN 102916483

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):

Roman Forest Consolidated Municipal Utility District Wastewater Treatment Plant

- C. Owner of treatment facility: Click to enter text.

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:

Title: Click to enter text.

Credential: Click to enter text.

Organization Name: Roman Forest Consolidated Municipal Utility District

Mailing Address: 611 Magnolia Bend
77537

City, State, Zip Code: New Caney, Texas

Phone No.: (281) 689-6324

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: N/A

Last Name, First Name: N/A

Title: N/A

Credential: N/A

Organization Name: N/A

Mailing Address: N/A

City, State, Zip Code: N/A

Phone No.: N/A

E-mail Address: N/A

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

Attachment: 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: N/A

Last Name, First Name: N/A

Title: N/A

Credential: N/A

Organization Name: N/A

Mailing Address: N/A

City, State, Zip Code: N/A

Phone No.: N/A

E-mail Address: N/A

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

Attachment: 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): Roman Forest

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

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

☐ Yes ☒ No

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

☐ Authorization granted ☐ Authorization pending

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

Attachment: Click to enter text.

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

Section 11. TLAP Disposal Information (Instructions Page 32)

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

☐ N/AYes ☐ No

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

N/A

- B. City nearest the disposal site: N/A

- C. County in which the disposal site is located: N/A

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

N/A

- E. For **TLAPs**, please identify the nearest watercourse to the disposal site to which rainfall runoff might flow if not contained: N/A

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: W10013638-001

Applicant: Roman Forest Consolidated Municipal Utility District

Certification:

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

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

Signatory name (typed or printed): Roy Patton

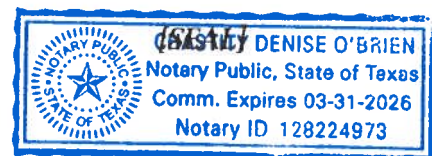
Signatory title: President

Signature: _____ Date: 9-25-2025
(Use blue ink)

Subscribed and Sworn to before me by the said Roy G. Patton
on this 25th day of September, 2025.
My commission expires on the 31st day of March, 2026

Notary Public

Montgomery
County, Texas



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

FOR AGENCIES REVIEWING DOMESTIC OR INDUSTRIAL TPDES WASTEWATER PERMIT APPLICATIONS

TCEQ USE ONLY:

Application type: ____ Renewal ____ Major Amendment ____ Minor Amendment ____ New

County: _____ Segment Number: _____

Admin Complete Date: _____

Agency Receiving SPIF:

____ Texas Historical Commission

____ U.S. Fish and Wildlife

____ Texas Parks and Wildlife Department

____ U.S. Army Corps of Engineers

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

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

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

The following applies to all applications:

1. Permittee: Roman Forrest Consolidated Municipal Utility DistrictPermit No. WQ00 13638-001EPA ID No. TX 003220

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

1602 Athens Street in the city of Roman Forrest, Montgomery County, Texas approximately 1.7 miles east of U.S. highway 59 and 1.2 miles north of the intersection of highway 59 and F.M. 1485.

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): Mrs.

First and Last Name: Chastity O'Brien

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

Title: Office Manager

Mailing Address: 311 Magnolia Bend

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

Phone No.: 281-689-6324 Ext.: Fax No.: 281-689-0022

E-mail Address: chastity@rfcmud.com

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

N/A

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

30-inch pipe to Peach Creek in Segment 1011 of San Jacinto River Basin

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

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

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

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

☐ Disturbance of vegetation or wetlands

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

N/A

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

The land was not in use, contained vegetation.

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

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

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



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION TECHNICAL REPORT 1.0

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

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

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

A. Existing/Interim I Phase

Design Flow (MGD): 0.35

2-Hr Peak Flow (MGD): 1.4

Estimated construction start date: N/A

Estimated waste disposal start date: N/A

B. Interim II Phase

Design Flow (MGD): N/A

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

Estimated construction start date: N/A

Estimated waste disposal start date: N/A

C. Final Phase

Design Flow (MGD): 0.70

2-Hr Peak Flow (MGD): 2.8

Estimated construction start date: N/A

Estimated waste disposal start date: N/A

D. Current Operating Phase

Provide the startup date of the facility: March 2024

Section 2. Treatment Process (Instructions Page 42)

A. Current Operating Phase

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

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

See Attachment H

B. Treatment Units

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

Table 1.0(1) - Treatment Units

Treatment Unit Type	Number of Units	Dimensions (L x W x D)
Aeration Basin	1	Surface Area=806.7ft ² , Depth=21.1
Clarifier	1	40' dia x 12.07 SWD
Sludge Digester	1	14' x 19.25' x 22.5'
Chlorine Contact Basin	1	Surface Area=295', Depth= 9.77'

C. Process Flow Diagram

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

Attachment: B

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

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

- Latitude: 30.169340
- Longitude: -95.178474

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: D

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

Roman Forest Consolidated Municipal Utility District serves the city of Roman Forest. It is approximately 38 miles Northeast of the city of Houston.

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
Roman Forest CMUD	Roman Forest CMUD	Publicly Owned	2,400
		Choose an item.	
		Choose an item.	
		Choose an item.	

Section 4. Unbuilt Phases (Instructions Page 44)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

Section 5. Closure Plans (Instructions Page 44)

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

☒ Yes ☐ No

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

☐ Yes ☒ No

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

Click to enter text.

Section 6. Permit Specific Requirements (Instructions Page 44)

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

A. Summary transmittal

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

☒ Yes ☐ No

If yes, provide the date(s) of approval for each phase: March 2024

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

B. Buffer zones

Have the buffer zone requirements been met?

☒ Yes ☐ No

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

Ownership

C. Other actions required by the current permit

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

☐ Yes ☒ No

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

None Required.

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. Attachment I

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 BOD₅ concentration of the sludge, and the design BOD₅ concentration of the influent from the collection system. Also note if this information has or has not changed since the last permit action.

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 BOD₅ concentration of the septic waste, and the design BOD₅ concentration of the influent from the collection system. Also note if this information has or has not changed since the last permit action.

Click to enter text.

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

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

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

☐ Yes ☒ No

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

Click to enter text.

Section 7. Pollutant Analysis of Treated Effluent (Instructions Page 49)

Is the facility in operation?

☒ Yes ☐ No

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

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

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

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

Pollutant	Average Conc.	Max Conc.	No. of Samples	Sample Type	Sample Date/Time
CBOD ₅ , 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, μ mohs/cm, †					
Oil & Grease, mg/l					
Alkalinity (CaCO ₃)*, 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 ₃), mg/l					

Section 8. Facility Operator (Instructions Page 49)

Facility Operator Name: Christopher BuergerFacility Operator's License Classification and Level: Class CFacility Operator's License Number: WW0054422

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

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

Check all that apply. See instructions for guidance

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

B. WWTP's Sewage Sludge or Biosolids Treatment Process

Check all that apply. See instructions for guidance.

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

C. Sewage Sludge or Biosolids Management

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

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

Biosolids Management

Management Practice	Handler or Preparer Type	Bulk or Bag Container	Amount (dry metric tons)	Pathogen Reduction Options	Vector Attraction Reduction Option
Disposal in Landfill	Off-site Third-Party Handler or Preparer	Bulk		N/A: Disposal in Landfill	N/A: Disposal in Landfill
Choose an item.	Choose an item.	Choose an item.		Choose an item.	Choose an item.
Choose an item.	Choose an item.	Choose an item.		Choose an item.	Choose an item.

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

D. Disposal site

Disposal site name: McCarty Landfill, Harris County

TCEQ permit or registration number: 261A

County where disposal site is located: Harris County

E. Transportation method

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

Name of the hauler: Republic Services

Hauler registration number: EPA ID No. TXR000015701

Sludge is transported as a:

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

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

A. Beneficial use authorization

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

☐ Yes ☒ No

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

☐ Yes ☐ No

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

☐ Yes ☐ No

B. Sludge processing authorization

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

Sludge Composting	☐ Yes	☒ No
Marketing and Distribution of Biosolids	☐ Yes	☒ No
Sludge Surface Disposal or Sludge Monofill	☐ Yes	☒ No
Temporary storage in sludge lagoons	☐ Yes	☒ No

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

☐ Yes ☐ No

Section 11. Sewage Sludge Lagoons (Instructions Page 53)

Does this facility include sewage sludge lagoons?

☐ Yes ☒ No

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

A. Location information

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

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

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

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

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

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

N/A

B. Temporary storage information

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

Nitrate Nitrogen, mg/kg: N/A

Total Kjeldahl Nitrogen, mg/kg: N/A

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

Phosphorus, mg/kg: N/A

Potassium, mg/kg: N/A

pH, standard units: N/A

Ammonia Nitrogen mg/kg: N/A

Arsenic: N/A

Cadmium: N/A

Chromium: N/A

Copper: N/A

Lead: N/A

Mercury: N/A

Molybdenum: N/A

Nickel: N/A

Selenium: N/A

Zinc: N/A

Total PCBs: N/A

Provide the following information:

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

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

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

C. Liner information

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

☐ Yes ☐ No

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

N/A

D. Site development plan

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

N/A

Attach the following documents to the application.

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

E. Groundwater monitoring

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

☐ Yes ☐ No

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

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

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

A. Additional authorizations

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

☐ Yes ☒ No

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

Click to enter text.

B. Permittee enforcement status

Is the permittee currently under enforcement for this facility?

☐ Yes ☒ No

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

☐ Yes ☒ No

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

Click to enter text.

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

A. RCRA hazardous wastes

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

☐ Yes ☒ No

B. Remediation activity wastewater

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

☐ Yes ☒ No

C. Details about wastes received

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

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

Section 14. Laboratory Accreditation (Instructions Page 55)

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

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

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

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

CERTIFICATION:

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

Printed Name: Brian French

Title: Project Manager

Signature: _____

Date: _____

DOMESTIC WASTEWATER PERMIT APPLICATION WORKSHEET 2.0: RECEIVING WATERS

The following information is required for all TPDES permit applications.

Section 1. Domestic Drinking Water Supply (Instructions Page 63)

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

☐ Yes ☒ No

If **no**, proceed 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 63)

Does the facility discharge into tidally affected waters?

☐ Yes ☒ No

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

A. Receiving water outfall

Width of the receiving water at the outfall, in feet: [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 63)

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

☒ Yes ☐ No

If yes, this Worksheet is complete.

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

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

Name of the immediate receiving waters: Click to enter text.

A. Receiving water type

Identify the appropriate description of the receiving waters.

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

Surface area, in acres: Click to enter text.

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

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

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

Click to enter text.

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.

Click to enter text.

Date and time of observation: Click to enter text.

Was the water body influenced by stormwater runoff during observations?

- ☐ Yes ☐ No

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

A. Upstream influences

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

- | | |
|---|--|
| ☐ 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.

- | | |
|--|--|
| ☐ Livestock watering | ☐ Contact recreation |
| ☐ Irrigation withdrawal | ☐ Non-contact recreation |
| ☐ Fishing | ☐ Navigation |
| ☐ Domestic water supply | ☐ Industrial water supply |
| ☐ Park activities | ☐ Other(s), specify: Click to enter text. |

C. Waterbody aesthetics

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

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

DOMESTIC WASTEWATER PERMIT APPLICATION

WORKSHEET 6.0: INDUSTRIAL WASTE CONTRIBUTION

The following is required for all publicly owned treatment works.

Section 1. All POTWs (Instructions Page 87)

A. Industrial users (IUs)

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

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

Categorical IUs:

Number of IUs: 0

Average Daily Flows, in MGD: 0

Significant IUs - non-categorical:

Number of IUs: 0

Average Daily Flows, in MGD: 0

Other IUs:

Number of IUs: 0

Average Daily Flows, in MGD: 0

B. Treatment plant interference

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

☐ Yes ☒ No

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

Click to enter text.

C. Treatment plant pass through

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

☐ Yes ☒ No

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

Click to enter text.

D. Pretreatment program

Does your POTW have an approved pretreatment program?

☐ Yes ☒ No

If yes, complete Section 2 only of this Worksheet.

Is your POTW required to develop an approved pretreatment program?

☐ Yes ☒ No

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

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

Section 2. POTWs with Approved Programs or Those Required

to Develop a Program (Instructions Page 87)

A. Substantial modifications

Have there been any **substantial modifications** to the approved pretreatment program that have not been submitted to the TCEQ for approval according to 40 CFR §403.18?

☐ Yes ☒ No

If **yes**, identify the modifications that have not been submitted to TCEQ, including the purpose of the modification.

Click to enter text.

B. Non-substantial modifications

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

☐ Yes ☒ No

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

Click to enter text.

C. Effluent parameters above the MAL

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

Table 1.0(1) – Parameters Above the MAL

Pollutant	Concentration	MAL	Units	Date

Pollutant	Concentration	MAL	Units	Date

D. Industrial user interruptions

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

☐ Yes ☒ No

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

Click to enter text.

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

A. General information

Company Name: N/A

SIC Code: N/A

Contact name: N/A

Address: N/A

City, State, and Zip Code: N/A

Telephone number: N/A

Email address: N/A

B. Process information

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

N/A

C. Product and service information

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

N/A

D. Flow rate information

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

Process Wastewater:

Discharge, in gallons/day: N/A

Discharge Type: ☐ Continuous ☐ Batch ☐ Intermittent

Non-Process Wastewater:

Discharge, in gallons/day: N/A

Discharge Type: ☐ Continuous ☐ Batch ☐ Intermittent

E. Pretreatment standards

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

☐ Yes ☒ No

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

☐ Yes ☒ No

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

Category: Subcategories: Click to enter text.

Click or tap here to enter text. Click to enter text.

Category: N/A

Subcategories: N/A

Category: N/A

Subcategories: N/A

Category: N/A

Subcategories: N/A

Category: N/A

Subcategories: N/A

F. Industrial user interruptions

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

☐ Yes ☒ No

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

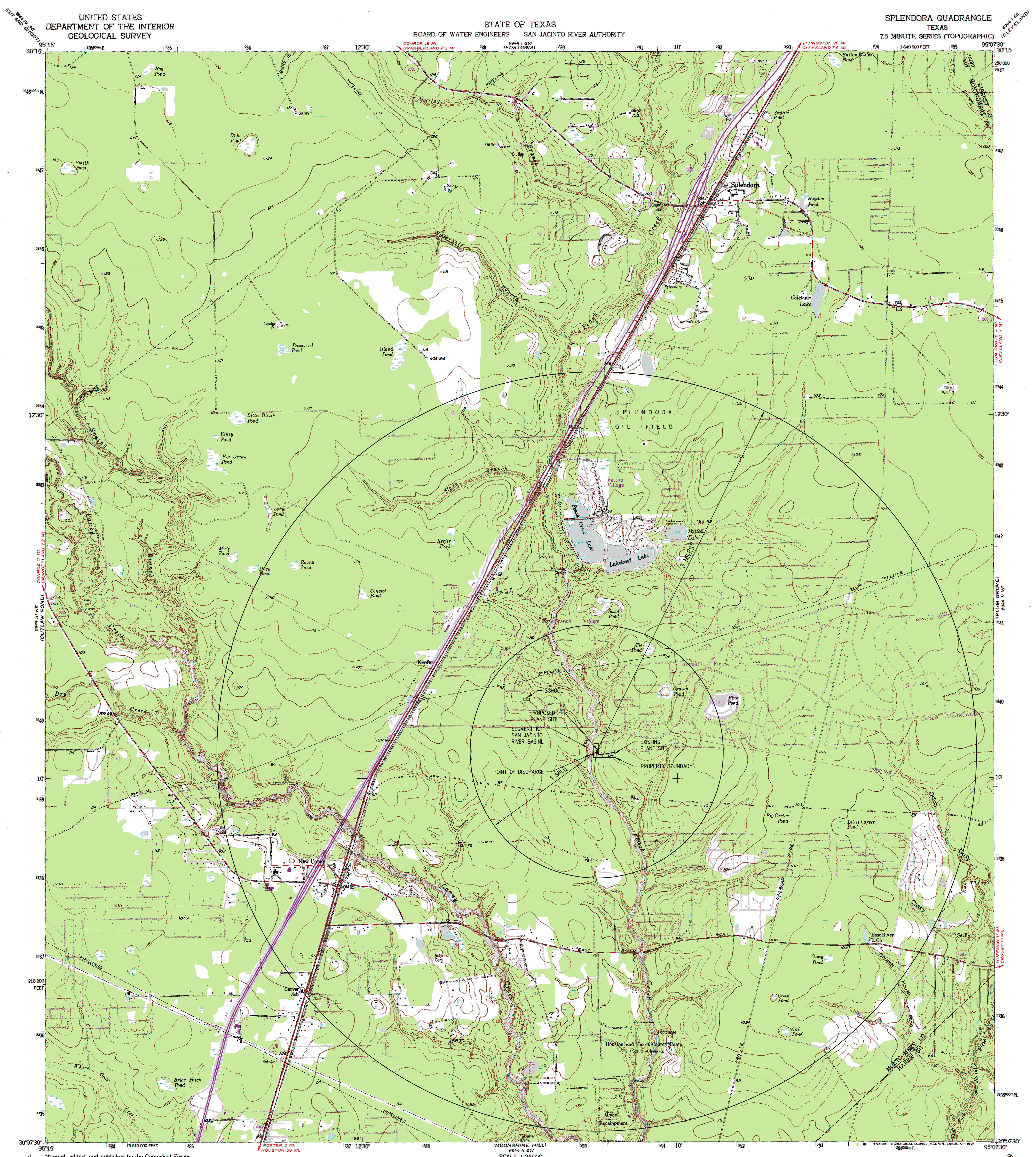
N/A

Attachment Index

Attachment	Title
A	Original USGS Topographic Map
B	Buffer Zone Map
C	Flow Diagram
D	Site Drawing
E	Plain Language Summary
F	Completion Letter
G	Core Data Form
H	Detailed Treatment Process
I	Sewage Sludge Solids Management Plan
J	Additional USGS Topographic Maps

Attachment A

Original USGS Topographic Map



UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

STATE OF TEXAS
BOARD OF WATER ENGINEERS
SAN JACINTO RIVER AUTHORITY

SPLENDORA QUADRANGLE
TEXAS
7.5 MINUTE SERIES (TOPOGRAPHIC)

Maped, edited, and published by the Geological Survey
Control by USGS and NOS/NOAA
Culture and drainage in part compiled from aerial photographs
taken 1957. Topography by planimetric survey 1959
Polyconic projection, 1927 North American Datum
10,000-foot grid based on Texas coordinate system,
central zone
1000-meter Universal Transverse Mercator grid ticks,
zone 15, shown in blue
To place on the predicted North American Datum 1983
move the projection lines 19 meters south and
22 meters east as shown by dashed corner ticks
Revisions shown in purple compiled from aerial photographs
taken 1977 and other source data. This information not
field checked. Map edited 1979

UTM GRID AND 1979 MAGNETIC NORTH
DECLINATION AT CENTER OF SHEET

SCALE 1:24,000
CONTOUR INTERVAL 5 FEET
NATIONAL GEODETIC VERTICAL DATUM OF 1929

ROAD CLASSIFICATION
Heavy duty ——— Light duty ———
Medium duty ——— Unimproved dirt ———
U.S. Route ———
State Route ———

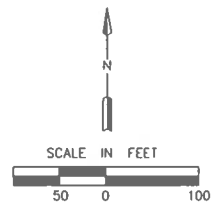
SPLENDORA, TEX.
3095-82-TF-024
1959
PHOTOREVISED 1979
DMA 6944 II NW-SERIES Y882

THIS MAP COMPLIES WITH NATIONAL MAP ACCURACY STANDARDS
FOR SALE BY U.S. GEOLOGICAL SURVEY, DENVER, COLORADO 80225, OR RESTON, VIRGINIA 22092
A FOLDER DESCRIBING TOPOGRAPHIC MAPS AND SYMBOLS IS AVAILABLE ON REQUEST

3095-113

Attachment B

Buffer Zone Map



WWTP BUFFER ZONE PH 2
ATTACHMENT B

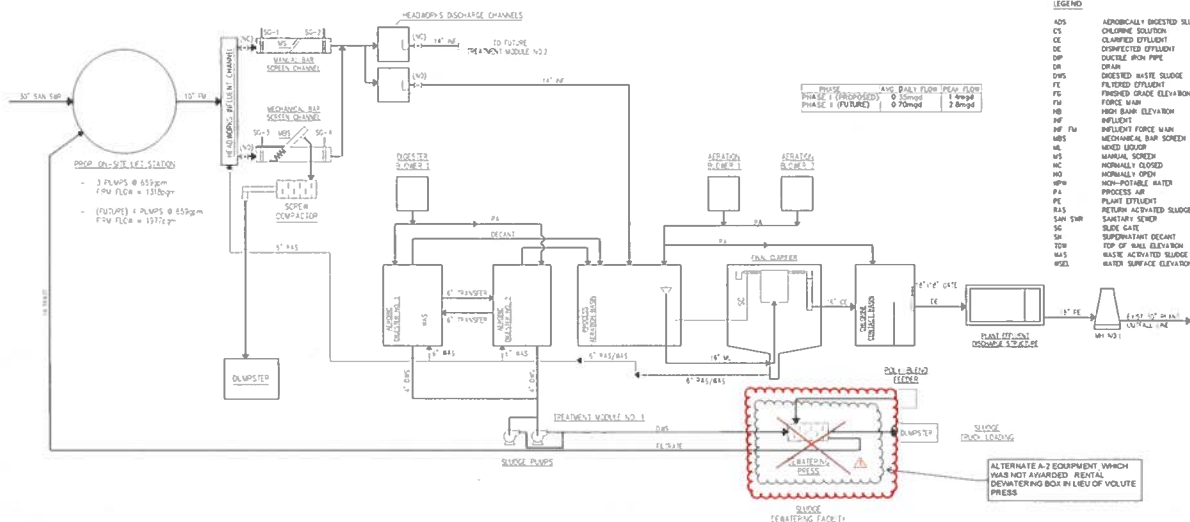
11821 East Freeway
Suite 360
Houston, Texas 77029

Phone 713.450.1300
Fax 713.953.5026
FRN - F-1386



Attachment C

Flow Diagram



PROCESS
FLOW DIAGRAM

LEGEND

ADS	AEROBICALLY DIGESTED SLUDGE
CS	CHLORINE SOLUTION
CE	CLARIFIED EFFLUENT
CE	CORRODED EFFLUENT
DIP	DUCTILE IRON PIPE
DR	DRUM
DVS	DIGESTED WASTE SLUDGE
FE	FILTERED EFFLUENT
FE	FRESH GRADE ELEVATION
FM	FORCE MAIN
HB	HIGH BANK ELEVATION
IF	INFILTRANT FORCE MAIN
MF	MECHANICAL BAR SCREEN
MS	MIXED SOLIDS
MS	MANUAL SCREEN
MC	NORMALLY CLOSED
MO	NORMALLY OPEN
MPW	NON-POTABLE WATER
PA	PROCESS AIR
RAIS	RETURN ACTIVATED SLUDGE
SAW SW	SANITARY SEWER
SC	SLIDE GATE
SD	SUPERNATANT DECANT
TDH	TOP OF WALL ELEVATION
WAS	WASTE ACTIVATED SLUDGE
WSEL	WATER SURFACE ELEVATION

PHASE	AUG. DAILY FLOW	PEAK FLOW
PHASE I (PRESENT)	0.50mgd	1.4mgd
PHASE I (FUTURE)	0.70mgd	2.8mgd



RECORD DRAWING

I CERTIFY THAT THIS DRAWING REFLECTS THE IMPROVEMENTS CONSTRUCTED AS TO DATE, LOCATION AND GRADE AND THAT THE CONSTRUCTION WILL BE IN FULL COMPLIANCE WITH THE CONTRACT DOCUMENTS.

BY: *[Signature]* DATE: 1/13/2021

TITLE: *[Signature]*

DATE	REVISION	BY

ROMAN FOREST CONSOLIDATED M.D.
TOWN COUNCIL PROJECT NO. 73829

DISASTER RELIEF -
WASTEWATER TREATMENT PLANT
REPLACEMENT - PHASE I

PROCESS FLOW DIAGRAM

LJA Engineering, Inc.
11021 East Freeway
Suite 200
Houston, Texas 77023
Phone: 281-458-1200
Fax: 281-458-1201
Web: www.lja.com

PROJECT NO.: E-210-0050

DATE: 11/13/2020

SCALE: AS SHOWN

SHEET NO. 3 OF 75

G-3

DISASTER RELIEF - WWP REPLACEMENT - PHASE I, LA 200#E-210-0050

Attachment D

Site Drawing



— SERVICE AREA

SITE MAP
ATTACHMENT: D

Date : 08/28/2025
File Name :
File Drawer No. :

LJA Engineering, Inc.

2615 Calder Avenue, Suite 500
Beaumont, Texas 77702



Phone 409.833.3363
Fax 409.833.0317
FRN - F-1386

Action	Name	Date
Design	BF	08/25
Drawn	REC	08/25
Checked	BF	08/25
Approved	BF	08/25
Scale	N.T.S.	
Sheet	1	of 1

Attachment E

Plain Language Summary

Plain Language Summary

Roman Forest Consolidated Municipal Utility District (CN600654966) Wastewater Treatment Plant (RN102916483). The facility is an activated sludge wastewater treatment system. The facility is located at 1602 Athens Street in the City of Roman Forest, Montgomery County, Texas approximately 1.7 miles east of U.S. highway 59 and 1.2 miles north of the intersection of highway 59 and F.M. 1485.

This application is for a renewal of the wastewater treatment facility with a daily average discharge of 350,000 gallons per day of treated domestic wastewater.

Discharges from the facility are expected to contain five-day carbonaceous biochemical oxygen demand (CBOD₅), total suspended solids (TSS), ammonia nitrogen (NH₃-N), and *Escherichia coli*. Domestic wastewater is treated by an activated sludge process plant and the treatment units will include screening, Aeration, clarifier, aerobic sludge digesters, sludge dewatering equipment, and disinfection, before discharge to the receiving stream.

Attachment F

Completion Letter



April 29, 2024

Mr. Louis C. Herrin, III, P.E.
TCEQ-MC 148
P.O. Box 13087
Austin, Texas 78711-3087

**RE: Chapter 217 Partial Substantial Completion Letter
City of Roman Forest, Texas
Roman Forest Consolidated MUD Disaster Relief – WWTP Replacement – Phase 1
TCEQ Permit: WQ0013638-001**

Mr. Herrin:

The purpose of this letter is to provide the TCEQ with notice that the Roman Forest CMUD WWTP was switched from the old bullseye plant to the new plant in March 2024. While the WWTP is not yet substantially complete, the new plant is online and discharging. We are notifying the TCEQ of this important intermediate step as a courtesy. LJA will fill the notification of completion when work is completed.

If you have any questions regarding this project, please contact Tim Aschoff at (713) 380-4420, taschoff@lja.com.

Sincerely,

LJA ENGINEERING, INC.

A handwritten signature in black ink that reads "Timothy M. Aschoff". The signature is written in a cursive, flowing style.

Timothy M. Aschoff, P.E.
Senior Project Manager

cc: Chastity O'Brien, Office Manager, Roman Forest CMUD
Chris Buerger, Plant Operator, Roman Forest CMUD
TCEQ Region 12

Attachment G

Core Data Form



TCEQ Core Data Form

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

SECTION I: General Information

1. Reason for Submission (If other is checked please describe in space provided.)		
☐ New Permit, Registration or Authorization (Core Data Form should be submitted with the program application.)		
☒ Renewal (Core Data Form should be submitted with the renewal form)		☐ Other
2. Customer Reference Number (if issued)	Follow this link to search for CN or RN numbers in Central Registry**	3. Regulated Entity Reference Number (if issued)
CN 600654966		RN 102916483

SECTION II: Customer Information

4. General Customer Information		5. Effective Date for Customer Information Updates (mm/dd/yyyy)		
☐ New Customer ☒ Update to Customer Information ☐ Change in Regulated Entity Ownership				
☐ Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)				
<i>The Customer Name submitted here may be updated automatically based on what is current and active with the Texas Secretary of State (SOS) or Texas Comptroller of Public Accounts (CPA).</i>				
6. Customer Legal Name (If an individual, print last name first: eg: Doe, John)		<i>If new Customer, enter previous Customer below:</i>		
Roman Forest Consolidated Municipal Utility District				
7. TX SOS/CPA Filing Number	8. TX State Tax ID (11 digits) 74-2023812	9. Federal Tax ID (9 digits) N/A	10. DUNS Number (if applicable) 80-471-2909	
11. Type of Customer:	☐ Corporation	☐ Individual	Partnership: ☐ General ☐ Limited	
Government: ☐ City ☐ County ☐ Federal ☐ Local ☐ State ☐ Other	☐ Sole Proprietorship	☒ Other: Municipal Utility District		
12. Number of Employees ☒ 0-20 ☐ 21-100 ☐ 101-250 ☐ 251-500 ☐ 501 and higher		13. Independently Owned and Operated? ☒ Yes ☐ No		
14. Customer Role (Proposed or Actual) – as it relates to the Regulated Entity listed on this form. Please check one of the following				
☐ Owner ☐ Operator ☐ Owner & Operator ☒ Other: Municipal Utility District				
☐ Occupational Licensee ☐ Responsible Party ☐ VCP/BSA Applicant				
15. Mailing Address:	611 Magnolia Bend			
	City	New Caney	State	TX
		ZIP	77357	ZIP + 4
				3282
16. Country Mailing Information (if outside USA)			17. E-Mail Address (if applicable)	
			rfcmud@nctv.com	

18. Telephone Number (281) 689-6324	19. Extension or Code	20. Fax Number (if applicable) (281) 689-0022
---	------------------------------	---

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								
<i>The Regulated Entity Name submitted may be updated, in order to meet TCEQ Core Data Standards (removal of organizational endings such as Inc, LP, or LLC).</i>								
22. Regulated Entity Name (Enter name of the site where the regulated action is taking place.) Roman Forrest CMUD WWTP								
23. Street Address of the Regulated Entity: (No PO Boxes)	1602 Athens Drive							
	City	Roman Forest	State	TX	ZIP	77357	ZIP + 4	
24. County	Montgomery							

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

25. Description to Physical Location:									
26. Nearest City	Roman Forest				State	TX	Nearest ZIP Code		77357
<i>Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).</i>									
27. Latitude (N) In Decimal:		30.169568			28. Longitude (W) In Decimal:		-95.176194		
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds				
29. Primary SIC Code (4 digits)		30. Secondary SIC Code (4 digits)		31. Primary NAICS Code (5 or 6 digits)		32. Secondary NAICS Code (5 or 6 digits)			
4952				221320					
33. What is the Primary Business of this entity? (Do not repeat the SIC or NAICS description.) Municipal Utility District									
34. Mailing Address:	611 Magnolia Bend								
	City	New Caney	State	TX	ZIP	77357	ZIP + 4		
35. E-Mail Address:		rfcmud@nctv.com							
36. Telephone Number			37. Extension or Code			38. Fax Number (if applicable)			
(281) 689-6324						(281) 689-22			

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

☐ Dam Safety	☐ Districts	☐ Edwards Aquifer	☐ Emissions Inventory Air	☐ Industrial Hazardous Waste
☐ Municipal Solid Waste	☐ New Source Review Air	☐ OSSF	☐ Petroleum Storage Tank	☐ PWS
☐ Sludge	☐ Storm Water	☐ Title V Air	☐ Tires	☐ Used Oil
☐ Voluntary Cleanup	☒ Wastewater	☐ Wastewater Agriculture	☐ Water Rights	☐ Other:
	WQ0013638-001			

SECTION IV: Preparer Information

40. Name:	Haley Allen			41. Title:	Environmental Technician
42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Mail Address		
(409) 554-8841		() -	hallen@lja.com		

SECTION V: Authorized Signature

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

Company:	Roman Forest	Job Title:	President
Name (In Print):	Roy Patton	Phone:	(713) 864- 5466
Signature:		Date:	9-25-2025

Attachment H

Detailed Treatment Process

ATTACHMENT "H"
Domestic Technical Report 1.0, Page 2 of 76
Treatment Process, Item 3a

I. General Process Description:

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

II. Treatment Units:

A. Headworks:

Raw sewage, pumped from the influent lift station, enters either of two bar screen channels. One has mechanically cleaned screens, the other manually cleaned. Collected material, failing to pass the screens is consolidated in a screw compactor and passed to a dumpster which is hauled to a landfill. Then the screened influent leaves the headworks to the aeration basin.

B. Treatment Works:

From the headworks the flow is to the aeration basin, then to the clarifier. From the clarifier the sludge is either returned to the headworks or wasted into an aerobic digester basin. At proper age the digested sludge is wasted to the belt press, from where it is collected, and hauled by truck to licensed landfill site.

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

Attachment I

Sewage Sludge Solids Management Plan



February 7, 2012

Mr. Mark Havran
LJA Engineering
11821 East Freeway
Suite 400
Houston, TX 77029

RE: Roman Forest Consolidated Municipal Utility District WWTP
Permit Application

Dear Mark:

The attached information is to be used for the referenced WWTP permit application. Sludge from the Roman Forest Consolidated Municipal Utility District WWTP may be transported to the Richey Road MUD WWTP as outlined in the attached "TRS Enviroganics' Houston Area Regional Biosolids Management Plan." A letter from Richey Road MUD confirming our agreement with the District is enclosed.

As an alternative to transporting biosolids to Richey Road MUD, we may transport biosolids directly to one of our land application farms. The list of Houston area farms is attached. The permit should allow for either method of sludge disposal.

Please note that TRS Enviroganics' TCEQ Transporter Number is 23777. Feel free to contact me at (713) 316-5050 if you have any questions.

Sincerely,

Cindy Carden
General Manager/Municipal Sales

Enclosures

RICHEY ROAD MUNICIPAL UTILITY DISTRICT
1001 McKinney, Suite 1000
Houston, Texas 77002-6424
(713) 237-1221

February 7, 2012

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

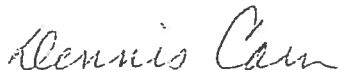
RE: Roman Forest Consolidated Municipal Utility District WWTP
Permit Application

To Whom It May Concern:

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

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

Sincerely,



Dennis Cain
President
Richey Road M.U.D. Board of Directors

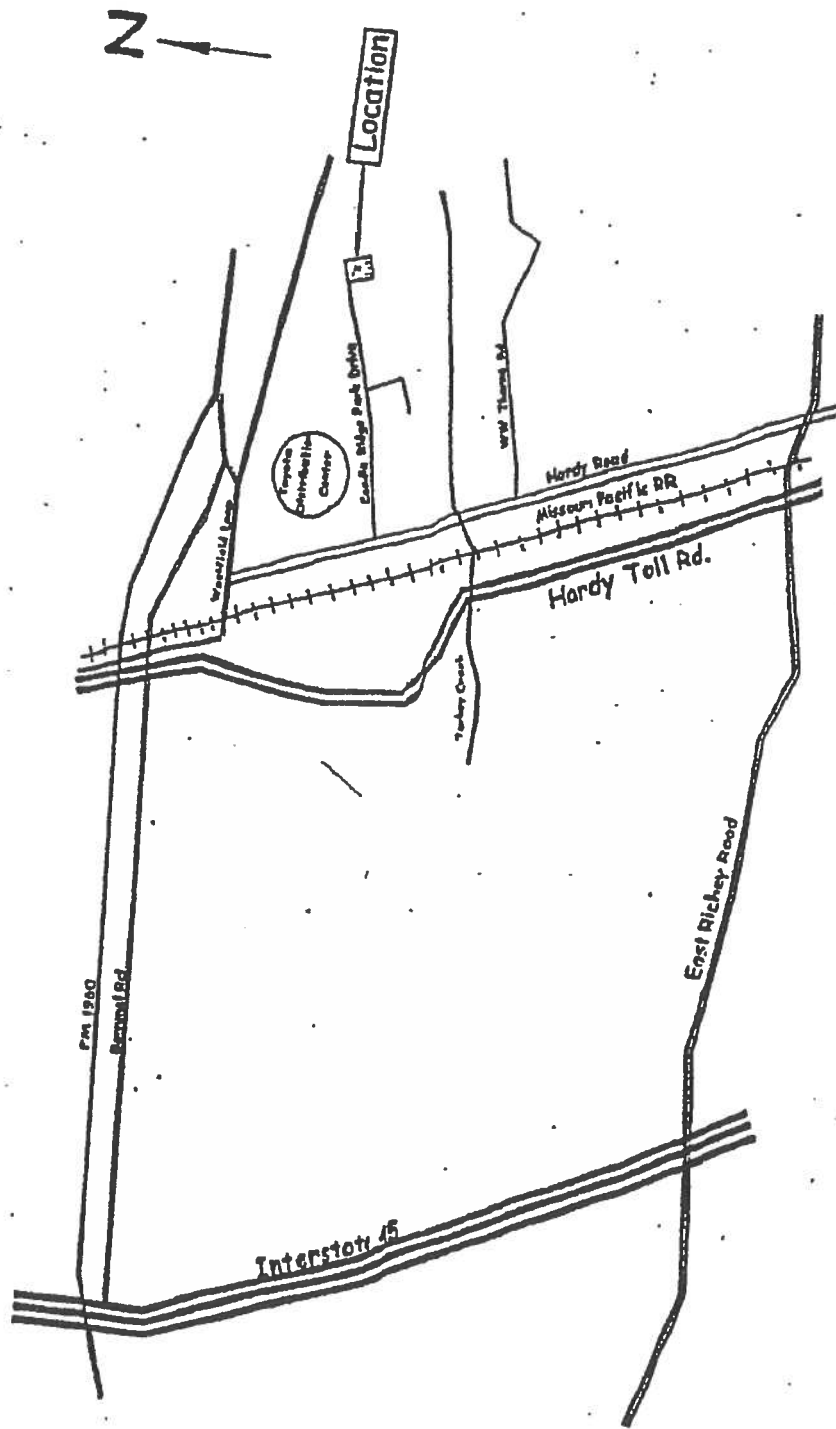


Cindy Carden
General Manager/Municipal Sales
TRS Envirogenics

cc: Alan Petrov, Johnson Radcliffe Petrov & Bobbitt

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

Location: Long: 95 Deg 23' 30" W, Lat: 30 Deg 00' 45" N
From Intersection of East Richey Road and Hardy Road, turn north,
Drive approximately 0.9 miles to Canale Ridge Park Drive, just before
the Texas Distribution Center. Turn right and proceed to end of road.
Facility will be on right.



TRS Enviroganics, Inc.

Permitted Beneficial Land Application Farm Sites Houston Area

Landowner	TCEQ Permit #	Longitude	Latitude	County	Location	Usable Acres
Barbra Look (water & wastewater)	WQ0004462000	96 Deg 5"	30 Deg 4"	Waller	4.8 ml. W. of interstn. of Hwy 290 and Hwy. 8	1,350.00
James Henderson (water & wastewater)	WQ0004460000	94 Deg 30'	30 Deg 33'	Liberty	1 ml S of intersection of Hwy 90 and FM 1009	2,000.00
Susan Cardwell (water & wastewater)	WQ0004501000	96 Deg 5'	30 Deg 6'	Waller	0.2 ml. W of intersection of FM 359 & Pierceall Rd.	115.00
						3,465.00

TCEQ Transporter Registration Number for TRS Enviroganics

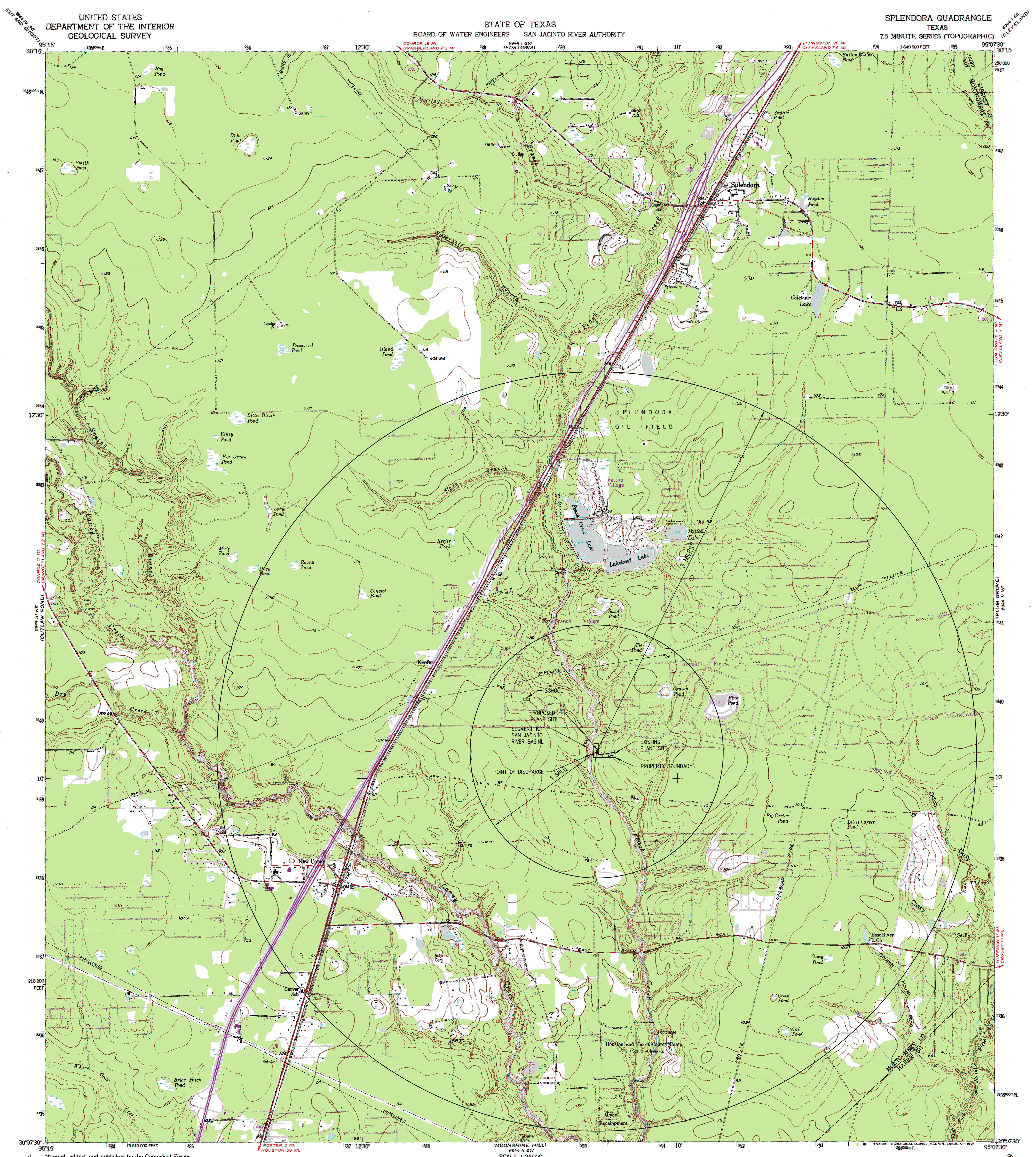
23777

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

TPDES Permit Number 12378-002
TCEQ Permit Number WQ0004810000

Attachment J

Additional USGS Topographic Maps



UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

STATE OF TEXAS
BOARD OF WATER ENGINEERS
SAN JACINTO RIVER AUTHORITY

SPLENDORA QUADRANGLE
TEXAS
7.5 MINUTE SERIES (TOPOGRAPHIC)

Maped, edited, and published by the Geological Survey
Control by USGS and NOS/NOAA
Culture and drainage in part compiled from aerial photographs
taken 1957. Topography by planimetric survey 1959
Polyconic projection, 1927 North American Datum
10,000-foot grid based on Texas coordinate system,
central zone
1000-meter Universal Transverse Mercator grid ticks,
zone 15, shown in blue
To place on the predicted North American Datum 1983
move the projection lines 19 meters south and
22 meters east as shown by dashed corner ticks
Revisions shown in purple compiled from aerial photographs
taken 1977 and other source data. This information not
field checked. Map edited 1979

SCALE 1:24,000
CONTOUR INTERVAL 5 FEET
NATIONAL GEODETIC VERTICAL DATUM OF 1929

ROAD CLASSIFICATION
Heavy duty ——— Light duty ———
Medium duty ——— Unimproved dirt ———
U.S. Route ———
State Route ———

SPLENDORA, TEX.
3095-82-TF-024
1959
PHOTOREVISED 1979
DMA 6944 II NW-SERIES Y882