

This file contains the following documents:

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



Este archivo contiene los siguientes documentos:

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





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

Sam Houston Area Council Boy Scouts of America (CN600664577) operates the Bovay Scout Ranch wastewater treatment plant (RN101223543), an activated sludge process plant operated in the extended aeration mode. The facility is located 2 miles northeast of the intersection of State Highway 6 and Farm-to-Market Road 2988 and 0.29 miles southeast of Sommerford Cemetery, in Grimes County, Texas 77868.

This application is for a renewal to discharge at an annual average flow of 30,000 gallons per day of treated domestic wastewater.

Discharges from the facility are expected to contain five-day biochemical oxygen demand (BOD₅), total suspended solids (TSS), and *Escherichia coli*. Additional potential pollutants are included in the Domestic Technical Report 1.0, Section 7. Pollutant Analysis of Treated Effluent. Domestic wastewater is treated by an activated sludge process plant and the treatment units include a bar screen, aeration basins, final clarifiers, sludge digesters, and chlorine contact chambers.



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

Sam Houston Area Council Boy Scouts of America (CN600664577) opera la planta de tratamiento de aguas residuales de Bovay Scout Ranch (RN101223543), una planta de procesamiento de lodos activados que funciona en modo de aireación extendida. La instalación está ubicada a 2 millas al noreste de la intersección de la carretera estatal 6 y Farm-to-Market Road 2988 y a 0.29 millas al sureste del cementerio Sommerford, en el condado de Grimes, Texas 77868.

Esta solicitud es para una renovación para descargar un flujo promedio anual de 30,000 galones por día de aguas residuales domésticas tratadas.

Se espera que las descargas de la instalación contengan demanda bioquímica de oxígeno de cinco días (BOD₅), sólidos suspendidos totales (TSS) y *Escherichia coli*. Se incluyen otros contaminantes potenciales en el Informe Técnico Doméstico 1.0, Sección 7. Análisis de contaminantes del efluente tratado. Las aguas residuales domésticas se tratan mediante una planta de procesamiento de lodos activados y las unidades de tratamiento incluyen una rejilla de barras, cuencas de aireación, clarificadores finales, digestores de lodos y cámaras de contacto con cloro.

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY



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

PERMIT NO. WQ0014095001

APPLICATION. Sam Houston Area Council Boy Scouts of America, 2225 North Loop West, Houston, Texas 77008, has applied to the Texas Commission on Environmental Quality (TCEQ) to renew Texas Pollutant Discharge Elimination System (TPDES) Permit No. WO0014095001 (EPA I.D. No. TX0119083) to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 30,000 gallons per day. The domestic wastewater treatment facility is located 2 miles northeast of the intersection of State Highway 6 and Farm-to-Market Road 2988, and 0.29 miles southeast of Sommerford Cemetery, on the unnamed tributary of Grassy Creek, near the city of Grimes, In Grimes County, Texas 77868. The discharge route is from the plant site to an unnamed tributary of Grassy Creek; thence to Grassy Creek; thence to Brazos River Below Navaota River. TCEQ received this application on October 22, 2024. The permit application will be available for viewing and copying at Navasota Public Library, 1411 East Washington Avenue, Navasota, in Grimes 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=-96.027777,30.331944&level=18

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

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

PUBLIC COMMENT / PUBLIC MEETING. You may submit public comments or request a public meeting on this application. The purpose of a public meeting is to provide the

opportunity to submit comments or to ask questions about the application. TCEQ will hold a public meeting if the Executive Director determines that there is a significant degree of public interest in the application or if requested by a local legislator. A public meeting is not a contested case hearing.

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

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

Following the close of all applicable comment and request periods, the Executive Director will forward the application and any requests for reconsideration or for a contested case hearing to the TCEO 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 Sam Houston Area Council Boy Scouts of America at the address stated above or by calling Mr. Dean Tartt, Head Ranger, at 936-827-9583.

Issuance Date: November 7, 2024

Comisión de Calidad Ambiental del Estado de Texas



AVISO DE RECIBO DE LA SOLICITUD E INTENCION DE OBTENER PERMISO PARA LA CALIDAD DEL AGUA RENOVACION

PERMISO NO. WQ0014095001

SOLICITUD. Sam Houston Area Council Boy Scouts of America, 2225 North Loop West, Houston, Texas 77008 ha solicitado a la Comisión de Calidad Ambiental de Texas (TCEQ) para renovar el Permiso No. WQ0014095001 (EPA I.D. No. TX0119083) de disposición de aguas residuales para autorizar la disposición de aguas residuales tratadas en un volumen que no sobrepasa un flujo promedio diario de 30,000 galones por día. La planta de tratamiento de aguas domésticos residuales está ubicados en2 millas al noreste de la intersección de la carretera estatal 6 y Farm-to-Market Road 2988, y 0.29 millas al sureste del cementerio Sommerford, en el afluente sin nombre de Grassy Creek, en el Condado de Grimes, Texas 77868. La ruta de descarga es desde el sitio de la planta hasta un afluente sin nombre de Grassy Creek; de allí a Grassy Creek; de allí al río Brazos debajo del río Navasota. La TCEQ recibió esta solicitud el día 22 de octubre de 2024. La solicitud para el permiso estará disponible para leerla y copiarla en City of Navasota Public Library, 1411 East Washington Avenue, Navasota, in Grimes County, Texas antes de la fecha de publicación de este aviso en el periódico. Este enlace a un mapa electrónico de la ubicación general del sitio o de la instalación es proporcionado como una cortesía y no es parte de la solicitud o del aviso. Para la ubicación exacta, consulte la solicitud. https://gisweb.tceq.texas.gov/LocationMapper/?marker=-96.027777,30.331944&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 todo los comentarios públicos esenciales, pertinentes, o significativos. A menos que la solicitud haya sido referida directamente a una audiencia administrativa de lo contencioso, la respuesta a los comentarios y la decisión del Director Ejecutivo sobre la solicitud serán enviados por correo a todos los que presentaron un comentario público y a las personas que están en la lista para recibir avisos sobre esta solicitud. Si se reciben comentarios, el aviso también proveerá instrucciones para pedir una reconsideración de la decisión del Director Ejecutivo y para pedir una audiencia administrativa de lo contencioso. Una audiencia administrativa de lo contencioso es un procedimiento legal similar a un procedimiento legal civil en un tribunal de distrito del estado.

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

Después del cierre de todos los períodos de comentarios y de petición que aplican, el Director Ejecutivo enviará la solicitud y cualquier petición para reconsideración o para una audiencia de caso impugnado a los Comisionados de la TCEQ para su consideración durante una reunión programada de la Comisión. La Comisión sólo puede conceder una solicitud de una audiencia de caso impugnado sobre los temas que el solicitante haya presentado en sus comentarios oportunos que no fueron retirados posteriormente. Si se concede una audiencia, el tema de la audiencia estará limitado a cuestiones de hecho en disputa o cuestiones mixtas de hecho y de derecho relacionadas a intereses pertinentes y materiales de calidad del agua que se hayan presentado durante el período de comentarios.

Si ciertos criterios se cumplen, la TCEQ puede actuar sobre una solicitud para renovar un permiso sin proveer una oportunidad de una audiencia administrativa de lo contencioso.

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

designe cual lista(s) y envia por correo su pedido a la Oficina del Secretario Principal de la TCEQ.

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

También se puede obtener información adicional del Sam Houston Area Council Boy Scouts of America a la dirección indicada arriba o llamando a Sr. Dean Tartt, Jefe de guardabosques, al 936-827-9583.

Fecha de emisión 7 de noviembre de 2024

Jon Niermann, *Chairman*Bobby Janecka, *Commissioner*Catarina R. Gonzales, *Commissioner*Kelly Keel, *Executive Director*



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

Protecting Texas by Reducing and Preventing Pollution

October 22, 2024

Re: Confirmation of Submission of the Renewal without changes for Private Domestic Wastewater Authorization.

Dear Applicant:

This is an acknowledgement that you have successfully completed Renewal without changes for the Private Domestic Wastewater authorization.

ER Account Number: ER094863

Application Reference Number: 674687 Authorization Number: WQ0014095001 Site Name: Boyay Scout Ranch WWTP

Regulated Entity: RN101223543 - Bovay Scout Ranch

Customer(s): CN600664577 - Sam Houston Area Council Boy Scouts of America

Please be aware that TCEQ staff may contact your designated contact for any additional information.

If you have any questions, you may contact the Applications Review and Processing Team by email at WQ-ARPTeam@tceq.texas.gov or by telephone at (512) 239-4671.

Sincerely, Applications Review and Processing Team Water Quality Division

Texas Commission on Environmental Quality

Update Domestic or Industrial Individual Permit WQ0014095001

Site Information (Regulated Entity)

What is the name of the site to be authorized?

BOVAY SCOUT RANCH WWTP

Does the site have a physical address?

Because there is no physical address, describe how to locate this site: LOCATED 2 MI NE OF THE INTERX

OF SH 6 AND FM 2988 AND 0.4 MI E OF SOMMERFORD CEMETERY ON THE UNNAMED TRIBUTARY OF

GRASSY CREEK

City NAVASOTA

State TX

ZIP 77868
County GRIMES

Latitude (N) (##.#####) 30.331944

Longitude (W) (-###.######) -96.027777

Primary SIC Code 7032

Secondary SIC Code

Primary NAICS Code

Secondary NAICS Code

Regulated Entity Site Information

What is the Regulated Entity's Number (RN)? RN101223543

What is the name of the Regulated Entity (RE)?

BOVAY SCOUT RANCH

Does the RE site have a physical address?

Physical Address

Because there is no physical address, describe how to locate this site: 2 MILE NE OF INTERSECTION OF

ST HWY 6 AND FM 2988 ABOUT 4 M SE OF SOMMERFORD CEMETERY ON UNAMMED TRIBUTARY OF GRASSY CREEK IN GRIMES

COUNTY TEXAS

City NAVASOTA

State TX
ZIP 77868
County GRIMES

Latitude (N) (##.#####)

Longitude (W) (-###.#####)

Facility NAICS Code

What is the primary business of this entity?

DOMESTIC

1 of 13 10/22/2024, 11:15 AM

Sam Hou-Customer (Applicant) Information (Owner)

How is this applicant associated with this site?

What is the applicant's Customer Number (CN)?

Type of Customer

Full legal name of the applicant:

Legal Name Sam Houston Area Council Boy

Scouts of America

Owner

CN600664577

Organization

Texas SOS Filing Number

Federal Tax ID

State Franchise Tax ID

State Sales Tax ID

Local Tax ID

DUNS Number

Number of Employees

Independently Owned and Operated?

I certify that the full legal name of the entity applying for this permit

has been provided and is legally authorized to do business in Texas.

Responsible Authority Contact

Organization Name Sam Houston Area Council Boy

Scouts of America

Yes

Prefix MR

First Brandon

Middle

Last Lewis

Suffix

Credentials

Title Director of Support Service

Responsible Authority Mailing Address

Enter new address or copy one from list:

Address Type Domestic

Mailing Address (include Suite or Bldg. here, if applicable) 2225 NORTH LOOP W

Routing (such as Mail Code, Dept., or Attn:)

City HOUSTON

State TX

ZIP 77008

Phone (###-###) 7137563319

Extension

Alternate Phone (###-###-####)

Fax (###-###-)

E-mail brandon.lewis@scouting.org

Billing Contact

Responsible contact for receiving billing statements:

Select the permittee that is responsible for payment of the annual fee. CN600664577, Sam Houston Area

Council Boy Scouts of America

Organization Name SAM HOUSTON AREA COUNCIL

BOY SCOUTS OF AMERICA

Prefix MR

First BRANDON

Middle

Last LEWIS

Suffix

Credentials

Title DIRECTOR OF SUPPORT SERVICE

Enter new address or copy one from list: CN600664577, Sam Houston Area

Council Boy Scouts of America

Mailing Address

Address Type Domestic

Mailing Address (include Suite or Bldg. here, if applicable) 2225 NORTH LOOP W

Routing (such as Mail Code, Dept., or Attn:)

City HOUSTON

State TX

ZIP 77008

Phone (###-####) 7137563319

Extension

Alternate Phone (###-###-###)

Fax (###-###-####)

E-mail brandon.lewis@scouting.org

Application Contact

Person TCEQ should contact for questions about this application:

Same as another contact?

Organization Name Quiddity Engineering

Prefix MR

First Jonathan

Middle

Last Nguyen

Suffix

Credentials

Title Permitting Specialist

Enter new address or copy one from list:

Mailing Address

Address Type Domestic

Mailing Address (include Suite or Bldg. here, if applicable) 3100 ALVIN DEVANE BLVD STE 150

Routing (such as Mail Code, Dept., or Attn:)

City AUSTIN

State TX

ZIP 78741

Phone (###-###) 5126855156

Extension

Alternate Phone (###-###-###)

Fax (###-###-###)

E-mail jnguyen@quiddity.com

Technical Contact

Person TCEQ should contact for questions about this application:

Same as another contact?

Organization Name Quiddity Engineering

Prefix MS
First AMY

Middle S

Last HENNARD

Suffix

Credentials PE|PG

Title PROJECT MGR

Enter new address or copy one from list:

Mailing Address

Address Type Domestic

Mailing Address (include Suite or Bldg. here, if applicable) 150 VENTURE DR STE 100

Routing (such as Mail Code, Dept., or Attn:)

City COLLEGE STATION

State TX

ZIP 77845

Phone (###-###) 9793076177

Extension

Alternate Phone (###-###-###)

Fax (###-#####) 9798462893

4 of 13 10/22/2024, 11:15 AM

E-mail AHENNARD@QUIDDITY.COM

DMR Contact

Person responsible for submitting Discharge Monitoring Report

Forms:

Same as another contact?

Billing Contact

Organization Name SAM HOUSTON AREA COUNCIL

BOY SCOUTS OF AMERICA

Prefix MR

First BRANDON

Middle

Last LEWIS

Suffix

Credentials

Title DIRECTOR OF SUPPORT SERVICE

Enter new address or copy one from list:

Mailing Address:

Address Type Domestic

Mailing Address (include Suite or Bldg. here, if applicable) 2225 NORTH LOOP W

Routing (such as Mail Code, Dept., or Attn:)

City HOUSTON

State TX

ZIP 77008

Phone (###-####) 7137563319

Extension

Alternate Phone (###-###-###)

Fax (###-###-###)

E-mail brandon.lewis@scouting.org

Section 1# Permit Contact

Permit Contact#: 1

Person TCEQ should contact throughout the permit term.

1) Same as another contact? DMR Contact

2) Organization Name SAM HOUSTON AREA COUNCIL

BOY SCOUTS OF AMERICA

3) Prefix MR

4) First BRANDON

5) Middle

6) Last LEWIS

5 of 13 10/22/2024, 11:15 AM

7) Suffix

8) Credentials

9) Title DIRECTOR OF SUPPORT SERVICE

Mailing Address

10) Enter new address or copy one from list

11) Address Type Domestic

11.1) Mailing Address (include Suite or Bldg. here, if applicable) 2225 NORTH LOOP W

11.2) Routing (such as Mail Code, Dept., or Attn:)

11.3) City HOUSTON

11.4) State TX
11.5) ZIP 77008

12) Phone (###-###+) 7137563319

13) Extension

14) Alternate Phone (###-###-###)

15) Fax (###-###-###)

16) E-mail brandon.lewis@scouting.org

Section 2# Permit Contact

Permit Contact#: 2

Person TCEQ should contact throughout the permit term.

1) Same as another contact?

2) Organization Name Sam Houston Area Council Boy

Scouts of America

3) Prefix MR

4) First Dean

5) Middle Gary

6) Last Tartt

7) Suffix

8) Credentials

9) Title Head Ranger

Mailing Address

10) Enter new address or copy one from list CN600664577, Sam Houston Area

Council Boy Scouts of America

11) Address Type Domestic

11.1) Mailing Address (include Suite or Bldg. here, if applicable) 2225 NORTH LOOP W

11.2) Routing (such as Mail Code, Dept., or Attn:)

11.3) City HOUSTON

11.4) State TX

11.5) ZIP 77008

12) Phone (###-###) 9368279583

13) Extension

14) Alternate Phone (###-###-)

15) Fax (###-###-###)

16) E-mail gary.tartt@scouting.org

Owner Information

Owner of Treatment Facility

1) Prefix

2) First and Last Name

3) Organization Name Sam Houston Area Council Boy

Scouts of America

4) Mailing Address 2225 North Loop West

5) City Houston

6) State TX

7) Zip Code 77008

8) Phone (###-####) 7137563319

9) Extension

10) Email brandon.lewis@scouting.org

11) What is ownership of the treatment facility?

Private

Owner of Land (where treatment facility is or will be)

12) Prefix

13) First and Last Name

14) Organization Name Sam Houston Area Council Boy

Scouts of America

15) Mailing Address 2225 North Loop West

16) City Houston

17) State TX

18) Zip Code 77008

19) Phone (###-###) 7137563319

20) Extension

21) Email brandon.lewis@scouting.org

22) Is the landowner the same person as the facility owner or co-

applicant?

General Information Renewal-Amendment

1) Current authorization expiration date: 11/21/2024

2) Current Facility operational status: Active

3) Is the facility located on or does the treated effluent cross American Indian Land? 4) What is the application type that you are seeking?

No

Renewal without changes

5) Current Authorization type:

Private Domestic Wastewater

5.1) What is the proposed total flow in MGD discharged at the facility?

0.03

5.2) Select the applicable fee

< .05 MGD - Renewal - \$315

6) What is the classification for your authorization?

TPDES

6.1) What is the EPA Identification Number?

TX0119083

6.2) Is the wastewater treatment facility location in the existing permit

Yes

accurate?

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

Yes

6.4) City nearest the outfall(s):

Navasota

6.5) County where the outfalls are located:

GRIMES

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

6.7) Is the daily average discharge at your facility of 5 MGD or more?

No

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

Yes

7.1) List each person formerly employed by the TCEQ who represented your company and was paid for service regarding the

Jonathan Nguyen

application:

Public Notice Information

Individual Publishing the Notices

1) Prefix

MR

2) First and Last Name

Jonathan Nguyen

3) Credential

4) Title

5) Organization Name

Quiddity Engineering

6) Mailing Address

3100 ALVIN DEVANE BLVD

7) Address Line 2

Suite 150 **AUSTIN**

8) City

TX

9) State

78741

11) Phone (###-###-###)

5126855156

12) Extension

14) Email

10) Zip Code

13) Fax (###-###-###)

jnguyen@quiddity.com

Contact person to be listed in the Notices

15) Prefix

MR

https://ida.tceq.texas.gov/steersstaff/index.cfm

16) First and Last Name Dean Tartt 17) Credential 18) Title Head Ranger 19) Organization Name Sam Houston Area Council Boy Scouts of America 20) Phone (###-###-###) 9368279583 21) Fax (###-###-###) 22) Email gary.tartt@scouting.org **Bilingual Notice Requirements** 23) Is a bilingual education program required by the Texas Education Yes Code at the elementary or middle school nearest to the facility or proposed facility? 23.1) Are the students who attend either the elementary school or the Yes middle school enrolled in a bilingual education program at that school? 23.2) Do the students at these schools attend a bilingual education No program at another location? 23.3) Would the school be required to provide a bilingual education No program but the school has waived out of this requirement under 19 TAC 89.1205(g)? 23.4) Which language is required by the bilingual program? Spanish

Section 1# Public Viewing Information

County#: 1

1) County GRIMES

2) Public building name City of Navasota Public Library

3) Location within the building

4) Physical Address of Building 1411 E. Washington Avenue

5) City Navasota

6) Contact Name

7) Phone (###-###) 9368256744

8) Extension

9) Is the location open to the public?

Plain Language

1) Plain Language

[File Properties]

File Name LANG_02 Attachment A - PLS.pdf

Hash A135B4FB014C8588558E76AF1F4D9E09B29F98906214AD969DCC50C2486B38BD

MIME-Type application/pdf

9 of 13 10/22/2024, 11:15 AM

Supplemental Permit Information Form

1) Supplemental Permit Information Form (SPIF)

[File Properties]

File Name SPIF_03 Attachment B - SPIF.pdf

Hash 5A58AF123A90A186FDDBA827F6E901A8CCF6EB70CA3402060B6CFC37A3B501C1

MIME-Type application/pdf

Domestic Attachments

1) Attach an 8.5"x11", reproduced portion of the most current and original USGS Topographic Quadrangle Map(s) that meets the 1:24,000 scale.

[File Properties]

File Name MAP_04 Attachment C - USGS Map.pdf

Hash 60350ACD307B3EBD555CA9B746DB395958DEEA080D472DFC9432BF9FC7CFCCB7

MIME-Type application/pdf

2) I confirm that all required sections of Technical Report 1.0 are Yes

complete and will be included in the Technical Attachment.

2.1) I confirm that Worksheet 2.0 (Receiving Waters) is complete and

included in the Technical Attachment.

2.2) Are you planning to include Worksheet 2.1 (Stream Physical No

Characteristics) in the Technical Attachment?

2.3) Are you planning to include Worksheet 4.0 (Pollutant Analyses No

Requirements) in the Technical Attachment?

2.4) Are you planning to include Worksheet 5.0 (Toxicity Testing No

Requirements) in the Technical Attachment?

2.5) Are you planning to include Worksheet 7.0 (Class V Injection Well No

Inventory/Authorization Form) in the Technical Attachment?

2.6) Technical Attachment

[File Properties]

File Name TECH 05 Attachment D - App Technical Report

1.0-2.0.pdf

Hash DF9E7D5D62FFCE7721D032C524C294E4CC2777E47394E22A7F2C7A96E7D166CA

MIME-Type application/pdf

3) Buffer Zone Map

[File Properties]

File Name BUFF_ZM_List of Attachments Not Required.pdf

Hash 6187FAC8F3B023CEF63555AEAD2129D90EE5163913562E8C35AE07401D035B58

MIME-Type application/pdf

4) Flow Diagram

[File Properties]

File Name FLDIA_06 Attachment E - Flow Schematics.pdf

Hash 4EB195011165521064ADDF291077BED6BC35F450D78B0D1492600D56B4CD4085

MIME-Type application/pdf

5) Site Drawing

[File Properties]

File Name SITEDR_07 Attachment F - Service Area

Map.pdf

Hash 583293647F6014CE600404A9153D2BB5CACA72F10A04113B283066720D2AFE83

MIME-Type application/pdf

6) Design Calculations

[File Properties]

File Name DES_CAL_List of Attachments Not Required.pdf

Hash 6187FAC8F3B023CEF63555AEAD2129D90EE5163913562E8C35AE07401D035B58

MIME-Type application/pdf

7) Solids Management Plan

[File Properties]

File Name SMP_List of Attachments Not Required.pdf

Hash 6187FAC8F3B023CEF63555AEAD2129D90EE5163913562E8C35AE07401D035B58

MIME-Type application/pdf

8) Water Balance

[File Properties]

File Name WB_List of Attachments Not Required.pdf

Hash 6187FAC8F3B023CEF63555AEAD2129D90EE5163913562E8C35AE07401D035B58

MIME-Type application/pdf

9) Other Attachments

[File Properties]

File Name OTHER_08 Attachment G - Core Data Form.pdf

Hash 429FE3A111ADDF3266ABB3D42398D52FE62D465FF7A36877969BF4DC613F3197

MIME-Type application/pdf

Certification

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

11 of 13 10/22/2024, 11:15 AM

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.

- 1. I am Brandon Lewis, the owner of the STEERS account ER108569.
- 2. I have the authority to sign this data on behalf of the applicant named above.
- 3. I have personally examined the foregoing and am familiar with its content and the content of any attachments, and based upon my personal knowledge and/or inquiry of any individual responsible for information contained herein, that this information is true, accurate, and complete.
- 4. I further certify that I have not violated any term in my TCEQ STEERS participation agreement and that I have no reason to believe that the confidentiality or use of my password has been compromised at any time.
- 5. I understand that use of my password constitutes an electronic signature legally equivalent to my written signature.
- 6. I also understand that the attestations of fact contained herein pertain to the implementation, oversight and enforcement of a state and/or federal environmental program and must be true and complete to the best of my knowledge.
- 7. I am aware that criminal penalties may be imposed for statements or omissions that I know or have reason to believe are untrue or misleading.
- 8. I am knowingly and intentionally signing Update Domestic or Industrial Individual Permit WQ0014095001.
- 9. My signature indicates that I am in agreement with the information on this form, and authorize its submittal to the TCEQ.

OWNER Signature: Brandon Lewis OWNER

Customer Number: CN600664577

Legal Name: Sam Houston Area Council Boy Scouts of

America

Account Number: ER108569

Signature IP Address: 50.203.31.142
Signature Date: 2024-10-22

Signature Hash: 73F126AB9B5A64AF45C47B4CF18F3B0D8DE75425E84526070C56392D242507D0

Form Hash Code at time

49479207EC6A5A99E85CE9F497A0F52B5076D6C86F6FE3DF9BCB7693EC540F38

of Signature:

Fee Payment

Transaction by: The application fee payment transaction was

made by ER094863/Huan J Nguyen

Paid by: The application fee was paid by JONATHAN

NGUYEN

Fee Amount: \$300.00

Paid Date: The application fee was paid on 2024-10-22

Transaction/Voucher number: The transaction number is 582EA000630749

and the voucher number is 727036

Submission

12 of 13 10/22/2024, 11:15 AM

Reference Number: The application reference number is 674687

Submitted by: The application was submitted by ER094863/

Huan J Nguyen

Submitted Timestamp: The application was submitted on 2024-10-22 at

10:16:21 CDT

Submitted From: The application was submitted from IP address

98.6.100.154

Confirmation Number: The confirmation number is 573025

Steers Version: The STEERS version is 6.82

Permit Number: The permit number is WQ0014095001

Additional Information

Application Creator: This account was created by Huan J Nguyen

13 of 13

ATTACHMENT G

CORE DATA FORM

SAM HOUSTON AREA COUNCIL BOY SCOUTS OF AMERICA BOVAY SCOUT RANCH WASTEWATER TREATMENT FACILITY





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 Perr	nit, Registra	tion or Autho	orization	(Core Data Fori	m should be	submitte	ed wit	h the prog	ram application.)					
Renewal (Core Data Form should be submitted with the renewal form)							Other							
2. Customer Reference Number (if issued) Follow this link t for CN or RN nu														
CN 6006645	577				Central Registry**			RN 101223543						
SECTIO	N II:	Custo	<u>mer</u>	Inforn	<u>nation</u>	<u>1</u>								
4. General Customer Information 5. Effective					ve Date for Customer Information Updates (mm/dd/yyyy)									
☐ New Custo	☐ New Customer ☐ Update to Customer Information							Char	nge in Regulated E	ntity Own	ership			
☐Change in L	egal Name (Verifiable wi	th the Tex	kas Secretary o	f State or Tex	as Com	ptrolle	er of Public	Accounts)					
The Custome	r Name su	bmitted he	re may l	be updated a	utomatical	ly base	d on	what is c	urrent and activ	e with th	ne Texas Sec	retary of State		
(SOS) or Texa	s Comptro	ller of Publ	ic Accou	ints (CPA).										
6. Customer	Legal Nam	e (If an indiv	idual, prii	nt last name fir	rst: eg: Doe, J	lohn)			If new Customer, enter previous Customer below:					
Sam Houston A	Area Council	Boy Scouts o	of Americ	a										
7. TX SOS/CP	A Filing Nu	ımber		8. TX State	8. TX State Tax ID (11 digits)			9. Federal Tax ID 10. DUNS Nun		,,				
66929-1								(9 digits)						
									741109732					
11. Type of Customer: Corporation								☐ Individ	☐ Individual Partne			neral 🔲 Limited		
Government: City County Federal Local State Other								Sole P	☐ Sole Proprietorship ☐ Other: Boy Scout Camp			ıt Camp		
12. Number	12. Number of Employees 13. Independently Owned and Operated?													
□ 0-20 □ 21-100 □ 101-250 □ 251-500 □ 501 and higher									⊠ Yes	☐ No				
14. Custome	r Role (Prop	osed or Actu	ual) – as i	t relates to the	Regulated E	ntity list	ed on	this form.	Please check one	of the follo	owing			
Owner Occupation	al Licensee	Operato	or nsible Pa	_	vner & Opera VCP/BSA App				☐ Othe	r:				
15. Mailing	2225 Nor	th Loop West	t											
Address:						_						-		
	City	Houston			State	TX		ZIP	77008		ZIP + 4			
16. Country I	Mailing Inf	ormation (i	f outside	USA)	,		17.	E-Mail A	ddress (if applica	ole)				
					brar	brandon.lewis@scouting.org								

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

18. Telephone Number			19. Extension or Code			20. Fax Number (if applicable)					
(713) 756-3319						()	-				
ECTION III:	Regula	ated Ent	ity Inforn	nation							
21. General Regulated Er	ntity Informa	ition (If 'New Reg	ulated Entity" is selec	cted, a new p	ermit applica	tion is also	required.)				
☐ New Regulated Entity	Update to	Regulated Entity	Name 🔲 Update t	o Regulated	Entity Inform	ation					
The Regulated Entity Nai as Inc, LP, or LLC).	me submitte	d may be updat	ed, in order to med	et TCEQ Cor	e Data Star	ndards (re	moval of or	ganization	al endings such		
22. Regulated Entity Nan	ne (Enter nam	e of the site wher	e the regulated actior	n is taking pla	ice.)						
Bovay Scout Ranch Wastewa	ter Treatment	: Facility									
23. Street Address of											
the Regulated Entity:											
(No PO Boxes)	City		State		ZIP			ZIP + 4			
24. County	Grimes				•						
		If no Stree	et Address is provid	ded, fields 2	5-28 are re	quired.					
25. Description to	2 miles nort	heast of the inters	section of State Highv	vay 6 and FM	2988, and 0.	.29 miles so	outheast of Sc	ommerford (Cemetery, on the		
Physical Location:	unnamed tr	ibutary of Grassy	Creek								
26. Nearest City						State		Nea	rest ZIP Code		
Navasota						TX		7786	8		
Latitude/Longitude are r used to supply coordinat	-	-	-		ata Standa	rds. (Geo	coding of th	e Physical	Address may be		
27. Latitude (N) In Decim	al:			28. L	ongitude (V	V) In Deci	mal:				
Degrees	Minutes Seconds		Seconds	Degrees			Minutes		Seconds		
30		19	55.79		-96		01		40.76		
29. Primary SIC Code 30. Secondary SIC Code (4 digits)			Code 31. Primary NAICS (5 or 6 digits)			ode 32. Secondary NAICS Code (5 or 6 digits)			CS Code		
7032	(4 0	igits)		72124			(5 01 0 018				
33. What is the Primary I	Business of t	his entity? (Do	o not repeat the SIC o		iption.)						
Camp for Cub Scouts											
	2225 Nort	h Loop West									
34. Mailing											
Address:							П		T		
	City	Houston	State	TX	ZIP	77008		ZIP + 4			
35. E-Mail Address:	jgre	er6510@gmail.co	om								
36. Telephone Number			37. Extension or	Code	38. F	ax Numbe	e r (if applicab	le)			

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

(938) 230-9719

() -

_		nbers Check all Programuctions for additional g		s/registration	numbers that w	rill be affected b	y the updates submitted on this		
☐ Dam Safety		Districts	☐ Edwards Aquifer	[Emissions In	ventory Air	☐ Industrial Hazardous Waste		
☐ Municipal Solid Waste		New Source	OSSF	Petroleum S		orage Tank	□ PWS		
Sludge		Storm Water	☐ Title V Air	[Tires		Used Oil		
☐ Voluntary Clean	ир		☐ Wastewater Agricul	ure Water Right		i	Other:		
SECTION 1	[V: Pr	eparer Info	ormation						
	nathan Nguy			41. Title:			Permitting Specialist		
42. Telephone Nur	nber	43. Ext./Code	44. Fax Number	45. E-Ma	il Address				
(512)685-5156		() -			jnguyen@quiddity.com				
46. By my signature be	elow, I certify	•		•		•	, and that I have signature authority ntified in field 39.		
Company:	Sam Hous	ston Area Council Boy S	couts of America	Director o	r of Support Service				
Name (In Print):	rint): Brandon Lewis				·	Phone:	(713)756- 3319		
Signature:				Date:					

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

ATTACHMENT A

PLAIN LANGUAGE SUMMARY

SAM HOUSTON AREA COUNCIL BOY SCOUTS OF AMERICA BOVAY SCOUT RANCH WASTEWATER TREATMENT FACILITY







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

Sam Houston Area Council Boy Scouts of America (CN600664577) operates the Bovay Scout Ranch wastewater treatment plant (RN101223543), an activated sludge process plant operated in the extended aeration mode. The facility is located 2 miles northeast of the intersection of State Highway 6 and Farm-to-Market Road 2988 and 0.29 miles southeast of Sommerford Cemetery, in Grimes County, Texas 77868.

This application is for a renewal to discharge at an annual average flow of 30,000 gallons per day of treated domestic wastewater.

Discharges from the facility are expected to contain five-day biochemical oxygen demand (BOD₅), total suspended solids (TSS), and *Escherichia coli*. Additional potential pollutants are included in the Domestic Technical Report 1.0, Section 7. Pollutant Analysis of Treated Effluent. Domestic wastewater is treated by an activated sludge process plant and the treatment units include a bar screen, aeration basins, final clarifiers, sludge digesters, and chlorine contact chambers.



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

Sam Houston Area Council Boy Scouts of America (CN600664577) opera la planta de tratamiento de aguas residuales de Bovay Scout Ranch (RN101223543), una planta de procesamiento de lodos activados que funciona en modo de aireación extendida. La instalación está ubicada a 2 millas al noreste de la intersección de la carretera estatal 6 y Farm-to-Market Road 2988 y a 0.29 millas al sureste del cementerio Sommerford, en el condado de Grimes, Texas 77868.

Esta solicitud es para una renovación para descargar un flujo promedio anual de 30,000 galones por día de aguas residuales domésticas tratadas.

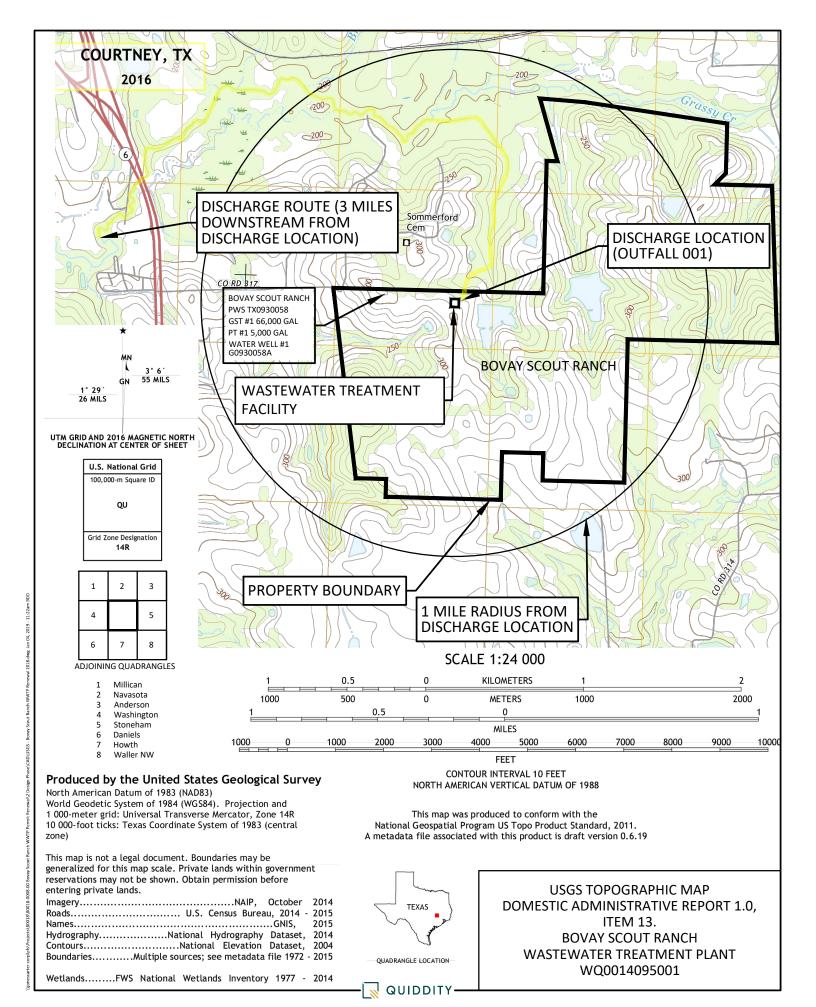
Se espera que las descargas de la instalación contengan demanda bioquímica de oxígeno de cinco días (BOD₅), sólidos suspendidos totales (TSS) y *Escherichia coli*. Se incluyen otros contaminantes potenciales en el Informe Técnico Doméstico 1.0, Sección 7. Análisis de contaminantes del efluente tratado. Las aguas residuales domésticas se tratan mediante una planta de procesamiento de lodos activados y las unidades de tratamiento incluyen una rejilla de barras, cuencas de aireación, clarificadores finales, digestores de lodos y cámaras de contacto con cloro.

ATTACHMENT C

USGS MAP

SAM HOUSTON AREA COUNCIL BOY SCOUTS OF AMERICA BOVAY SCOUT RANCH WASTEWATER TREATMENT FACILITY





ATTACHMENT B

SPIF

SAM HOUSTON AREA COUNCIL BOY SCOUTS OF AMERICA BOVAY SCOUT RANCH WASTEWATER TREATMENT FACILITY



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:RenewalMajor Ame	endmentMinor AmendmentNew
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. TCE our agreement with EPA. If any of the items are not needed, we will contact you to provide the inforeach item completely.	ot completely addressed or further information
Do not refer to your response to any item in the attachment for this form separately from the Ada application will not be declared administratively completed in its entirety including all attachment may be directed to the Water Quality Division's A amail at	

TCEQ-20971 (08/31/2023) Wastewater Individual Permit Application, Supplemental Permit Information Form (SPIF)

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

First and Last Name: Jonathan Nguyen

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

	Mailing Address: <u>3100 Alvin Devane Blvd, Suite 150</u>							
	City, State, Zip Code: <u>Austin, TX 78741</u>							
	Phone No.: <u>512-685-5156</u> Ext.: Fax No.:							
	E-mail Address: jnguyen@quiddity.com							
2.	List the county in which the facility is located: <u>Grimes</u>							
3.	the property is publicly owned and the owner is different than the permittee/applicant,							
	please list the owner of the property. Property owned by permittee.							
4.	Provide a description of the effluent discharge route. The discharge route must follow the flow of effluent from the point of discharge to the nearest major watercourse (from the point of discharge to a classified segment as defined in 30 TAC Chapter 307). If known, please identify the classified segment number.							
	To an unnamed tributary, thence to Grassy Creek, thence to Brazos River Below Navasota River in Segment No. 1202 of the Brazos River Basin							
5.	Please provide a separate 7.5-minute USGS quadrangle map with the project boundaries plotted and a general location map showing the project area. Please highlight the discharge route from the point of discharge for a distance of one mile downstream. (This map is required in addition to the map in the administrative report).							
	Provide original photographs of any structures 50 years or older on the property.							
	Does your project involve any of the following? Check all that apply.							
	☐ Proposed access roads, utility lines, construction easements							
	☐ Visual effects that could damage or detract from a historic property's integrity							
	□ Vibration effects during construction or as a result of project design							
	Additional phases of development that are planned for the future							
	☐ Sealing caves, fractures, sinkholes, other karst features							
	☐ Disturbance of vegetation or wetlands							
1.	List proposed construction impact (surface acres to be impacted, depth of excavation, sealing of caves, or other karst features): No additional construction.							
	110 MMMM COHOLI MCLIVIII							
2.	Describe existing disturbances, vegetation, and land use:							
	Facility is a part of the Boy Scout ranch used for camping and outdoor activities. Existing vegetation includes open rolling fields with native grasses.							

Title: <u>Permitting Specialist</u>

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

ATTACHMENT D

APPLICATION TECHNICAL REPORT 1.0-2.0

SAM HOUSTON AREA COUNCIL BOY SCOUTS OF AMERICA BOVAY SCOUT RANCH WASTEWATER TREATMENT FACILITY



THE THE PARTY OF T

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION TECHNICAL REPORT 1.0

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

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

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

A. Existing/Interim I Phase

Design Flow (MGD): o.o3

2-Hr Peak Flow (MGD): <u>0.085</u>

Estimated construction start date: <u>N/A</u>
Estimated waste disposal start date: <u>N/A</u>

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): N/A

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

Estimated construction start date: **N/A**Estimated waste disposal start date: **N/A**

D. Current Operating Phase

Provide the startup date of the facility: Existing

Section 2. Treatment Process (Instructions Page 43)

A. Current Operating Phase

Provide a detailed description of the treatment process. Include the type of treatment plant, mode of operation, and all treatment units. Start with the plant's head works and finish with the point of discharge. Include all sludge processing and drying units. If more than one phase exists or is proposed, a description of *each phase* must be provided.

The plant is an activated sludge system operating in the extended aeration mode. Treatment units include equalization tanks, aeration basins, clarifiers, aerobic digesters, and a chlorine contact basin.

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 tank	1	10' x 10' x 35'
Clarifier	1	10' x 12' diameter
Aerobic digester	1	10' x 10' x 25'
Chlorine contact basin	1	10' x 12' x 2'
Equalization tank	1	17' x 14' diameter

C. Process Flow Diagram

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

Attachment: Attachment E

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

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

• Latitude: <u>30.332278</u>

• Longitude: <u>-96.027816</u>

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

• Latitude: N/A

Longitude: <u>N/A</u>

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

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

Attachment: Click to enter text.

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

The plant serves a 1,498-acre camp for Cub Scouts and Webelos. The camp sites include restrooms, showers, potable drinking water, lighted pavilions, and picnic tables.

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
Bovay Scout Ranch	SHACBSA	Publicly Owned	1,498-acre camp site

	site
Section 4. Unbuilt Phases (Instructi	ons Page 45)
Is the application for a renewal of a permit that	
□ Yes ⊠ No	
If yes , does the existing permit contain a phase years of being authorized by the TCEQ?	that has not been constructed within five
□ Yes ⊠ No	
If yes, provide a detailed discussion regarding the Failure to provide sufficient justification may be recommending denial of the unbuilt phase or provide a detailed discussion regarding the Failure to provide sufficient justification may be recommended as a failure to provide a detailed discussion regarding the Failure to provide sufficient justification may be recommended as a failure to provide a detailed discussion regarding the failure to provide a detailed discussion regarding the recommending denial of the unbuilt phase or provide a detailed discussion regarding the recommending denial of the unbuilt phase or provide a denial discussion regarding the recommendation regarding the recommend	result in the Executive Director
<u>N/A</u>	
Section 5. Closure Plans (Instruction	ns Page 45)
Have any treatment units been taken out of serv out of service in the next five years?	ice permanently, or will any units be taken
□ Yes ⊠ No	
If yes, was a closure plan submitted to the TCEC)?
□ Yes ⊠ No	
If yes, provide a brief description of the closure	and the date of plan approval.
<u>N/A</u>	
	<i></i>
Section 6. Permit Specific Requiren	nents (Instructions Page 45)

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

A. Summary transmittal

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

⊠ Yes □ No

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

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.

Approval letters for this facility is not available.	

B.	Bu	ffer zones
	На	ve the buffer zone requirements been met?
		⊠ Yes □ No
	the	ovide information below, including dates, on any actions taken to meet the conditions of buffer zone. If available, provide any new documentation relevant to maintaining the ffer zones.
	M	let by ownership. No change.
C.	Ot	her actions required by the current permit
	su	bes the <i>Other Requirements</i> or <i>Special Provisions</i> section in the existing permit require bmission of any other information or other required actions? Examples include otification of Completion, progress reports, soil monitoring data, etc.
		□ Yes ⊠ No
		yes, provide information below on the status of any actions taken to meet the nditions of an <i>Other Requirement</i> or <i>Special Provision</i> .
	N	<u>/A</u>
D.	Gr	it and grease treatment
	1.	Acceptance of grit and grease waste
		Does the facility have a grit and/or grease processing facility onsite that treats and decants or accepts transported loads of grit and grease waste that are discharged directly to the wastewater treatment plant prior to any treatment?
		□ Yes ⊠ No
		If No, stop here and continue with Subsection E. Stormwater Management.
	2.	Grit and grease processing
		Describe below how the grit and grease waste is treated at the facility. In your description, include how and where the grit and grease is introduced to the treatment works and how it is separated or processed. Provide a flow diagram showing how grit and grease is processed at the facility.
		N/A
	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.
		<u>N/A</u>

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.

		Describe flow the decant and grease are treated and disposed of after grit separation.
		<u>N/A</u>
E.	Sto	ormwater management
	1.	Applicability
		Does the facility have a design flow of 1.0 MGD or greater in any phase?
		□ Yes ⊠ No
		Does the facility have an approved pretreatment program, under 40 CFR Part 403?
		□ Yes ⊠ No
		If no to both of the above, then skip to Subsection F, Other Wastes Received.
	2.	MSGP coverage
		Is the stormwater runoff from the WWTP and dedicated lands for sewage disposal currently permitted under the TPDES Multi-Sector General Permit (MSGP), TXR050000?
		□ Yes □ No
		If yes , please provide MSGP Authorization Number and skip to Subsection F, Other Wastes Received:
		TXR05 <u>N/A</u> or TXRNE <u>N/A</u>
		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:
		<u>N/A</u>
	4.	Existing coverage in individual permit
		Is your stormwater discharge currently permitted through this individual TPDES or TLAP permit?
		□ Yes □ No
		If yes , provide a description of stormwater runoff management practices at the site that are authorized in the wastewater permit then skip to Subsection F, Other Wastes Received.
		N/A

	5.	Zero stormwater discharge
		Do you intend to have no discharge of stormwater via use of evaporation or other means?
		□ Yes □ No
		If yes, explain below then skip to Subsection F. Other Wastes Received.
		N/A
		Note: If there is a potential to discharge any stormwater to surface water in the state as the result of any storm event, then permit coverage is required under the MSGP or an individual discharge permit. This requirement applies to all areas of facilities with treatment plants or systems that treat, store, recycle, or reclaim domestic sewage, wastewater or sewage sludge (including dedicated lands for sewage sludge disposal located within the onsite property boundaries) that meet the applicability criteria of above. You have the option of obtaining coverage under the MSGP for direct discharges, (recommended), or obtaining coverage under this individual permit.
	<i>6.</i>	Request for coverage in individual permit
		Are you requesting coverage of stormwater discharges associated with your treatment plant under this individual permit?
		□ Yes □ No
		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.
		N/A
		Note: Direct stormwater discharges to waters in the state authorized through this individual permit will require the development and implementation of a stormwater pollution prevention plan (SWPPP) and will be subject to additional monitoring and reporting requirements. Indirect discharges of stormwater via headworks recycling will require compliance with all individual permit requirements including 2-hour peak flow limitations. All stormwater discharge authorization requests will require additional information during the technical review of your application.
F.	Dis	scharges to the Lake Houston Watershed
	Do	es the facility discharge in the Lake Houston watershed?
		□ Yes ⊠ No
	If y N /	ves, attach a Sewage Sludge Solids Management Plan. See Example 5 in the instructions. $\underline{\mathbf{A}}$
G.	Ot	her wastes received including sludge from other WWTPs and septic waste
	1.	Acceptance of sludge from other WWTPs
		Does or will the facility accept sludge from other treatment plants at the facility site?
		□ Yes ⊠ No

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

N/A

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

2. Acceptance of septic waste

Is	the f	facilit	y acc	epting or will it accept septic waste?
		Yes	\boxtimes	No
If	yes,	does	the f	Cacility have a Type V processing unit?
		Yes		No
If	yes,	does	the ı	unit have a Municipal Solid Waste permit?
		Yes		No

If yes to any of the above, provide the date the plant started or is anticipated to start accepting septic waste, an estimate of monthly septic waste acceptance (gallons or millions of gallons), an estimate of the BOD_5 concentration of the septic waste, and the design BOD_5 concentration of the influent from the collection system. Also note if this information has or has not changed since the last permit action.

N/A

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

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

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

□ Yes ⊠ No

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

<u>N/A</u>

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

Is the facility in operation?

⊠ Yes □ No

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

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

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

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

Pollutant	Average Conc.	Max Conc.	No. of Samples	Sample Type	Sample Date/Time
CBOD ₅ , mg/l	<3	<3	1	G	9/25/24, 08:26
Total Suspended Solids, mg/l	6.0	6.0	1	G	9/25/24, 08:26
Ammonia Nitrogen, mg/l	<0.1	<0.1	1	G	9/25/24, 08:26
Nitrate Nitrogen, mg/l	21.5	21.5	1	G	9/25/24, 08:26
Total Kjeldahl Nitrogen, mg/l	<1.1	<1.1	1	G	9/25/24, 08:26
Sulfate, mg/l	4.7	4.7	1	G	9/25/24, 08:26
Chloride, mg/l	137.8	137.8	1	G	9/25/24, 08:26
Total Phosphorus, mg/l	2.1	2.1	1	G	9/25/24, 08:26
pH, standard units	8.7	8.7	1	G	9/25/24, 08:26
Dissolved Oxygen*, mg/l	7.3	7.3	1	G	9/25/24, 08:26
Chlorine Residual, mg/l	1.5	1.5	1	G	9/25/24, 08:26
<i>E.coli</i> (CFU/100ml) freshwater	<1	<1	1	G	9/25/24, 08:26
Entercocci (CFU/100ml) saltwater	N/A	N/A	N/A	N/A	N/A
Total Dissolved Solids, mg/l	748	748	1	G	9/25/24, 08:26
Electrical Conductivity, µmohs/cm, †	N/A	N/A	N/A	N/A	N/A
Oil & Grease, mg/l	N/A	N/A	N/A	N/A	N/A
Alkalinity (CaCO ₃)*, mg/l	N/A	N/A	N/A	N/A	N/A

^{*}TPDES permits only

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

Pollutant	Average Conc.	Max Conc.	No. of Samples	Sample Type	Sample Date/Time
Total Suspended Solids, mg/l	N/A	N/A	N/A	N/A	N/A
Total Dissolved Solids, mg/l	N/A	N/A	N/A	N/A	N/A
pH, standard units	N/A	N/A	N/A	N/A	N/A
Fluoride, mg/l	N/A	N/A	N/A	N/A	N/A

[†]TLAP permits only

Pollutant	Average Conc.		No. of Samples	Sample Type	Sample Date/Time
Aluminum, mg/l	N/A	N/A	N/A	N/A	N/A
Alkalinity (CaCO ₃), mg/l	N/A	N/A	N/A	N/A	N/A

Section 8. Facility Operator (Instructions Page 50)

Facility Operator Name: Jeff B. Greer

Facility Operator's License Classification and Level: A

Facility Operator's License Number: <u>WW0054139</u>

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

A. WWTP's Biosolids Management Facility Type

Che	ck all that apply. See instructions for guidance
	Design flow>= 1 MGD
	Serves >= 10,000 people
	Class I Sludge Management Facility (per 40 CFR § 503.9)
\boxtimes	Biosolids generator
	Biosolids end user - land application (onsite)
	Biosolids end user - surface disposal (onsite)
	Biosolids end user - incinerator (onsite)
TA7TA	went no 10 m n

B. WWTP's Biosolids Treatment Process

Check a	all tl	hat ar	plv.	See	instruct	tions	for	guidance.

\boxtimes	Aerobic Digestion
	Air Drying (or sludge drying beds)
	Lower Temperature Composting
	Lime Stabilization
	Higher Temperature Composting
	Heat Drying
	Thermophilic Aerobic Digestion
	Beta Ray Irradiation
	Gamma Ray Irradiation
	Pasteurization
	Preliminary Operation (e.g. grinding, de-gritting, blending)
	Thickening (e.g. gravity thickening, centrifugation, filter press, vacuum filter)

Sludge Lagoon
Temporary Storage (< 2 years)
Long Term Storage (>= 2 years)
Methane or Biogas Recovery
Other Treatment Process: Click to enter text.

C. Biosolids Management

Provide information on the *intended* biosolids management practice. Do not enter every management practice that you want authorized in the permit, as the permit will authorize all biosolids management practices listed in the instructions. Rather indicate the management practice the facility plans to use.

Biosolids Management

Management Practice	Handler or Preparer Type	Bulk or Bag Container	Amount (dry metric tons)	Pathogen Reduction Options	Vector Attraction Reduction Option
Disposal in Landfill	Off-site Third-Party Handler or Preparer	Bulk	None to date	Choose an item.	Choose an item.

If "Other" is selected for Management Practice, please explain (e.g. monofill or transport to another WWTP): $\rm N/A$

D. Disposal site

Disposal site name: will be selected prior to sludge disposal

TCEQ permit or registration number: will be selected prior to sludge disposal County where disposal site is located: will be selected prior to sludge disposal

E. Transportation method

Method of transportation (truck, train, pipe, other): will be selected prior to sludge disposal

Name of the hauler: will be selected prior to sludge disposal

Hauler registration number: will be selected prior to sludge disposal

Sludge is transported as a:

Liquid \square semi-liquid \square semi-solid \square solid \square

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

A. Beneficial use authorization

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

□ Yes	\boxtimes	No
-------	-------------	----

	If yes , benefi	-		questing	to continue t	his author	izati	on to la	and app	oly sewage s	sludge for
		Yes	\boxtimes	No							
	-	Form		-	pplication fo ttached to th						-
		Yes	\boxtimes	No							
B.	Sludge	e proc	essir	ng author	ization						
				g permit in sal option	nclude authors?	rization fo	r any	y of the	follow	ving sludge	processing,
	Slu	dge Co	omp	osting				Yes	\boxtimes	No	
	Ma	rketin	g and	d Distribu	tion of sludg	je		Yes		No	
	Slu	dge Sı	ırfac	e Disposa	ıl or Sludge M	Ionofill		Yes	\boxtimes	No	
	Tei	npora	ry st	orage in s	sludge lagoon	ıs		Yes	\boxtimes	No	
	Techn	ical R o Yes	epor	t (TCEQ I	lleted Domes F orm No. 10 0	956) attach	ed to	o this p	ermit a	application?	
Se	ction	11.	Sev	vage Slı	ıdge Lago	ons (Ins	tru	ctions	Page	2 53)	
Doe	es this	facilit	y inc	lude sewa	age sludge lag	goons?					
	□ Ye	es 🗵	No)							
If y	es, cor	nplete	the	remainde	r of this sect	ion. If no, p	proc	eed to S	Section	12.	
A.	Locati	on inf	orma	ation							
				aps are re chment N	quired to be umber.	submitted	as p	art of t	he app	lication. For	each map,
	•	Origir	nal G	eneral Hi	ghway (Coun	ty) Map:					
		Attac	hme	nt: N/A							
	•	USDA	Nati	ural Reso	urces Conser	vation Serv	vice S	Soil Ma	p:		
		Attac	hme	nt: N/A							
	•			,	Management	Map:					
				nt: N/A							
	•	Site m	_	4.							
				nt: N/A	0.7.0						
	Discus apply.	ss in a	desc	ription if	any of the fo	ollowing ex	ist w	vithin tl	ne lago	on area. Ch	eck all that
		Over	dap a	ı designat	ed 100-year i	frequency	floo	d plain			
		Soils	with	n flooding	classificatio	n					

	Located less than 60 meters from a fault			
	None of the above			
Attachment: N/A				

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 $1x10^{-7}$ cm/sec?

	П	Yes □ No
		, describe the liner below. Please note that a liner is required.
	N/A	, describe the micr below. Frease note that a micr is required.
	11/11	
D.	Site d	evelopment plan
	Provid	le a detailed description of the methods used to deposit sludge in the lagoon(s):
	N/A	
	Attacl	n the following documents to the application.
	•	Plan view and cross-section of the sludge lagoon(s)
		Attachment: N/A
	•	Copy of the closure plan
		Attachment: N/A
	•	Copy of deed recordation for the site
		Attachment: N/A
	•	Size of the sludge lagoon(s) in surface acres and capacity in cubic feet and gallons
		Attachment: N/A
	•	Description of the method of controlling infiltration of groundwater and surface water from entering the site
		Attachment: N/A
	•	Procedures to prevent the occurrence of nuisance conditions
		Attachment: N/A
E.	Groui	ndwater monitoring
	groun	undwater monitoring currently conducted at this site, or are any wells available for dwater monitoring, or are groundwater monitoring data otherwise available for the e lagoon(s)?
		Yes □ No
	types	undwater monitoring data are available, provide a copy. Provide a profile of soil encountered down to the groundwater table and the depth to the shallowest dwater as a separate attachment.
		- T 37/A

Attachment: N/A

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

A. Additional authorizations

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

Yes 🗵 No

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

B. 3	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:
N/	'A

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: N/A

DOMESTIC WASTEWATER PERMIT APPLICATION WORKSHEET 2.0: RECEIVING WATERS

The following information is required for all TPDES permit applications.

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

Section 3. Classified Segments (Instructions Page 64)

N/A

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

	□ Ye	es 🗵 No
If y	yes, this	s Worksheet is complete.
If 1	no , com	plete Sections 4 and 5 of this Worksheet.
Se	ection	4. Description of Immediate Receiving Waters (Instructions Page 65)
Na	me of t	he immediate receiving waters: <u>unnamed tributary to Grassy Creek</u>
A.	Receiv	ring water type
	Identif	y the appropriate description of the receiving waters.
	\boxtimes	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: <u>Click to enter text.</u>
B.	Flow c	haracteristics
	existin	eam, man-made channel or ditch was checked above, provide the following. For g discharges, check one of the following that best characterizes the area <i>upstream</i> discharge. For new discharges, characterize the area <i>downstream</i> of the discharge one).
		Intermittent - dry for at least one week during most years
	⊠ ma	Intermittent with Perennial Pools - enduring pools with sufficient habitat to intain significant aquatic life uses
		Perennial - normally flowing
	Check discha	the method used to characterize the area upstream (or downstream for new rgers).
		USGS flow records
		Historical observation by adjacent landowners
	\boxtimes	Personal observation
		Other, specify: Click to enter text.

TCEQ-10054 (01/09/2024) Domestic Wastewater Permit Application Technical Report

C. Downstream perennial confluences

downstream of the discharge point. **Grassy Creek** 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 ves, discuss how. N/A E. Normal dry weather characteristics Provide general observations of the water body during normal dry weather conditions. Shallow and clear, low velocity flow. Date and time of observation: 9/17/2024 Was the water body influenced by stormwater runoff during observations? Yes 🖂 No Section 5. **General Characteristics of the Waterbody (Instructions Page 66)** A. Upstream influences Is the immediate receiving water upstream of the discharge or proposed discharge site influenced by any of the following? Check all that apply. Oil field activities Urban runoff Upstream discharges Agricultural runoff Septic tanks Other(s), specify: **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 Other(s), specify: Click to enter text. Park activities C. Waterbody aesthetics

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

List the names of all perennial streams that join the receiving water within three miles

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 89)

A. Industrial users (IUs)

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

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

Categorical IUs:

Number of IUs: o

Average Daily Flows, in MGD: o

Significant IUs - non-categorical:

Number of IUs: o

Average Daily Flows, in MGD: o

Other IUs:

Number of IUs: o

Average Daily Flows, in MGD: o

B. Treatment plant interference

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

□ Yes ⊠ No

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

N/A

C. Treatment plant pass through

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

□ Yes ⊠ No

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

N/A

D. Pretreatment program

	Does your POTW have an approved pretreatment program?
	□ Yes ⊠ No
	If yes, complete Section 2 only of this Worksheet.
	Is your POTW required to develop an approved pretreatment program?
	□ Yes ⊠ No
	If yes, complete Section 2.c. and 2.d. only, and skip Section 3.
	If no to either question above , skip Section 2 and complete Section 3 for each significant industrial user and categorical industrial user.
E.	Service Area Map
	Attach a map indicating the service area of the POTW. The map should include the applicant's service area boundaries and the location of any known industrial users discharging to the POTW. Please see the instructions for guidance.
	Attachment: Click to enter text.
Se	ction 2. POTWs with Approved Programs or Those Required to Develop a Program (Instructions Page 90)
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 <i>40 CFR §403.18</i> ?
	□ Yes □ No
	If yes , identify the modifications that have not been submitted to TCEQ, including the purpose of the modification.
	N/A
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.
	N/A
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.
Tal	ble 6.0(1) - Parameters Above the MAL

TCEQ-10054 (01/09/2024) Domestic Wastewater Permit Application Technical Report

MAL

Units

Concentration

Pollutant

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.								
	N/A								
Ca									
5 e	ction 3. Significant Industrial User (SIU) Information and Categorical Industrial User (CIU) (Instructions Page 90)								
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								
υ.	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 *i*nstructions?

□ Yes □ No
Is the SIU or CIU subject to categorical pretreatment standards found in 40 CFR Parts 405 - 471 ?
□ Yes □ No
If subject to categorical pretreatment standards , indicate the applicable category and subcategory for each categorical process.
Category: Subcategories: N/A
Click or tap here to enter text. N/A
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

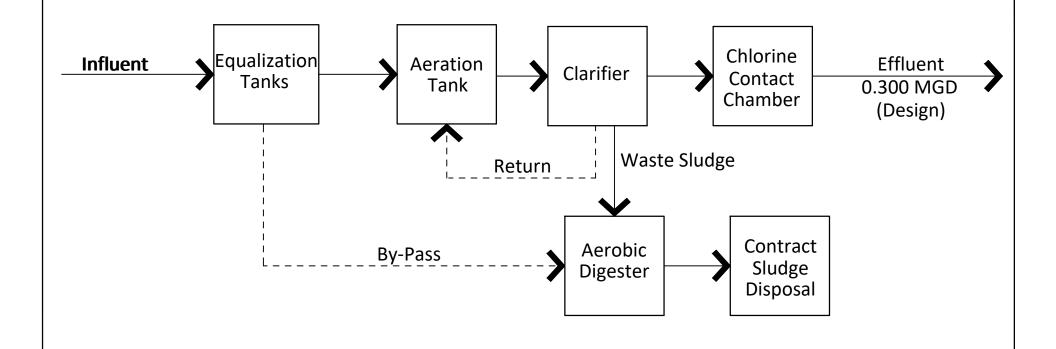
F.

ATTACHMENT E

FLOW SCHEMATICS

SAM HOUSTON AREA COUNCIL BOY SCOUTS OF AMERICA BOVAY SCOUT RANCH WASTEWATER TREATMENT FACILITY





LEGEND

Normal Plant Operation

- By-Pass or Return Operation

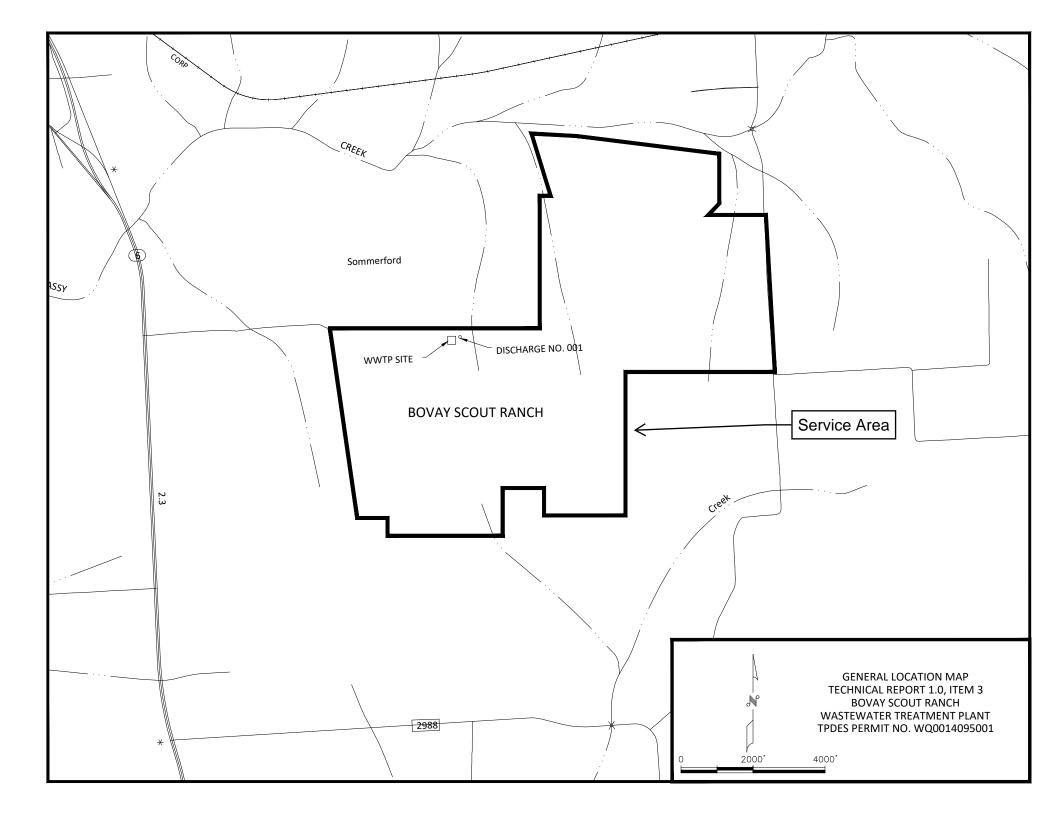
PLANT FLOW DIAGRAM
TECHNICAL REPORT 1.0, ITEM 2
BOVAY SCOUT RANCH
TPDES PERMIT NO. WQ0014095001

ATTACHMENT F

SERVICE AREA MAP

SAM HOUSTON AREA COUNCIL BOY SCOUTS OF AMERICA BOVAY SCOUT RANCH WASTEWATER TREATMENT FACILITY







- 1. Buffer Zone Maps
- 2. Design Calculations
- 3. Water Balance



- 1. Buffer Zone Maps
- 2. Design Calculations
- 3. Water Balance



- 1. Buffer Zone Maps
- 2. Design Calculations
- 3. Water Balance



- 1. Buffer Zone Maps
- 2. Design Calculations
- 3. Water Balance

Francesca Findlay

From: Jonathan Nguyen <jnguyen@quiddity.com>

Sent: Friday, November 1, 2024 8:29 AM

To: Francesca Findlay **Cc:** Amy S. Hennard PG, PE

Subject: Re: WQ0014095001 Sam Houston Area Council Boys Scouts of America

Attachments: Bovay Scout Ranch Spanish NORI.docx

Good morning,

The only revision for the notice is in the facility county location. It should read "in Grimes County, Texas 77868." Attached is the Spanish translated NORI. Please let me know if you have any additional questions.

Thank you!

Jonathan Nguyen

Permitting Specialist





(512) 685-5156

912 S. Capital of Texas Hwy, Suite 300, Austin, Texas, 78746

www.quiddity.com









From: Francesca Findlay < Francesca. Findlay@tceq.texas.gov>

Sent: Thursday, October 31, 2024 10:31 AM

To: Jonathan Nguyen < jnguyen@quiddity.com>

Cc: Amy S. Hennard PG, PE <ahennard@quiddity.com>

Subject: FW: WQ0014095001 Sam Houston Area Council Boys Scouts of America

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Dear Mr. Nguyen:

The attached Notice of Deficiency letter sent on October 31, 2024, requesting additional information needed to declare the application administratively complete. Please send the complete response to my attention November 13, 2024.

Thank you,

Dean Sindleg

Francesca Findlay
License & Permit Specialist
ARP Team | Water Quality Division
512-239-2441
Texas Commission on Environmental Quality



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