

This file contains the following documents:

- 1. Summary of application (in plain language)
- 2. First notice (NORI-Notice of Receipt of Application and Intent to Obtain a Permit)
- 3. Second notice (NAPD-Notice of Preliminary Decision)
- 4. Application materials
- 5. Draft permit
- 6. Technical summary or fact sheet



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

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

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

Applicants should use this template to develop a plain language summary of your facility and application as required by Title 30, Texas Administrative Code (30 TAC), Chapter 39, Subchapter H. You may modify the template as necessary to accurately describe your facility as long as the summary includes the following information: (1) the function of the proposed plant or facility; (2) the expected output of the proposed plant or facility; (3) the expected pollutants that may be emitted or discharged by the proposed plant or facility; and (4) how you will control those pollutants, so that the proposed plant will not have an adverse impact on human health or the environment.

Fill in the highlighted areas below to describe your facility and application in plain language. Instructions and examples are provided below. Make any other edits necessary to improve readability or grammar and to comply with the rule requirements. After filling in the information for your facility delete these instructions.

If you are subject to the alternative language notice requirements in 30 TAC Section 39.426, you must provide a translated copy of the completed plain language summary in the appropriate alternative language as part of your application package. For your convenience, a Spanish template has been provided below.

ENGLISH TEMPLATE FOR TPDES or TLAP NEW/RENEWAL/AMENDMENT APPLICATIONS Enter 'INDUSTRIAL' or 'DOMESTIC' here WASTEWATER/STORMWATER

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

Combined Consumers Special Utility District (CN602690422) operates Shawnee Shores Water Treatment Facility (RN104983150), a Wastewater Treatment Facility. The facility is located at 10446 Farm-to-Market Road, in Quinlan, Texas, Hunt County, Texas 75474. The wastewater treatment plant is authorized to discharge treated wastewater at a volume not to exceed a daily average flow of 25,000 gallons per day.

Discharges from the facility are expected to contain total suspended solids (TSS), ammonia nitrogen (NH_3 -N), and chlorine residual (HOCI). The water at Combined Consumers SUD is treated by means of sedimentation, filtration, and disinfection to remove harmful contaminates .

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY



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

PERMIT NO. WQ0014685001

APPLICATION. Combined Consumers Special Utility District, P.O. Box 2829, Ouinlan, Texas 75474, has applied to the Texas Commission on Environmental Quality (TCEO) to renew Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0014685001 (EPA I.D. No. TX0128538) to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 25,000 gallons per day. The water treatment facility is located at 10446 Farm-to-Market Road 751, near the city of Quinlan, in Hunt County, Texas 75474. The discharge route is from the plant site directly to Lake Tawakoni. TCEQ received this application on May 16, 2025. The permit application will be available for viewing and copying at Hunt County Courthouse, Second Floor, 2507 Lee Street, Greenville, in Hunt 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.tceg.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=-96.073055,32.870833&level=18

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

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

OPPORTUNITY FOR A CONTESTED CASE HEARING. After the deadline for submitting public comments, the Executive Director will consider all timely comments and prepare a response to all relevant and material, or significant public comments. **Unless the application**

is directly referred for a contested case hearing, the response to comments, and the Executive Director's decision on the application, will be mailed to everyone who submitted public comments and to those persons who are on the mailing list for this application. If comments are received, the mailing will also provide instructions for requesting reconsideration of the Executive Director's decision and for requesting a contested case hearing. A contested case hearing is a legal proceeding similar to a civil trial in state district court.

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

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

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

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

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

INFORMATION AVAILABLE ONLINE. For details about the status of the application, visit the Commissioners' Integrated Database at 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 Combined Consumers Special Utility District at the address stated above or by calling Mr. Drew Roberts, General Manager, at 903-356-3321.

Issuance Date: June 17, 2025

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY



NOTICE OF APPLICATION AND PRELIMINARY DECISION FOR TPDES PERMIT FOR WASTEWATER

RENEWAL

PERMIT NO. WQ0014685001

APPLICATION AND PRELIMINARY DECISION. Combined Consumers Special Utility District, P.O. Box 2829, Quinlan, Texas, 75474, has applied to the Texas Commission on Environmental Quality (TCEQ) for a renewal of Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0014685001 which authorizes the discharge of treated filter backwash effluent from a water treatment plant at a daily average flow not to exceed 25,000 gallons per day. TCEQ received this application on May 16, 2025.

The facility is located at 10446 Farm-to-Market Road 751, in Hunt County, Texas 75474. The treated effluent is discharged directly to Lake Tawakoni in Segment No. 0507 of the Sabine River Basin. The designated uses for Segment No. 0507 are primary contact recreation, public water supply, high aquatic life use. All determinations are preliminary and subject to additional review and/or revisions. This link to an electronic map of the site or facility's general location is provided as a public courtesy and is not part of the application or notice. For the exact location, refer to the application.

https://gisweb.tceq.texas.gov/LocationMapper/?marker=-96.073055,32.870833&level=18

The TCEQ Executive Director has completed the technical review of the application and prepared a draft permit. The draft permit, if approved, would establish the conditions under which the facility must operate. The Executive Director has made a preliminary decision that this permit, if issued, meets all statutory and regulatory requirements. The permit application, Executive Director's preliminary decision, and draft permit are available for viewing and copying at Hunt County Courthouse, Second Floor, 2507 Lee Street, Greenville, in Hunt County, Texas. 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.

You may submit public comments or request a public meeting about this application. The purpose of a public meeting is to provide the opportunity to submit comments or to ask questions about the application. TCEQ holds 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 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 a contested case hearing or reconsideration of the Executive Director's decision. A contested case hearing is a legal proceeding similar to a civil trial in a 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.

EXECUTIVE DIRECTOR ACTION. The Executive Director may issue final approval of the application unless a timely contested case hearing request or request for reconsideration is filed. If a timely hearing request or request for reconsideration is filed, the Executive Director will not issue final approval of the permit and will forward the application and request to the TCEQ Commissioners for their consideration at a scheduled Commission meeting.

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 TCEO Office of the Chief Clerk at the address below.

All written public comments and public meeting requests must be submitted to the Office of the Chief Clerk, MC 105, Texas Commission on Environmental Quality, P.O. Box 13087, Austin, TX 78711-3087 or electronically at www.tceq.texas.gov/goto/comment within 30 days from the date of newspaper publication of this notice.

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. Public comments and requests must be submitted either electronically at www.tceq.texas.gov/goto/comment, 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. Any personal information you submit to the TCEQ will become part of the agency's record; this includes email addresses. 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 Combined Consumers Special Utility District at the address stated above or by calling Mr. Drew Roberts, General Manager, at 903-356-3321.

Issuance Date: September 18, 2025

Tyler N. Hendrickson, P.E.

Founders: W. Wayne Weeks, P.E. Neal E. Velvin, P.E.



930 E. Corsicana Street P.O. Box 1007 Athens TX 75751

Texas Registered Engineering Firm F-151

Phone: 903-675-3903 vwce@velvin-weeks.com Fax: 903-675-8345

May 12, 2025

Texas Commission on Environmental Quality Water Quality Division (MC-148) Application Review & Processing Team PO Box 13087 Austin, Tx 78711-3087

Re: Combined Consumers SUD – Renewal Application for Permit # WQ01485001, RN104983150, CN602690422

Team Member,

Please find enclosed renewal application for Combined Consumers SUD. Please feel free to contact me if you have any additional questions at (903) 675-3903 or at tracyk@velvin-weeks.com

Sincerely,

Velvin & Weeks Consulting Engineers, Inc.

Tracy Kyser

CC: Drew Roberts

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TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the application.

APPLICANT	NAME:	Combined	Consumers	<u>SUD</u>

PERMIT NUMBER (If new, leave blank): WQ00 014685001

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

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

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

THE TOTAL OUT IN THE TO

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	Paymer	it Infoi	rmation
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Mailed Check/Money Order Number: <u>51178</u>

Check/Money Order Amount: \$315.00

Name Printed on Check: Velvin & Weeks Consulting Engineers, Inc.

EPAY Voucher Number: Click to enter text.

Copy of Payment Voucher enclosed? Yes \square

Section 2. Type of Application (Instructions Page 26)

a.	Che	ck the box next to the appropriate authorization type.
	\boxtimes	Publicly-Owned Domestic Wastewater
		Privately-Owned Domestic Wastewater
		Conventional Wastewater Treatment
b.	Che	ck the box next to the appropriate facility status.
	\boxtimes	Active Inactive

C.	Che	eck the box next to the appropriate permit typ	e.	
	\boxtimes	TPDES Permit		
		TLAP		
		TPDES Permit with TLAP component		
		Subsurface Area Drip Dispersal System (SAD	DS)	
d.	Che	eck the box next to the appropriate application	n typ	e
		New		
		Major Amendment with Renewal		Minor Amendment with Renewal
		Major Amendment without Renewal		Minor Amendment without Renewal
	\boxtimes	Renewal without changes		Minor Modification of permit
e.	For	amendments or modifications, describe the p	ropo	osed changes: Click to enter text.
f.	For	existing permits:		
	Per	mit Number: WQ00 <u>0014685001</u>		
	EPA	A I.D. (TPDES only): TX <u>0128538</u>		
	Exp	oiration Date: <u>Sept. 10, 2026</u>		

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?

Combined Consumers SUD

(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: <u>602690422</u>

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

Prefix: Click to enter text. Last Name, First Name: Click to enter text.

Title: Click to enter text. 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. <u>SEE ATTACHENT A</u>

Section 4. Application Contact Information (Instructions Page 27)

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

A. Prefix: Mr. Last Name, First Name: Roberts, Drew

Title: General Manager Credential: Click to enter text.

Organization Name: Combine Consumers SUD

Mailing Address: PO Box 2829 City, State, Zip Code: Quinlan, Tx 75474

Phone No.: 903-356-3321 E-mail Address: droberts@ccsud.com

Check one or both:

B. Prefix: Mr. Last Name, First Name: Hendrickson, Tyler

Title: President Credential: P.E.

Organization Name: Velvin & Weeks Consulting Engineers, Inc.

Mailing Address: 930 E. Corsicana St. City, State, Zip Code: Athens, Tx 75751

Phone No.: 903-675-3903 E-mail Address: then@velvin-weeks.com

Check one or both:

Administrative Contact

Technical Contact

Section 5. Permit Contact Information (Instructions Page 27)

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

A. Prefix: Ms. Last Name, First Name: Kyser, Tracy

Title: Permit Coordinator Credential: Click to enter text.

Organization Name: Velvin & Weeks Consulting Engineers, Inc.

Mailing Address: <u>930 E. Corsicana St.</u> City, State, Zip Code: <u>Athens, Tx 75751</u>

Phone No.: 903-675-3903 E-mail Address: tracyk@velvin-weeks.com

B. Prefix: Click to enter text. Last Name, First Name: Click to enter text.

Title: Click to enter text. Credential: Click to enter text.

Organization Name: Click to enter text.

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

Phone No.: Click to enter text. E-mail Address: Click to enter text.

Section 6. Billing Contact Information (Instructions Page 27)

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

Prefix: Mr. Last Name, First Name: Roberts, Drew

Title: General Manager Credential: Click to enter text.

Organization Name: Combine Consumers SUD

Mailing Address: PO Box 2829 City, State, Zip Code: Quinlan, Tx 75474

Phone No.: 903-356-3321 E-mail Address: droberts@ccsud.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: Roberts, Drew

Title: General Manager Credential: Click to enter text.

Organization Name: Combine Consumers SUD

Mailing Address: PO Box 2829 City, State, Zip Code: Quinlan, Tx 75474

Phone No.: 903-356-3321 E-mail Address: droberts@ccsud.com

Section 8. Public Notice Information (Instructions Page 27)

A. Individual Publishing the Notices

Prefix: ___ Last Name, First Name: <u>Landrum</u>, <u>Becky</u>

Title: <u>County Clerk</u> Credential: Click to enter text.

Organization Name: <u>Hunt County Courthouse</u>

Mailing Address: <u>2507 Lee St.</u> City, State, Zip Code: <u>Greenville, Tx 75401</u>

Phone No.: 903-408-4100 E-mail Address: Click to enter text.

	Pa	ckage				
	Ind	dicate b	y a check m	ark tl	he preferred method for receiving the first notice and instruction	S
		E-mai	il Address			
		Fax				
		Regu	lar Mail			
C.	Co	ntact p	ermit to be	liste	d in the Notices	
	Pre	efix: <u>Mr</u>			Last Name, First Name: Roberts, Drew	
	Tit	le: <u>Gene</u>	eral Manager		Credential: Click to enter text.	
	Or	ganizat	ion Name: <u>C</u>	Combi	ne Consumers SUD	
	Ma	iling A	ddress: <u>PO E</u>	<u>Box</u>	City, State, Zip Code: Quinlan, Tx 75474	
	Ph	one No.	: <u>903-356-33</u>	321	E-mail Address: <u>dr</u>	
D.	Pu	blic Vie	wing Infor	matio	on	
		•	lity or outfal Ist be provid		ocated in more than one county, a public viewing place for each	
	Pu	blic bui	lding name:	Hunt	t County Courthouse	
	Lo	cation v	vithin the bı	uildin	ng: <u>2nd Floor</u>	
	Ph	ysical A	ddress of B	uildir	ng: <u>2507 Lee Street</u>	
	Cit	y: <u>Gree</u> r	<u>rville, Texas</u>		County: <u>Hunt</u>	
	Co	ntact (L	ast Name, F	irst N	lame): <u>Beck Landrum</u>	
	Ph	one No.	: 903-408-41	<u>130</u> Ex	xt.: Click to enter text.	
E.	Bil	ingual l	Notice Requ	ıirem	nents	
					ed for new, major amendment, minor amendment or minor applications.	
	be	needed	_	instru	tion is only used to determine if alternative language notices will uctions on publishing the alternative language notices will be in s.	
	ob				L coordinator at the nearest elementary and middle schools and nation to determine whether an alternative language notices are	
	1.				program required by the Texas Education Code at the elementary st to the facility or proposed facility?	7
			Yes	\boxtimes	No	
		If no , p	oublication (of an	alternative language notice is not required; skip to Section 9	
	2.				ttend either the elementary school or the middle school enrolled in rogram at that school?	ir
			Yes		No	

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

	3.	Do the locatio		s at the	se sch	ools a	ttend	a biling	ual educ	ation pro	gram a	t another	
			Yes		No								
	4.		the scho								ogram l	out the school	has
			Yes		No								
	5.											tive language enter text.	are
F.	Pla	in Lang	guage Su	mmary	Temp	late							
	Co	mplete	the Plain	Langu	age Sui	mmar	y (TCI	EQ Form	20972)	and inclu	de as a	ın attachment	
	At	tachme	nt: <u>See A</u>	ttachme	ent B								
G.	Pu	blic Inv	olvemer	nt Plan	Form								
						t Plan	Form	(TCEQ	Form 209	960) for e	ach ap	plication for a	l
										as an atta			
	At	tachme	nt: <u>N/A</u>										
C -		0	D	1-4-1	F 44		-1 D -		al Cita	I C		/T t t-1	
56	CU.	on 9.	Regu Page		Enui	ty an	a Pe	ermitte	ea Site	iniorm	auon	(Instructio	ons
A.			is curren L N <u>10498</u>		ulated l	by TC	EQ, pı	covide tl	ne Regula	ated Enti	y Num	ber (RN) issue	d to
			TCEQ's					<u>//www1</u>	5.tceq.tex	xas.gov/c	rpub/	to determine i	f
B.	Na	me of p	roject or	site (tł	ie nam	e kno	wn by	the cor	nmunity	where lo	cated):		
	Sha	awnee Sl	nore Trea	tment P	<u>lant</u>								
C.	Ow	vner of	treatmen	t facilit	y: <u>Com</u>	bined	Consu	mers SU	D				
	Ow	mership	of Facil	ity: 🛛	Publ	lic		Private		Both		Federal	
D.	Ow	mer of l	and whe	re treat	ment f	facility	is or	will be:					
	Pre	efix: Clic	k to ent	er text.		Last	Name	, First N	lame: Cli	ck to ent	er text.		
	Tit	le: Click	to enter	text.		Cred	ential	: Click t	o enter t	ext.			
	Or	ganizati	ion Name	e: <u>Comb</u>	ined Co	nsume	ers SU	D					
	Ma	iling Ac	ldress: <u>10</u>	0446 FM	<u> 751</u>			City, Sta	ite, Zip C	ode: Clic	k to en	ter text.	
	Ph	one No.	903-356	-3321		E-m	ail Ad	ldress: <u>d</u>	lroberts@	ccsud.con	<u>n</u>		
			owner is or deed							r or co-ap	plican	t, attach a leas	se
		Attach	ment: Cl	ick to e	nter te	ext.							

E.	Owner of effluent disposal site:	2 .
	Prefix: Click to enter text.	Last Name, First Name: Click to enter text.
	Title: Click to enter text.	Credential: Click to enter text.
	Organization Name: Click to ent	er text.
	Mailing Address: Click to enter t	ext. City, State, Zip Code: Click to enter text.
	Phone No.: Click to enter text.	E-mail Address: Click to enter text.
	If the landowner is not the same agreement or deed recorded ease	person as the facility owner or co-applicant, attach a lease ement. See instructions.
	Attachment: Click to enter te	ext.
F.	Owner sewage sludge disposal si property owned or controlled by	ite (if authorization is requested for sludge disposal on the applicant)::
	Prefix: Click to enter text.	Last Name, First Name: Click to enter text.
	Title: Click to enter text.	Credential: Click to enter text.
	Organization Name: Happy Hollo	w Farm #3 & #4
	Mailing Address: Click to enter to	ext. City, State, Zip Code: Click to enter text.
	Phone No.: Click to enter text.	E-mail Address: Click to enter text.
	If the landowner is not the same agreement or deed recorded ease	person as the facility owner or co-applicant, attach a lease ement. See instructions.
	Attachment: Click to enter te	xt.
Se	ection 10. TPDES Dischar	ge Information (Instructions Page 31)
		ge Information (Instructions Page 31) lity location in the existing permit accurate?
	Is the wastewater treatment facil ☐ Yes ☐ No If no, or a new permit application	
	Is the wastewater treatment facil ☐ Yes ☐ No	lity location in the existing permit accurate?
	Is the wastewater treatment facil ☐ Yes ☐ No If no, or a new permit application	lity location in the existing permit accurate?
A.	Is the wastewater treatment facil	lity location in the existing permit accurate?
A.	Is the wastewater treatment facil	on, please give an accurate description:
A.	Is the wastewater treatment facility Yes No If no, or a new permit application Click to enter text. Are the point(s) of discharge and Yes No If no, or a new or amendment point of discharge and the discharge	on, please give an accurate description:
A.	Is the wastewater treatment facil	on, please give an accurate description: I the discharge route(s) in the existing permit correct? ermit application, provide an accurate description of the
A.	Is the wastewater treatment facil ☐ Yes ☐ No If no, or a new permit application of the content text. Are the point(s) of discharge and ☐ Yes ☐ No If no, or a new or amendment point of discharge and the discharge are discharged and the discharge are discharged and the discharged are discharged as the discharged are discharged and the discharged are discharged as the disch	on, please give an accurate description: I the discharge route(s) in the existing permit correct? ermit application, provide an accurate description of the
A.	Is the wastewater treatment facil	on, please give an accurate description: I the discharge route(s) in the existing permit correct? ermit application, provide an accurate description of the arge route to the nearest classified segment as defined in 30
A.	Is the wastewater treatment faciliated. Yes No If no, or a new permit application. Click to enter text. Are the point(s) of discharge and permit of discharge and the disc	on, please give an accurate description: I the discharge route(s) in the existing permit correct? ermit application, provide an accurate description of the arge route to the nearest classified segment as defined in 30
А.	Is the wastewater treatment facil Yes No If no, or a new permit application Click to enter text. Are the point(s) of discharge and Yes No If no, or a new or amendment perpoint of discharge and the discharge	In please give an accurate description: If the discharge route(s) in the existing permit correct? If the discharge route(s) in the existing permit correct? If the discharge route an accurate description of the arge route to the nearest classified segment as defined in 30 in the arge route to the nearest classified segment as defined in 30 in the arge route to the nearest classified segment as defined in 30 in the existing permit correct?
А.	Is the wastewater treatment facil Yes No If no, or a new permit application of the content text. Are the point(s) of discharge and the point of discharge and the discharge and the discharge and the discharge and the content text. City nearest the outfall(s): Quinla County in which the outfalls(s) is	In please give an accurate description: If the discharge route(s) in the existing permit correct? If the discharge route(s) in the existing permit correct? If the discharge route an accurate description of the arge route to the nearest classified segment as defined in 30 in the arge route to the nearest classified segment as defined in 30 in the arge route to the nearest classified segment as defined in 30 in the existing permit correct?

	If yes , indicate by a check mark if:
	☐ Authorization granted ☐ Authorization pending
	For new and amendment applications, provide copies of letters that show proof of contact and the approval letter upon receipt.
	Attachment: Click to enter text.
D.	For all applications involving an average daily discharge of 5 MGD or more, provide the names of all counties located within 100 statute miles downstream of the point(s) of discharge: Click to enter text.
Se	ection 11. TLAP Disposal Information (Instructions Page 32)
Α.	For TLAPs, is the location of the effluent disposal site in the existing permit accurate?
	□ Yes □ No
	If no, or a new or amendment permit application , provide an accurate description of the disposal site location:
	N/A
В.	City nearest the disposal site: Click to enter text.
C.	County in which the disposal site is located: Click to enter text.
D.	For TLAPs , describe the routing of effluent from the treatment facility to the disposal site:
	Click to enter text.
E.	For TLAPs , please identify the nearest watercourse to the disposal site to which rainfall runoff might flow if not contained: Click to enter text.
Se	ection 12. Miscellaneous Information (Instructions Page 32)
A.	Is the facility located on or does the treated effluent cross American Indian Land?
	□ Yes ⊠ No
В.	If the existing permit contains an onsite sludge disposal authorization, is the location of the sewage sludge disposal site in the existing permit accurate?
	□ Yes □ No ⊠ Not Applicable
	If No, or if a new onsite sludge disposal authorization is being requested in this permit application, provide an accurate location description of the sewage sludge disposal site.
	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.
	The state of the s
Se	ction 13. Attachments (Instructions Page 33)
	ction 13. Attachments (Instructions Page 33) cate which attachments are included with the Administrative Report. Check all that apply:
Inc	cate 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
Inc	cate 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.
Inc	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)
Inc □	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.

Section 14. Signature Page (Instructions Page 34)

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

Permit Number: <u>WO00014685001</u>
Applicant: <u>Combined Consumers SUD</u>

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 title: General Manager

(Use blue ink)

Subscribed and Sworn to before me by the said...

on this 21 5+

Signature:

_day of__

Mac

, 20 2

My commission expires on the_

_day of

14,20

Notary Provice

County, Texas

(SEAL)

SIEGLINDE ELLISON

Notary Public, State of Texas

Comm. Expires 07-03-2028

Notary ID 125755887

DOMESTIC WASTEWATER PERMIT APPLICATION SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

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

Attachment: See Attachment D

ATTACHMENT 1

INDIVIDUAL INFORMATION

Section 1. Individual Information (Instructions Page 41)

Complete this attachment if the facility applicant or co-applicant is an individual. Make additional copies of this attachment if both are individuals.

Prefix (Mr., Ms., Miss): Click to enter text.

Full legal name (Last Name, First Name, Middle Initial): Click to enter text.

Driver's License or State Identification Number: Click to enter text.

Date of Birth: Click to enter text.

Mailing Address: Click to enter text.

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

Phone Number: Click to enter text. Fax Number: Click to enter text.

E-mail Address: Click to enter text.

CN: Click to enter text.

For Commission Use Only:

Customer Number:

Regulated Entity Number:

Permit Number:

DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST OF COMMON DEFICIENCIES

Below is a list of common deficiencies found during the administrative review of domestic wastewater permit applications. To ensure the timely processing of this application, please review the items below and indicate by checking Yes that each item is complete and in accordance applicable rules at 30 TAC Chapters 21, 281, and 305. If an item is not required this application, indicate by checking N/A where appropriate. Please do not submit the application until the items below have been addressed.

Core Data Form (TCEQ Form No. 10400) (Required for all application types. Must be completed in its entirety and signed. Note: Form may be signed by applicant representative.)					
Correct and Current Industrial Wastewater Permit Application Forms (TCEQ Form Nos. 10053 and 10054. Version dated 6/25/2018 or later.)					
Water Quality Permit Payment Submittal Form (Page 19) (Original payment sent to TCEQ Revenue Section. See instructions for	or ma	iling ad	⊠ ldress	Yes s.)	
7.5 Minute USGS Quadrangle Topographic Map Attached (Full-size map if seeking "New" permit. 8 ½ x 11 acceptable for Renewals and Amendments)				Yes	
Current/Non-Expired, Executed Lease Agreement or Easement		N/A		Yes	
Landowners Map (See instructions for landowner requirements)		N/A		Yes	
 Things to Know: All the items shown on the map must be labeled. The applicant's complete property boundaries must be a boundaries of contiguous property owned by the application. The applicant cannot be its own adjacent landowner. You landowners immediately adjacent to their property, regardered from the actual facility. If the applicant's property is adjacent to a road, creek, on on the opposite side must be identified. Although the prapplicant's property boundary, they are considered pote If the adjacent road is a divided highway as identified or map, the applicant does not have to identify the landown the highway. 	int. u mus rdless r strea opert ntially i the U	at identi s of hov am, the ies are affecto JSGS to	ify the value of the contract	e they are owners djacent to ndowners. aphic	
Landowners Cross Reference List (See instructions for landowner requirements)	□ I	N/A		Yes	
Landowners Labels or USB Drive attached (See instructions for landowner requirements)		N/A		Yes	
Original signature per 30 TAC § 305.44 – Blue Ink Preferred (If signature page is not signed by an elected official or principle exacopy of signature authority/delegation letter must be attached)	ecutiv	e officei	□ r,	Yes	
Plain Language Summary				Yes	

THE TOTAL OWN

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): Click to enter text.

2-Hr Peak Flow (MGD): Click to enter text.

Estimated construction start date: Click to enter text.

Estimated waste disposal start date: Click to enter text.

B. Interim II Phase

Design Flow (MGD): Click to enter text.

2-Hr Peak Flow (MGD): Click to enter text.

Estimated construction start date: Click to enter text.

Estimated waste disposal start date: Click to enter text.

C. Final Phase

Design Flow (MGD): <u>0.025</u>

2-Hr Peak Flow (MGD): <u>0.025</u>

Estimated construction start date: Click to enter text.

Estimated waste disposal start date: Click to enter text.

D. Current Operating Phase

Provide the startup date of the facility: 2006

Section 2. Treatment Process (Instructions Page 43)

A. Current Operating Phase

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

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

This is a water treatment plant. The backwash from the treatment process begins at the filter system and is then transferred to holding ponds (or lagoons) where the sludge is allowed to settle by gravity, and the clarified water is then reintroduced into the plant or is discharged back out into the main water supply.

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

Lagoon #1 Lagoon #2	1	57'x69'x6' 60'x2'x6'
	1	60'v2'v6!
		00 X2 X0
Lagoon #3	1	38'x72'x6'
Lagoon #4	1	66'x166'x6'

C. Process Flow Diagram

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

Attachment: <u>SEE ATTACHMENT E</u>

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

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

• Latitude: 32.870247

• Longitude: <u>-96.072949</u>

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

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

• Longitude: Click to enter text.

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

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

Attachment: <u>SEE ATTACHMENT F</u>

Preserved by the structions for a detailed of	Population Serverage or phases? the unbuilt phase.
Owner Type Choose an item. ctions Page 45) at contains an unbuilt phose that has not been consider the continued need for the	Population Serve Population Serve
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If y	yes, was a closure plan submitted to the TCEQ?
	□ Yes □ No
If y	yes, provide a brief description of the closure and the date of plan approval.
C	lick to enter text.
	ection 6. Permit Specific Requirements (Instructions Page 45)
	r applicants with an existing permit, check the Other Requirements or Special ovisions of the permit.
A.	Summary transmittal
	Have plans and specifications been approved for the existing facilities and each proposed phase?
	□ Yes □ No
	If yes, provide the date(s) of approval for each phase: Click to enter text.
	Provide information, including dates, on any actions taken to meet a <i>requirement or provision</i> pertaining to the submission of a summary transmittal letter. Provide a copy of an approval letter from the TCEQ, if applicable.
	Click to enter text.
R.	Buffer zones
	Have the buffer zone requirements been met?
	□ Yes ⊠ No
	Provide information below, including dates, on any actions taken to meet the conditions of the buffer zone. If available, provide any new documentation relevant to maintaining the buffer zones.
	N/A

C.	Ot	ther actions required by the current permit						
	su	bes the Other Requirements or Special Provisions 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						
	If yes, provide information below on the status of any actions taken to meet the conditions of an <i>Other Requirement</i> or <i>Special Provision</i> .							
	N	I/A						
D.	Gr	rit 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.						
	<i>3.</i>	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.	<i>Grease and decanted liquid disposal</i> 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.							
F	Sta	ormwater management							
E.		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.						
	N/A						
5	Zero stormwater discharge						
<i>.</i>	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.						
<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.	Di	scharges to the Lake Houston Watershed
	Do	es the facility discharge in the Lake Houston watershed?
		□ Yes ⊠ No
		yes, attach a Sewage Sludge Solids Management Plan. See Example 5 in the instructions. ick to enter text.
G.	Ot	her wastes received including sludge from other WWTPs and septic waste
	1.	Acceptance of sludge from other WWTPs
		Does or will the facility accept sludge from other treatment plants at the facility site?
		□ Yes ⊠ No
		If yes, attach sewage sludge solids management plan. See Example 5 of instructions.
		In addition, provide the date the plant started or is anticipated to start accepting sludge, an estimate of monthly sludge acceptance (gallons or millions of gallons), an
		estimate of the BOD ₅ concentration of the sludge, 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.
		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. Pollutant Analysis of Treated Effluent (Instructions Page Section 7. 50) Is the facility in operation? Yes □ No **If no**, this section is not applicable. Proceed to Section 8.

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

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

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

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

^{*}TPDES permits only †TLAP permits only

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

Pollutant	Average Conc.	Max Conc.	No. of Samples	Sample Type	Sample Date/Time
Total Suspended Solids, mg/l	2.89	20.3	12	Grab	Monthly
Total Dissolved Solids, mg/l					
pH, standard units	7.91	8.57	12	Grab	Monthly
Fluoride, mg/l					
Aluminum, mg/l					
Alkalinity (CaCO ₃), mg/l	74.5	78	12	Grab	Monthly

Section 8. Facility Operator (Instructions Page 50)

Facility Operator Name: Dustin Haywood

Facility Operator's License Classification and Level: WS0012529

Facility Operator's License Number: B Surface Water License

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

Α.	VV VV	1P's Biosonas Management Facility Type
	Che	ck all that apply. See instructions for guidance
		Design flow>= 1 MGD
		Serves >= 10,000 people
	\boxtimes	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.	ww	TP's Biosolids Treatment Process
	Che	ck all that apply. See instructions for guidance.
		Aerobic Digestion
		Air Drying (or sludge drying beds)
		Lower Temperature Composting
		Lime Stabilization
		Higher Temperature Composting
		Heat Drying
		Thermophilic Aerobic Digestion
		Beta Ray Irradiation
		Gamma Ray Irradiation
		Pasteurization
		Preliminary Operation (e.g. grinding, de-gritting, blending)
		Thickening (e.g. gravity thickening, centrifugation, filter press, vacuum filter)
		Sludge Lagoon
		Temporary Storage (< 2 years)
		Long Term Storage (>= 2 years)
		Methane or Biogas Recovery
		Other Treatment Process: Click to enter text.

C. Biosolids Management

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

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

Biosolids Management

Management Practice	Handler or Preparer Type	Bulk or Bag Container	Amount (dry metric tons)	Pathogen Reduction Options	Vector Attraction Reduction Option
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.	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): The sludge is transported by truck to a on-site location in Van Zandt County

D.	Dis	posa	ıl site
----	-----	------	---------

Disposal site name: Happy Hollow Farm #3 & #4

TCEQ permit or registration number: <u>730170 & 730168</u> County where disposal site is located: <u>Van Zandt County</u>

E. Transportation method

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

Name of the hauler: <u>Deep Roots</u> Hauler registration number: <u>24383</u>

Sludge is transported as a:

Liquid □	semi-liquid □	semi-solid □	solid ⊠
Liquiu L	ociin nquiu 🗀	ociin oona 🗀	JOHA E

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

A. Beneficial use authorization

beneficial use?
□ Yes ⊠ No
If yes , are you requesting to continue this authorization to land apply sewage sludge for beneficial use?
□ Yes □ No
If we is the completed Application for Deposit for Deposition I and Heart Course Child

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)?

b. Siuug	ge processing authorization					
	the existing permit include authorization f ge or disposal options?	or an	y of the	follov	ving sludge processing,	
Sl	udge Composting		Yes	\boxtimes	No	
M	arketing and Distribution of sludge		Yes	\boxtimes	No	
Sl	udge Surface Disposal or Sludge Monofill		Yes		No	
Τe	emporary storage in sludge lagoons		Yes	\boxtimes	No	
autho	s to any of the above sludge options and the orization, is the completed Domestic Waste nical Report (TCEQ Form No. 10056) attac	wate	r Permi	t Appl	lication: Sewage Sludge	
	Yes □ No					
Section	n 11. Sewage Sludge Lagoons (Ins	stru	ctions	Page	e 53)	
Does this	s facility include sewage sludge lagoons?					
□ Y	es ⊠ No					
If yes, co	mplete the remainder of this section. If no,	proc	eed to S	ection	12.	
A. Locat	ion information					
	ollowing maps are required to be submitted de the Attachment Number.	d as p	art of th	ne app	lication. For each map,	
•	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.					
Discu apply	ess in a description if any of the following e	xist v	vithin th	e lago	on area. Check all that	
	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					
\boxtimes	None of the above					
Λ1	tachment: Click to enter text					

N/A
Temporary storage information
Provide the results for the pollutant screening of sludge lagoons. These results are in addition to pollutant results in <i>Section 7 of Technical Report 1.0.</i>
Nitrate Nitrogen, mg/kg: Click to enter text.
Total Kjeldahl Nitrogen, mg/kg: Click to enter text.
Total Nitrogen (=nitrate nitrogen + TKN), mg/kg: Click to enter text.
Phosphorus, mg/kg: Click to enter text.
Potassium, mg/kg: Click to enter text.
pH, standard units: <u>Click to enter text.</u>
Ammonia Nitrogen mg/kg: Click to enter text.
Arsenic: Click to enter text.
Cadmium: Click to enter text.
Chromium: Click to enter text.
Copper: Click to enter text.
Lead: Click to enter text.
Mercury: Click to enter text.
Molybdenum: Click to enter text.
Nickel: <u>Click to enter text.</u>
Selenium: <u>Click to enter text.</u>
Zinc: Click to enter text.
Total PCBs: <u>Click to enter text.</u>
Provide the following information:
Volume and frequency of sludge to the lagoon(s): Click to enter text.
Total dry tons stored in the lagoons(s) per 365-day period: Click to enter text.
Total dry tons stored in the lagoons(s) over the life of the unit: Click to enter text.

C

conductivity of 1x10⁻⁷ cm/sec?

\boxtimes	Yes	No
	1 (3	1110

Co	ncrete Liner
Site	development plan
	vide a detailed description of the methods used to deposit sludge in the lagoon(s):
the	e sludge in the lagoons is silt and other natural particles that were removed from the raw during water treatment process. Once the sludge settles to the bottom of the lagoon, it is pumped into large press before it is hauled to the land fill.
Atta	ich 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.
Gro	undwater monitoring
gro	roundwater monitoring currently conducted at this site, or are any wells available for indwater monitoring, or are groundwater monitoring data otherwise available for the lge lagoon(s)?
į	□ Yes □ No
type	coundwater monitoring data are available, provide a copy. Provide a profile of soil es encountered down to the groundwater table and the depth to the shallowest undwater as a separate attachment.
	Attachment: Click to enter text.

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

A.	Additional authorizations	
	Does the permittee have additional authorizations for this facility, such as reuse authorization, sludge permit, etc?	
	□ Yes ⊠ No	
	If yes , provide the TCEQ authorization number and description of the authorization:	
C	ck to enter text.	
В.	Permittee enforcement status	
	s the permittee currently under enforcement for this facility?	
	□ Yes ⊠ No	
	s 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 implementa schedule, and the current status:	tior
Cl	ck to enter text.	
Se	ction 13. RCRA/CERCLA Wastes (Instructions Page 55)	
	RCRA hazardous wastes Has the facility received in the past three years, does it currently receive, or will it receive. RCRA hazardous waste?	ive
	□ Yes ⊠ No	

B. Remediation activity wastewater

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

□ Yes ⊠ No

C. Details about wastes received

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

Attachment: Click to enter text.

Section 14. Laboratory Accreditation (Instructions Page 56)

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

- The laboratory is an in-house laboratory and is:
 - o periodically inspected by the TCEQ; or
 - o located in another state and is accredited or inspected by that state; or
 - o 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: Click to enter text.

Title: Click to enter text.

Signature:

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: <u>Combined Consumers SUD</u>
Distance and direction to the intake: 881' South East
Attach a USGS map that identifies the location of the intake.
Attachment: Click to enter text.
Section 2. Discharge into Tidally Affected Waters (Instructions Page 64)
Does the facility discharge into tidally affected waters?
□ Yes ⊠ No
If no , proceed to Section 3. If yes , complete the remainder of this section. If no, proceed to Section 3.
A. Receiving water outfall
Width of the receiving water at the outfall, in feet: Click to enter text.
B. Oyster waters
Are there oyster waters in the vicinity of the discharge?
□ Yes □ No
If yes, provide the distance and direction from outfall(s).
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).
N/A

Section 3. Classified Segments (Instructions Page 64) Is the discharge directly into (or within 300 feet of) a classified segment? Yes 🛛 No If yes, this Worksheet is complete. **If no**, complete Sections 4 and 5 of this Worksheet. **Description of Immediate Receiving Waters (Instructions** Section 4. Page 65) Name of the immediate receiving waters: Lake Tawakoni A. Receiving water type Identify the appropriate description of the receiving waters. Stream Freshwater Swamp or Marsh Lake or Pond X Surface area, in acres: 36,700 Average depth of the entire water body, in feet: 12 Average depth of water body within a 500-foot radius of discharge point, in feet: 12 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												
		e names of all perennial streams t tream of the discharge point.	hat joi	n the receiving water within three miles									
	Click t	o enter text.											
D.	Downs	stream 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.	Norma	l dry weather characteristics											
	Provid	e general observations of the wate	r body	during normal dry weather conditions.									
		ater Treatment Plant discharges to th 437.5', the historic low level of the la	Tawakoni. The normal water level of the 35.08' msl, recorded on Sept. 2018										
	Date a	nd time of observation: Click to en	iter tex	t									
		e water body influenced by storm											
		Yes □ No											
Se	ection	5. General Characteristi Page 66)	cs of	the Waterbody (Instructions									
A.	Upstre	am influences											
		mmediate receiving water upstrea nced by any of the following? Chec		ne discharge or proposed discharge site nat apply.									
		Oil field activities		Urban runoff									
		Upstream discharges		Agricultural runoff									
	П	Sentic 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	\boxtimes	Non-contact recreation						
		Fishing		Navigation						
		Domestic water supply		Industrial water supply						
		Park activities		Other(s), specify: Click to enter text.						
C.	Waterl	body aesthetics								
		one of the following that best rrounding area.	describes	the aesthetics of the receiving water and						
		Wilderness: outstanding natuclerity exceptional	ilderness: outstanding natural beauty; usually wooded or unpastured area; water arity exceptional							
		Natural Area: trees and/or na fields, pastures, dwellings);	_	ation; some development evident (from ty discolored						
		Common Setting: not offension turbid	ive; develo	ped but uncluttered; water may be colored						
		Offensive: stream does not e dumping areas; water discol		sthetics; cluttered; highly developed;						

TCEQ Use Only



TCEQ Core Data Form

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

SECTION I: General Information

1. Reason for	r Submissi	on (If other is checked	please describe	e in space pro	ovided.)						
☐ New Perr	mit, Registra	ation or Authorization ((Core Data Form	n should be su	ubmitted (with the prog	ram application.)				
	(Core Data	Form should be submit	Ited with the re	newal form)		Other					
2. Customer	Reference	Number (if issued)		Follow this lin							
CN 6 026904	122			Central Re		_	104983150				
SECTIO	N II:	Customer	Inform	<u>nation</u>							
4. General Cu	ustomer In	formation	Date for Cus	stomer li	nformation	Updates (mm/dd/	уууу)				
☐ New Custo	mer		pdate to Custor	mer Informati	ion	☐ Char	nge in Regulated Ent	ity Own	ership	1	
Change in L	egal Name	(Verifiable with the Tex	•			_					
The Custome	er Name su	ıbmitted here may b	be updated at	utomatically	v based c	on what is c	urrent and active	with th	ne Texas Secr	etary of State	
		oller of Public Accou		,						, ,	
6. Customer	Legal Nam	ne (If an individual, prir	nt last name firs	st: eg: Doe, Jo	ohn)		If new Customer,	enter pre	evious Custome	er below:	
Combined Con	sumer SUD										
7. TX SOS/CP	A Filing N	umber	8. TX State 1	Tax ID (11 dig	gits)		9. Federal Tax ID 10. DUNS Number (if			Number (if	
							(9 digits)			applicable)	
							72-1595079				
11. Type of C	ustomer:	Corporat	tion			□ Individ	Individual Partnershi		rship: \square Gene	eral 🔲 Limited	
		County Federal I		☐ Other			☐ Sole Proprietorship ☐ Other: SUD				
12. Number							13. Independer			rated?	
Ø 0-20 ☐ :			500 🗍 501 a	and higher				⊠ No			
14. Customer	r Role (Pro	posed or Actual) – as it	t relates to the	Regulated Ent	tity listed o	on this form.	Please check one of	the follo	wing		
⊠Owner □ Operator □ Owner & Operator □ Occupational Licensee □ Responsible Party □ VCP/BSA Applicant											
15. Mailing	PO Box 2	829									
Address:											
71441 0331	City	Quinlan		State	TX	ZIP	75474		ZIP + 4		
16. Country f	Mailing Inf	formation (if outside l	USA)		1	17. E-Mail Address (if applicable)					
drob					droberts@ccsud.com						

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18. Telephone Number	19. Extension or Code	20. Fax Number (if applicable)
(903) 356-3321		(903) 356-3322

SECTION III: Regulated Entity Information

21. General Regulated Entity Information (If 'New Regulated Entity" is selected, a new permit application is also required.)

New Regulated Entity Update to Regulated Entity Name Update to Regulated Entity Information										
The Regulated Entity Name submitted may be updated, in order to meet TCEQ Core Data Standards (removal of organizational endings such as Inc, LP, or LLC).										
22. Regulated Entity Nam	22. Regulated Entity Name (Enter name of the site where the regulated action is taking place.)									
Shawnee Shores Water Treatment Facility										
23. Street Address of the Regulated Entity:	10446 FM 7	751								
(No PO Boxes)	City	Quinlan	State	TX	ZIP	75474		ZIP + 4		
			State		ZIP	/54/4		ZIP T 4		
24. County Hunt County										
	If no Street Address is provided, fields 25-28 are required.									
25. Description to										
Physical Location:										
26. Nearest City						State		Nea	rest ZIP Code	
Quninlan						TX		7547	4	
Latitude/Longitude are r	-	-	-		Data Standa	rds. (Geoc	oding of the	e Physical .	Address may be	
used to supply coordinate			roviaea or to gain							
27. Latitude (N) In Decim	al: 	32.870833			ongitude (W	/) In Decin	mal:	-96.07305	55	
Degrees	Minutes		Seconds	Degre	ees	М	inutes		Seconds	
32		52	15	96			4	4 23		
29. Primary SIC Code	30.	Secondary SIC	Code	31. Frimary WAICS Code			32. Secon	Secondary NAICS Code		
(4 digits)	(4 d	igits)		(5 or 6 digi	its)		(5 or 6 digi	its)		
4941			- F							
33. What is the Primary E	Business of t	his entity? (Do	not repeat the SIC o	r NAICS desci	ription.)					
=										
34. Mailing										
Address:	614		P4	 	710			710 - 4		
	City		State		ZIP			ZIP + 4		
35. E-Mail Address:										
36. Telephone Number			37. Extension or	Code	38. Fa	ıx Numbe	r (if applicabl	e)		
(903) 356-3321					(903)	3 56 -3 322				

TCEQ-10400 (11/22)

	Dam Safety Districts		Edwards Aquifer		Emissions Inventory A	Air Industr	al Hazardous Waste
Municipal Solid Waste Review Air		New Source Review Air	□ ossF		Petroleum Storage Ta	nk PWS	
Skudge		Storm Water	Title V Alr		Thres	Used O	1
☐ Voluntary Clea	nup	₩astewater	☐ Wastewater Agricu	iture [Water Rights	Other:	
SECTION IV: Preparer Information 40. Name: Drew Roberts 41. Title: General Manager							
42. Telephone Nu		43. Ext./Code	44. Fax Number	45. E-Mai	Address		
(903) 356-3321			(903) 356-3322	droberts@ccsud.com			
ECTION	V: Au	thorized S	ignature				
6. By my signature b	nelow, i certify n behalf of the	r, to the best of my know e entity specified in Sec	wledge, that the information II, Field 6 and/or as re	on provided in quired for the	this form is true and cor updates to the ID numbe	nplete, and that I have ers identified in field 39	signature authority 3.
 By my signature t submit this form or 	n behalf of the	y, to the best of my know e entity specified in Sec d Consumers SUD	wledge, that the Information 11, Field 6 and/or as re	on provided in quired for the Job Title:	this form is true and cor updates to the ID number General Manager	nplete, and that I have ers identified in field 3:	signature authority 3.
6. By my signature b	n behalf of the	e entity specified in Sec	wledge, that the information II, Field 6 and/or as re	quired for the	updates to the ID number	ers identified in field 3:).

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

ATTACHMENT B

ADMINISTRATIVE REPORT – SECTION 8(F) – PLAIN LANGUAGE SUMMARY



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

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

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

Applicants should use this template to develop a plain language summary of your facility and application as required by Title 30, Texas Administrative Code (30 TAC), Chapter 39, Subchapter H. You may modify the template as necessary to accurately describe your facility as long as the summary includes the following information: (1) the function of the proposed plant or facility; (2) the expected output of the proposed plant or facility; (3) the expected pollutants that may be emitted or discharged by the proposed plant or facility; and (4) how you will control those pollutants, so that the proposed plant will not have an adverse impact on human health or the environment.

Fill in the highlighted areas below to describe your facility and application in plain language. Instructions and examples are provided below. Make any other edits necessary to improve readability or grammar and to comply with the rule requirements. After filling in the information for your facility delete these instructions.

If you are subject to the alternative language notice requirements in 30 TAC Section 39.426, you must provide a translated copy of the completed plain language summary in the appropriate alternative language as part of your application package. For your convenience, a Spanish template has been provided below.

ENGLISH TEMPLATE FOR TPDES or TLAP NEW/RENEWAL/AMENDMENT APPLICATIONS Enter 'INDUSTRIAL' or 'DOMESTIC' here WASTEWATER/STORMWATER

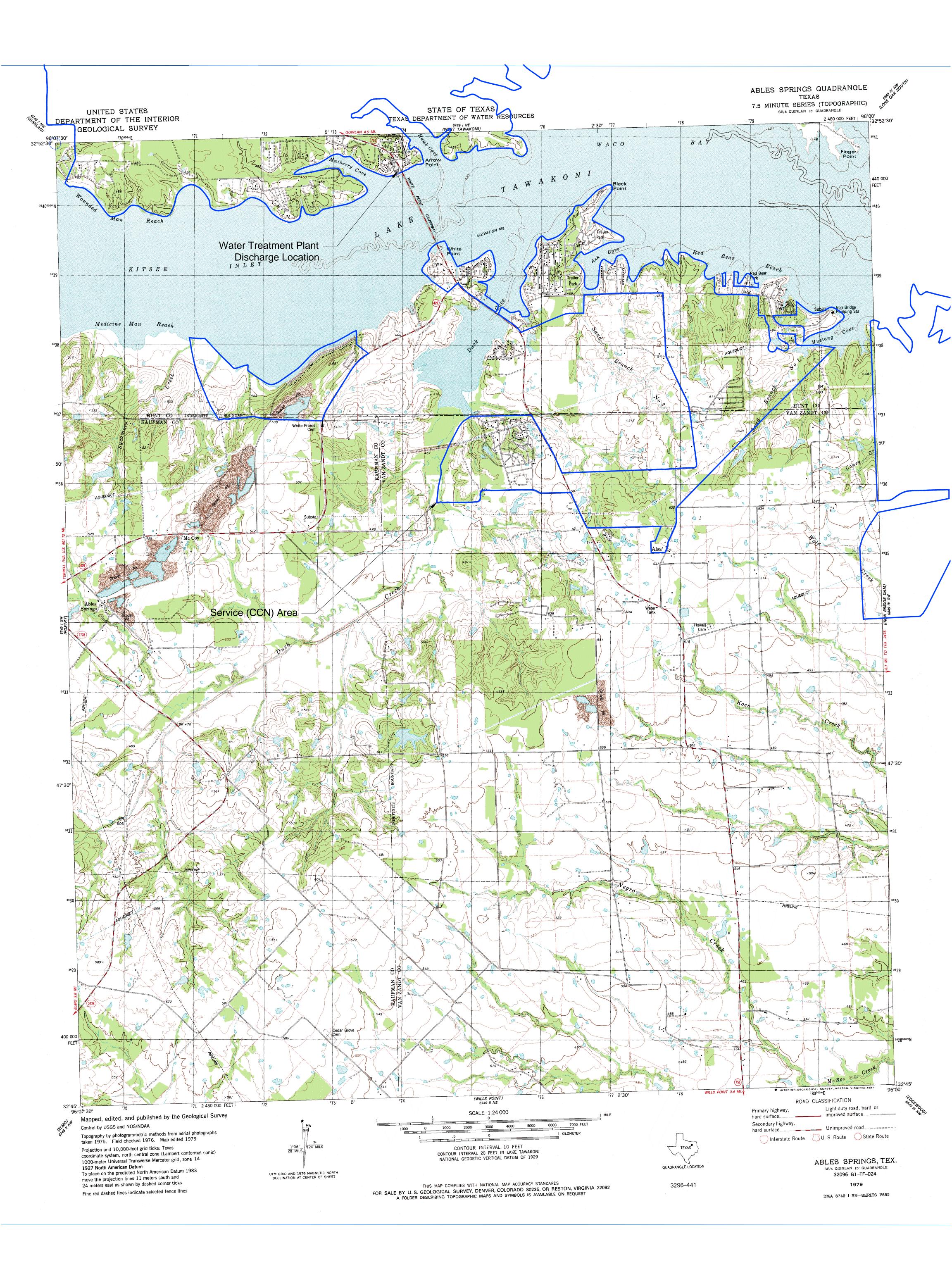
The following summary is provided for this pending water quality permit application being reviewed by the Texas Commission on Environmental Quality as required by 30 TAC Chapter 39. The information provided in this summary may change during the technical review of the application and is not a federal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

Combined Consumers Special Utility District (CN602690422) operates Shawnee Shores Water Treatment Facility (RN104983150), a Wastewater Treatment Facility. The facility is located at 10446 Farm-to-Market Road, in Quinlan, Texas, Hunt County, Texas 75474. The wastewater treatment plant is authorized to discharge treated wastewater at a volume not to exceed a daily average flow of 25,000 gallons per day.

Discharges from the facility are expected to contain total suspended solids (TSS), ammonia nitrogen (NH_3 -N), and chlorine residual (HOCI). The water at Combined Consumers SUD is treated by means of sedimentation, filtration, and disinfection to remove harmful contaminates .

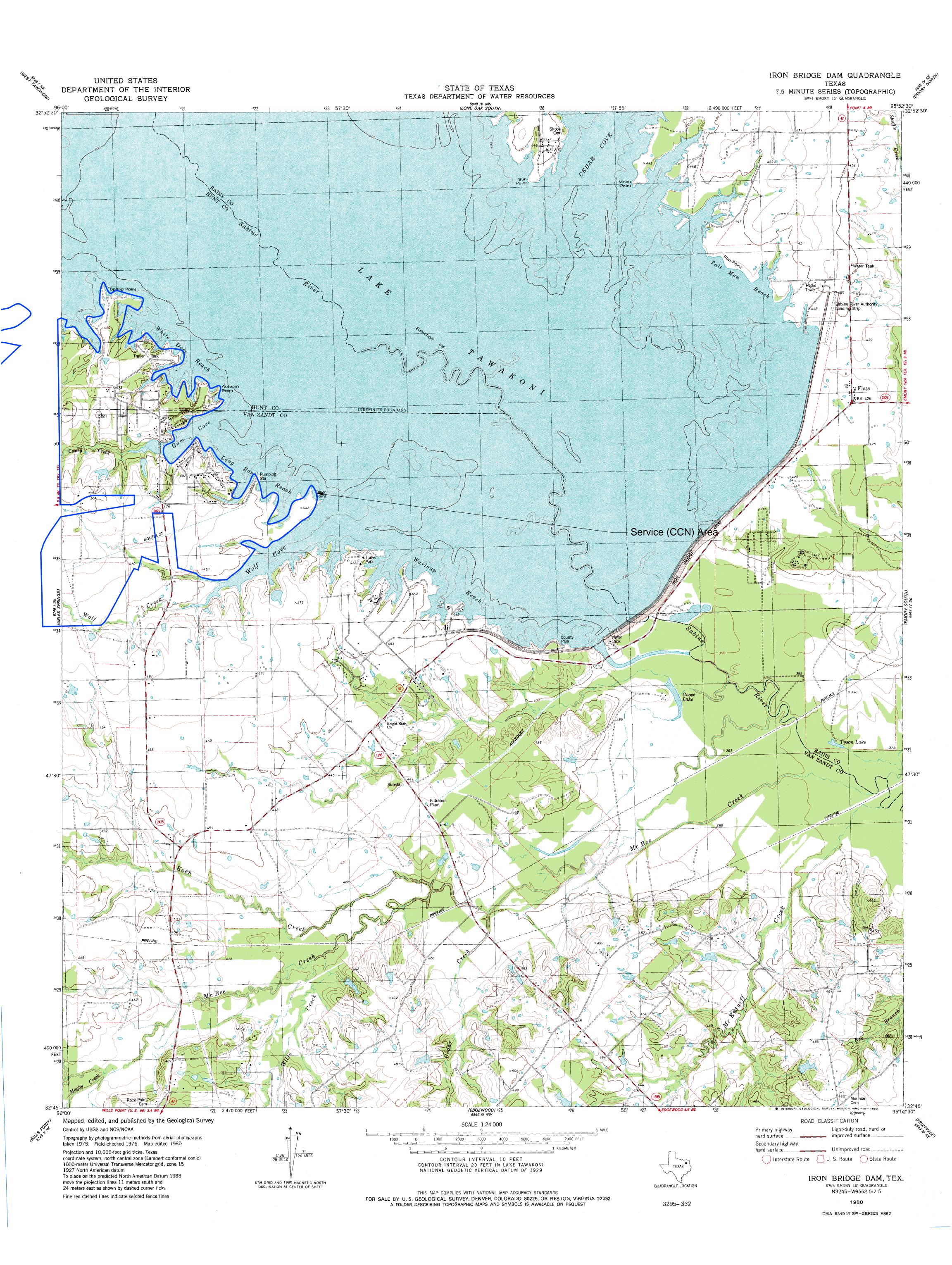
ATTACHMENT C

ADMINISTRATIVE REPORT – SECTION 13 – USGS TOPOGRAPHIC MAP



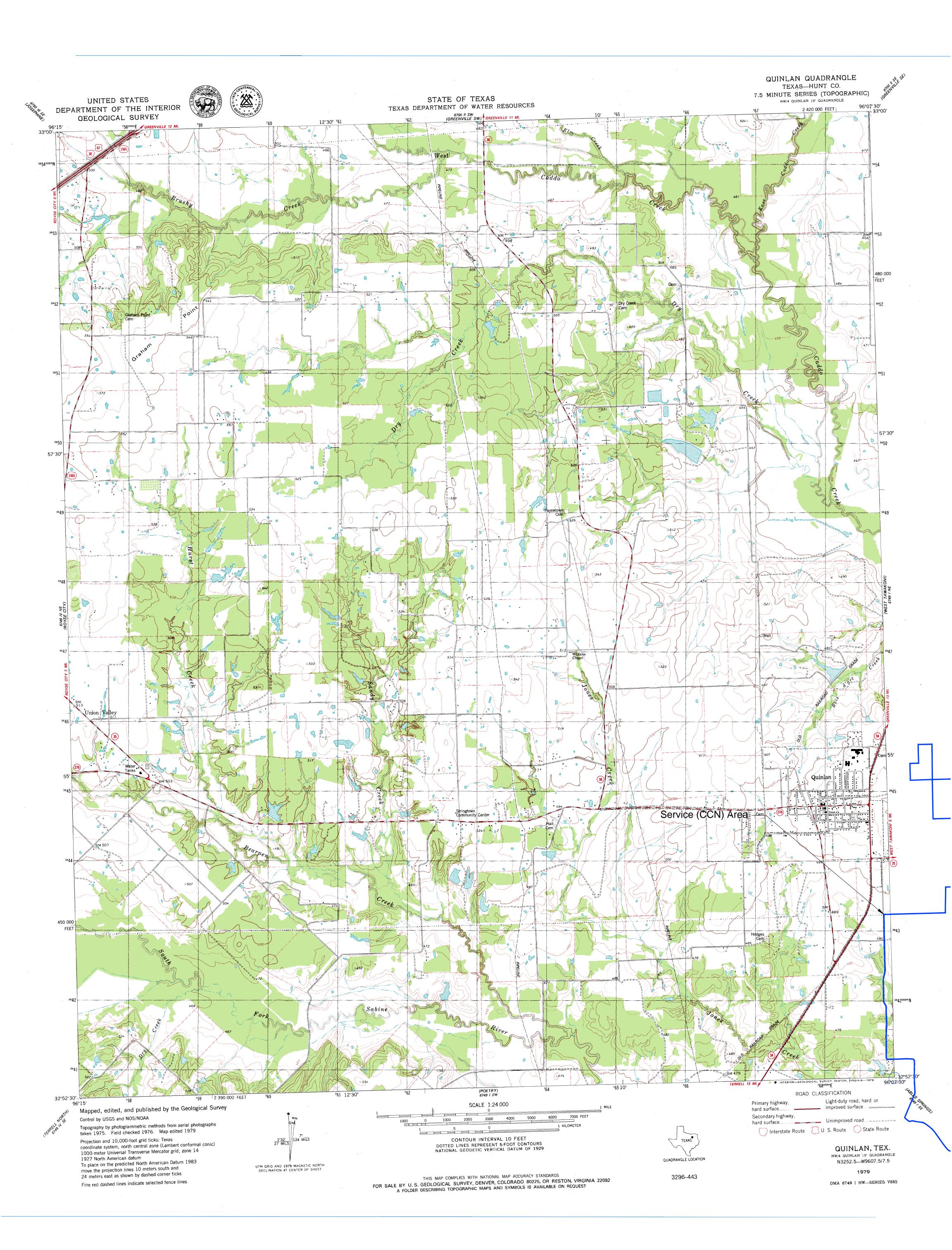






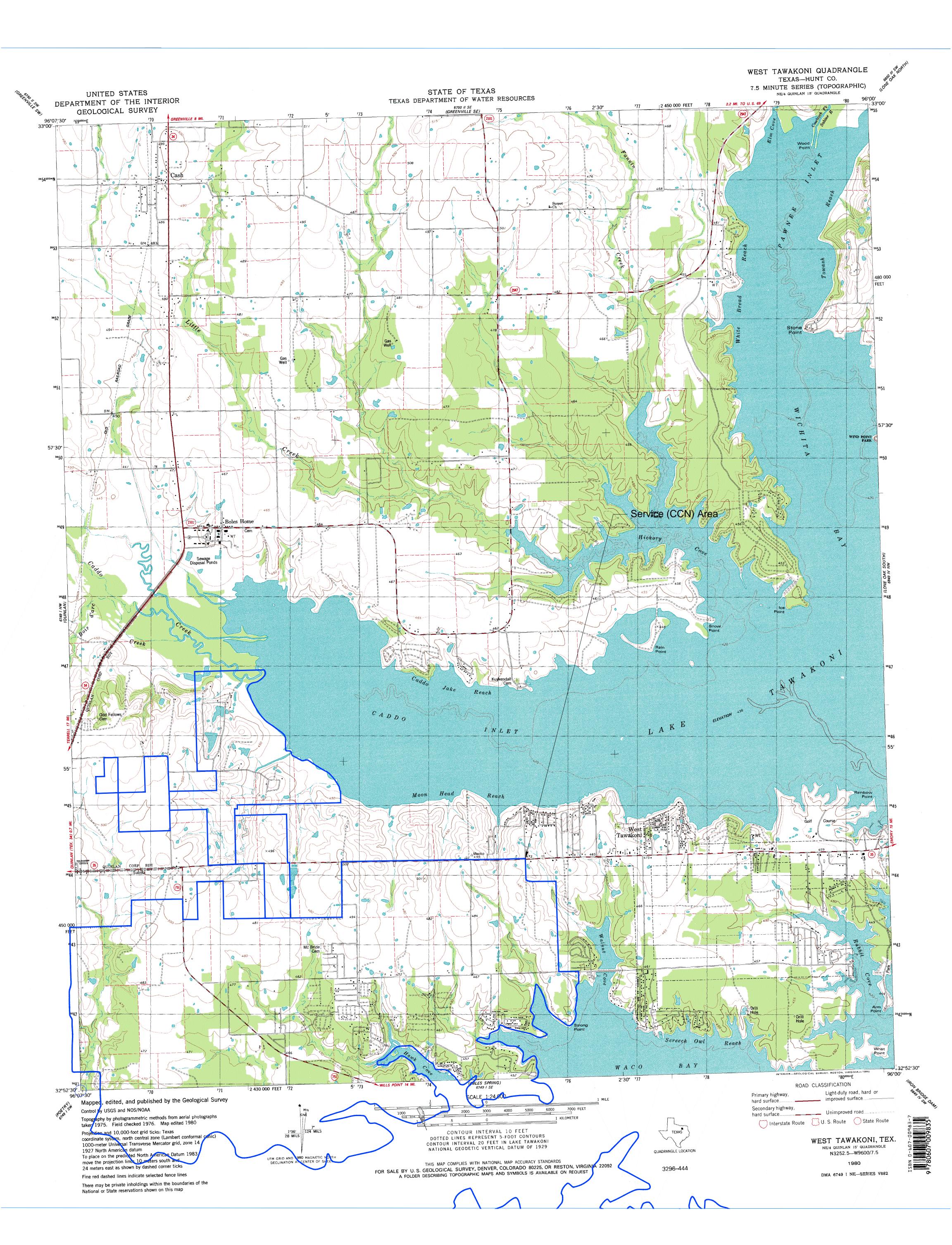






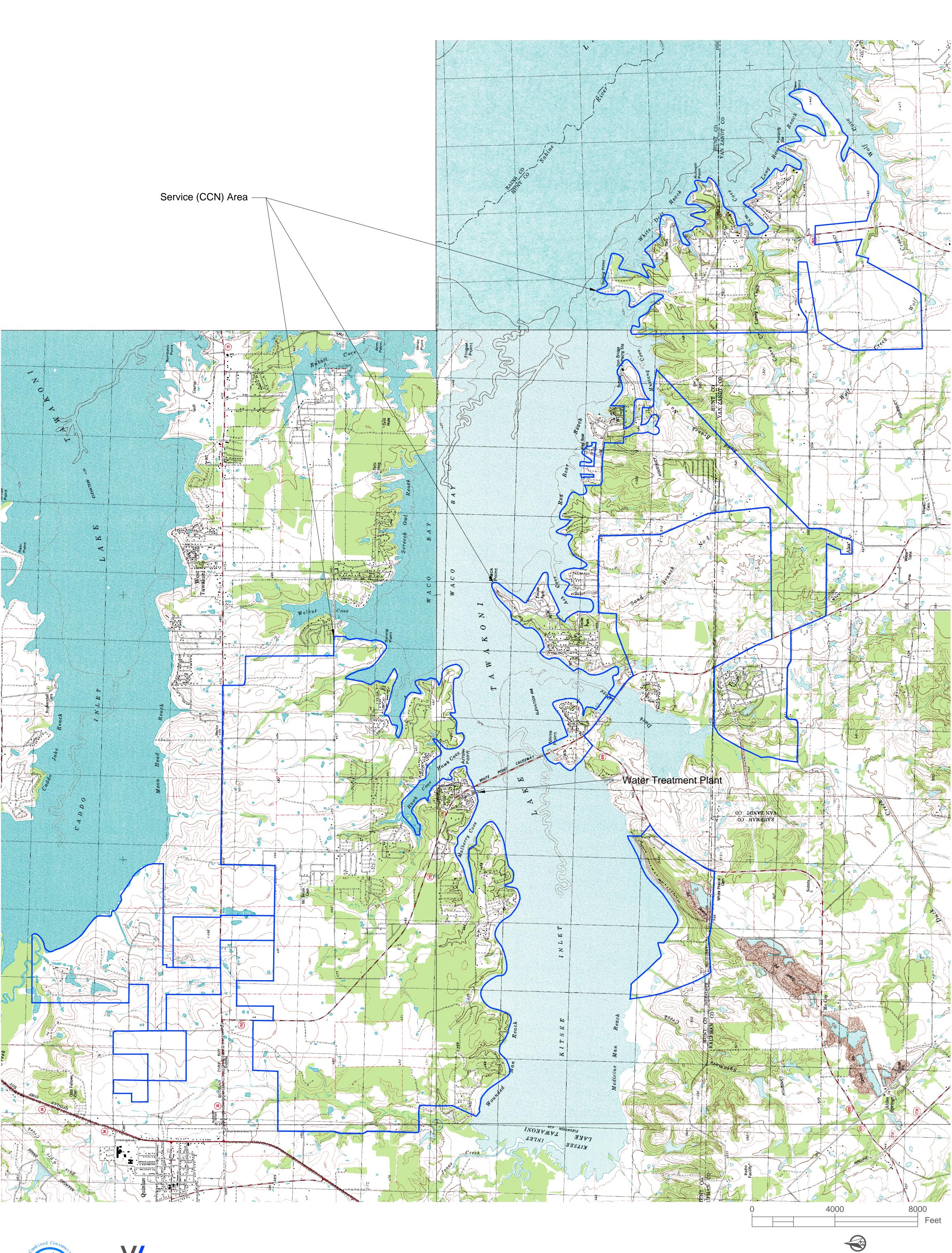














ATTACHMENT D

ADMINISTRATIVE REPORT – SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

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:			
Admin Complete Date:			
Agency Receiving SPIF:			
Texas Historical Commission	u U.S	. Fish and Wildlife	
Texas Parks and Wildlife Dep	oartment U.S	. Army Corps of Engineer	rs
This form applies to TPDES permit a	applications only. (Ins	tructions, Page 53)	
Complete this form as a separate doc our agreement with EPA. If any of the s needed, we will contact you to prove each item completely.	items are not comple	tely addressed or further	information
Oo not refer to your response to any attachment for this form separately fupplication will not be declared admit completed in its entirety including all may be directed to the Water Quality email at WQ-ARPTeam@tceq.texas.go	rom the Administrativ nistratively complete v l attachments. Question Division's Application	we Report of the application without this SPIF form be ons or comments concern Review and Processing T	on. The ing ing this form
The following applies to all application	ons:		
. Permittee: <u>Combined Consumers S</u>	SUD		
Permit No. WQ00 <u>0014685001</u>	EPA II) No. TX <u>0128538</u>	
Address of the project (or a location and county):	on description that in	cludes street/highway, ci	ty/vicinity,
10446 FM 75, Quinlan, Tx 75474	Hunt County		

	de the name, address, phone and fax number of ver specific questions about the property.	an individual that can be contacted to							
Prefix	x (Mr., Ms., Miss): <u>Mr.</u>								
First a	and Last Name: <u>Roberts, Drew</u>								
Crede	ential (P.E, P.G., Ph.D., etc.):								
Title:	General Manager								
Mailin	ng Address: <u>PO Box 2829</u>								
City, S	State, Zip Code: Quinlan, Tx 75474								
Phone	Phone No.: 903-356-3321 Ext.: Fax No.:								
E-mail	il Address: <u>drobertsccsud.com</u>								
List th	he county in which the facility is located: Hunt Co	ounty							
	e property is publicly owned and the owner is difference is the list the owner of the property.	fferent than the permittee/applicant,							
N/A									
Duovid	ide a description of the offwart discharge route	The discharge route must follow the flow							
of efflu	ide a description of the effluent discharge route. The luent from the point of discharge to the nearest manner.	najor watercourse (from the point of							
	arge to a classified segment as defined in 30 TAC lassified segment number.	Chapter 307). If known, please identify							
	effluent is discharged directly to Lake Tawakon	i in Segment 0507 of the Sabine River							
Basin		m segment soor of the saline raver							
plotte route	e provide a separate 7.5-minute USGS quadrangled and a general location map showing the projection the point of discharge for a distance of or a distance or a dis	ect area. Please highlight the discharge ne mile downstream. (This map is							
Provid	de original photographs of any structures 50 year	ars or older on the property.							
Does y	your project involve any of the following? Check	k all that apply.							
	Proposed access roads, utility lines, construct	cion easements							
	Visual effects that could damage or detract fr	om a historic property's integrity							
	Vibration effects during construction or as a	result of project design							
	Additional phases of development that are pl	anned for the future							
	Sealing caves, fractures, sinkholes, other kars	t features							
	, , , , , , , , , , , , , , , , , , , ,								

3.

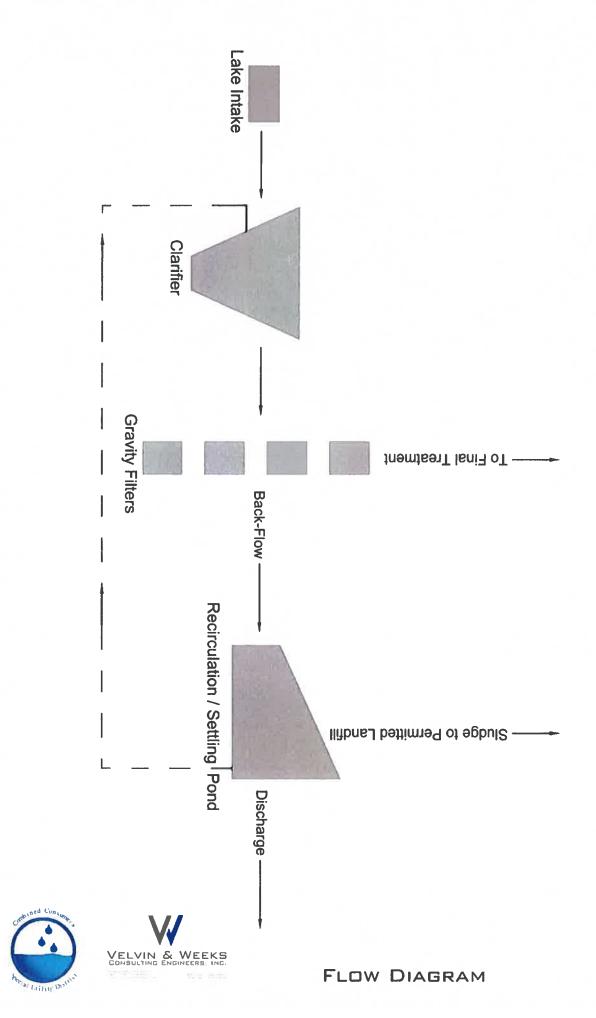
4.

5.

		Disturban	ce of vegetation	or wetlands				
			struction impact karst features):	t (surface acr	es to be imp	acted, depth	of excavation,	sealing
2.	Descri	be existing (listurbances, ve	getation, and	l land use:			
THE	E FOLL	OWING ITEN	AS APPLY ONLY	TO APPLICA	TIONS FOR N	IEW TPDES PI	ERMITS AND M	IAIOR
AM]	ENDMI	ENTS TO TP	DES PERMITS lates of all build					. Jok
				ango una otr	actures our ta	ie property.		
4.]	Provid	e a brief his	tory of the prop	erty, and nar	ne of the arc	hitect/builde	r, if known.	

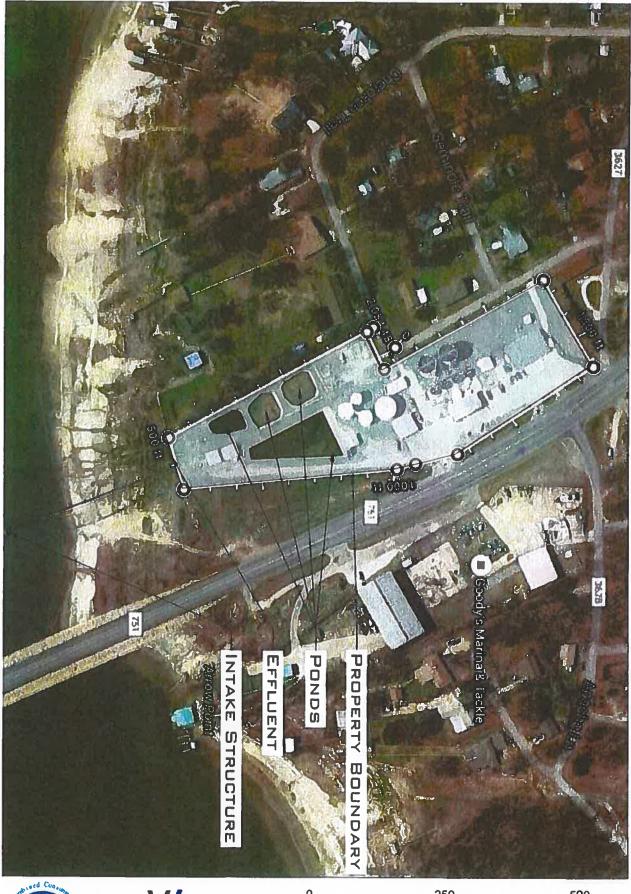
ATTACHMENT E

TECHNICAL REPORT – SECTION(C) – PROCESS FLOW DIAGRAM



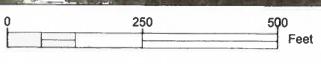
ATTACHMENT F

TECHNICAL REPORT - SECTION 3 - SITE INFORMATION AND DRAWING













Rainee Trevino

From: Tracy Kyser <tracyk@velvin-weeks.com>

Sent: Thursday, June 12, 2025 1:50 PM

To: Rainee Trevino

Cc: Erwin Madrid; Drew Roberts

Subject: Combined Consumers SUD - Permit # WQ0014685001

Attachments: cover letter for deficiencies docx.pdf

Rainee,

Please see attached permit application to meet the deficiencies. I apologize for the delay for I thought I had sent it. Please let me know if you need anything else.



Combined Consumers SUD - Permit Appl. WQ0014685001.pdf

Thank you,

Tracy Kyser

930 E. Corsicana St. Athens, Tx 75751 903-675-3903

Velvin & Weeks Consulting Engineers, Inc.

tracyk@velvin-weeks.com

THE COMMISSION OF THE PROPERTY OF THE PROPERTY

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the application.

APPLICANT NAME: Click to enter text.

PERMIT NUMBER (If new, leave blank): WQ00Click to enter text.

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

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

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION **ADMINISTRATIVE REPORT 1.0**

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

Section 1. Application Fees (Instructions Page 26)

Indicate the amount submitted for the application fee (check only one).									
Flow	New/Major Amendment	Renewal							
<0.05 MGD	\$350.00 □	\$315.00 ☒							
≥0.05 but <0.10 MGD	\$550.00 🗆	\$515.00 □							
≥0.10 but <0.25 MGD	\$850.00 □	\$815.00 □							
≥0.25 but <0.50 MGD	\$1,250.00 □	\$1,215.00 □							
≥0.50 but <1.0 MGD	\$1,650.00 □	\$1,615.00 □							
≥1.0 MGD	\$2,050.00 □	\$2,015.00							
Minor Amendment (for any flow) \$150.00 □ Payment Information:									
Mailed C	heck/Money Order Number: <u>51178</u>								
C	Check/Money Order Amount: 315.00								
N	ame Printed on Check: <u>Velvin & Weeks Cor</u>	nsulting Engineers, Inc.							
EPAY Voucher Number: Click to enter text.									
Copy of Payment Voucher enclosed? Yes □									
Section 2. Type	e of Application (Instructions P	age 26)							
a. Check the box nex	t to the appropriate authorization type.								

Check the box next to the appropriate authorization type.											
◁	Publicly Owned Domestic Wastewater										
	Privately-Owned Domestic Wastewater										
	Conventional Water Treatment										
Check the box next to the appropriate facility status.											
□ Inactive											
]] hed										

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. **SEE ATTACHENT A**

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: Roberts, Drew

Title: General Manager

Credential: Click to enter text.

Organization Name: Combined Consumers SUD

Mailing Address: PO Box 2829

City, State, Zip Code: Quinlan, Tx 75474

Phone No.: 903.-356-3321

E-mail Address: droberts@ccsud.com

Check one or both:

□ Administrative Contact

□ Technical Contact

B. Prefix: Mr.

Last Name, First Name: Hendrickson, Tyler

Title: President

Credential: P.E.

Mailing Address: 930 E. Corsicana St.

City, State, Zip Code: Athens, Tx 75751

Phone No.: 903-675-3903

E-mail Address: then@velvin-weeks.com

Check one or both:

 □ Technical Contact

Section 5. Permit Contact Information (Instructions Page 27)

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

A. Prefix: Ms.

Last Name, First Name: Kyser, Tracy

Title: Permit Coordinator

Credential: Click to enter text.

Organization Name: Velvin & Weeks Consulting Engineers, Inc.

Organization Name: Velvin & Weeks Consulting Engineers, Inc.

Mailing Address: 930 E. Corsicana St.

City, State, Zip Code: Athens, Tx 75751

Phone No.: 903-675-3903

E-mail Address: tracyk@velvin-weeks.com

B. Prefix: Click to enter text. Last Name, First Name: Click to enter text.

Title: Click to enter text. Credential: Click to enter text.

Organization Name: Click to enter text.

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

Phone No.: Click to enter text. E-mail Address: Click to enter text.

Section 6. Billing Contact Information (Instructions Page 27)

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

Prefix: Mr. Last Name, First Name: Roberts, Drew

Title: General Manager Credential: Click to enter text.

Organization Name: Combined Consumers SUD

Mailing Address: PO Box 2829 City, State, Zip Code: Quinlan, Tx 75474

Phone No.: 903-356-3321 E-mail Address: droberts@ccsud.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: Roberts, Drew

Title: <u>General Manager</u> Credential: Click to enter text.

Organization Name: <u>Combined Consumers</u>

Mailing Address: PO Box 2829 City, State, Zip Code: Quinlan, Tx 75474

Phone No.: <u>903-356-3321</u> E-mail Address: <u>droberts@ccsud.com</u>

Section 8. Public Notice Information (Instructions Page 27)

A. Individual Publishing the Notices

Prefix: Ms. Last Name, First Name: Kyser, Tracy

Title: <u>Permit Coordinator</u> Credential: Click to enter text.

Organization Name: <u>Velvin & Weeks Consulting Engineers, Inc.</u>

Mailing Address: <u>930 E. Corsicana St.</u> City, State, Zip Code: <u>Athens, TX</u>

Phone No.: <u>903-675-3903</u> E-mail Address: <u>tracyk@velvin-weeks.com</u>

	Рa	ckage							
	Inc	dicate b	y a check n	nark th	e preferred method for rec	eiving the first notice and instructions			
	\boxtimes	E-ma	il Address						
		Fax							
		Regu	lar Mail						
C.	Co	ntact p	ermit to be	listed	in the Notices				
	Pre	efix: <u>Mr</u>	<u>.</u>		Last Name, First Nan	ie: <u>Roberts, Drew</u>			
	Tit	tle: <u>Gen</u>	eral Managei	<u>c</u>	Credential: Click to e	nter text.			
	Or	ganizat	ion Name: <u>(</u>	Combin	ed Consumers SUD				
	Ma	ailing A	ddress: <u>PO l</u>	Box 282	g City, State,	Zip Code: Quinlan, Tx 75474			
	Ph	one No	.: <u>903-356-3</u>	<u>321</u>	E-mail Address: drol	oerts@ccsud.com			
D.	Pu	blic Vi	ewing Infor	mation	L				
	•	•	lity or outfa ust be provi		ated in more than one cour	nty, a public viewing place for each			
	Pu	blic bui	lding name	: <u>Hunt</u>	County Courthouse				
	Lo	cation v	within the b	uilding	: <u>2nd Floor</u>				
	Ph	ysical A	Address of E	Buildin	: 2507 Lee Street				
	Cit	y: <u>Gree</u>	nville, Tx 754	<u>101</u>	County: Hunt Cou	nty			
	Co	ntact (I	ast Name, l	First Na	me): <u>Landrum, Becky</u>				
	Ph	one No.	.: <u>903-408-4</u>	100 Ex	.: Click to enter text.				
E.	Bil	ingual	Notice Req	uireme	nts				
	This information is required for new, major amendment, minor amendment or minor modification, and renewal applications.								
	be	needed		instru		ne if alternative language notices will ternative language notices will be in			
	ob					elementary and middle schools and an alternative language notices are			
	1.				rogram required by the Te to the facility or proposed	exas Education Code at the elementary l facility?			
			Yes	\boxtimes	No				
		If no , p		of an a	ternative language notice	is not required; skip to Section 9			
	2.				end either the elementary gram at that school?	school or the middle school enrolled ir			
			Yes		No				

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

	3.	. Do the students at these schools attend a bilingual education program at another location?									
			Yes		No						
	4.	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.		inswer is ye : ed. Which lai								tive language are enter text.
F.	Summary of Application in Plain Language Template										
			the F. Sumn n as the plai) Form 20972), ment.
	At	tachme	nt: <u>See Attacl</u>	<u>ımen</u>	<u>t B</u>						
G.	Pu	blic Inv	olvement P	lan F	orm						
			the Public In it or major								plication for a t.
	At	tachme	nt: <u>N/A</u>								
Se	cti	on 9.	Regulat Page 29		Entity a	nd Pe	ermitted	Site	Inform 	ation	(Instructions
A.			is currently N <u>104983150</u>	-	ated by T	CEQ, p	rovide the	Regula	ited Entit	y Num	ber (RN) issued to
			TCEQ's Cencer				<u>//www15.te</u>	ceq.tex	as.gov/ci	rpub/	to determine if
B.	Na	me of p	roject or site	e (the	name kn	own by	the comm	nunity	where loo	cated):	
	Sha	awnee Sl	nore Treatme	nt Pla	<u>nt</u>						
C.	Ow	mer of t	treatment fa	cility	: Combine	d Consu	mers SUD				
	Ow	mership	of Facility:	\boxtimes	Public		Private		Both		Federal
D.	Ow	ner of l	and where t	reatn	nent facili	ty is or	will be:				
	Pre	efix: Clic	ck to enter te	ext.	Las	t Name	e, First Nan	ne: Clio	ck to ente	er text.	
	Title: Click to enter text. Credential: Click to enter text.										
	Organization Name: Combined Consumers SUD										
	Mailing Address: PO Box 2829 City, State, Zip Code: Quinlan, Tx 75474										
	Pho	one No.:	903-356-33	21	E-1	nail Ac	ldress: <u>dro</u> l	berts@	ccsud.com	Ī	
	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.										

	If yes , indicate by a check mark if:
	☐ Authorization granted ☐ Authorization pending
	For new and amendment applications, provide copies of letters that show proof of contact and the approval letter upon receipt.
	Attachment: Click to enter text.
D.	For all applications involving an average daily discharge of 5 MGD or more, provide the names of all counties located within 100 statute miles downstream of the point(s) of discharge: Click to enter text.
Se	ection 11. TLAP Disposal Information (Instructions Page 32)
Δ	For TLAPs, is the location of the effluent disposal site in the existing permit accurate?
7 11	☐ Yes ☐ No
	If no, or a new or amendment permit application , provide an accurate description of the disposal site location:
	Click to enter text.
В.	City nearest the disposal site: Click to enter text.
	County in which the disposal site is located: Click to enter text.
	For TLAPs , describe the routing of effluent from the treatment facility to the disposal site:
	Click to enter text.
E.	For TLAPs , please identify the nearest watercourse to the disposal site to which rainfall runoff might flow if not contained: Click to enter text.
	ction 12. Miscellaneous Information (Instructions Page 32)
A.	Is the facility located on or does the treated effluent cross American Indian Land?
	□ Yes ⊠ No
В.	If the existing permit contains an onsite sludge disposal authorization, is the location of the sewage sludge disposal site in the existing permit accurate?
	□ Yes □ No ⊠ Not Applicable
	If No, or if a new onsite sludge disposal authorization is being requested in this permit application, provide an accurate location description of the sewage sludge disposal site.
	Click to enter text.

C.	, .		nerly employed by the TCEQ represent your compais application?	any and get paid for
	□ Yes	\boxtimes	No	
			on formerly employed by the TCEQ who represent regarding the application: Click to enter text.	ed your company and
D.	Do you owe	any fees	s to the TCEQ?	
	□ Yes	\boxtimes	No	
	If yes , provi	de the f	ollowing information:	
	Account	number	: Click to enter text.	
	Amount	past due	e: Click to enter text.	
E.	Do you owe	any pen	alties to the TCEQ?	
	□ Yes		No	
	If yes , pleas	e provid	e the following information:	
	Enforcen	ent ord	er number: Click to enter text.	
	Amount	past due	e: Click to enter text.	
1				
Se	ection 13.	Attacl	nments (Instructions Page 33)	
			nments (Instructions Page 33) ents are included with the Administrative Report.	Check all that apply:
	dicate which a	nttachme ment or		eatment facility is
Inc	licate which a Lease agree located or	nttachme ment or the efflu	ents are included with the Administrative Report. deed recorded easement, if the land where the tr	eatment facility is or co-applicant.
Ind	dicate which a Lease agree located or Original fu Appli Treat Label Highl Onsite Refflue New a	ment or the effluction the effluction the effluction cant's pro- ment faction and point de sewage ont dispond and future eradius es down	ents are included with the Administrative Report. deed recorded easement, if the land where the trace the disposal site are not owned by the applicant of	eatment facility is or co-applicant. cion:
Ind	dicate which a Lease agree located or Original fu Appli Treate Labele Highl Onsite Ffflue New a 1 mile All po	ment or the effluction of the	ents are included with the Administrative Report. deed recorded easement, if the land where the trainent disposal site are not owned by the applicant of SGS Topographic Map with the following information of the condition of the discharge for each discharge point (TPDES only ischarge route for each discharge point (TPDES only ischarge disposal site (if applicable) osal site boundaries (TLAP only) re construction (if applicable) information	eatment facility is or co-applicant. cion:
Inc	dicate which a Lease agree located or Original fu Appli Treate Labele Highl Onsite Rew a 1 mile All po	ment or the effluction of the	ents are included with the Administrative Report. I deed recorded easement, if the land where the trainent disposal site are not owned by the applicant of SGS Topographic Map with the following information of discharge for each discharge point (TPDES only ischarge route for each discharge point (TPDES only is sludge disposal site (if applicable) osal site boundaries (TLAP only) re construction (if applicable) information stream information (TPDES only)	eatment facility is or co-applicant. cion:

Section 14. Signature Page (Instructions Page 34)

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

Permit Number: <u>WQ00014685001</u>
Applicant: <u>Combined Consumers SUD</u>

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): Cl	ick to enter text.	
Signatory title: Click to enter text.		
Signature:	Da	te:
(Use blue ink)		
Subscribed and Sworn to before me b	y the said	
on thisda		
My commission expires on the	day of	, 20
N		(OF A.I.)
Notary Public		[SEAL]
County, Texas		

DOMESTIC WASTEWATER PERMIT APPLICATION ADMINISTRATIVE REPORT 1.0

The following information is required for new and amendment applications.

Section 1. Affected Landowner Information (Instructions Page 36)

A.		cate by a check mark that the landowners map or drawing, with scale, includes the owing information, as applicable:
		The applicant's property boundaries
		The facility site boundaries within the applicant's property boundaries
		The distance the buffer zone falls into adjacent properties and the property boundaries of the landowners located within the buffer zone
		The property boundaries of all landowners surrounding the applicant's property (Note: if the application is a major amendment for a lignite mine, the map must include the property boundaries of all landowners adjacent to the new facility (ponds).)
		The point(s) of discharge and highlighted discharge route(s) clearly shown for one mile downstream
		The property boundaries of the landowners located on both sides of the discharge route for one full stream mile downstream of the point of discharge
		The property boundaries of the landowners along the watercourse for a one-half mile radius from the point of discharge if the point of discharge is into a lake, bay, estuary, or affected by tides
		The boundaries of the effluent disposal site (for example, irrigation area or subsurface drainfield site) and all evaporation/holding ponds within the applicant's property
		The property boundaries of all landowners surrounding the effluent disposal site
		The boundaries of the sludge land application site (for land application of sewage sludge for beneficial use) and the property boundaries of landowners surrounding the applicant's property boundaries where the sewage sludge land application site is located
		The property boundaries of landowners within one-half mile in all directions from the applicant's property boundaries where the sewage sludge disposal site (for example, sludge surface disposal site or sludge monofill) is located
В.		Indicate by a check mark that a separate list with the landowners' names and mailing resses cross-referenced to the landowner's map has been provided.
C.		Indicate by a check mark that the landowners list has also been provided as mailing ls in electronic format (Avery 5160).
D.	Prov	vide the source of the landowners' names and mailing addresses: Click to enter text.
E.		equired by $Texas\ Water\ Code\ \S\ 5.115$, is any permanent school fund land affected by application?
		□ Yes □ No

	If ye land	s, provide the location and foreseeable impacts and effects this application has on the (s):
		k to enter text.
Se	ectio	n 2. Original Photographs (Instructions Page 38)
		original ground level photographs. Indicate with checkmarks that the following tion is provided.
		At least one original photograph of the new or expanded treatment unit location
		At least two photographs of the existing/proposed point of discharge and as much area downstream (photo 1) and upstream (photo 2) as can be captured. If the discharge is to an open water body (e.g., lake, bay), the point of discharge should be in the right or left edge of each photograph showing the open water and with as much area on each respective side of the discharge as can be captured.
		At least one photograph of the existing/proposed effluent disposal site
		A plot plan or map showing the location and direction of each photograph
Se	ectio	n 3. Buffer Zone Map (Instructions Page 38)
	Buffe infor	er zone map. Provide a buffer zone map on 8.5 x 11-inch paper with all of the following mation. The applicant's property line and the buffer zone line may be distinguished by g dashes or symbols and appropriate labels.
	•	The applicant's property boundary; The required buffer zone; and Each treatment unit; and The distance from each treatment unit to the property boundaries.
В.		er zone compliance method. Indicate how the buffer zone requirements will be met. k all that apply.
		Ownership
		Restrictive easement
		Nuisance odor control
		Variance
C.		itable site characteristics. Does the facility comply with the requirements regarding itable site characteristic found in 30 TAC § 309.13(a) through (d)?
		Yes □ No

DOMESTIC WASTEWATER PERMIT APPLICATION SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

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

Attachment: See Attachment D

WATER QUALITY PERMIT

PAYMENT SUBMITTAL FORM

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

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

Mail this form and the check or money order to:

BY REGULAR U.S. MAIL

BY OVERNIGHT/EXPRESS MAIL

Texas Commission on Environmental Quality Texas Commission on Environmental Quality

Financial Administration Division Financial Administration Division

Cashier's Office, MC-214
P.O. Box 13088
Cashier's Office, MC-214
12100 Park 35 Circle

Austin, Texas 78711-3088 Austin, Texas 78753

Fee Code: WQP Waste Permit No: WQ00014685001

1. Check or Money Order Number: 51178

2. Check or Money Order Amount: \$315.00

3. Date of Check or Money Order: 3/28/25

4. Name on Check or Money Order: Velvin & Weeks Consulting Engineers, Inc.

5. APPLICATION INFORMATION

Name of Project or Site: Combined Consumers SUD

Physical Address of Project or Site: 10446 FM 751, Quinlan, Tx 75474

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

Staple Check or Money Order in This Space

ATTACHMENT 1

INDIVIDUAL INFORMATION

Section 1. Individual Information (Instructions Page 41)

Complete this attachment if the facility applicant or co-applicant is an individual. Make additional copies of this attachment if both are individuals.

Prefix (Mr., Ms., Miss): Click to enter text.

Full legal name (Last Name, First Name, Middle Initial): Click to enter text.

Driver's License or State Identification Number: Click to enter text.

Date of Birth: Click to enter text.

Mailing Address: Click to enter text.

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

Phone Number: Click to enter text. Fax Number: Click to enter text.

E-mail Address: Click to enter text.

CN: Click to enter text.

For Commission Use Only:

Customer Number:

Regulated Entity Number:

Permit Number:

DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST OF COMMON DEFICIENCIES

Below is a list of common deficiencies found during the administrative review of domestic wastewater permit applications. To ensure the timely processing of this application, please review the items below and indicate by checking Yes that each item is complete and in accordance applicable rules at 30 TAC Chapters 21, 281, and 305. If an item is not required this application, indicate by checking N/A where appropriate. Please do not submit the application until the items below have been addressed.

Core Data Form (TCEQ Form No. 10400) (Required for all application types. Must be completed in its entirety and signed. Note: Form may be signed by applicant representative.)						
Correct and Current Industrial Wastewater Permit Application For (TCEQ Form Nos. 10053 and 10054. Version dated 6/25/2018 or la				Yes		
Water Quality Permit Payment Submittal Form (Page 19) (Original payment sent to TCEQ Revenue Section. See instructions for	or ma	iling ad	□ ldres:	Yes s.)		
7.5 Minute USGS Quadrangle Topographic Map Attached (Full-size map if seeking "New" permit. 8 ½ x 11 acceptable for Renewals and Amendments)				Yes		
Current/Non-Expired, Executed Lease Agreement or Easement		N/A		Yes		
Landowners Map (See instructions for landowner requirements)		N/A		Yes		
 Things to Know: All the items shown on the map must be labeled. The applicant's complete property boundaries must be a boundaries of contiguous property owned by the applicate. The applicant cannot be its own adjacent landowner. You landowners immediately adjacent to their property, regardered from the actual facility. If the applicant's property is adjacent to a road, creek, on on the opposite side must be identified. Although the prapplicant's property boundary, they are considered pote If the adjacent road is a divided highway as identified or map, the applicant does not have to identify the landown the highway. 	nt. I mus rdless r strea opert ntially	at identics of how am, the ies are: affectors	ify th v far land not a ed la pogr	e they are owners djacent to ndowners. aphic		
Landowners Labels and Cross Reference List (See instructions for landowner requirements)		N/A		Yes		
Electronic Application Submittal (See application submittal requirements on page 23 of the instruction	ns.)			Yes		
Original signature per 30 TAC § 305.44 - Blue Ink Preferred (If signature page is not signed by an elected official or principle exc a copy of signature authority/delegation letter must be attached)	ecutiv	e office	r,	Yes		
Summary of Application (in Plain Language)				Yes		

Tyler N. Hendrickson, P.E.

Founders: W. Wayne Weeks, P.E. Neal E. Velvin, P.E.



930 E. Corsicana Street P.O. Box 1007 Athens TX 75751

Texas Registered Engineering Firm F-151

Phone: 903-675-3903 vwce@velvin-weeks.com Fax: 903-675-8345

May 12, 2025

Texas Commission on Environmental Quality Water Quality Division (MC-148) Application Review & Processing Team PO Box 13087 Austin, Tx 78711-3087

Re: Combined Consumers SUD – Renewal Application for Permit # WQ01485001, RN104983150, CN602690422

Team Member,

Please find enclosed renewal application for Combined Consumers SUD. Please feel free to contact me if you have any additional questions at (903) 675-3903 or at tracyk@velvin-weeks.com

Sincerely,

Velvin & Weeks Consulting Engineers, Inc.

Tracy Kyser

CC: Drew Roberts

THE COMMISSION OF THE PROPERTY OF THE PROPERTY

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the application.

APPLICANT NAME: Combined Consumers SUD

PERMIT NUMBER (If new, leave blank): WQ00 <u>014685001</u>

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

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

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

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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/Mo	ney Order Number: <u>51178</u>				
Check/Money Order Amount: \$315.00					
Name Prin	Name Printed on Check: Velvin & Weeks Consulting Engineers, Inc.				
EPAY Voucher N	umber: Click to enter text.				
Copy of Payment Vouch	er enclosed? Yes □				
Section 2. Type of Ap	Section 2. Type of Application (Instructions Page 26)				

Che	ck the box next to the appropriate authorization type.
\boxtimes	Publicly-Owned Domestic Wastewater
	Privately-Owned Domestic Wastewater
	Conventional Wastewater Treatment
Che	ck the box next to the appropriate facility status.
\boxtimes	Active Inactive
	□ □ Che

C.	Che	eck the box next to the appropriate permit typ	e.	
	\boxtimes	TPDES Permit		
		TLAP		
		TPDES Permit with TLAP component		
		Subsurface Area Drip Dispersal System (SAD	DS)	
d.	Che	eck the box next to the appropriate application	n typ	pe e
		New		
		Major Amendment with Renewal		Minor Amendment with Renewal
		Major Amendment without Renewal		Minor Amendment <u>without</u> Renewal
	\boxtimes	Renewal without changes		Minor Modification of permit
e.	For	amendments or modifications, describe the p	ropo	osed changes: Click to enter text.
f.	For	existing permits:		
	Per	mit Number: WQ00 <u>0014685001</u>		
	EPA	A I.D. (TPDES only): TX <u>0128538</u>		
	Exp	viration Date: <u>Sept. 10, 2026</u>		

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?

Combined Consumers SUD

(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: 602690422

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.

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. <u>SEE ATTACHENT A</u>

Section 4. Application Contact Information (Instructions Page 27)

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

A. Prefix: Mr. Last Name, First Name: Roberts, Drew

Title: <u>General Manager</u> Credential: Click to enter text.

Organization Name: Combine Consumers SUD

Mailing Address: PO Box 2829 City, State, Zip Code: Quinlan, Tx 75474

Phone No.: 903-356-3321 E-mail Address: droberts@ccsud.com

Check one or both:

B. Prefix: Mr. Last Name, First Name: Hendrickson, Tyler

Title: <u>President</u> Credential: <u>P.E.</u>

Organization Name: Velvin & Weeks Consulting Engineers, Inc.

Mailing Address: 930 E. Corsicana St. City, State, Zip Code: Athens, Tx 75751

Phone No.: 903-675-3903 E-mail Address: then@velvin-weeks.com

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: Ms. Last Name, First Name: Kyser, Tracy

Title: <u>Permit Coordinator</u> Credential: Click to enter text.

Organization Name: Velvin & Weeks Consulting Engineers, Inc.

Mailing Address: 930 E. Corsicana St. City, State, Zip Code: Athens, Tx 75751

Phone No.: 903-675-3903 E-mail Address: tracyk@velvin-weeks.com

B. Prefix: Click to enter text. Last Name, First Name: Click to enter text.

Title: Click to enter text. Credential: Click to enter text.

Organization Name: Click to enter text.

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

Phone No.: Click to enter text. E-mail Address: Click to enter text.

Section 6. Billing Contact Information (Instructions Page 27)

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

Prefix: Mr. Last Name, First Name: Roberts, Drew

Title: General Manager Credential: Click to enter text.

Organization Name: Combine Consumers SUD

Mailing Address: PO Box 2829 City, State, Zip Code: Quinlan, Tx 75474

Phone No.: <u>903-356-3321</u> E-mail Address: <u>droberts@ccsud.com</u>

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

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

Prefix: Mr. Last Name, First Name: Roberts, Drew

Title: <u>General Manager</u> Credential: Click to enter text.

Organization Name: Combine Consumers SUD

Mailing Address: PO Box 2829 City, State, Zip Code: Quinlan, Tx 75474

Phone No.: <u>903-356-3321</u> E-mail Address: <u>droberts@ccsud.com</u>

Section 8. Public Notice Information (Instructions Page 27)

A. Individual Publishing the Notices

Prefix: ___ Last Name, First Name: <u>Landrum, Becky</u>

Title: <u>County Clerk</u> Credential: Click to enter text.

Organization Name: <u>Hunt County Courthouse</u>

Mailing Address: <u>2507 Lee St.</u> City, State, Zip Code: <u>Greenville, Tx 75401</u>

Phone No.: <u>903-408-4100</u> E-mail Address: Click to enter text.

В.		ethod fo ckage	or Receiving	g Not	ice of Receipt and Intent to Obtain a Water Quality Permit		
	In	dicate b	y a check m	ark tl	he preferred method for receiving the first notice and instructions		
		E-ma	il Address				
		Fax					
	\boxtimes	Regu	lar Mail				
C.	Co	ntact p	ermit to be	listed	d in the Notices		
	Pr	efix: <u>Mr</u>	<u>•</u>		Last Name, First Name: <u>Roberts, Drew</u>		
	Tit	tle: <u>Gene</u>	eral Manager		Credential: Click to enter text.		
	Or	ganizat	ion Name: <u>C</u>	ombii	ne Consumers SUD		
	Ma	ailing Ao	ddress: <u>PO E</u>	<u>Sox</u>	City, State, Zip Code: Quinlan, Tx 75474		
	Ph	one No.	: <u>903-356-33</u>	<u> 21</u>	E-mail Address: <u>dr</u>		
D.	Pu	blic Vie	ewing Infor	matio	on .		
			lity or outfal ust be provid		cated in more than one county, a public viewing place for each		
	Pu	blic bui	lding name:	<u>Hunt</u>	County Courthouse		
	Lo	cation v	vithin the b	ıildin	g: <u>2nd Floor</u>		
	Ph	ysical A	ddress of B	uildin	ig: <u>2507 Lee Street</u>		
	Cit	ty: <u>Gree</u> i	nville, Texas		County: <u>Hunt</u>		
	Contact (Last Name, First Name): Beck Landrum						
	Ph	one No.	: 903-408-41	130 Ex	xt.: Click to enter text.		
E.	Bilingual Notice Requirements						
					ed for new, major amendment, minor amendment or minor applications.		
	be	needed		instru	tion is only used to determine if alternative language notices will actions on publishing the alternative language notices will be in .		
	ob				L coordinator at the nearest elementary and middle schools and nation to determine whether an alternative language notices are		
	1.				program required by the Texas Education Code at the elementary at to the facility or proposed facility?		
			Yes	\boxtimes	No		
		If no , p	oublication o	of an	alternative language notice is not required; skip to Section 9		
	2.				tend either the elementary school or the middle school enrolled it ogram at that school?		
			Yes		No		

	3.	Do the locatio	students a n?	t thes	e schools	attend	a bilingual	l educa	tion pro	gram a	t another
			Yes		No						
	4.		the school l out of this							gram	but the school has
			Yes		No						
	5.		answer is ye ed. Which la								itive language are enter text.
F.	Pla	in Lang	guage Sumr	nary '	Геmplate	ā					
	Co	mplete	the Plain La	angua	ge Summ	ary (TC	EQ Form 20	0972) a	and inclu	de as a	an attachment.
	At	tachme	nt: <u>See Atta</u>	chmen	t B						
G.	Pu	blic Inv	olvement l	Plan F	orm						
						an Form	(TCEQ Fo	rm 209)60) for e	ach ar	plication for a
			it or major								
	At	tachme	nt: <u>N/A</u>								
-	. •		D 1	. 1.	- · • ·	1.5			. C		(7
Se	ecti	on 9.	Regula Page 2'		Entity a	and Pe	ermitted	Site .	lnform	ation	ı (Instructions
A.			is currently N <u>10498315</u>		ated by	ΓCEQ, p	rovide the	Regula	ited Entit	y Nun	aber (RN) issued to
			e TCEQ's Ce currently re				//www15.te	<u>ceq.tex</u>	as.gov/c	rpub/	to determine if
B.	Na	me of p	roject or si	te (the	name k	nown by	the comn	nunity	where lo	cated):	
	Sha	awnee Sl	hore Treatme	<u>ent Pla</u>	<u>nt</u>						
C.	Ow	mer of	treatment f	acility	: Combine	ed Consu	mers SUD				
	Ow	nership	of Facility	: ⊠	Public		Private		Both		Federal
D.	Ow	mer of l	land where	treatn	nent facil	ity is or	will be:				
	Pre	efix: Clic	ck to enter t	text.	La	st Name	e, First Nan	ne: Clic	ck to ente	er text	
	Tit	le: Click	k to enter te	ext.	Cr	edentia	l: Click to e	enter te	ext.		
	Or	ganizati	ion Name: <u>C</u>	Combir	ed Consu	mers SU	<u>D</u>				
	Ma	iling Ac	ddress: <u>1044</u>	6 FM	7 <u>51</u>		City, State	, Zip C	ode: Clic	k to en	iter text.
	Ph	one No.	: <u>903-356-33</u>			-1 4	ldwaaa Just	hanta@	eccud com	_	
				<u> 321</u>	E-	maii Ac	ldress: <u>dro</u>	berts@e	ccsuu.com	1	
	If t			ot the	same pei	son as	the facility	owner			t, attach a lease

	Prefix: Click to enter text.	Last Name, First Name: Click to enter text.
	Title: Click to enter text.	Credential: Click to enter text.
	Organization Name: Click to ente	er text.
	Mailing Address: Click to enter to	ext. City, State, Zip Code: Click to enter text.
	Phone No.: Click to enter text.	E-mail Address: Click to enter text.
	If the landowner is not the same agreement or deed recorded ease	person as the facility owner or co-applicant, attach a lease ement. See instructions.
	Attachment: Click to enter te	ext.
F.	Owner sewage sludge disposal si property owned or controlled by	ite (if authorization is requested for sludge disposal on the applicant)::
	Prefix: Click to enter text.	Last Name, First Name: Click to enter text.
	Title: Click to enter text.	Credential: Click to enter text.
	Organization Name: <u>Happy Hollo</u>	w Farm #3 & #4
	Mailing Address: Click to enter to	ext. City, State, Zip Code: Click to enter text.
	Phone No.: Click to enter text.	E-mail Address: Click to enter text.
	If the landowner is not the same agreement or deed recorded ease	person as the facility owner or co-applicant, attach a lease ement. See instructions.
	Attachment: Click to enter te	xt.
_		
Se	ection 10. TPDES Dischar	ge Information (Instructions Page 31)
		ge Information (Instructions Page 31) lity location in the existing permit accurate?
	Is the wastewater treatment facil ☐ Yes ☐ No If no, or a new permit application	
	Is the wastewater treatment facil ☐ Yes ☐ No	lity location in the existing permit accurate?
A.	Is the wastewater treatment facil Yes No If no, or a new permit application Click to enter text.	on, please give an accurate description:
A.	Is the wastewater treatment facil Yes No If no, or a new permit application Click to enter text.	lity location in the existing permit accurate?
A.	Is the wastewater treatment facil Yes No If no, or a new permit application Click to enter text.	on, please give an accurate description:
A.	Is the wastewater treatment facil ☐ Yes ☐ No If no, or a new permit application Click to enter text. Are the point(s) of discharge and ☐ Yes ☐ No If no, or a new or amendment point of discharge and the discharge and discharge and the discharge and the discharge and the dischar	on, please give an accurate description:
A.	Is the wastewater treatment facility Yes	on, please give an accurate description: the discharge route(s) in the existing permit correct? ermit application, provide an accurate description of the
A.	Is the wastewater treatment facil ☐ Yes ☐ No If no, or a new permit application Click to enter text. Are the point(s) of discharge and ☐ Yes ☐ No If no, or a new or amendment point of discharge and the discharge and discharge and the discharge and the discharge and the dischar	on, please give an accurate description: I the discharge route(s) in the existing permit correct? ermit application, provide an accurate description of the arge route to the nearest classified segment as defined in 30
A.	Is the wastewater treatment facility Yes	on, please give an accurate description: I the discharge route(s) in the existing permit correct? ermit application, provide an accurate description of the arge route to the nearest classified segment as defined in 30 n
A. B.	Is the wastewater treatment facil Yes No If no, or a new permit application Click to enter text. Are the point(s) of discharge and Yes No If no, or a new or amendment p point of discharge and the discharge	on, please give an accurate description: I the discharge route(s) in the existing permit correct? ermit application, provide an accurate description of the arge route to the nearest classified segment as defined in 30 on the arge route to the nearest classified segment as defined in 30 on the arge route to the nearest classified segment as defined in 30 on the arge route to a city, county, or state highway right-of-way, or state highway right-of-way.

E. Owner of effluent disposal site:

	If yes , indicate by a check mark if:
	☐ Authorization granted ☐ Authorization pending
	For new and amendment applications, provide copies of letters that show proof of contact and the approval letter upon receipt.
	Attachment: Click to enter text.
D.	For all applications involving an average daily discharge of 5 MGD or more, provide the names of all counties located within 100 statute miles downstream of the point(s) of discharge: Click to enter text.
Se	ection 11. TLAP Disposal Information (Instructions Page 32)
A.	For TLAPs, is the location of the effluent disposal site in the existing permit accurate?
	□ Yes □ No
	If no, or a new or amendment permit application , provide an accurate description of the disposal site location:
	N/A
B.	City nearest the disposal site: Click to enter text.
C.	County in which the disposal site is located: Click to enter text.
D.	For TLAPs , describe the routing of effluent from the treatment facility to the disposal site:
	Click to enter text.
E.	For TLAPs , please identify the nearest watercourse to the disposal site to which rainfall runoff might flow if not contained: Click to enter text.
6	
	ction 12. Miscellaneous Information (Instructions Page 32)
A.	Is the facility located on or does the treated effluent cross American Indian Land?
	□ Yes ⊠ No
В.	If the existing permit contains an onsite sludge disposal authorization, is the location of the sewage sludge disposal site in the existing permit accurate?
	□ Yes □ No ⊠ Not Applicable
	If No, or if a new onsite sludge disposal authorization is being requested in this permit application, provide an accurate location description of the sewage sludge disposal site.
	Click to enter text.

C.	 Did any person for service regarding 	ormerly employed by the TCEQ represent your company and get paid this application?	d for
	□ Yes 🛭	⊠ No	
		erson formerly employed by the TCEQ who represented your compaice regarding the application: Click to enter text.	ny and
D.	. Do you owe any f	ees to the TCEQ?	
	□ Yes □	⊠ No	
	If yes , provide the	e following information:	
	Account numb	per: Click to enter text.	
	Amount past of	due: Click to enter text.	
E.	Do you owe any p	enalties to the TCEQ?	
	□ Yes 🏻	⊠ No	
	If yes , please prov	vide the following information:	
	Enforcement o	order number: Click to enter text.	
	Amount past o	due: Click to enter text.	
0			
Se	ection 13. Atta	achments (Instructions Page 33)	
		nchments (Instructions Page 33) Imments are included with the Administrative Report. Check all that a	pply:
	dicate which attach Lease agreement		
Inc	dicate which attach Lease agreement located or the ef	ments are included with the Administrative Report. Check all that a or deed recorded easement, if the land where the treatment facility	
Inc	dicate which attach Lease agreement located or the ef Original full-size Applicant's Treatment Labeled poi Highlighted Onsite sew Effluent dis New and fu	ments are included with the Administrative Report. Check all that a or deed recorded easement, if the land where the treatment facility ffluent disposal site are not owned by the applicant or co-applicant.	
Inc	dicate which attach Lease agreement located or the ef Original full-size Applicant's Treatment Labeled poi Highlighted Onsite sew Effluent dis New and fu I mile radii 3 miles dow All ponds.	ments are included with the Administrative Report. Check all that a cor deed recorded easement, if the land where the treatment facility affluent disposal site are not owned by the applicant or co-applicant. USGS Topographic Map with the following information: a property boundary facility boundary facility boundary int of discharge for each discharge point (TPDES only) and discharge route for each discharge point (TPDES only) age sludge disposal site (if applicable) applicable) atture construction (if applicable) us information	
Inc	dicate which attach Lease agreement located or the ef Original full-size Applicant's Treatment Labeled por Highlighted Onsite sew Effluent dis New and fu I mile radii 3 miles dow All ponds. Attachment 1 for	aments are included with the Administrative Report. Check all that a cor deed recorded easement, if the land where the treatment facility affluent disposal site are not owned by the applicant or co-applicant. E USGS Topographic Map with the following information: Is property boundary facility boundary int of discharge for each discharge point (TPDES only) all discharge route for each discharge point (TPDES only) age sludge disposal site (if applicable) sposal site boundaries (TLAP only) ature construction (if applicable) us information (TPDES only)	

Section 14. Signature Page (Instructions Page 34)

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

Permit Number: <u>WO00014685001</u>
Applicant: <u>Combined Consumers SUD</u>

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): Drew Roberts

Signatory title: General Manager

Signature:_

(Lice blue ink)

Date

Subscribed and Sworn to before me by the said...

on this 31 5+

day of March

.20 2

My commission expires on the

day of

, 20 2

Notary Provic

County Teyas

(SEAL)

SIEGLINDE ELLISON
SENotary Public, State of Texas
Comm. Expires 07-03-2028
Notary ID 125755887

DOMESTIC WASTEWATER PERMIT APPLICATION SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

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

Attachment: See Attachment D

ATTACHMENT 1

INDIVIDUAL INFORMATION

Section 1. Individual Information (Instructions Page 41)

Complete this attachment if the facility applicant or co-applicant is an individual. Make additional copies of this attachment if both are individuals.

Prefix (Mr., Ms., Miss): Click to enter text.

Full legal name (Last Name, First Name, Middle Initial): Click to enter text.

Driver's License or State Identification Number: Click to enter text.

Date of Birth: Click to enter text.

Mailing Address: Click to enter text.

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

Phone Number: Click to enter text. Fax Number: Click to enter text.

E-mail Address: Click to enter text.

CN: Click to enter text.

For Commission Use Only:

Customer Number:

Regulated Entity Number:

Permit Number:

DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST OF COMMON DEFICIENCIES

Below is a list of common deficiencies found during the administrative review of domestic wastewater permit applications. To ensure the timely processing of this application, please review the items below and indicate by checking Yes that each item is complete and in accordance applicable rules at 30 TAC Chapters 21, 281, and 305. If an item is not required this application, indicate by checking N/A where appropriate. Please do not submit the application until the items below have been addressed.

Core Data Form (TCEQ Form No. 10400) (Required for all application types. Must be completed in its entirety Note: Form may be signed by applicant representative.)	and s	signed.		Yes
Correct and Current Industrial Wastewater Permit Application Form (TCEQ Form Nos. 10053 and 10054. Version dated 6/25/2018 or late				Yes
Water Quality Permit Payment Submittal Form (Page 19) (Original payment sent to TCEQ Revenue Section. See instructions fo	r ma	iling ad	⊠ ldress	Yes s.)
7.5 Minute USGS Quadrangle Topographic Map Attached (Full-size map if seeking "New" permit. 8 ½ x 11 acceptable for Renewals and Amendments)				Yes
Current/Non-Expired, Executed Lease Agreement or Easement		N/A		Yes
Landowners Map (See instructions for landowner requirements)		N/A		Yes
 Things to Know: All the items shown on the map must be labeled. The applicant's complete property boundaries must be deboundaries of contiguous property owned by the applicant. The applicant cannot be its own adjacent landowner. You landowners immediately adjacent to their property, regar from the actual facility. If the applicant's property is adjacent to a road, creek, or on the opposite side must be identified. Although the proapplicant's property boundary, they are considered potent if the adjacent road is a divided highway as identified on map, the applicant does not have to identify the landown the highway. 	nt. mus dless strea perti tially the U	it identi s of hov am, the ies are i affecto JSGS to	ify the value of t	e they are owners djacent to ndowners. aphic
Landowners Cross Reference List (See instructions for landowner requirements)		N/A		Yes
Landowners Labels or USB Drive attached (See instructions for landowner requirements)		N/A		Yes
Original signature per 30 TAC § 305.44 - Blue Ink Preferred (If signature page is not signed by an elected official or principle execated a copy of signature authority/delegation letter must be attached)	cutiv	e officei	□ r,	Yes
Plain Language Summary				Yes

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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): Click to enter text.

2-Hr Peak Flow (MGD): Click to enter text.

Estimated construction start date: Click to enter text.

Estimated waste disposal start date: Click to enter text.

B. Interim II Phase

Design Flow (MGD): Click to enter text.

2-Hr Peak Flow (MGD): Click to enter text.

Estimated construction start date: Click to enter text.

Estimated waste disposal start date: Click to enter text.

C. Final Phase

Design Flow (MGD): 0.025

2-Hr Peak Flow (MGD): 0.025

Estimated construction start date: Click to enter text.

Estimated waste disposal start date: Click to enter text.

D. Current Operating Phase

Provide the startup date of the facility: 2006

Section 2. Treatment Process (Instructions Page 43)

A. Current Operating Phase

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

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

This is a water treatment plant. The backwash from the treatment process begins at the filter system and is then transferred to holding ponds (or lagoons) where the sludge is allowed to settle by gravity, and the clarified water is then reintroduced into the plant or is discharged back out into the main water supply.

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)
Lagoon #1	1	57'x69'x6'
Lagoon #2	1	60'x2'x6'
Lagoon #3	1	38'x72'x6'
Lagoon #4	1	66'x166'x6'

C. Process Flow Diagram

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

Attachment: SEE 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: 32.870247

• Longitude: <u>-96.072949</u>

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

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

• Longitude: Click to enter text.

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

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

Attachment: <u>SEE ATTACHMENT F</u>

Provide the name and a des	•	,	
Collection System Informati			
each uniquely owned collection systems.			
examples.			
Collection System Informatio	n		
Collection System Name	Owner Name	Owner Type	Population Served
		Choose an item.	
Section 4. Unbuilt F	Phases (Instruc	tions Page 45)	
Is the application for a rene	wal of a permit tha	t contains an unbuilt ph	ase or phases?
□ Yes ⊠ No			
If yes , does the existing per years of being authorized b		e that has not been cons	tructed within five
□ Yes ⊠ No			
If yes, provide a detailed dis Failure to provide sufficient recommending denial of the	nt justification may	result in the Executive	
Click to enter text.			
Section 5. Closure F	Plans (Instructi	one Paga 45)	
section 3. Crosure i			
Horro oner two atmost sunit - 1-			l any unita ha talaa-
	en taken out of se		l any units be taken
Have any treatment units be out of service in the next fiv ☐ Yes ☒ No	en taken out of se		l any units be taken

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.
Section 6. Permit Specific Requirements (Instructions Page 45)
For applicants with an existing permit, check the Other Requirements or Special Provisions of the permit. A. Summary transmittal
Have plans and specifications been approved for the existing facilities and each proposed
phase?
□ Yes □ No
If yes, provide the date(s) of approval for each phase: Click to enter text.
Provide information, including dates, on any actions taken to meet a <i>requirement or provision</i> pertaining to the submission of a summary transmittal letter. Provide a copy of an approval letter from the TCEQ, if applicable.
Click to enter text.
B. Buffer zones
Have the buffer zone requirements been met?
□ Yes ⊠ No
Provide information below, including dates, on any actions taken to meet the conditions of the buffer zone. If available, provide any new documentation relevant to maintaining the buffer zones.
<u>N/A</u>

C.	Ot	her actions required by the current permit
	su	bes the Other Requirements or Special Provisions 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	T/A
D.	Gr	it and grease treatment
	1.	Acceptance of grit and grease waste
		Does the facility have a grit and/or grease processing facility onsite that treats and decants or accepts transported loads of grit and grease waste that are discharged directly to the wastewater treatment plant prior to any treatment?
		□ Yes ⊠ No
		If No, stop here and continue with Subsection E. Stormwater Management.
	2.	Grit and grease processing
		Describe below how the grit and grease waste is treated at the facility. In your description, include how and where the grit and grease is introduced to the treatment works and how it is separated or processed. Provide a flow diagram showing how grit and grease is processed at the facility.
		Click to enter text.
	3.	Grit disposal
		Does the facility have a Municipal Solid Waste (MSW) registration or permit for grit disposal?
		□ Yes ⊠ No
		If No, contact the TCEQ Municipal Solid Waste team at 512-239-2335. Note: A registration or permit is required for grit disposal. Grit shall not be combined with treatment plant sludge. See the instruction booklet for additional information on grit disposal requirements and restrictions.

	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.
	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.
	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

		it to water in the state.
		N/A
		Note Direct of the state of the
		Note: Direct stormwater discharges to waters in the state authorized through this individual permit will require the development and implementation of a stormwater pollution prevention plan (SWPPP) and will be subject to additional monitoring and reporting requirements. Indirect discharges of stormwater via headworks recycling will require compliance with all individual permit requirements including 2-hour peak flow limitations. All stormwater discharge authorization requests will require additional information during the technical review of your application.
F.	Di	scharges to the Lake Houston Watershed
	Do	oes the facility discharge in the Lake Houston watershed?
		□ Yes ⊠ No
		yes, attach a Sewage Sludge Solids Management Plan. See Example 5 in the instructions. ick to enter text.
G.	Ot	her wastes received including sludge from other WWTPs and septic waste
	1.	Acceptance of sludge from other WWTPs
		Does or will the facility accept sludge from other treatment plants at the facility site?
		□ Yes ⊠ No
		If yes, attach sewage sludge solids management plan. See Example 5 of instructions.
		In addition, provide the date the plant started or is anticipated to start accepting sludge, an estimate of monthly sludge acceptance (gallons or millions of gallons), an
		estimate of the BOD ₅ concentration of the sludge, 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.
		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. Pollutant Analysis of Treated Effluent (Instructions Page Section 7. 50) Is the facility in operation? Yes □ No

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

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

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

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

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

^{*}TPDES permits only †TLAP permits only

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

Pollutant	Average Conc.	Max Conc.	No. of Samples	Sample Type	Sample Date/Time
Total Suspended Solids, mg/l	2.89	20.3	12	Grab	Monthly
Total Dissolved Solids, mg/l					
pH, standard units	7.91	8.57	12	Grab	Monthly
Fluoride, mg/l					
Aluminum, mg/l					
Alkalinity (CaCO ₃), mg/l	74.5	78	12	Grab	Monthly

Section 8. Facility Operator (Instructions Page 50)

Facility Operator Name: Dustin Haywood

Facility Operator's License Classification and Level: WS0012529

Facility Operator's License Number: B Surface Water License

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

Α.	WW	TP's Biosolids Management Facility Type			
	Che	ck all that apply. See instructions for guidance			
		Design flow>= 1 MGD			
		Serves >= 10,000 people			
	\boxtimes	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)			
В.	ww	ΓP's Biosolids Treatment Process			
	Check all that apply. See instructions for guidance.				
		Aerobic Digestion			
		Air Drying (or sludge drying beds)			
		Lower Temperature Composting			
		Lime Stabilization			
		Higher Temperature Composting			
		Heat Drying			
		Thermophilic Aerobic Digestion			
		Beta Ray Irradiation			
		Gamma Ray Irradiation			
		Pasteurization			
		Preliminary Operation (e.g. grinding, de-gritting, blending)			
		Thickening (e.g. gravity thickening, centrifugation, filter press, vacuum filter)			
		Sludge Lagoon			
		Temporary Storage (< 2 years)			
		Long Term Storage (>= 2 years)			
		Methane or Biogas Recovery			
		Other Treatment Process: Click to enter text.			

C. Biosolids Management

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

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

Biosolids Management

Management Practice	Handler or Preparer Type	Bulk or Bag Container	Amount (dry metric tons)	Pathogen Reduction Options	Vector Attraction Reduction Option
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.	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): The sludge is transported by truck to a on-site location in Van Zandt County

D. Disposal site

Disposal site name: Happy Hollow Farm #3 & #4

TCEQ permit or registration number: <u>730170 & 730168</u> County where disposal site is located: Van Zandt County

E. Transportation method

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

Name of the hauler: Deep Roots

Hauler registration number: 24383

Sludge is transported as a:

Liquid □	semi-liquid 🗆	semi-solid □	solid 🛛
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Section 10. Permit Authorization for Sewage Sludge Disposal (Instructions Page 53)

A. Beneficial use authorization

Does the existing permit include authorization for land application of sewage sludge for beneficial use?
□ Yes ⊠ No
If yes , are you requesting to continue this authorization to land apply sewage sludge for beneficial use?
□ Yes □ No
If yes, is the completed Application for Permit for Beneficial Land Use of Sewage Sludg (TCEQ Form No. 10451) attached to this permit application (see the instructions for details)?
□ Yes □ No

B. Sludg	ge processing authorization				
	the existing permit include authorization f ge or disposal options?	or an	y of the	follov	ving sludge processing,
Sl	udge Composting		Yes	\boxtimes	No
M	arketing and Distribution of sludge		Yes	\boxtimes	No
Sl	udge Surface Disposal or Sludge Monofill		Yes	\boxtimes	No
Te	emporary storage in sludge lagoons		Yes		No
autho	s to any of the above sludge options and the orization, is the completed Domestic Waste nical Report (TCEQ Form No. 10056) attack	wate	r Permi	t Appl	lication: Sewage Sludge
Section	n 11. Sewage Sludge Lagoons (Ins	stru	ctions	Page	e 53)
Does this	s facility include sewage sludge lagoons?				
	res ⊠ No				
If yes, co	emplete the remainder of this section. If no,	proc	eed to S	ection	12.
A. Locat	tion information				
	ollowing maps are required to be submitted de the Attachment Number.	d as p	art of th	ne app	lication. For each map,
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.				
Discu apply	iss in a description if any of the following e	xist w	ithin th	e lago	on area. Check all that
	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				
Aı	ttachment: Click to enter text.				

N/A					
Temporary storage information					
Provide the results for the pollutant screening of sludge lagoons. These results are in addition to pollutant results in <i>Section 7 of Technical Report 1.0.</i>					
Nitrate Nitrogen, mg/kg: Click to enter text.					
Total Kjeldahl Nitrogen, mg/kg: Click to enter text.					
Total Nitrogen (=nitrate nitrogen + TKN), mg/kg: Click to enter text.					
Phosphorus, mg/kg: Click to enter text.					
Potassium, mg/kg: Click to enter text.					
pH, standard units: <u>Click to enter text.</u>					
Ammonia Nitrogen mg/kg: Click to enter text.					
Arsenic: Click to enter text.					
Cadmium: Click to enter text.					
Chromium: Click to enter text.					
Copper: Click to enter text.					
Lead: Click to enter text.					
Mercury: Click to enter text.					
Molybdenum: Click to enter text.					
Nickel: Click to enter text.					
Selenium: <u>Click to enter text.</u>					
Zinc: Click to enter text.					
Total PCBs: Click to enter text.					
Provide the following information:					
Volume and frequency of sludge to the lagoon(s): Click to enter text.					
Total dry tons stored in the lagoons(s) per 365-day period: Click to enter text.					
Total dry tons stored in the lagoons(s) over the life of the unit: Click to enter text.					
Liner information					
Does the active/proposed sludge lagoon(s) have a liner with a maximum hydraulic conductivity of $1x10^7$ cm/sec?					

Yes □ No

Cor	crete Liner
Site	development plan
Prov	ide a detailed description of the methods used to deposit sludge in the lagoon(s):
the	sludge in the lagoons is silt and other natural particles that were removed from the raw during water treatment process. Once the sludge settles to the bottom of the lagoon, it is pumped into ter press before it is hauled to the land fill.
Atta	ch 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.
Grou	ındwater monitoring
grou	oundwater monitoring currently conducted at this site, or are any wells available for ndwater monitoring, or are groundwater monitoring data otherwise available for the ge lagoon(s)?
	l Yes □ No
type	oundwater monitoring data are available, provide a copy. Provide a profile of soil s encountered down to the groundwater table and the depth to the shallowest ndwater as a separate attachment.
A	ttachment: Click to enter text.

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

A.	Additional authorizations
	Does the permittee have additional authorizations for this facility, such as reuse authorization, sludge permit, etc?
	□ Yes ⊠ No
	If yes, provide the TCEQ authorization number and description of the authorization:
C	lick to enter text.
В.	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:
Cl	ick to enter text.
Se	ction 13. RCRA/CERCLA Wastes (Instructions Page 55)
A.	RCRA hazardous wastes
	Has the facility received in the past three years, does it currently receive, or will it receive RCRA hazardous waste?
	□ Yes ⊠ No

B. Remediation activity wastewater

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

□ Yes ⊠ No

C. Details about wastes received

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

Attachment: Click to enter text.

Section 14. Laboratory Accreditation (Instructions Page 56)

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

- The laboratory is an in-house laboratory and is:
 - o periodically inspected by the TCEQ; or
 - o located in another state and is accredited or inspected by that state; or
 - o 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: Click to enter text.

Title: Click to enter text.

Signature:

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? ———————————————————————————————————
If no , proceed it Section 2. If yes , provide the following:
Owner of the drinking water supply: <u>Combined Consumers SUD</u>
Distance and direction to the intake: 881' South East
Attach a USGS map that identifies the location of the intake.
Attachment: Click to enter text.
Section 2. Discharge into Tidally Affected Waters (Instructions Page 64)
Does the facility discharge into tidally affected waters?
□ Yes ⊠ No
If no , proceed to Section 3. If yes , complete the remainder of this section. If no, proceed to Section 3.
A. Receiving water outfall
Width of the receiving water at the outfall, in feet: Click to enter text.
B. Oyster waters
Are there oyster waters in the vicinity of the discharge?
□ Yes □ No
If yes, provide the distance and direction from outfall(s).
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).
N/A

Section 3. Classified Segments (Instructions Page 64) Is the discharge directly into (or within 300 feet of) a classified segment? Yes 🖾 No If yes, this Worksheet is complete. **If no**, complete Sections 4 and 5 of this Worksheet. **Description of Immediate Receiving Waters (Instructions** Section 4. Page 65) Name of the immediate receiving waters: Lake Tawakoni A. Receiving water type Identify the appropriate description of the receiving waters. Stream Freshwater Swamp or Marsh X Lake or Pond Surface area, in acres: 36,700 Average depth of the entire water body, in feet: 12 Average depth of water body within a 500-foot radius of discharge point, in feet: 12 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 downstream of the discharge point.				n the receiving water within three miles
	Click t	o enter text.		
D.	Downs	stream characteristics		
		receiving water characteristics or ge (e.g., natural or man-made da		rithin three miles downstream of the ids, reservoirs, etc.)?
		Yes ⊠ No		
	If yes,	discuss how.		
	Click t	o enter text.		
F	Norma	l dry weather characteristics		
Provide general observations of the water body during normal dry weather condition				
	The W		the Lake	Tawakoni. The normal water level of the
	Date a	nd time of observation: Click to	enter tex	t.
		e water body influenced by stori		
		Yes □ No		
Se	ection	5. General Characteris Page 66)	tics of	the Waterbody (Instructions
Α.	Upstre	am influences		
		mmediate receiving water upstro		ne discharge or proposed discharge site nat apply.
		Oil field activities		Urban runoff
		Upstream discharges		Agricultural runoff
	П	Sentic tanks	П	Other(s) specify Click to enter text

B.	Waterl	Waterbody uses					
	Observed or evidences of the following uses. Check all that apply.						
		Livestock watering		Contact recreation			
		Irrigation withdrawal	\boxtimes	Non-contact recreation			
		Fishing		Navigation			
		Domestic water supply		Industrial water supply			
		Park activities		Other(s), specify: Click to enter text.			
C.	Waterl	oody aesthetics					
Check one of the following that best describes the aesthetics of the receiving water the surrounding area.				the aesthetics of the receiving water and			
		☐ Wilderness: outstanding natural beauty; usually wooded or unpastured area; water clarity exceptional					
		Natural Area: trees and/or nativ fields, pastures, dwellings); wat	_	ation; some development evident (from ty discolored			
		Common Setting: not offensive; developed but uncluttered; water may be colored or turbid					
		Offensive: stream does not enha dumping areas; water discolore		thetics; cluttered; highly developed;			

LIST OF ATTACHMENTS

ATTACHMENT A - ADMINISTRATIVE REPORT - SECTION 3(B) - CORE DATA FORM

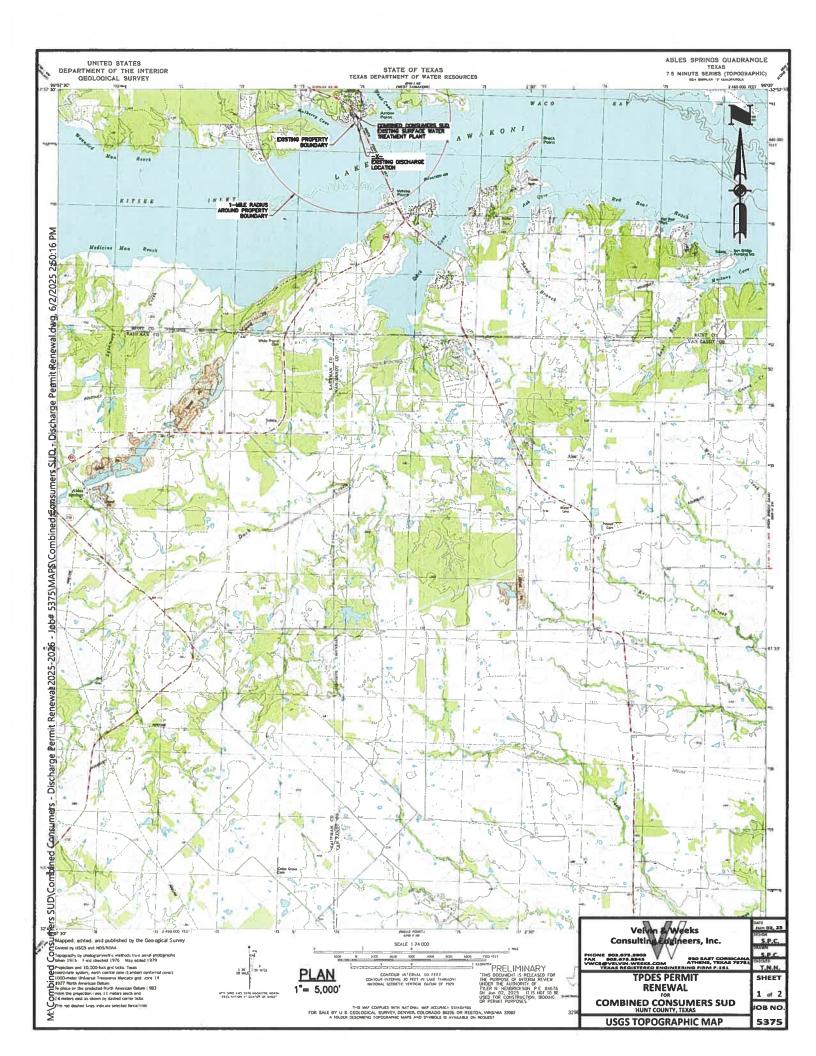
ATTACHMENT B- ADMINISTRATIVE REPORT - SECTION 8(F) - PLAIN LANGUAGE SUMMARY

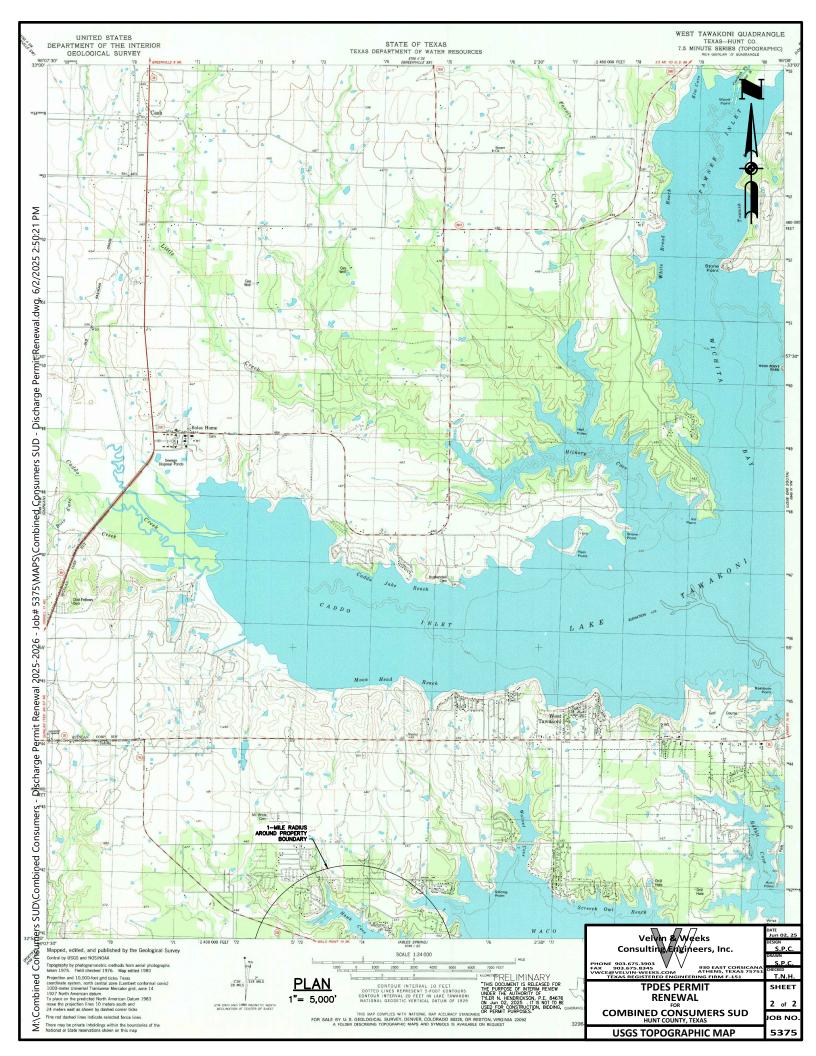
ATTACHMENT C - ADMINISTRATIVE REPORT - SECTION 13 - USGS TOPOGRAPHIC MAP

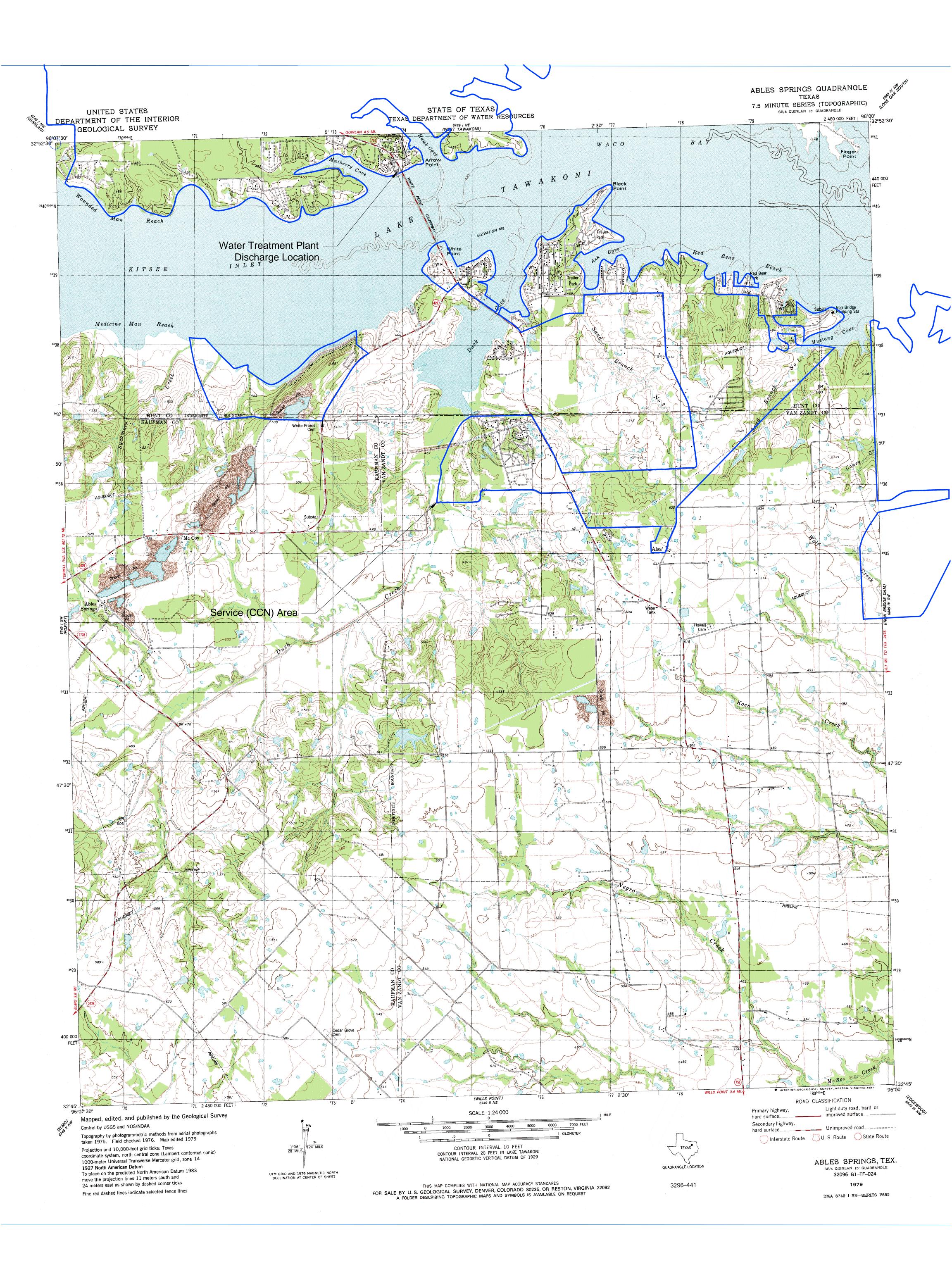
ATTACHMENT D - ADMINISTRATIVE REPORT - SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

ATTACHMENT E - TECHNICAL REPORT – SECTION(C) – PROCESS FLOW DIAGRAM

ATTACHMENT F - TECHNICAL REPORT – SECTION 3 – SITE INFORMATION AND DRAWING

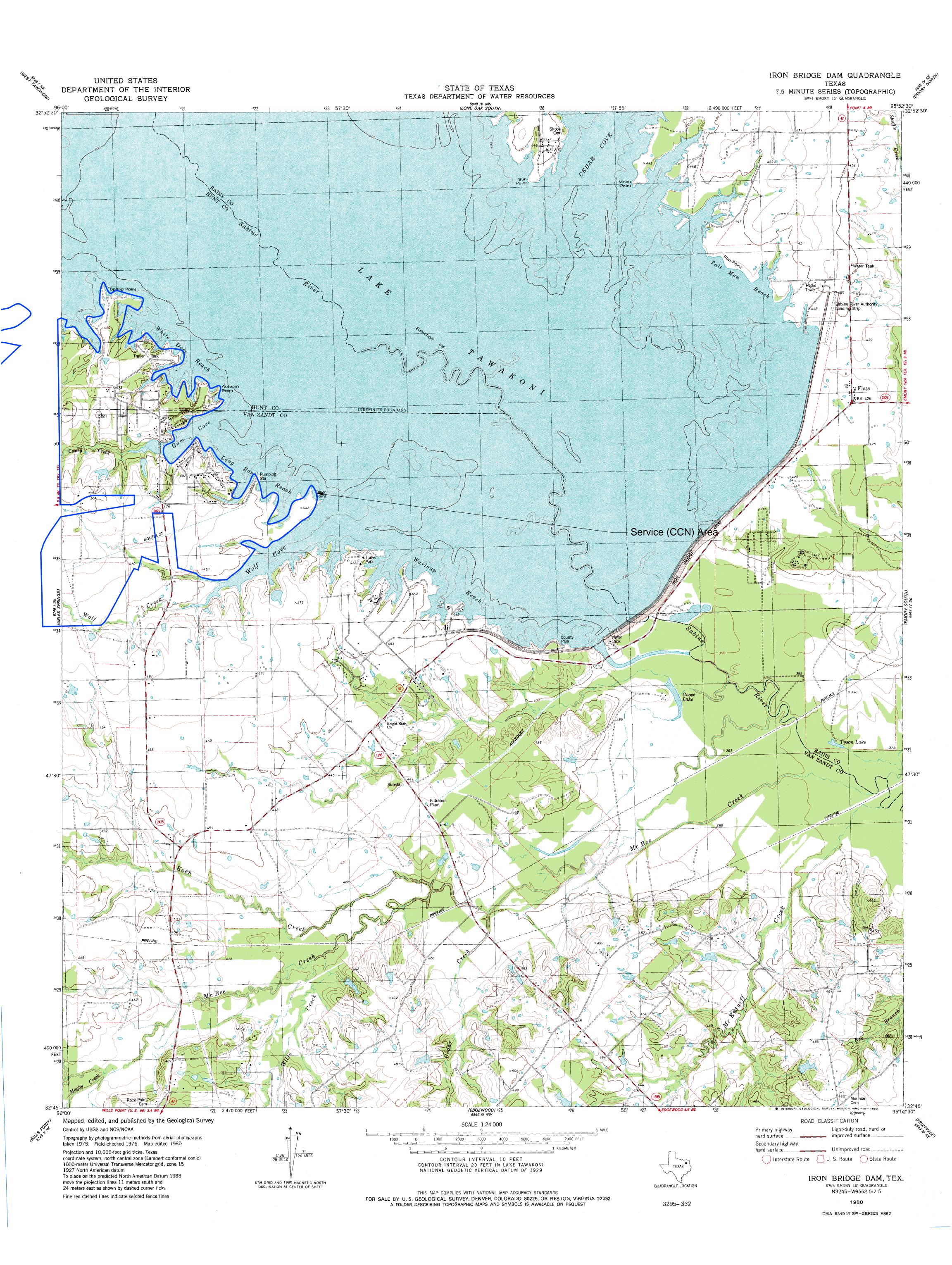






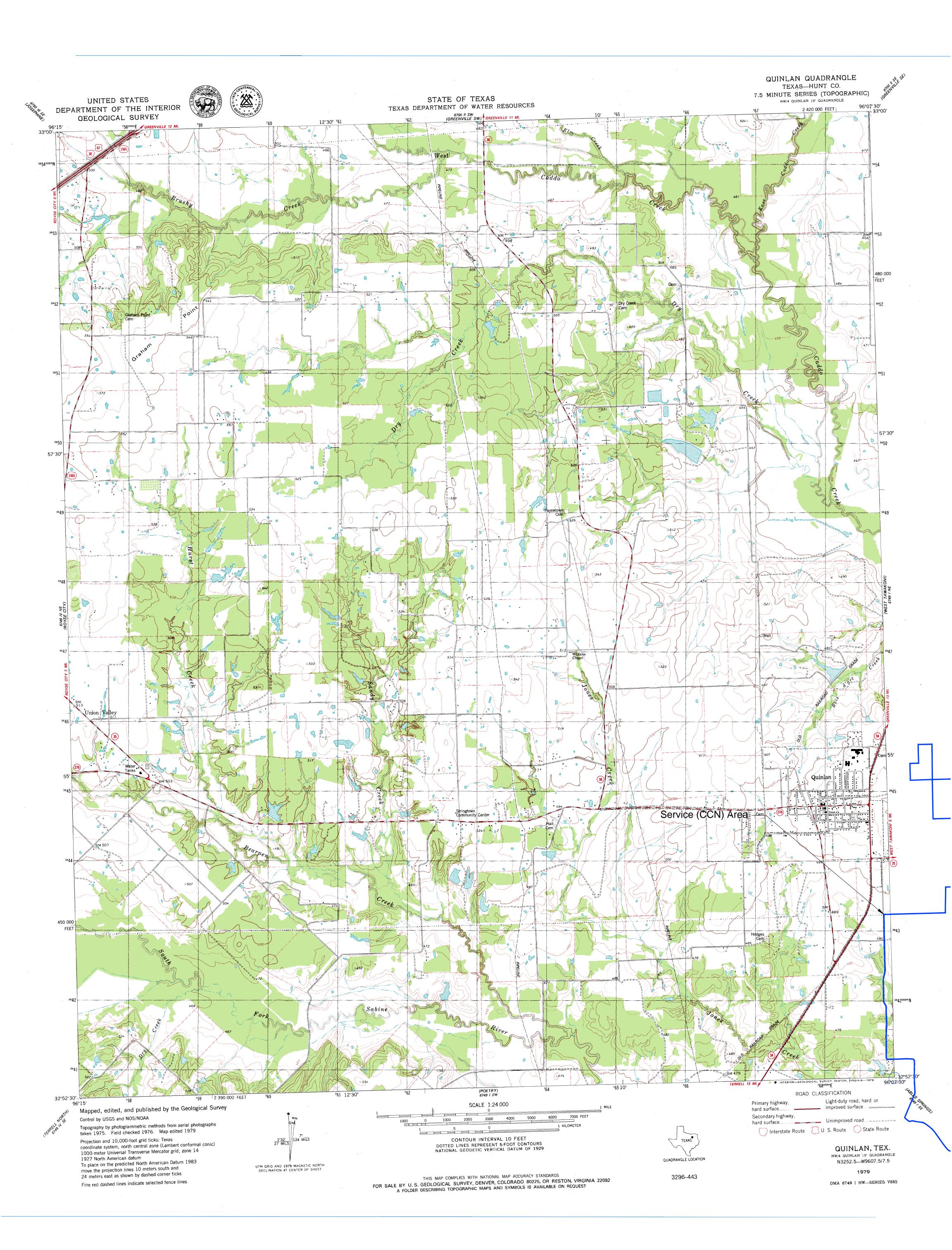






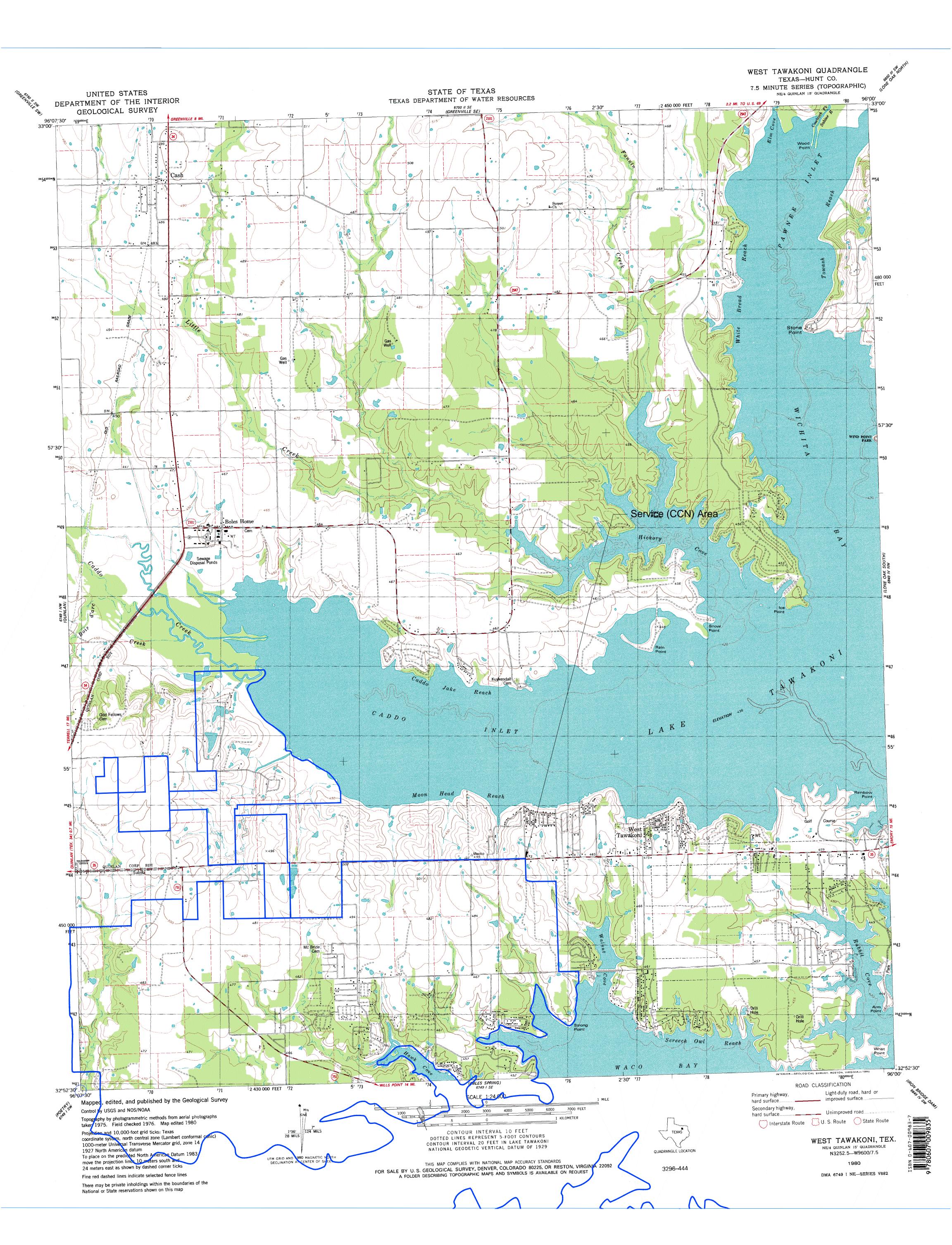
















Rainee Trevino

From: Tracy Kyser <tracyk@velvin-weeks.com>

Sent: Friday, June 13, 2025 10:47 AM

To: Rainee Trevino

Subject: Re: Combined Consumers SUD - Permit # WQ0014685001

Attachments: Combined Consumers Section 10 page 9&10.pdf

Categories: NOD Response Review

Sorry about that! TGIF. Here it is. Have a great weekend!

Thank you,

Tracy Kyser 930 E. Corsicana St. Athens, Tx 75751 903-675-3903

Velvin & Weeks Consulting Engineers, Inc.

tracyk@velvin-weeks.com

From: Rainee Trevino < Rainee. Trevino@tceq.texas.gov>

Sent: Friday, June 13, 2025 10:25 AM

To: Tracy Kyser <tracyk@velvin-weeks.com>

Subject: RE: Combined Consumers SUD - Permit # WQ0014685001

Thanks Tracy. I didn't see section 10 included in the attachment.

Regards, Rainee Trevino

From: Tracy Kyser <tracyk@velvin-weeks.com>

Sent: Friday, June 13, 2025 10:23 AM

To: Rainee Trevino < Rainee. Trevino@tceq.texas.gov>

Subject: Re: Combined Consumers SUD - Permit # WQ0014685001

Hi Rainee,

Here is the updated page you requested.

Thank you,

Tracy Kyser930 E. Corsicana St.
Athens, Tx 75751
903-675-3903

Velvin & Weeks Consulting Engineers, Inc.

tracvk@velvin-weeks.com

From: Rainee Trevino < Rainee. Trevino@tceq.texas.gov>

Sent: Friday, June 13, 2025 9:48 AM

To: Tracy Kyser < tracyk@velvin-weeks.com>

Subject: RE: Combined Consumers SUD - Permit # WQ0014685001

You don't often get email from rainee.trevino@tceq.texas.gov. Learn why this is important Good morning, Tracy,

I have reviewed the response and there are a couple of small corrections needed.

Please update section 3 with the name and title of the individual who signed the signature page. Both questions in section 10 need to be completed.

All other items are sufficient.

Regards, Rainee Trevino

From: Rainee Trevino

Sent: Thursday, June 12, 2025 3:28 PM **To:** Tracy Kyser < < <u>tracyk@velvin-weeks.com</u>>

Cc: Erwin Madrid < Erwin Madrid < Erwin Madrid < Erwin Madrid < Erwin Madrid@tceq.texas.gov; Drew Roberts < drccsud@gmail.com>

Subject: RE: Combined Consumers SUD - Permit # WQ0014685001

Good afternoon,

Received.

Regards, Rainee Trevino

From: Tracy Kyser <tracyk@velvin-weeks.com>

Sent: Thursday, June 12, 2025 1:50 PM

To: Rainee Trevino < Rainee. Trevino@tceq.texas.gov>

Cc: Erwin Madrid < Erwin.Madrid@tceq.texas.gov>; Drew Roberts < drccsud@gmail.com>

Subject: Combined Consumers SUD - Permit # WQ0014685001

Rainee,

it. Please	let me know if you need anyt	thing else.		
	Combined Consumers	SUD - Permit Appl. W	7O0014685001.pdf	

Please see attached permit application to meet the deficiencies. I apologize for the delay for I thought I had sent

Thank you,

Tracy Kyser
930 E. Corsicana St.
Athens, Tx 75751
903-675-3903
Velvin & Weeks Consulting Engineers, Inc.
tracyk@velvin-weeks.com

C.	Che	eck the box next to the appropriate permit type	oe.	
	\boxtimes	TPDES Permit		
		TLAP		
		TPDES Permit with TLAP component		
		Subsurface Area Drip Dispersal System (SAD	DS)	
d.	Che	eck the box next to the appropriate applicatio	n typ	e
		New		
		Major Amendment with Renewal		Minor Amendment with Renewal
		Major Amendment without Renewal		Minor Amendment without Renewal
	\boxtimes	Renewal without changes		Minor Modification of permit
e.	For	amendments or modifications, describe the p	oropo	osed changes: Click to enter text.
f.	For existing permits:			
	Permit Number: WQ00 <u>0014685001</u>			
	EPA	A I.D. (TPDES only): TX <u>0128538</u>		
	Exp	piration Date: Sept. 10, 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?

Combined Consumers SUD

(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: 602690422

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: Roberts, Drew

Title: General Manager

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.)

	Prefix: Click to enter text.	Last Name, First Name: Click to enter text.
	Title: Click to enter text.	Credential: Click to enter text.
	Organization Name: Click to ente	er text.
	Mailing Address: Click to enter to	ext. City, State, Zip Code: Click to enter text.
	Phone No.: Click to enter text.	E-mail Address: Click to enter text.
	If the landowner is not the same agreement or deed recorded ease	person as the facility owner or co-applicant, attach a lease ement. See instructions.
	Attachment: Click to enter te	xt.
F.	Owner sewage sludge disposal si property owned or controlled by	te (if authorization is requested for sludge disposal on the applicant)::
	Prefix: Click to enter text.	Last Name, First Name: Click to enter text.
	Title: Click to enter text.	Credential: Click to enter text.
	Organization Name: Happy Hollow	w Farm #3 & #4
	Mailing Address: Click to enter to	ext. City, State, Zip Code: Click to enter text.
	Phone No.: Click to enter text.	E-mail Address: Click to enter text.
	If the landowner is not the same agreement or deed recorded ease	person as the facility owner or co-applicant, attach a lease ement. See instructions.
	Attachment: Click to enter te	xt.
Se	ction 10. TPDES Dischars	ge Information (Instructions Page 31)
		9
		ity location in the existing permit accurate?
	Is the wastewater treatment facil	
	Is the wastewater treatment facil ☑ Yes □ No	ity location in the existing permit accurate?
	Is the wastewater treatment facil	ity location in the existing permit accurate?
A.	Is the wastewater treatment facil	ity location in the existing permit accurate?
A.	Is the wastewater treatment facil	ity location in the existing permit accurate? on, please give an accurate description:
A.	Is the wastewater treatment facil	ity location in the existing permit accurate? on, please give an accurate description:
A.	Is the wastewater treatment facil ✓ Yes □ No If no, or a new permit application of discharge and with the point of discharge and the di	on, please give an accurate description: I the discharge route(s) in the existing permit correct? ermit application, provide an accurate description of the
A.	Is the wastewater treatment facil	on, please give an accurate description: I the discharge route(s) in the existing permit correct? ermit application, provide an accurate description of the
A.	Is the wastewater treatment facil	on, please give an accurate description: I the discharge route(s) in the existing permit correct? ermit application, provide an accurate description of the arge route to the nearest classified segment as defined in 30
A.	Is the wastewater treatment facil	on, please give an accurate description: I the discharge route(s) in the existing permit correct? ermit application, provide an accurate description of the arge route to the nearest classified segment as defined in 30
А.	Is the wastewater treatment facil	ity location in the existing permit accurate? on, please give an accurate description: I the discharge route(s) in the existing permit correct? ermit application, provide an accurate description of the arge route to the nearest classified segment as defined in 30 n s/are located: Hunt discharge to a city, county, or state highway right-of-way, or

E. Owner of effluent disposal site:

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



TPDES PERMIT NO. WQ0014685001 [For TCEQ office use only - EPA I.D. No. TX0128538]

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

PERMIT TO DISCHARGE WASTES

under provisions of Section 402 of the Clean Water Act and Chapter 26 of the Texas Water Code This is a renewal that replaces TPDES Permit No. WO0014685001 issued on September 10, 2021.

Combined Consumers Special Utility District

whose mailing address is

P.O. Box 2829 Quinlan, Texas, 75474

is authorized to treat and discharge filter backwash wastes from the Shawnee Shores Water Treatment Facility, SIC Code 4941

located at 10446 Farm-to-Market Road 751, in Hunt County, Texas 75474

directly to Lake Tawakoni in Segment No. 0507 of the Sabine River Basin

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

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

ISSUED DATE:	
	For the Commission

EFFLUENT LIMITATIONS AND MONITORING REQUIREMENTS

Outfall Number 001

1. During the period beginning upon the date of issuance and lasting through the date of expiration, the permittee is authorized to discharge subject to the following effluent limitations:

The daily average flow of effluent shall not exceed 0.025 million gallons per day (MGD)

Effluent Characteristic	<u>c</u> <u>Discharge Limitations</u>				Min. Self-Monitoring Requirements	
	Daily Avg	7-day Avg	Daily Max	Single Grab	Report Daily Avg. & Daily Max.	
	mg/l (lbs/day)	mg/l	mg/l	mg/l	Measurement Frequency	Sample Type
Flow, MGD	Report	N/A	Report	N/A	Five/week	Instantaneous
Total Suspended Solids	25 (5.2)	35	45	65	One/week	Composite*

^{*} The composite sample must consist of at least three portions collected over a period of not less than two hours. In the case of intermittent discharges of less than two hours duration, the composite sample must consist of at least three portions collected over the duration of the discharge. This provision supersedes the definitions in standard permit conditions No. 3a on page 4 of this permit.

- 2. The pH shall not be less than 6.0 standard units nor greater than 9.0 standard units and shall be monitored once per month by grab sample.
- 3. There shall be no discharge of floating solids or visible foam in other than trace amounts and no discharge of visible oil.
- 4. Effluent monitoring samples shall be taken at the following location(s): Following the final treatment unit.

DEFINITIONS AND STANDARD PERMIT CONDITIONS

As required by Title 30 Texas Administrative Code (TAC) Chapter 305, certain regulations appear as standard conditions in waste discharge permits. 30 TAC § 305.121 - 305.129 (relating to Permit Characteristics and Conditions) as promulgated under the Texas Water Code (TWC) §§ 5.103 and 5.105, and the Texas Health and Safety Code (THSC) §§ 361.017 and 361.024(a), establish the characteristics and standards for waste discharge permits, including sewage sludge, and those sections of 40 Code of Federal Regulations (CFR) Part 122 adopted by reference by the Commission. The following text includes these conditions and incorporates them into this permit. All definitions in TWC § 26.001 and 30 TAC Chapter 305 shall apply to this permit and are incorporated by reference. Some specific definitions of words or phrases used in this permit are as follows:

1. Flow Measurements

- a. Annual average flow the arithmetic average of all daily flow determinations taken within the preceding 12 consecutive calendar months. The annual average flow determination shall consist of daily flow volume determinations made by a totalizing meter, charted on a chart recorder and limited to major domestic wastewater discharge facilities with one million gallons per day or greater permitted flow.
- b. Daily average flow the arithmetic average of all determinations of the daily flow within a period of one calendar month. The daily average flow determination shall consist of determinations made on at least four separate days. If instantaneous measurements are used to determine the daily flow, the determination shall be the arithmetic average of all instantaneous measurements taken during that month. Daily average flow determination for intermittent discharges shall consist of a minimum of three flow determinations on days of discharge.
- c. Daily maximum flow the highest total flow for any 24-hour period in a calendar month.
- d. Instantaneous flow the measured flow during the minimum time required to interpret the flow measuring device.
- e. 2-hour peak flow (domestic wastewater treatment plants) the maximum flow sustained for a two-hour period during the period of daily discharge. The average of multiple measurements of instantaneous maximum flow within a two-hour period may be used to calculate the 2-hour peak flow.
- f. Maximum 2-hour peak flow (domestic wastewater treatment plants) the highest 2-hour peak flow for any 24-hour period in a calendar month.

2. Concentration Measurements

- a. Daily average concentration the arithmetic average of all effluent samples, composite or grab as required by this permit, within a period of one calendar month, consisting of at least four separate representative measurements.
 - i. For domestic wastewater treatment plants When four samples are not available in a calendar month, the arithmetic average (weighted by flow) of all values in the previous four consecutive month period consisting of at least four measurements shall be utilized as the daily average concentration.

- ii. For all other wastewater treatment plants When four samples are not available in a calendar month, the arithmetic average (weighted by flow) of all values taken during the month shall be utilized as the daily average concentration.
- b. 7-day average concentration the arithmetic average of all effluent samples, composite or grab as required by this permit, within a period of one calendar week, Sunday through Saturday.
- c. Daily maximum concentration the maximum concentration measured on a single day, by the sample type specified in the permit, within a period of one calendar month.
- d. Daily discharge the discharge of a pollutant measured during a calendar day or any 24-hour period that reasonably represents the calendar day for purposes of sampling. For pollutants with limitations expressed in terms of mass, the daily discharge is calculated as the total mass of the pollutant discharged over the sampling day. For pollutants with limitations expressed in other units of measurement, the daily discharge is calculated as the average measurement of the pollutant over the sampling day.
 - The daily discharge determination of concentration made using a composite sample shall be the concentration of the composite sample. When grab samples are used, the daily discharge determination of concentration shall be the arithmetic average (weighted by flow value) of all samples collected during that day.
- e. Bacteria concentration (*E. coli* or Enterococci) Colony Forming Units (CFU) or Most Probable Number (MPN) of bacteria per 100 milliliters effluent. The daily average bacteria concentration is a geometric mean of the values for the effluent samples collected in a calendar month. The geometric mean shall be determined by calculating the nth root of the product of all measurements made in a calendar month, where n equals the number of measurements made; or, computed as the antilogarithm of the arithmetic mean of the logarithms of all measurements made in a calendar month. For any measurement of bacteria equaling zero, a substituted value of one shall be made for input into either computation method. If specified, the 7-day average for bacteria is the geometric mean of the values for all effluent samples collected during a calendar week.
- f. Daily average loading (lbs/day) the arithmetic average of all daily discharge loading calculations during a period of one calendar month. These calculations must be made for each day of the month that a parameter is analyzed. The daily discharge, in terms of mass (lbs/day), is calculated as (Flow, MGD x Concentration, mg/l x 8.34).
- g. Daily maximum loading (lbs/day) the highest daily discharge, in terms of mass (lbs/day), within a period of one calendar month.

3. Sample Type

a. Composite sample - For domestic wastewater, a composite sample is a sample made up of a minimum of three effluent portions collected in a continuous 24-hour period or during the period of daily discharge if less than 24 hours, and combined in volumes proportional to flow, and collected at the intervals required by 30 TAC § 319.9 (a). For industrial wastewater, a composite sample is a sample made up of a minimum of three effluent portions collected in a continuous 24-hour period or during the period of daily discharge if less than 24 hours, and combined in volumes proportional to flow, and collected at the intervals required by 30 TAC § 319.9 (b).

- b. Grab sample an individual sample collected in less than 15 minutes.
- 4. Treatment Facility (facility) wastewater facilities used in the conveyance, storage, treatment, recycling, reclamation and/or disposal of domestic sewage, industrial wastes, agricultural wastes, recreational wastes, or other wastes including sludge handling or disposal facilities under the jurisdiction of the Commission.
- 5. The term "sewage sludge" is defined as solid, semi-solid, or liquid residue generated during the treatment of domestic sewage in 30 TAC Chapter 312. This includes the solids that have not been classified as hazardous waste separated from wastewater by unit processes.
- 6. Bypass the intentional diversion of a waste stream from any portion of a treatment facility.

MONITORING AND REPORTING REQUIREMENTS

1. Self-Reporting

Monitoring results shall be provided at the intervals specified in the permit. Unless otherwise specified in this permit or otherwise ordered by the Commission, the permittee shall conduct effluent sampling and reporting in accordance with 30 TAC §§ 319.4 - 319.12. Unless otherwise specified, effluent monitoring data shall be submitted each month, to the Enforcement Division (MC 224), by the 20th day of the following month for each discharge which is described by this permit whether or not a discharge is made for that month. Monitoring results must be reported on an approved self-report form that is signed and certified as required by Monitoring and Reporting Requirements No. 10.

As provided by state law, the permittee is subject to administrative, civil and criminal penalties, as applicable, for negligently or knowingly violating the Clean Water Act (CWA); TWC §§ 26, 27, and 28; and THSC § 361, including but not limited to knowingly making any false statement, representation, or certification on any report, record, or other document submitted or required to be maintained under this permit, including monitoring reports or reports of compliance or noncompliance, or falsifying, tampering with or knowingly rendering inaccurate any monitoring device or method required by this permit or violating any other requirement imposed by state or federal regulations.

2. Test Procedures

- a. Unless otherwise specified in this permit, test procedures for the analysis of pollutants shall comply with procedures specified in 30 TAC §§ 319.11 319.12. Measurements, tests, and calculations shall be accurately accomplished in a representative manner.
- b. All laboratory tests submitted to demonstrate compliance with this permit must meet the requirements of 30 TAC § 25, Environmental Testing Laboratory Accreditation and Certification.

3. Records of Results

- a. Monitoring samples and measurements shall be taken at times and in a manner so as to be representative of the monitored activity.
- b. Except for records of monitoring information required by this permit related to the permittee's sewage sludge use and disposal activities, which shall be retained for a period

of at least five years (or longer as required by 40 CFR Part 503), monitoring and reporting records, including strip charts and records of calibration and maintenance, copies of all records required by this permit, records of all data used to complete the application for this permit, and the certification required by 40 CFR § 264.73(b)(9) shall be retained at the facility site, or shall be readily available for review by a TCEQ representative for a period of three years from the date of the record or sample, measurement, report, application or certification. This period shall be extended at the request of the Executive Director.

c. Records of monitoring activities shall include the following:

- i. date, time and place of sample or measurement;
- ii. identity of individual who collected the sample or made the measurement.
- iii. date and time of analysis;
- iv. identity of the individual and laboratory who performed the analysis;
- v. the technique or method of analysis; and
- vi. the results of the analysis or measurement and quality assurance/quality control records.

The period during which records are required to be kept shall be automatically extended to the date of the final disposition of any administrative or judicial enforcement action that may be instituted against the permittee.

4. Additional Monitoring by Permittee

If the permittee monitors any pollutant at the location(s) designated herein more frequently than required by this permit using approved analytical methods as specified above, all results of such monitoring shall be included in the calculation and reporting of the values submitted on the approved self-report form. Increased frequency of sampling shall be indicated on the self-report form.

5. Calibration of Instruments

All automatic flow measuring or recording devices and all totalizing meters for measuring flows shall be accurately calibrated by a trained person at plant start-up and as often thereafter as necessary to ensure accuracy, but not less often than annually unless authorized by the Executive Director for a longer period. Such person shall verify in writing that the device is operating properly and giving accurate results. Copies of the verification shall be retained at the facility site and/or shall be readily available for review by a TCEQ representative for a period of three years.

6. Compliance Schedule Reports

Reports of compliance or noncompliance with, or any progress reports on, interim and final requirements contained in any compliance schedule of the permit shall be submitted no later than 14 days following each schedule date to the Regional Office and the Enforcement Division (MC 224).

7. Noncompliance Notification

a. In accordance with 30 TAC § 305.125(9) any noncompliance which may endanger

human health or safety, or the environment shall be reported by the permittee to the TCEQ. Except as allowed by 30 TAC § 305.132, report of such information shall be provided orally or by facsimile transmission (FAX) to the Regional Office within 24 hours of becoming aware of the noncompliance. A written submission of such information shall also be provided by the permittee to the Regional Office and the Enforcement Division (MC 224) within five working days of becoming aware of the noncompliance. The written submission shall contain a description of the noncompliance and its cause; the potential danger to human health or safety, or the environment; the period of noncompliance, including exact dates and times; if the noncompliance has not been corrected, the time it is expected to continue; and steps taken or planned to reduce, eliminate, and prevent recurrence of the noncompliance, and to mitigate its adverse effects.

- b. The following violations shall be reported under Monitoring and Reporting Requirement 7.a.:
 - i. Unauthorized discharges as defined in Permit Condition 2(g).
 - ii. Any unanticipated bypass that exceeds any effluent limitation in the permit.
 - iii. Violation of a permitted maximum daily discharge limitation for pollutants listed specifically in the Other Requirements section of an Industrial TPDES permit.
- c. In addition to the above, any effluent violation which deviates from the permitted effluent limitation by more than 40% shall be reported by the permittee in writing to the Regional Office and the Enforcement Division (MC 224) within 5 working days of becoming aware of the noncompliance.
- d. Any noncompliance other than that specified in this section, or any required information not submitted or submitted incorrectly, shall be reported to the Enforcement Division (MC 224) as promptly as possible. For effluent limitation violations, noncompliances shall be reported on the approved self-report form.
- 8. In accordance with the procedures described in 30 TAC §§ 35.301 35.303 (relating to Water Quality Emergency and Temporary Orders) if the permittee knows in advance of the need for a bypass, it shall submit prior notice by applying for such authorization.
- 9. Changes in Discharges of Toxic Substances

All existing manufacturing, commercial, mining, and silvicultural permittees shall notify the Regional Office, orally or by facsimile transmission within 24 hours, and both the Regional Office and the Enforcement Division (MC 224) in writing within five (5) working days, after becoming aware of or having reason to believe:

- a. That any activity has occurred or will occur which would result in the discharge, on a routine or frequent basis, of any toxic pollutant listed at 40 CFR Part 122, Appendix D, Tables II and III (excluding Total Phenols) which is not limited in the permit, if that discharge will exceed the highest of the following "notification levels":
 - i. One hundred micrograms per liter (100 μ g/L);
 - ii. Two hundred micrograms per liter (200 μ g/L) for acrolein and acrylonitrile; five hundred micrograms per liter (500 μ g/L) for 2,4-dinitrophenol and for 2-methyl-4,6-dinitrophenol; and one milligram per liter (1 mg/L) for antimony;

- iii. Five (5) times the maximum concentration value reported for that pollutant in the permit application; or
- iv. The level established by the TCEQ.
- b. That any activity has occurred or will occur which would result in any discharge, on a nonroutine or infrequent basis, of a toxic pollutant which is not limited in the permit, if that discharge will exceed the highest of the following "notification levels":
 - i. Five hundred micrograms per liter (500 μ g/L);
 - ii. One milligram per liter (1 mg/L) for antimony;
 - iii. Ten (10) times the maximum concentration value reported for that pollutant in the permit application; or
 - iv. The level established by the TCEQ.

10. Signatories to Reports

All reports and other information requested by the Executive Director shall be signed by the person and in the manner required by 30 TAC § 305.128 (relating to Signatories to Reports).

- 11. All POTWs must provide adequate notice to the Executive Director of the following:
 - a. Any new introduction of pollutants into the POTW from an indirect discharger which would be subject to CWA § 301 or § 306 if it were directly discharging those pollutants;
 - b. Any substantial change in the volume or character of pollutants being introduced into that POTW by a source introducing pollutants into the POTW at the time of issuance of the permit; and
 - c. For the purpose of this paragraph, adequate notice shall include information on:
 - i. The quality and quantity of effluent introduced into the POTW; and
 - ii. Any anticipated impact of the change on the quantity or quality of effluent to be discharged from the POTW.

PERMIT CONDITIONS

1. General

- a. When the permittee becomes aware that it failed to submit any relevant facts in a permit application, or submitted incorrect information in an application or in any report to the Executive Director, it shall promptly submit such facts or information.
- b. This permit is granted on the basis of the information supplied and representations made by the permittee during action on an application, and relying upon the accuracy and completeness of that information and those representations. After notice and opportunity for a hearing, this permit may be modified, suspended, or revoked, in whole or in part, in accordance with 30 TAC Chapter 305, Subchapter D, during its term for good cause including, but not limited to, the following:

- i. Violation of any terms or conditions of this permit;
- ii. Obtaining this permit by misrepresentation or failure to disclose fully all relevant facts; or
- iii. A change in any condition that requires either a temporary or permanent reduction or elimination of the authorized discharge.
- c. The permittee shall furnish to the Executive Director, upon request and within a reasonable time, any information to determine whether cause exists for amending, revoking, suspending or terminating the permit. The permittee shall also furnish to the Executive Director, upon request, copies of records required to be kept by the permit.

2. Compliance

- a. Acceptance of the permit by the person to whom it is issued constitutes acknowledgment and agreement that such person will comply with all the terms and conditions embodied in the permit, and the rules and other orders of the Commission.
- b. The permittee has a duty to comply with all conditions of the permit. Failure to comply with any permit condition constitutes a violation of the permit and the Texas Water Code or the Texas Health and Safety Code, and is grounds for enforcement action, for permit amendment, revocation, or suspension, or for denial of a permit renewal application or an application for a permit for another facility.
- c. It shall not be a defense for a permittee in an enforcement action that it would have been necessary to halt or reduce the permitted activity in order to maintain compliance with the conditions of the permit.
- d. The permittee shall take all reasonable steps to minimize or prevent any discharge or sludge use or disposal or other permit violation that has a reasonable likelihood of adversely affecting human health or the environment.
- e. Authorization from the Commission is required before beginning any change in the permitted facility or activity that may result in noncompliance with any permit requirements.
- f. A permit may be amended, suspended and reissued, or revoked for cause in accordance with 30 TAC §§ 305.62 and 305.66 and TWC§ 7.302. The filing of a request by the permittee for a permit amendment, suspension and reissuance, or termination, or a notification of planned changes or anticipated noncompliance, does not stay any permit condition.
- g. There shall be no unauthorized discharge of wastewater or any other waste. For the purpose of this permit, an unauthorized discharge is considered to be any discharge of wastewater into or adjacent to water in the state at any location not permitted as an outfall or otherwise defined in the Other Requirements section of this permit.
- h. In accordance with 30 TAC § 305.535(a), the permittee may allow any bypass to occur from a TPDES permitted facility which does not cause permitted effluent limitations to be exceeded or an unauthorized discharge to occur, but only if the bypass is also for

essential maintenance to assure efficient operation.

i. The permittee is subject to administrative, civil, and criminal penalties, as applicable, under TWC §§ 7.051 - 7.075 (relating to Administrative Penalties), 7.101 - 7.111 (relating to Civil Penalties), and 7.141 - 7.202 (relating to Criminal Offenses and Penalties) for violations including, but not limited to, negligently or knowingly violating the federal CWA §§ 301, 302, 306, 307, 308, 318, or 405, or any condition or limitation implementing any sections in a permit issued under the CWA § 402, or any requirement imposed in a pretreatment program approved under the CWA §§ 402 (a)(3) or 402 (b)(8).

3. Inspections and Entry

- a. Inspection and entry shall be allowed as prescribed in the TWC Chapters 26, 27, and 28, and THSC § 361.
- b. The members of the Commission and employees and agents of the Commission are entitled to enter any public or private property at any reasonable time for the purpose of inspecting and investigating conditions relating to the quality of water in the state or the compliance with any rule, regulation, permit or other order of the Commission. Members, employees, or agents of the Commission and Commission contractors are entitled to enter public or private property at any reasonable time to investigate or monitor or, if the responsible party is not responsive or there is an immediate danger to public health or the environment, to remove or remediate a condition related to the quality of water in the state. Members, employees, Commission contractors, or agents acting under this authority who enter private property shall observe the establishment's rules and regulations concerning safety, internal security, and fire protection, and if the property has management in residence, shall notify management or the person then in charge of his presence and shall exhibit proper credentials. If any member, employee, Commission contractor, or agent is refused the right to enter in or on public or private property under this authority, the Executive Director may invoke the remedies authorized in TWC § 7.002. The statement above, that Commission entry shall occur in accordance with an establishment's rules and regulations concerning safety, internal security, and fire protection, is not grounds for denial or restriction of entry to any part of the facility, but merely describes the Commission's duty to observe appropriate rules and regulations during an inspection.

4. Permit Amendment and/or Renewal

- a. The permittee shall give notice to the Executive Director as soon as possible of any planned physical alterations or additions to the permitted facility if such alterations or additions would require a permit amendment or result in a violation of permit requirements. Notice shall also be required under this paragraph when:
 - i. The alteration or addition to a permitted facility may meet one of the criteria for determining whether a facility is a new source in accordance with 30 TAC § 305.534 (relating to New Sources and New Dischargers); or
 - ii. The alteration or addition could significantly change the nature or increase the quantity of pollutants discharged. This notification applies to pollutants that are subject neither to effluent limitations in the permit, nor to notification requirements in Monitoring and Reporting Requirements No. 9; or

- iii. The alteration or addition results in a significant change in the permittee's sludge use or disposal practices, and such alteration, addition, or change may justify the application of permit conditions that are different from or absent in the existing permit, including notification of additional use or disposal sites not reported during the permit application process or not reported pursuant to an approved land application plan.
- b. Prior to any facility modifications, additions, or expansions that will increase the plant capacity beyond the permitted flow, the permittee must apply for and obtain proper authorization from the Commission before commencing construction.
- c. The permittee must apply for an amendment or renewal at least 180 days prior to expiration of the existing permit in order to continue a permitted activity after the expiration date of the permit. If an application is submitted prior to the expiration date of the permit, the existing permit shall remain in effect until the application is approved, denied, or returned. If the application is returned or denied, authorization to continue such activity shall terminate upon the effective date of the action. If an application is not submitted prior to the expiration date of the permit, the permit shall expire and authorization to continue such activity shall terminate.
- d. Prior to accepting or generating wastes which are not described in the permit application or which would result in a significant change in the quantity or quality of the existing discharge, the permittee must report the proposed changes to the Commission. The permittee must apply for a permit amendment reflecting any necessary changes in permit conditions, including effluent limitations for pollutants not identified and limited by this permit.
- e. In accordance with the TWC § 26.029(b), after a public hearing, notice of which shall be given to the permittee, the Commission may require the permittee, from time to time, for good cause, in accordance with applicable laws, to conform to new or additional conditions.
- f. If any toxic effluent standard or prohibition (including any schedule of compliance specified in such effluent standard or prohibition) is promulgated under CWA § 307(a) for a toxic pollutant which is present in the discharge and that standard or prohibition is more stringent than any limitation on the pollutant in this permit, this permit shall be modified or revoked and reissued to conform to the toxic effluent standard or prohibition. The permittee shall comply with effluent standards or prohibitions established under CWA § 307(a) for toxic pollutants within the time provided in the regulations that established those standards or prohibitions, even if the permit has not yet been modified to incorporate the requirement.

5. Permit Transfer

- a. Prior to any transfer of this permit, Commission approval must be obtained. The Commission shall be notified in writing of any change in control or ownership of facilities authorized by this permit. Such notification should be sent to the Applications Review and Processing Team (MC 148) of the Water Quality Division.
- b. A permit may be transferred only according to the provisions of 30 TAC § 305.64 (relating to Transfer of Permits) and 30 TAC § 50.133 (relating to Executive Director

Action on Application or WQMP update).

6. Relationship to Hazardous Waste Activities

This permit does not authorize any activity of hazardous waste storage, processing, or disposal that requires a permit or other authorization pursuant to the Texas Health and Safety Code.

7. Relationship to Water Rights

Disposal of treated effluent by any means other than discharge directly to water in the state must be specifically authorized in this permit and may require a permit pursuant to TWC Chapter 11.

8. Property Rights

A permit does not convey any property rights of any sort, or any exclusive privilege.

9. Permit Enforceability

The conditions of this permit are severable, and if any provision of this permit, or the application of any provision of this permit to any circumstances, is held invalid, the application of such provision to other circumstances, and the remainder of this permit, shall not be affected thereby.

10. Relationship to Permit Application

The application pursuant to which the permit has been issued is incorporated herein; provided, however, that in the event of a conflict between the provisions of this permit and the application, the provisions of the permit shall control.

11. Notice of Bankruptcy.

- a. Each permittee shall notify the Executive Director, in writing, immediately following the filing of a voluntary or involuntary petition for bankruptcy under any chapter of Title 11 (Bankruptcy) of the United States Code (11 USC) by or against:
 - i. the permittee;
 - ii. an entity (as that term is defined in 11 USC, § 101(14)) controlling the permittee or listing the permit or permittee as property of the estate; or
 - iii. an affiliate (as that term is defined in 11 USC, § 101(2)) of the permittee.

b. This notification must indicate:

- i. the name of the permittee;
- ii. the permit number(s);
- iii. the bankruptcy court in which the petition for bankruptcy was filed; and
- iv. the date of filing of the petition.

OPERATIONAL REQUIREMENTS

1. The permittee shall at all times ensure that the facility and all of its systems of collection, treatment, and disposal are properly operated and maintained. This includes, but is not

limited to, the regular, periodic examination of wastewater solids within the treatment plant by the operator in order to maintain an appropriate quantity and quality of solids inventory as described in the various operator training manuals and according to accepted industry standards for process control. Process control, maintenance, and operations records shall be retained at the facility site, or shall be readily available for review by a TCEQ representative, for a period of three years.

- 2. Upon request by the Executive Director, the permittee shall take appropriate samples and provide proper analysis in order to demonstrate compliance with Commission rules. Unless otherwise specified in this permit or otherwise ordered by the Commission, the permittee shall comply with all applicable provisions of 30 TAC Chapter 312 concerning sewage sludge use and disposal and 30 TAC §§ 319.21 319.29 concerning the discharge of certain hazardous metals.
- 3. Domestic wastewater treatment facilities shall comply with the following provisions:
 - a. The permittee shall notify the Municipal Permits Team, Wastewater Permitting Section (MC 148) of the Water Quality Division, in writing, of any facility expansion at least 90 days prior to conducting such activity.
 - b. The permittee shall submit a closure plan for review and approval to the Municipal Permits Team, Wastewater Permitting Section (MC 148) of the Water Quality Division, for any closure activity at least 90 days prior to conducting such activity. Closure is the act of permanently taking a waste management unit or treatment facility out of service and includes the permanent removal from service of any pit, tank, pond, lagoon, surface impoundment and/or other treatment unit regulated by this permit.
- 4. The permittee is responsible for installing prior to plant start-up, and subsequently maintaining, adequate safeguards to prevent the discharge of untreated or inadequately treated wastes during electrical power failures by means of alternate power sources, standby generators, and/or retention of inadequately treated wastewater.
- 5. Unless otherwise specified, the permittee shall provide a readily accessible sampling point and, where applicable, an effluent flow measuring device or other acceptable means by which effluent flow may be determined.
- 6. The permittee shall remit an annual water quality fee to the Commission as required by 30 TAC Chapter 21. Failure to pay the fee may result in revocation of this permit under TWC § 7.302(b)(6).

7. Documentation

For all written notifications to the Commission required of the permittee by this permit, the permittee shall keep and make available a copy of each such notification under the same conditions as self-monitoring data are required to be kept and made available. Except for information required for TPDES permit applications, effluent data, including effluent data in permits, draft permits and permit applications, and other information specified as not confidential in 30 TAC §§ 1.5(d), any information submitted pursuant to this permit may be claimed as confidential by the submitter. Any such claim must be asserted in the manner prescribed in the application form or by stamping the words confidential business information on each page containing such information. If no claim is made at the time of

submission, information may be made available to the public without further notice. If the Commission or Executive Director agrees with the designation of confidentiality, the TCEQ will not provide the information for public inspection unless required by the Texas Attorney General or a court pursuant to an open records request. If the Executive Director does not agree with the designation of confidentiality, the person submitting the information will be notified.

- 8. Facilities that generate domestic wastewater shall comply with the following provisions; domestic wastewater treatment facilities at permitted industrial sites are excluded.
 - a. Whenever flow measurements for any domestic sewage treatment facility reach 75% of the permitted daily average or annual average flow for three consecutive months, the permittee must initiate engineering and financial planning for expansion and/or upgrading of the domestic wastewater treatment and/or collection facilities. Whenever the flow reaches 90% of the permitted daily average or annual average flow for three consecutive months, the permittee shall obtain necessary authorization from the Commission to commence construction of the necessary additional treatment and/or collection facilities. In the case of a domestic wastewater treatment facility which reaches 75% of the permitted daily average or annual average flow for three consecutive months, and the planned population to be served or the quantity of waste produced is not expected to exceed the design limitations of the treatment facility, the permittee shall submit an engineering report supporting this claim to the Executive Director of the Commission.

If in the judgment of the Executive Director the population to be served will not cause permit noncompliance, then the requirement of this section may be waived. To be effective, any waiver must be in writing and signed by the Director of the Enforcement Division (MC 219) of the Commission, and such waiver of these requirements will be reviewed upon expiration of the existing permit; however, any such waiver shall not be interpreted as condoning or excusing any violation of any permit parameter.

- b. The plans and specifications for domestic sewage collection and treatment works associated with any domestic permit must be approved by the Commission and failure to secure approval before commencing construction of such works or making a discharge is a violation of this permit and each day is an additional violation until approval has been secured.
- c. Permits for domestic wastewater treatment plants are granted subject to the policy of the Commission to encourage the development of area-wide waste collection, treatment, and disposal systems. The Commission reserves the right to amend any domestic wastewater permit in accordance with applicable procedural requirements to require the system covered by this permit to be integrated into an area-wide system, should such be developed; to require the delivery of the wastes authorized to be collected in, treated by or discharged from said system, to such area-wide system; or to amend this permit in any other particular to effectuate the Commission's policy. Such amendments may be made when the changes required are advisable for water quality control purposes and are feasible on the basis of waste treatment technology, engineering, financial, and related considerations existing at the time the changes are required, exclusive of the loss of investment in or revenues from any then existing or proposed waste collection, treatment or disposal system.

- Domestic wastewater treatment plants shall be operated and maintained by sewage plant operators holding a valid certificate of competency at the required level as defined in 30 TAC Chapter 30.
- 10. For Publicly Owned Treatment Works (POTWs), the 30-day average (or monthly average) percent removal for BOD and TSS shall not be less than 85%, unless otherwise authorized by this permit.
- 11. Facilities that generate industrial solid waste as defined in 30 TAC § 335.1 shall comply with these provisions:
 - a. Any solid waste, as defined in 30 TAC § 335.1 (including but not limited to such wastes as garbage, refuse, sludge from a waste treatment, water supply treatment plant or air pollution control facility, discarded materials, discarded materials to be recycled, whether the waste is solid, liquid, or semisolid), generated by the permittee during the management and treatment of wastewater, must be managed in accordance with all applicable provisions of 30 TAC Chapter 335, relating to Industrial Solid Waste Management.
 - b. Industrial wastewater that is being collected, accumulated, stored, or processed before discharge through any final discharge outfall, specified by this permit, is considered to be industrial solid waste until the wastewater passes through the actual point source discharge and must be managed in accordance with all applicable provisions of 30 TAC Chapter 335.
 - c. The permittee shall provide written notification, pursuant to the requirements of 30 TAC § 335.8(b)(1), to the Environmental Cleanup Section (MC 127) of the Remediation Division informing the Commission of any closure activity involving an Industrial Solid Waste Management Unit, at least 90 days prior to conducting such an activity.
 - d. Construction of any industrial solid waste management unit requires the prior written notification of the proposed activity to the Registration and Reporting Section (MC 129) of the Registration, Review, and Reporting Division. No person shall dispose of industrial solid waste, including sludge or other solids from wastewater treatment processes, prior to fulfilling the deed recordation requirements of 30 TAC § 335.5.
 - e. The term "industrial solid waste management unit" means a landfill, surface impoundment, waste-pile, industrial furnace, incinerator, cement kiln, injection well, container, drum, salt dome waste containment cavern, or any other structure vessel, appurtenance, or other improvement on land used to manage industrial solid waste.
 - f. The permittee shall keep management records for all sludge (or other waste) removed from any wastewater treatment process. These records shall fulfill all applicable requirements of 30 TAC § 335 and must include the following, as it pertains to wastewater treatment and discharge:
 - i. Volume of waste and date(s) generated from treatment process;
 - ii. Volume of waste disposed of on-site or shipped off-site;
 - iii. Date(s) of disposal;
 - iv. Identity of hauler or transporter;
 - v. Location of disposal site; and
 - vi. Method of final disposal.

The above records shall be maintained on a monthly basis. The records shall be retained at the facility site, or shall be readily available for review by authorized representatives of the TCEQ for at least five years.

12. For industrial facilities to which the requirements of 30 TAC § 335 do not apply, sludge and solid wastes, including tank cleaning and contaminated solids for disposal, shall be disposed of in accordance with THSC § 361.

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SLUDGE PROVISIONS

The permittee is authorized to dispose of water treatment sludge only at a Texas Commission on Environmental Quality (TCEQ) registered or permitted land application site, commercial land application site or co-disposal landfill authorized to accept water treatment plant sludge.

The disposal of water treatment sludge by land application on property owned, leased or under the direct control of the permittee is a violation of the permit unless the site is permitted or registered with the TCEQ. This provision does not authorize Distribution and Marketing of sludge.

SECTION I. REQUIREMENTS APPLYING TO ALL WATER TREATMENT SLUDGE LAND APPLICATION

A. General Requirements

- 1. The permittee shall handle and dispose of water treatment sludge in accordance with 30 TAC Chapter 312 Subchapter F and all other applicable state and federal regulations to protect public health and the environment from any reasonably anticipated adverse effects due to any toxic pollutants that may be present. The permittee shall ensure that the water treatment sludge meets the requirements in 40 CFR Part 257 concerning the quality of water treatment sludge disposed of by land application.
- 2. The permittee shall provide necessary information to the parties who receive the water treatment sludge to assure compliance with these regulations.

B. Operation Requirements and Regulated Management Conditions for Water Treatment Sludge

The operation and maintenance of a water treatment sludge disposal site must be in accordance with 30 TAC Chapter 312 Subchapter F and 40 CFR Part 257 as it relates to solid waste disposal. Specifically, land application of water treatment sludge shall meet the following requirements.

- 1. Land application of water treatment sludge shall not cause or contribute to the harm of a threatened or endangered species of plant, fish, or wildlife or result in the destruction or adverse modification of the critical habitat of a threatened or endangered species after application to agricultural land.
- 2. Land application of water treatment sludge shall not restrict the flow of the base flood, reduce the temporary water storage capacity of the flood plain, or result in washout of solid waste.
- 3. Land application of water treatment sludge shall be disposed of by a method and under conditions that prevents runoff beyond the active application area and protects the quality of the surface water.

- 4. Land application of water treatment sludge disposal shall not contaminate an underground drinking water source beyond the site boundary, as specified in 40 CFR 257.3-4.
- 5. Land application of water treatment sludge disposal practices shall not allow uncontrolled public access so as to expose the public to potential health and safety hazards at the disposal site.

C. Testing Requirements

1. Water treatment sludge shall be tested prior to sludge disposal in accordance with the method specified in both 40 CFR Part 261, Appendix II and 40 CFR Part 268, Appendix I [Toxicity Characteristic Leaching Procedure (TCLP)] or other method, which receives the prior approval of the TCEQ for the contaminants listed in Table 1 of 40 CFR Section 261.24. Water treatment sludge failing this test shall be managed according to RCRA standards for generators of hazardous waste, and the waste's disposition must be in accordance with all applicable requirements for hazardous waste processing, storage, or disposal.

Following failure of any TCLP test, the management or disposal of water treatment sludge at a facility other than an authorized hazardous waste processing, storage, or disposal facility shall be prohibited until such time as the permittee can demonstrate the sludge no longer exhibits the hazardous waste toxicity characteristics (as demonstrated by the results of the TCLP tests). A written report shall be provided to both the TCEQ Registration and Reporting Section (MC 129) of the Permitting and Registration Support Division and the Regional Director (MC Region 4) within 7 days after failing the TCLP Test. The report shall contain test results, certification that unauthorized waste management has stopped, and a summary of alternative disposal plans that comply with RCRA standards for the management of hazardous waste. The report shall be addressed to: Director, Registration and Reporting Section (MC 129) of the Permitting and Registration Support Division, Texas Commission on Environmental Quality, P.O. Box 13087, Austin, Texas 78711-3087. In addition, the permittee shall prepare an annual report on the results of all sludge toxicity testing.

The permittee shall submit the following information in an annual report to the TCEQ by September 30th of each year. The permittee must submit this annual report using the online electronic reporting system available through TCEQ's website. If the permittee requests and obtains an electronic reporting waiver, the annual report can be submitted in hard copy to the TCEQ Regional Office (MC Region 4) and the Enforcement Division (MC 224).

- 2. Water treatment sludge shall be tested as needed, in accordance with the requirements of 30 TAC Chapter 312. The following pollutant limits shall apply to disposal of water treatment sludge on land used for the production of food chain crops.
 - a. Cadmium Disposal of water treatment sludge on a site within three feet of the surface of land used for the production of food chain crops shall not exist or occur, unless in compliance with all requirements of the following paragraphs (i) or (ii).

- i. (A) The pH of the water treatment sludge and soil mixture must be 6.5 or greater at the time of each application of sludge, except for water treatment sludge containing cadmium concentrations of 2 mg/kg (dry weight) or less.
 - (B) The annual application rate for cadmium in sludge shall not exceed 0.5 kilograms per hectare.
 - (C) The maximum cumulative application rate of cadmium, in kg/ha based on background soil pH, from sludge does not exceed the following levels:

Background Soil	pH Soil Cat	Soil Cation Exchange Capacity (CEC)			
		meq/100 g of soil			
	<u>0 - 5</u>	<u>5 - 15</u>	<u>>15</u>		
II C -	_	_	_		
pH < 6.5	5	5	5		
pH > 6.5	5	10	20		

(D) The maximum cumulative application rate of cadmium from sludge on soils with a background pH of less than 6.5 shall not exceed the values listed in the table below, provided that the pH of the **sludge and soil mixture** is adjusted to and maintained at 6.5 or greater whenever food chain crops are grown.

<u>Parameter</u>	Soil Cation Exchange Capacity (CEC)			
	meq/100 g of soil			
	<u>0 - 5</u>	<u>5 - 15</u>	<u>>15</u>	
Cadmium, kg/ha	5	10	20	

- ii. (A) The only food chain crop produced is animal feed.
 - (B) The pH of the sludge and soil mixture is 6.5 or greater at the time of sludge application or at the time the crop is planted, whichever occurs later, and this pH level is maintained whenever food chain crops are grown.
 - (C) A facility operating plan which demonstrates how the animal feed will be distributed to preclude ingestion by humans and describes the measures to be taken to safeguard against possible health hazards from cadmium entering the food chain, which may result from alternative land uses must be developed.
 - (D) Future property owners are notified by a stipulation in the land record or property deed which states that the property has received sludge at high cadmium application rates and that food chain crops should not be grown, due to a possible health hazard.
- b. Polychlorinated Biphenyls (PCBs) Water treatment sludge containing

concentrations of PCBs equal to or greater than 10 mg/kg (dry weight) is incorporated into the soil when applied to land used for producing animal feed, including pasture crops for animals raised for milk. Incorporation of the solid waste into the soil is not required if it is assured that the PCBs content is less than 0.2 mg/kg (actual weight) in animal feed or less than 1.5 mg/kg (fat basis) in milk.

D. Record Keeping Requirements

The permittee, pursuant to 30 TAC Section 312 Subchapter F shall retain a record of all water treatment sludge testing performed and the concentration of Cadmium and PCBs and shall retain the information for a minimum of five (5) years. Records shall be readily available for review or submittal to the Executive Director upon request.

E. Reporting Requirements

The permittee shall submit the following information in an annual report to the TCEQ by September 30th of each year. The permittee must submit this annual report using the online electronic reporting system available through TCEQ's website. If the permittee requests and obtains an electronic reporting waiver, the annual report can be submitted in hard copy to the TCEQ Regional Office (MC Region 4) and the Enforcement Division (MC 224).

- 1. Annual sludge production in dry tons/year.
- 2. Amount of sludge disposed of in dry tons/year.
- 3. Identity of hauler and TCEQ transporter registration number.
- 4. Owner and location of the disposal site(s).
- 5. Certification that the water treatment sludge meets the requirements of 40 CFR Part 257 concerning the quality of the sludge being land applied.
- 6. The TCEQ Registration or Permit Number for the disposal site(s).
- 7. Toxicity Characteristic Leach Procedure (TCLP) results.

The above records shall be maintained on-site on a monthly basis, for a period of at least five (5) years and shall be made available to the Texas Commission on Environmental Quality upon request.

SECTION II. REQUIREMENTS APPLYING TO ALL WATER TREATMENT SLUDGE DISPOSED OF IN A MUNICIPAL SOLID WASTE LANDFILL

- A. The permittee shall handle and dispose of water treatment sludge in accordance with 30 TAC Chapter 330 and all other applicable state and federal regulations to protect public health and the environment from any reasonably anticipated adverse effects due to any toxic pollutants that may be present. The permittee shall ensure that the water treatment sludge meets the requirements in 30 TAC Chapter 330 concerning the quality of the sludge disposed of in a Municipal Solid Waste Landfill (MSWL).
- **B.** The permittee shall ensure that the water treatment sludge meets the requirements in 40 CFR Part 258 concerning the quality of the sludge disposed of in a MSWL.
- **C.** If the permittee generates water treatment sludge and supplies that sludge to the owner or operator of a MSWL for disposal, the permittee shall provide to the owner or operator of the MSWL appropriate information needed to be in compliance with the provisions of this permit.
- D. Water treatment sludge shall be tested prior to sludge disposal in accordance with the method in both 40 CFR Part 261, Appendix II and 40 CFR Part 268, Appendix I [Toxicity Characteristic Leaching Procedure (TCLP)] or other method, which receives the prior approval of the TCEQ for the contaminants listed in Table 1 of 40 CFR Section 261.24. Water treatment sludge failing this test shall be managed according to RCRA standards for generators of hazardous waste, and the waste's disposition must be in accordance with all applicable requirements for hazardous waste processing, storage, or disposal.

Following failure of any TCLP test, the management or disposal of water treatment sludge at a facility other than an authorized hazardous waste processing, storage, or disposal facility shall be prohibited until such time as the permittee can demonstrate that the water treatment sludge no longer exhibits the hazardous waste toxicity characteristics (as demonstrated by the results of the TCLP tests). A written report shall be provided to both the TCEQ Registration and Reporting Section (MC 129) of the Permitting and Registration Support Division and the Regional Director (MC Region 4) within 7 days after failing the TCLP Test. The report shall contain test results, certification that unauthorized waste management has stopped, and a summary of alternative disposal plans that comply with RCRA standards for the management of hazardous waste. The report shall be addressed to: Director, Registration and Reporting Section (MC 129) of the Permitting and Registration Support Division, Texas Commission on Environmental Quality, P. O. Box 13087, Austin, Texas 78711-3087. In addition, the permittee shall prepare an annual report on the results of all sludge toxicity testing. The reporting period is from September 1 of previous year to August 31 of the current year. This annual report shall be submitted to the TCEO Regional Office (MC **Region 4)** and the Land Application Team (MC 150) of the Water Quality Division by September 30 of each year.

E. Water treatment sludge shall be tested as needed, in accordance with the requirements of 30 TAC Chapter 330.

F. Record Keeping Requirements

The permittee shall develop the following information and shall retain the information for five years.

- 1. The description (including procedures followed and the results) of all liquid Paint Filter Tests performed.
- 2. The description (including procedures followed and results) of all TCLP tests performed.

The above records shall be maintained on-site on a monthly basis and shall be made available to the Texas Commission on Environmental Quality upon request.

H. Reporting Requirements

The permittee shall submit the following information in an annual report to the TCEQ by September 30th of each year. The permittee must submit this annual report using the online electronic reporting system available through TCEQ's website. If the permittee requests and obtains an electronic reporting waiver, the annual report can be submitted in hard copy to the TCEQ Regional Office (MC Region 4) and the Enforcement Division (MC 224).

- 1. Toxicity Characteristic Leaching Procedure (TCLP) results.
- 2. Annual sludge production in dry tons/year.
- 3. Amount of sludge disposed of in a municipal solid waste landfill in dry tons/year.
- 4. Amount of sludge transported interstate in dry tons/year.
- 5. A certification that the water treatment sludge meets the requirements of 30 TAC Chapter 330 concerning the quality of the sludge disposed of in a municipal solid waste landfill.
- 6. Identity of hauler(s) and transporter registration number.
- 7. Owner of disposal site(s).
- 8. Location of disposal site(s).
- 9. Date(s) of disposal.

The above records shall be maintained on-site on a monthly basis, for a period of at least five (5) years and shall be made available to the Texas Commission on Environmental Quality upon request.

SECTION III. REQUIREMENTS APPLYING TO ALL WATER TREATMENT SLUDGE STORED IN A WATER TREATMENT SLUDGE LAGOON

The final disposal of water treatment sludge at the plant site is a violation of this permit. Water treatment sludge placed in water treatment sludge lagoon(s) is for temporary storage only. Water treatment sludge will ultimately be disposed of in accordance with the closure plan as required in item (B).

- A. The permittee shall maintain a minimum of two feet of freeboard in the water treatment sludge lagoon(s).
- B. The permittee shall submit a closure plan for the water treatment sludge lagoon(s) at least 180 days prior to planned closure to the Executive Director in care of the Municipal Wastewater Permits Team (MC 148) of the Water Quality Division for approval.

OTHER REQUIREMENTS

- These water treatment facilities shall be operated at all times under the direct supervision of a water works operator who holds an applicable, valid license issued by the TCEQ executive director.
- 2. The permittee shall operate and maintain these facilities in accordance with accepted practices.
- 3. The permittee shall monitor and report data on the effluent discharge.

STATEMENT OF BASIS/TECHNICAL SUMMARY AND EXECUTIVE DIRECTOR'S PRELIMINARY DECISION

DESCRIPTION OF APPLICATION

Applicant: Combined Consumers Special Utility District

Texas Pollutant Discharge Elimination System (TPDES) Permit

No. WQ0014685001, EPA ID No. TX0128538

Regulated Activity: Discharge of treated filter backwash effluent from a water

treatment plant

Type of Application: Renewal

Request: Renewal with no changes

Authority: Federal Clean Water Act (CWA) § 402; Texas Water Code (TWC)

§ 26.027; 30 Texas Administrative Code (TAC) Chapters 30, 305, 307, 309, 312, and 319; Commission policies; and United States Environmental Protection Agency (EPA) guidelines.

EXECUTIVE DIRECTOR RECOMMENDATION

The Executive Director has made a preliminary decision that this permit, if issued, meets all statutory and regulatory requirements. The draft permit includes an expiration date of **five years from the date of issuance**.

REASON FOR PROPOSED PROJECT

The applicant has applied to the Texas Commission on Environmental Quality (TCEQ) for a renewal of the existing permit that authorizes the discharge of treated filter backwash effluent from a water treatment plant at a daily average flow not to exceed 0.025 million gallons per day (MGD). The existing water treatment facility serves Combined Consumers Special Utility District.

PROJECT DESCRIPTION AND LOCATION

Filter backwash wastewater from the water treatment plant is treated in sedimentation ponds. The facility is in operation.

Sludge generated from the water treatment facility is hauled by a registered transporter and disposed of at a TCEQ-authorized landfill, Maloy Landfill, Registration No. 10854 & 10855, in Hunt County. The draft also permit authorizes the disposal of sludge at a TCEQ authorized land application site, co-disposal landfill, or wastewater treatment facility.

The plant site is located at 10446 Farm-to-Market Road 751, in Hunt County, Texas 75474.

The treated effluent is discharged directly to Lake Tawakoni in Segment No. 0507 of the Sabine River Basin. The designated uses for Segment No. 0507 are primary contact recreation, public water supply, high aquatic life use. The effluent limitations in the draft permit will maintain and protect the existing instream uses.

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Effluent limitations for the conventional effluent parameters (i.e., Total Suspended Solids) are based on stream standards and waste load allocations for water-quality limited streams as established in the Texas Water Quality Standards (TSWQS).

For this type of discharge, end-of-pipe compliance with pH limits between 6.0 and 9.0 standard units reasonably assures instream compliance with the TSWQS for pH when the discharge authorized is from a minor facility. This conservative assumption is based on TCEQ sampling conducted throughout the state that indicates that instream buffering quickly restores pH levels to ambient conditions.

The effluent limits have been reviewed for consistency with the State of Texas Water Quality Management Plan (WQMP). The WQMP consideration does not apply to this facility as stated in the latest EPA approved Water Quality Management Program Continuing Planning Process. A Waste Load Evaluation has not been prepared for Segment No. 0507.

The discharge from this permit action is not expected to have an effect on any federal endangered or threatened aquatic or aquatic-dependent species or proposed species or their critical habitat. This determination is based on the United States Fish and Wildlife Service's (USFWS) biological opinion on the State of Texas authorization of the TPDES (September 14, 1998; October 21, 1998, update). To make this determination for TPDES permits, TCEQ and EPA only considered aquatic or aquatic-dependent species occurring in watersheds of critical concern or high priority as listed in Appendix A of the USFWS biological opinion. The determination is subject to reevaluation due to subsequent updates or amendments to the biological opinion. The permit does not require EPA review with respect to the presence of endangered or threatened species.

Segment No. 0507 is not currently listed on the state's inventory of impaired and threatened waters (the 2024 CWA § 303(d) list).

SUMMARY OF EFFLUENT DATA

The following is a summary of the applicant's effluent monitoring data for the period May 31, 2023 through May 31, 2025. The average of Daily Average value is computed by averaging of all 30-day average values for the reporting period for each parameter: flow and total suspended solids (TSS).

<u>Parameter</u> <u>Average of Daily Average</u>

Flow, MGD 0.0057 TSS, mg/l 3.4

DRAFT PERMIT CONDITIONS

The draft permit authorizes a discharge of treated filter backwash effluent at a volume not to exceed a daily average flow of 0.025 MGD.

The effluent limitation in the draft permit, based on a 30-day average, is 25 mg/l total suspended solids (TSS).

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The draft permit includes Sludge Provisions according to the requirements of 30 TAC Chapter 312, Sludge Use, Disposal, and Transportation. Sludge generated from the water treatment facility is hauled by a registered transporter and disposed of at a TCEQ-authorized landfill, Maloy Landfill, Registration No. 10854 & 10855, in Hunt County. The draft also permit authorizes the disposal of sludge at a TCEQ authorized land application site, co-disposal landfill, or wastewater treatment facility.

SUMMARY OF CHANGES FROM APPLICATION

None.

SUMMARY OF CHANGES FROM EXISTING PERMIT

The Standard Permit Conditions, Sludge Provisions, and Other Requirements sections of the draft permit have been updated.

The sludge testing has been updated from the existing from once during the term of the permit to prior to sludge disposal.

BASIS FOR DRAFT PERMIT

The following items were considered in developing the permit draft:

- 1. Application received on May 16, 2025, and additional information received on June 12, 2025.
- 2. TPDES Permit No. WQ0014685001 issued on September 10, 2021.
- 3. The effluent limitations and/or conditions in the draft permit comply with the TSWQS, 30 TAC §§ 307.1 307.10, effective July 22, 2010 and the EPA-approved portions of the 2014 TSWQS, effective March 6, 2014.
- 4. The effluent limitations in the draft permit are based on Best Professional Judgment. The effluent limits are consistent with other water treatment plant permits.
- 5. Interoffice Memoranda from the Water Quality Assessment Section of the TCEQ Water Quality Division.
- 6. Consistency with the Coastal Management Plan: The facility is not located in the Coastal Management Program boundary.
- 7. Procedures to Implement the Texas Surface Water Quality Standards (IP), Texas Commission on Environmental Quality, June 2010, as approved by EPA, and the IP, January 2003, for portions of the 2010 IP not approved by EPA.
- 8. Texas 2024 Clean Water Act Section 303(d) List, Texas Commission on Environmental Quality, June 26, 2024; approved by the U.S. Environmental Protection Agency on November 13, 2024.

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9. Texas Natural Resource Conservation Commission Guidance Document for Establishing Monitoring Frequencies for Domestic and Industrial Wastewater Discharge Permits, Document No. 98-001.000-OWR-WQ, May 1998.

PROCEDURES FOR FINAL DECISION

When an application is declared administratively complete, the Chief Clerk sends a letter to the applicant advising the applicant to publish the Notice of Receipt of Application and Intent to Obtain Permit in the newspaper. In addition, the Chief Clerk instructs the applicant to place a copy of the application in a public place for review and copying in the county where the facility is or will be located. This application will be in a public place throughout the comment period. The Chief Clerk also mails this notice to any interested persons and, if required, to landowners identified in the permit application. This notice informs the public about the application, and provides that an interested person may file comments on the application or request a contested case hearing or a public meeting.

Once a draft permit is completed, it is sent, along with the Executive Director's preliminary decision, as contained in the technical summary or fact sheet, to the Chief Clerk. At that time, the Notice of Application and Preliminary Decision will be mailed to the same people and published in the same newspaper as the prior notice. This notice sets a deadline for making public comments. The applicant must place a copy of the Executive Director's preliminary decision and draft permit in the public place with the application.

Any interested person may request a public meeting on the application until the deadline for filing public comments. A public meeting is intended for the taking of public comment, and is not a contested case proceeding.

After the public comment deadline, the Executive Director prepares a response to all significant public comments on the application or the draft permit raised during the public comment period. The Chief Clerk then mails the Executive Director's response to comments and final decision to people who have filed comments, requested a contested case hearing, or requested to be on the mailing list. This notice provides that if a person is not satisfied with the Executive Director's response and decision, they can request a contested case hearing or file a request to reconsider the Executive Director's decision within 30 days after the notice is mailed.

The Executive Director will issue the permit unless a written hearing request or request for reconsideration is filed within 30 days after the Executive Director's response to comments and final decision is mailed. If a hearing request or request for reconsideration is filed, the Executive Director will not issue the permit and will forward the application and request to the TCEQ Commissioners for their consideration at a scheduled Commission meeting. If a contested case hearing is held, it will be a legal proceeding similar to a civil trial in state district court.

If the Executive Director calls a public meeting or the Commission grants a contested case hearing as described above, the Commission will give notice of the date, time, and place of the meeting or hearing. If a hearing request or request for reconsideration is made, the Commission will consider all public comments in making its decision and shall either adopt the Executive Director's response to public comments or prepare its own response.

For additional information about this application, contact Garrison Layne at (512) 239-0849.

Combined Consumers Special Utility District	
TPDES Permit No. WQ0014685001	
Statement of Basis/Technical Summary and Executive D	irector's Preliminary Decision
Garrison Layne	Date
Domestic Permits Team	
Domestic Wastewater Section (MC 148)	