



Administrative Package Cover Page

This file contains the following documents:

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



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

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

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

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 DOMESTIC WASTEWATER/STORMWATER

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

White Oak Shores Sewer Service Corporation (CN603246471) operates White Oak Shores WWTP (RN105345748), an extended aeration activated sludge facility. The facility is located at 6435 N FM 17, in Yantis, Wood County, Texas 75497. This application is to renew a TPDES permit authorizing a discharge of 11,000 gallons per day.

Discharges from the facility are expected to contain five-day biological oxygen demand (BOD₅), total suspended solids (TSS) and Escherichia Coli. Additional pollutants are included in the Domestic Technical Report 1.0 in the permit application package. Domestic treated wastewater is treated by a bar screen, aeration basin, final clarifier, a chlorine chamber and a sludge digester.

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY



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

PERMIT NO. WQ0014851001

APPLICATION. Whiteoak Shores Sewer Service Corporation, 6435 North Farm-to-Market 17 #A16, Yantis, Texas 75497, has applied to the Texas Commission on Environmental Quality (TCEQ) to renew Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0014851001 (EPA I.D. No. TX0129992) to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 11,000 gallons per day. The domestic wastewater treatment facility is located at 6435 North Farm-to-Market Road 17, in the city of Yantis, in Wood County, Texas 75497. The discharge route is from the plant site to an unnamed tributary, thence to Lake Fork Reservoir. TCEQ received this application on August 25, 2025. The permit application will be available for viewing and copying at Yantis City Hall, front desk, 103 City Circle, Yantis, Texas prior to the date this notice is published in the newspaper. The application, including any updates, and associated notices are available electronically at the following webpage:

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

<https://gisweb.tceq.texas.gov/LocationMapper/?marker=-95.603888,32.905277&level=18>

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

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

OPPORTUNITY FOR A CONTESTED CASE HEARING. After the deadline for submitting public comments, the Executive Director will consider all timely comments and prepare a

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

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

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

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

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

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

INFORMATION AVAILABLE ONLINE. For details about the status of the application, visit the Commissioners' Integrated Database at www.tceq.texas.gov/goto/cid. 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 Whiteoak Shores Sewer Service Corporation at the address stated above or by calling Ms. Sheila Smith, Manager, at 903-383-7571.

Issuance Date: September 12, 2025

TPDES Permit Renewal Application Submittal

Submitted to:

**Texas Commission on Environmental Quality
Application Review & Processing Team (MC-148)
P.O. Box 13087
Austin, Texas 78711-3087**

For:

**Whiteoak Shores WWTP
WQ0014851001
Yantis, Wood County, Texas**

Owner:

**WhiteOak Shores Sewer Service Corporation
PO Box 456
Yantis, TX 75497**

Issue Date: August 26, 2025



consulting environmental engineers, inc.

Main Office:

**150 N. Harbin Drive – Suite 408
Stephenville, TX 76401
Phone: (254) 968-8130
Fax: (254) 968-8134
Registered Firm: F-2323**

Branch Office:

**11504 PR 7440
Wolfforth, TX 79382
Phone: (817) 504-8390
www.ceeinc.org
email: ceeinc@ceeinc.org**

Whiteoak Shores Sewer Service Corporation Wastewater Permit Renewal Exhibit Cross Reference

<u>Exhibit I.D.</u>	<u>Description</u>	<u>Reference</u>
I	Project Summary	
II	Topographic Map	Section 13 (b), page 11 of 21
III	SPIF Topographic Map	Item 5, page 17 of 21
IV	Flow Diagram	Section 2 (c), page 2 of 79
V	Site Drawing	Section 3, page 3 of 79
VI	Effluent Analysis	
VII	Copy of Check	
VIII	Summary Transmittal Letter	
IX	Plain Language Summary	
X	Supplemental Permit Information Form (SPIF)	
XI	Core Data Form	
XII	Domestic Administrative Report Form	
XIII	Domestic Technical Report Form	



I
**Whiteoak Shores WWTP Renewal
Project Summary**





consulting environmental engineers, inc.

150 n. harbin drive – suite 408 • stephenville, tx 76401

phone: (254) 968-8130 fax: (254) 968-8134

email: ceeinc@ceeinc.org registered firm: #F-2323

PROJECT SUMMARY

WhiteOak Shores Wastewater Treatment Plant provides wastewater treatment service to the WhiteOak Shores Subdivision. The site is located at 6435 North FM 17, Wood County, Texas. The WWTP has been constructed and is in operation. There have been no changes to the system since the permit was issued.

This packet contains the information and documents required for a renewal of the existing permit (WQ0014851001) which expires March 30, 2026.

II

Whiteoak Shores WWTP Renewal Topographic Map

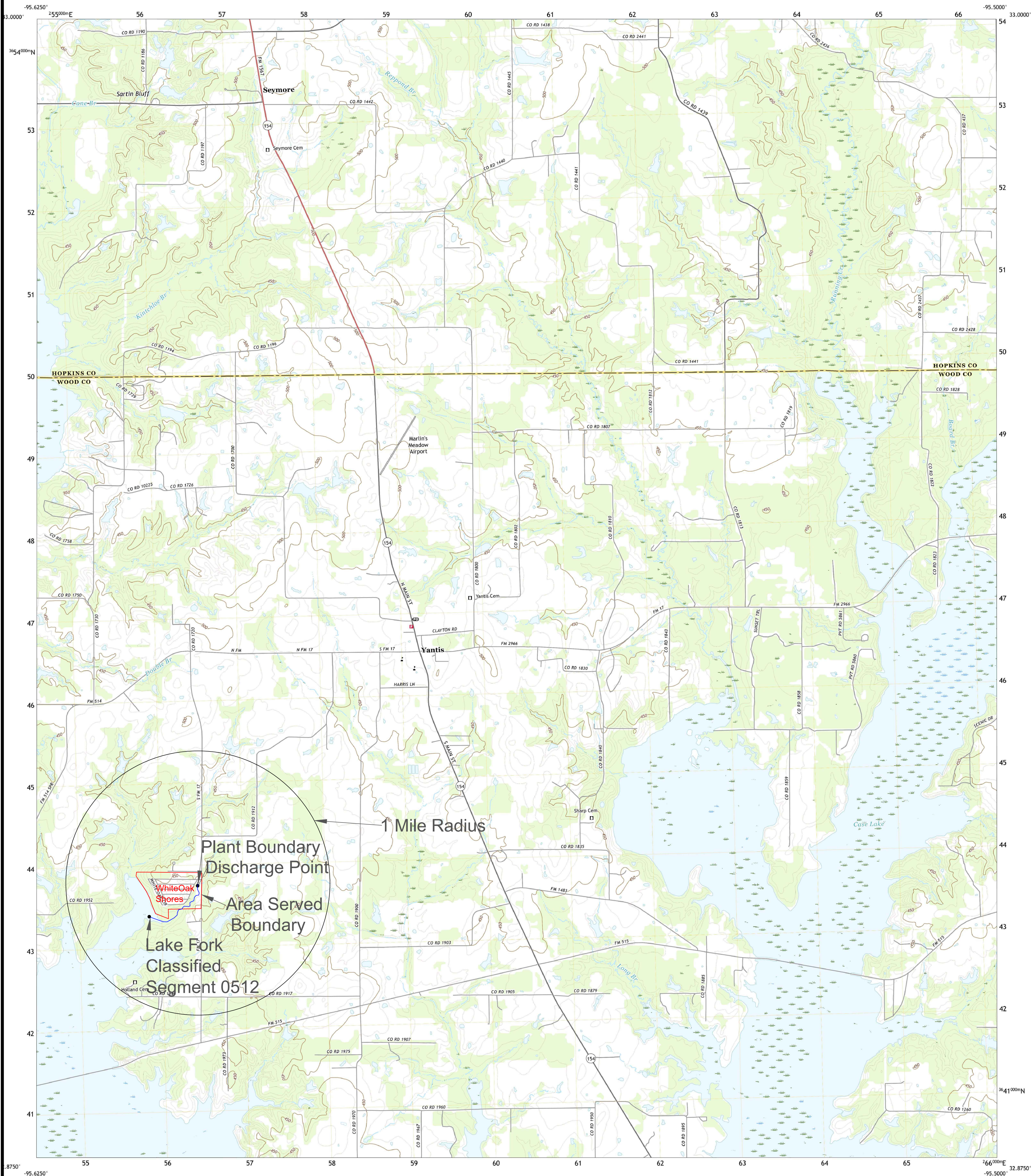




U.S. DEPARTMENT OF THE INTERIOR
U.S. GEOLOGICAL SURVEY

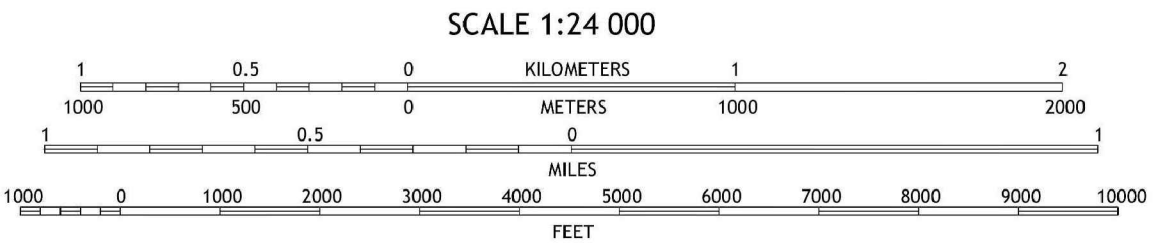
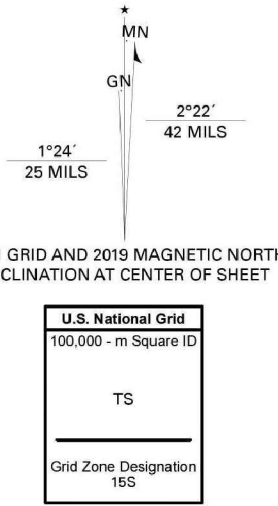


YANTIS QUADRANGLE
TEXAS
7.5-MINUTE SERIES

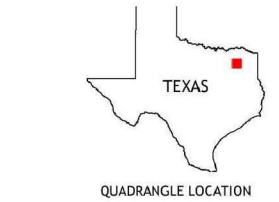


Produced by the United States Geological Survey
North American Datum of 1983 (NAD83)
World Geodetic System of 1984 (WGS84), Projection and
1 000-meter grid: Universal Transverse Mercator, Zone 15S
This map is not a legal document. Boundaries may be
generalized for this map scale. Private lands within government
reservations may not be shown. Obtain permission before
entering private lands.

Imagery.....NAIP, September 2016 - November 2016
Roads.....U.S. Census Bureau, 2015 - 2018
Names.....National Hydrography Dataset, 2003 - 2018
Hydrography.....National Elevation Dataset, 2004 - 2017
Contours.....Multiple sources; see metadata file
Boundaries.....FWS National Wetlands Inventory 1979 - 1980
Wetlands.....



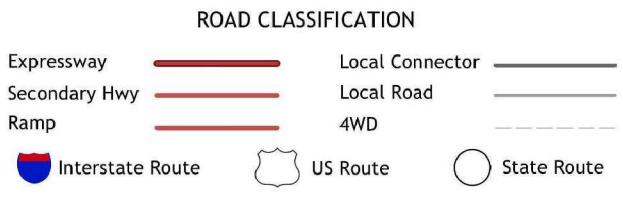
CONTOUR INTERVAL 10 FEET
NORTH AMERICAN VERTICAL DATUM OF 1988
This map was produced to conform with the
National Geospatial Program US Topo Product Standard, 2011.
A metadata file associated with this product is draft version 0.6.18



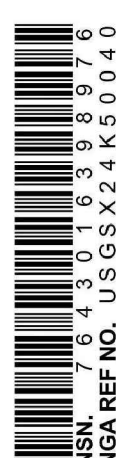
1	2	3
4	5	6
7	8	9

ADJOINING QUADRANGLES

1 Bradhear
2 Sulphur Springs SE
3 Como
4 Artaba
5 Pleasant Grove
6 Alba
7 Calvary
8 Quitman



YANTIS, TX
2019



Date
July 8, 2025

Drawn By
CE

Scale
1":1900'

consulting environmental engineers, inc.
150 n. harbin drive - suite 408 stephenville, tx 76401
(254)968-8130 fax: (254)968-8134 email: ceecinc@ceecinc.org
registered firm: #F-2323

WhiteOak Shores Subdivision
WhiteOak Shores Sewer Service Corp.
Yantis, Texas

Topographic Map

Exhibit II

III
Whiteoak Shores WWTP Renewal
SPIF Topographic Map





U.S. DEPARTMENT OF THE INTERIOR
U.S. GEOLOGICAL SURVEY

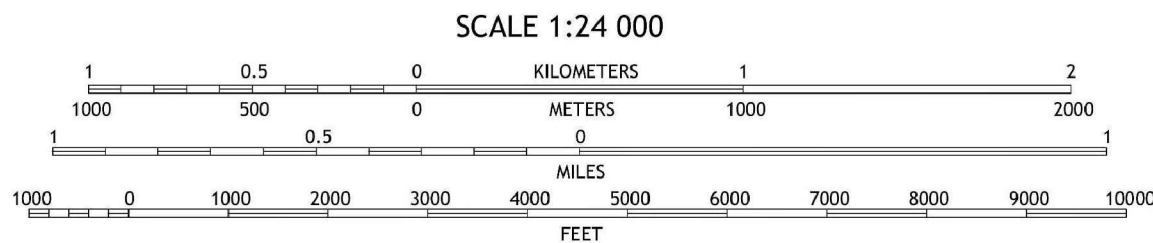
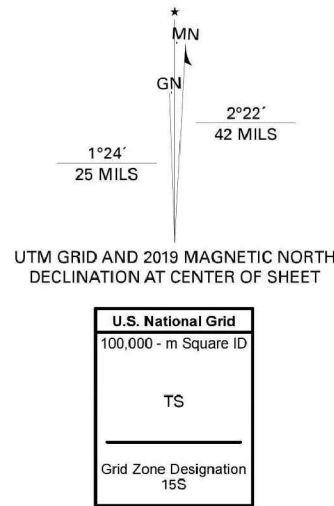


YANTIS QUADRANGLE
TEXAS
7.5-MINUTE SERIES



Produced by the United States Geological Survey
North American Datum of 1983 (NAD83)
World Geodetic System of 1984 (WGS84). Projection and
1,000-meter grid/Universal Transverse Mercator, Zone 15S
This map is not a legal document. Boundaries may be
generalized for this map scale. Private lands within government
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entering private lands.

Imagery.....NAP, September 2016 - November 2016
Roads.....U.S. Census Bureau, 2015 - 2018
Names.....GNIS, 1979 - 2018
Hydrography.....National Hydrography Dataset, 2003 - 2018
Contours.....National Elevation Dataset, 2004
Boundaries.....Multiple sources; see metadata file 2016 - 2017
Wetlands.....FWS National Wetlands Inventory 1979 - 1980



1	2	3
4	5	6
7	8	9

ADJOINING QUADRANGLES

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

YANTIS, TX
2019

Date
July 8, 2025
Drawn By
CE
Scale
1":1900'

consulting environmental engineers, inc.
150 n. harbin drive - suite 408 stephenville, tx 76401
(254)968-8130 fax: (254)968-8134 email: ceinc@ceeinc.org
registered firm: #F-2323

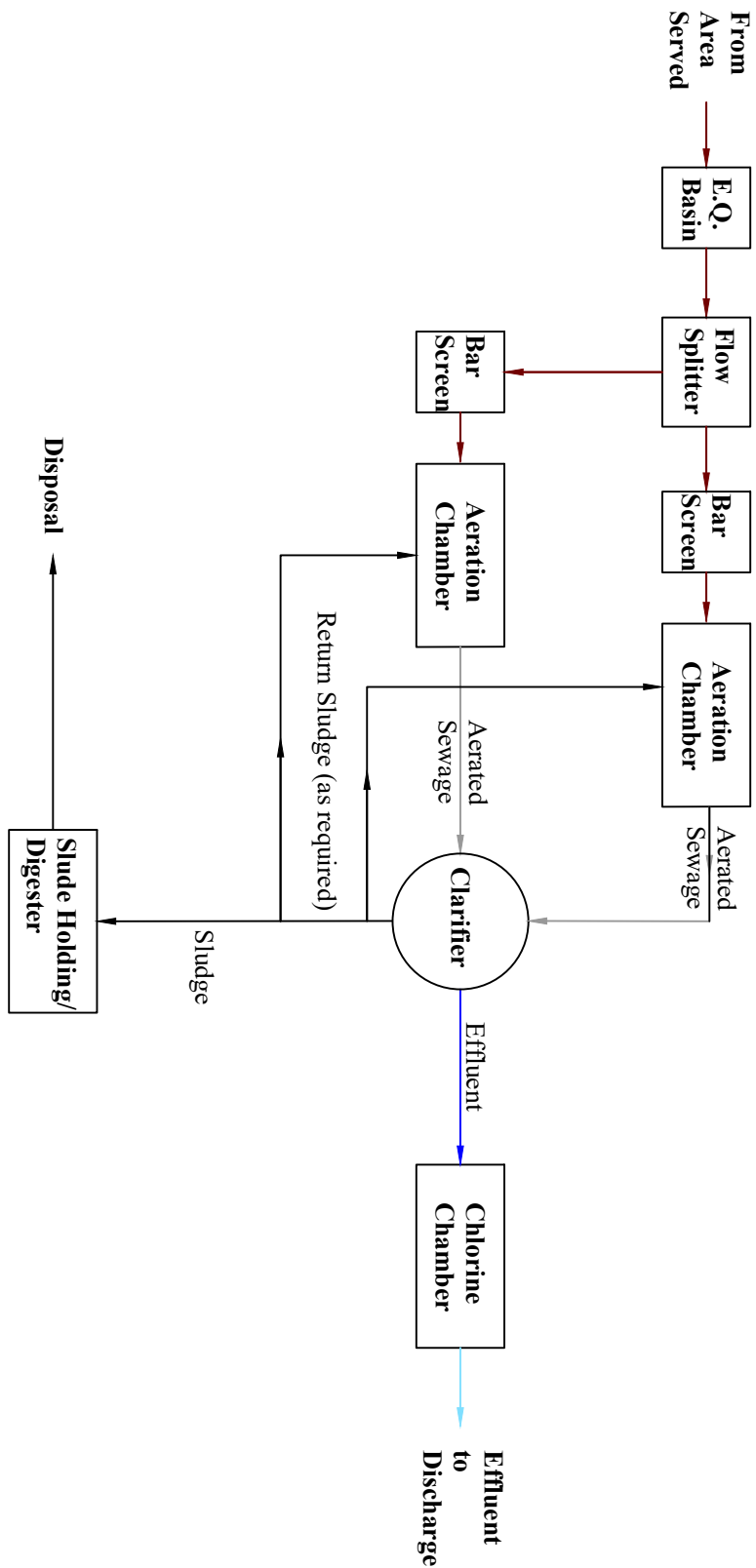
WhiteOak Shores Subdivsion
WhiteOak Shores Sewer Service Corp.
Yantis, Texas
SPIF Topographic Map

Exhibit III

IV

Whiteoak Shores WWTP Renewal Flow Diagram





Date
July 8, 2025

Drawn By
CE

Scale
NTS

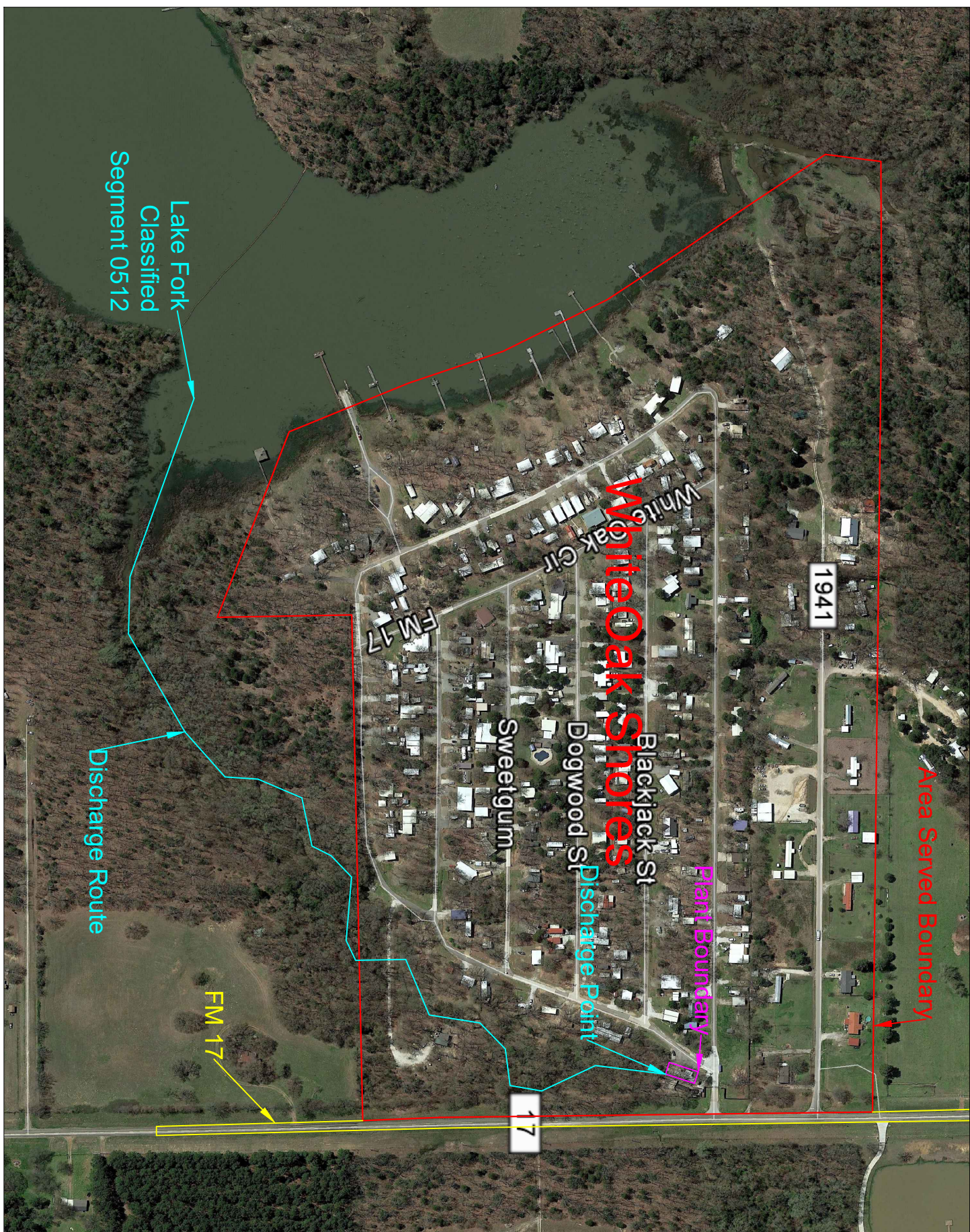
consulting environmental engineers, inc.
150 n. harbin drive - suite 408 - stephenville, tx 76401
(254)968-8130 fax: (254)968-8134 email: ceinc@ceinc.org
registered firm: #F-2323

WhiteOak Shores Subdivision
WhiteOak Shores Sewer Service Corp.
Yantis, Texas
Flow Diagram

Exhibit IV

V
Whiteoak Shores WWTP Renewal
Site Drawings





Date
July 8, 20254
Drawn By
CE
Scale
1"=300'

consulting **environmental** engineers, inc.
 150 N. Harbin Drive - Suite 408 - Georgetown, TX 76641
 (254) 968-8130 fax: (254) 968-8134 email: ceo@ceei.com
 registered firm #F-2323

WhiteOak Shores Subdivision
 WhiteOak Shores Sewer Service Corp.
 Yantis, Texas
 Site Drawing

Exhibit V

VI

Whiteoak Shores WWTP Renewal Effluent Analysis



Project
1157266

WSS1-A

White Oak Shores Sewer Service
Sheila Smith
6435 N FM 17 Office A16
Yantis, TX 75497-

Printed 08/20/2025
7:19

TABLE OF CONTENTS

This report consists of this Table of Contents and the following pages:

<u>Report Name</u>	<u>Description</u>	<u>Pages</u>
1157266_r02_01_ProjectSamples	SPL Kilgore Project P:1157266 C:WSS1 Project Sample Cross Reference t:304	1
1157266_r03_03_ProjectResults	SPL Kilgore Project P:1157266 C:WSS1 Project Results t:304	5
1157266_r10_05_ProjectQC	SPL Kilgore Project P:1157266 C:WSS1 Project Quality Control Groups	8
1157266_r99_09_CoC__1_of_1	SPL Kilgore CoC WSS1 1157266_1_of_1	2
Total Pages:		16

Email: Kilgore.ProjectManagement@spllabs.com

Survey: How are we doing?



Report Page 1 of 17

SAMPLE CROSS REFERENCE

Project

1157266

White Oak Shores Sewer Service
 Sheila Smith
 6435 N FM 17 Office A16
 Yantis, TX 75497-

Printed

8/20/2025

Page 1 of 1
 ww

Sample	Sample ID	Taken	Time	Received
2434745	Permit Renewal	08/06/2025	07:00:00	08/06/2025

Bottle 01 Polyethylene 1/2 gal (White), Q
 Bottle 02 Polyethylene Quart, Q
 Bottle 03 H2SO4 to pH <2 Glass Qt w/Teflon lined lid, Q
 Bottle 04 H2SO4 to pH <2 Glass Qt w/Teflon lined lid, Q
 Bottle 05 16 oz HNO3 Metals Plastic, Q
 Bottle 06 8 oz Plastic H2SO4 pH < 2, Q
 Bottle 07 Na2S2O3 (0.008%) Polystyrene-100 mL Sterilized, I
 Bottle 08 Prepared Bottle: NH3N TRAACS Autosampler Vial (Batch 1189080) Volume: 6.00000 mL <== Derived from 06 (6 ml)
 Bottle 09 BOD Titration Beaker A (Batch 1189246) Volume: 100.00000 mL <== Derived from 01 (100 ml)
 Bottle 10 BOD Analytical Beaker B (Batch 1189246) Volume: 100.00000 mL <== Derived from 01 (100 ml)
 Bottle 11 Prepared Bottle: TKN TRAACS Autosampler Vial (Batch 1189262) Volume: 20.00000 mL <== Derived from 06 (20 ml)
 Bottle 12 Prepared Bottle: ICP Preparation for Metals (Batch 1189311) Volume: 50.00000 mL <== Derived from 05 (50 ml)

Method	Bottle	PrepSet	Preparation	QcGroup	Analytical
EPA 300.0 2.1	01	1189279	08/06/2025	1189279	08/06/2025
EPA 200.8 5.4	12	1189311	08/07/2025	1189497	08/07/2025
SM 2320 B-2011	02	1191280	08/19/2025	1191280	08/19/2025
SM 5210 B-2016 (TCMP Inhibitor)	01	1189246	08/12/2025	1189246	08/12/2025
SM 2510 B-2011	02	1190087	08/12/2025	1190087	08/12/2025
EPA 1664B (HEM)	03	1189553	08/07/2025	1189553	08/07/2025
SM 9223 B (Colilert-18 QT)-2016	07	1189218	08/07/2025	1189218	08/07/2025
SM 9223 B (Colilert-18 QT)-2016	07	1189217	08/07/2025	1189217	08/07/2025
EPA 350.1 2	08	1189080	08/06/2025	1189378	08/07/2025
SM 2540 C-2020	01	1189734	08/07/2025	1189734	08/07/2025
EPA 351.2 2	11	1189262	08/07/2025	1189370	08/07/2025
SM 4500-P E-2011	06	1189842	08/11/2025	1189842	08/11/2025
SM 2540 D-2020	01	1189537	08/07/2025	1189537	08/07/2025

Email: Kilgore.ProjectManagement@spllabs.com

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WSS1-A

Page 1 of 5

White Oak Shores Sewer Service
 Sheila Smith
 6435 N FM 17 Office A16
 Yantis, TX 75497-

Project

1157266

Printed: 08/20/2025

RESULTS

Sample Results

2434745 Permit Renewal

Received: 08/06/2025

Non-Potable Water

Collected by: Client
 Taken: 08/06/2025

White Oak Shores Sew
 07:00:00

PO:

EPA 1664B (HEM)

Prepared: 1189553 08/07/2025 07:19:00 Analyzed 1189553 08/07/2025 07:19:00 MAX

Parameter	Results	Units	RL	Flags	CAS	Bottle
NELAC Oil and Grease (HEM)	<4.21	mg/L	4.21			03

EPA 200.8 5.4

Prepared: 1189311 08/07/2025 07:00:00 Analyzed 1189497 08/07/2025 17:37:00 HLT

Parameter	Results	Units	RL	Flags	CAS	Bottle
NELAC Aluminum, Total	0.0433	mg/L	0.005		7429-90-5	12

EPA 300.0 2.1

Prepared: 1189279 08/06/2025 18:17:00 Analyzed 1189279 08/06/2025 18:17:00 KRA

Parameter	Results	Units	RL	Flags	CAS	Bottle
NELAC Chloride	85.9	mg/L	3.00			01
NELAC Fluoride	<0.5	mg/L	0.5			01
NELAC Nitrate-Nitrogen Total	19.3	mg/L	0.226		14797-55-8	01
NELAC Sulfate	44.0	mg/L	3.00			01

EPA 350.1 2

Prepared: 1189080 08/06/2025 12:34:32 Analyzed 1189378 08/07/2025 08:52:00 AMB

Parameter	Results	Units	RL	Flags	CAS	Bottle
NELAC Ammonia Nitrogen	0.247	mg/L	0.020			08

EPA 351.2 2

Prepared: 1189262 08/07/2025 08:11:34 Analyzed 1189370 08/07/2025 11:25:00 AMB

Parameter	Results	Units	RL	Flags	CAS	Bottle
NELAC Total Kjeldahl Nitrogen	1.76	mg/L	0.050		7727-37-9	11

SM 2320 B-2011

Prepared: 1191280 08/19/2025 08:41:00 Analyzed 1191280 08/19/2025 08:41:00 TRC

Parameter	Results	Units	RL	Flags	CAS	Bottle
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WSS1-A

Page 2 of 5

White Oak Shores Sewer Service
Sheila Smith
6435 N FM 17 Office A16
Yantis, TX 75497-

Project
1157266

Printed: 08/20/2025

2434745 Permit Renewal

Received: 08/06/2025

Non-Potable Water

Collected by: Client

White Oak Shores Sew

PO:

Taken: 08/06/2025

07:00:00

SM 2320 B-2011		Prepared: 1191280 08/19/2025		08:41:00	Analyzed	1191280 08/19/2025	08:41:00	TRC
Parameter		Results	Units	RL	Flags	CAS	Bottle	
NELAC	Total Alkalinity (as CaCO3)	84.2	mg/L	1.00			02	
SM 2510 B-2011		Prepared: 1190087 08/12/2025		12:56:00	Analyzed	1190087 08/12/2025	12:56:00	JKL
Parameter		Results	Units	RL	Flags	CAS	Bottle	
NELAC	Lab Spec. Conductance at 25 C	900	umhos/cm				02	
SM 2540 C-2020		Prepared: 1189734 08/07/2025		14:45:00	Analyzed	1189734 08/07/2025	14:45:00	JMB
Parameter		Results	Units	RL	Flags	CAS	Bottle	
NELAC	Total Dissolved Solids	404	mg/L	20.0			01	
SM 2540 D-2020		Prepared: 1189537 08/07/2025		13:00:00	Analyzed	1189537 08/07/2025	13:00:00	ADR
Parameter		Results	Units	RL	Flags	CAS	Bottle	
NELAC	Total Suspended Solids	6.17	mg/L	3.33			01	
SM 4500-P E-2011		Prepared: 1189842 08/11/2025		08:15:00	Analyzed	1189842 08/11/2025	08:15:00	PNR
Parameter		Results	Units	RL	Flags	CAS	Bottle	
NELAC	Phosphorus (as P), total	5.49	mg/L	0.600		7723-14-0	06	
SM 5210 B-2016 (TCMP Inhibitor)		Prepared: 1189246 08/07/2025			Analyzed	1189246 08/12/2025	13:12:56	ESN
Parameter		Results	Units	RL	Flags	CAS	Bottle	
NELAC	BOD Carbonaceous	4.27	mg/L	2.00			01	
SM 9223 B (Colilert-18 QT)-2016		Prepared: 1189217 08/07/2025		11:40:00	Analyzed	1189217 08/07/2025	11:40:00	CPI
Parameter		Results	Units	RL	Flags	CAS	Bottle	
NELAC	MPN, Total Coliform, Non-Pot	3.1	MPN/100mL	1.00			07	



Report Page 4 of 17

WSS1-A

Page 3 of 5

White Oak Shores Sewer Service
Sheila Smith
6435 N FM 17 Office A16
Yantis, TX 75497-

Project
1157266

Printed: 08/20/2025

2434745 Permit Renewal

Received: 08/06/2025

Non-Potable Water

Collected by: Client

White Oak Shores Sew

PO:

Taken: 08/06/2025

07:00:00

SM 9223 B (Colilert-18 QT)-2016

Prepared: 1189218 08/07/2025 11:40:00 Analyzed 1189218 08/07/2025 11:40:00 CPI

Parameter	Results	Units	RL	Flags	CAS	Bottle
NELAC MPN, E.coli, Col.-18 - Non-Pot	<1.0	MPN/100mL	1.00			07

Sample Preparation

2434745 Permit Renewal

Received: 08/06/2025

08/06/2025

Prepared: 08/06/2025 11:01:23 Calculated 08/06/2025 11:01:23 CAL

z Enviro Fee (per Sampling Group) Verified

EPA 1664B (HEM)

Prepared: 1189267 08/07/2025 07:19:00 Analyzed 1189267 08/07/2025 07:19:00 MAX

NELAC O&G HEM Started Started

EPA 200.2 2.8

Prepared: 1189311 08/07/2025 07:00:00 Analyzed 1189311 08/07/2025 07:00:00 AMC

z Liquid Metals Digestion 50/50 ml 05

EPA 350.1, Rev. 2.0

Prepared: 1189080 08/06/2025 12:34:32 Analyzed 1189080 08/06/2025 12:34:32 MEG

NELAC Ammonia Distillation 6/6 ml 06



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White Oak Shores Sewer Service
Sheila Smith
6435 N FM 17 Office A16
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Printed: 08/20/2025

2434745 Permit Renewal

Received: 08/06/2025

08/06/2025

EPA 351.2, Rev 2.0		Prepared:	1189262	08/07/2025	08:11:34	Analyzed	1189262	08/07/2025	08:11:34	MEG
NELAC	TKN Block Digestion	20/20	ml							06
SM 2540 C-2015		Prepared:	1189380	08/07/2025	14:45:00	Analyzed	1189380	08/07/2025	14:45:00	JMB
NELAC	Total Dissolved Solids Started	Started								
SM 2540 D-2011		Prepared:	1188519	08/07/2025	13:00:00	Analyzed	1188519	08/07/2025	13:00:00	ADR
NELAC	TSS Set Started	Started								
SM 5210 B-2016 (TCMP Inhibitor)		Prepared:	1189246	08/07/2025		Analyzed	1189246	08/07/2025	06:54:24	ESN
NELAC	BODc Set Started	Started								
SM 9223 B (Colilert-18 QT)-2016		Prepared:	1189216	08/06/2025	14:11:00	Analyzed	1189216	08/06/2025	14:11:00	CP1
NELAC	MPN (Colilert-18) Start Non-Pot	STARTED								07



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Sheila Smith
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Qualifiers:

We report results on an As Received (or Wet) basis unless marked Dry Weight.

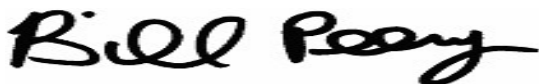
Unless otherwise noted, testing was performed at SPL, Inc.- Kilgore laboratory which holds International, Federal, and state accreditations. Please see our Websites for details.

(N)ELAC - Covered in our NELAC scope of accreditation

z -- Not covered by our NELAC scope of accreditation

These analytical results relate to the sample tested. This report may NOT be reproduced EXCEPT in FULL without written approval of SPL Kilgore. Unless otherwise specified, these test results meet the requirements of NELAC.

RL is the Reporting Limit (sample specific quantitation limit) and is at or above the Method Detection Limit (MDL). CAS is Chemical Abstract Service number. RL is our Reporting Limit, or Minimum Quantitation Level. The RL takes into account the Instrument Detection Limit (IDL), Method Detection Limit (MDL), and Practical Quantitation Limit (PQL), and any dilutions and/or concentrations performed during sample preparation (EQL). Our analytical result must be above this RL before we report a value in the 'Results' column of our report (without a 'I' flag). Otherwise, we report ND (Not Detected above RL), because the result is "<" (less than) the number in the RL column. MAL is Minimum Analytical Level and is typically from regulatory agencies. Unless we report a result in the result column, or interferences prevent it, we work to have our RL at or below the MAL.



Bill Peery, MS, VP Technical Services



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Analytical Set 1189217

SM 9223 B (Colilert-18 QT)-2016

Blank

Parameter	PrepSet	Reading	MDL	MQL	Units	File
MPN, Total Coliform, Non-Pot	1189217	<1.0	1.00	1.00	MPN/100mL	127924685

Micro Dup

Parameter	Sample	Type	Result	Unknown	Unit	Range	Criterion
MPN, Total Coliform, Non-Pot	2435058	Duplicate	7.4	7.3	MPN/100mL	0.00591	0.7825

Standard

Parameter	Sample	Reading	Known	Units	Recover%	Limits%	File
P. aeruginosa	1189216	<1.0	<1.0	MPN/100mL	-	-	127924682
Standard E. coli	1189216	>2419.6	>2419.6	MPN/100mL	-	-	127924684
Standard K.varicola	1189216	>2419.6	>2419.6	MPN/100mL	-	-	127924683

Analytical Set 1189218

SM 9223 B (Colilert-18 QT)-2016

Blank

Parameter	PrepSet	Reading	MDL	MQL	Units	File
MPN, E.coli, Col.-18 - Non-Pot	1189218	<1.0	1.00	1.00	MPN/100mL	127924705

Micro Dup

Parameter	Sample	Type	Result	Unknown	Unit	Range	Criterion
MPN, E.coli, Col.-18 - Non-Pot	2435058	Duplicate	<1.0	<1.0	MPN/100mL	0	0.7825

Standard

Parameter	Sample	Reading	Known	Units	Recover%	Limits%	File
P. aeruginosa	1189216	<1.0	<1.0	MPN/100mL	-	-	127924702
Standard E. coli	1189216	>2419.6	>2419.6	MPN/100mL	-	-	127924704
Standard K.varicola	1189216	<1.0	<1.0	MPN/100mL	-	-	127924703

Analytical Set 1189246

SM 5210 B-2016 (TCMP Inhibitor)

Blank

Parameter	PrepSet	Reading	MDL	MQL	Units	File
BOD Carbonaceous	1189246	0.2	0.200	0.500	mg/L	127926094
BOD Carbonaceous	1189246	0.1	0.200	0.500	mg/L	127927888

Duplicate

Parameter	Sample	Result	Unknown	Unit	RPD	Limit%
BOD Carbonaceous	2434703	12.4	13.5	mg/L	8.49	30.0
BOD Carbonaceous	2434911	3.95	3.63	mg/L	8.44	30.0
BOD Carbonaceous	2435163	6.00	5.96	mg/L	0.669	30.0

Seed Drop

Parameter	PrepSet	Reading	MDL	MQL	Units	File
BOD Carbonaceous	1189246	0.273	0.200	0.500	mg/L	127926096
BOD Carbonaceous	1189246	0.470	0.200	0.500	mg/L	127927890

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Standard							File
Parameter	Sample	Reading	Known	Units	Recover%	Limits%	
BOD Carbonaceous		225	198	mg/L	114	83.7 - 116	127926097
BOD Carbonaceous		206	198	mg/L	104	83.7 - 116	127927891

Analytical Set 1189370

EPA 351.2 2

AWRL/LOQ C							File
Parameter		Reading	Known	Units	Recover%	Limits%	
Total Kjeldahl Nitrogen		0.208	0.200	mg/L	104	75.0 - 125	127928667

Blank							File
Parameter	PrepSet	Reading	MDL	MQL	Units		
Total Kjeldahl Nitrogen	1189262	ND	0.00712	0.050	mg/L		127928663

CCB							File
Parameter	PrepSet	Reading	MDL	MQL	Units		
Total Kjeldahl Nitrogen	1189262	ND	0.00712	0.050	mg/L		127928664
Total Kjeldahl Nitrogen	1189262	ND	0.00712	0.050	mg/L		127928676
Total Kjeldahl Nitrogen	1189262	ND	0.00712	0.050	mg/L		127928688
Total Kjeldahl Nitrogen	1189370	ND	0.00712	0.050	mg/L		127928697

CCV							File
Parameter		Reading	Known	Units	Recover%	Limits%	
Total Kjeldahl Nitrogen		5.16	5.00	mg/L	103	90.0 - 110	127928651
Total Kjeldahl Nitrogen		5.25	5.00	mg/L	105	90.0 - 110	127928661
Total Kjeldahl Nitrogen		5.24	5.00	mg/L	105	90.0 - 110	127928672
Total Kjeldahl Nitrogen		5.26	5.00	mg/L	105	90.0 - 110	127928683
Total Kjeldahl Nitrogen		5.26	5.00	mg/L	105	90.0 - 110	127928694
Total Kjeldahl Nitrogen		5.25	5.00	mg/L	105	90.0 - 110	127928698

Duplicate							RPD	Limit%
Parameter	Sample	Result	Unknown	Unit				
Total Kjeldahl Nitrogen	2434861	0.206	0.184	mg/L			11.3	20.0
Total Kjeldahl Nitrogen	2434862	1.23	1.23	mg/L			0	20.0

ICV							File
Parameter		Reading	Known	Units	Recover%	Limits%	
Total Kjeldahl Nitrogen		4.94	5.00	mg/L	98.8	90.0 - 110	127928650

LCS Dup										
Parameter	PrepSet	LCS	LCSD	Known	Limits%	LCS%	LCSD%	Units	RPD	Limit%
Total Kjeldahl Nitrogen	1189262	4.57	4.56	5.00	90.0 - 110	91.4	91.2	mg/L	0.219	20.0

Mat. Spike								
Parameter	Sample	Spike	Unknown	Known	Units	Recovery %	Limits %	File
Total Kjeldahl Nitrogen	2434861	4.73	0.184	5.00	mg/L	90.9	80.0 - 120	127928670
Total Kjeldahl Nitrogen	2434862	5.53	1.23	5.00	mg/L	86.0	80.0 - 120	127928674

Analytical Set 1189378

EPA 350.1 2

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Blank

Parameter	PrepSet	Reading	MDL	MQL	Units	File
Ammonia Nitrogen	1189080	ND	0.00336	0.020	mg/L	127928931

CCV

Parameter	Reading	Known	Units	Recover%	Limits%	File
Ammonia Nitrogen	2.10	2.00	mg/L	105	90.0 - 110	127928922
Ammonia Nitrogen	2.15	2.00	mg/L	108	90.0 - 110	127928932
Ammonia Nitrogen	2.19	2.00	mg/L	110	90.0 - 110	127928943
Ammonia Nitrogen	2.16	2.00	mg/L	108	90.0 - 110	127928953
Ammonia Nitrogen	2.14	2.00	mg/L	107	90.0 - 110	127928963
Ammonia Nitrogen	2.11	2.00	mg/L	106	90.0 - 110	127928974
Ammonia Nitrogen	2.11	2.00	mg/L	106	90.0 - 110	127928983
Ammonia Nitrogen	2.06	2.00	mg/L	103	90.0 - 110	127928992
Ammonia Nitrogen	2.03	2.00	mg/L	102	90.0 - 110	127929002
Ammonia Nitrogen	2.09	2.00	mg/L	104	90.0 - 110	127929013

Duplicate

Parameter	Sample	Result	Unknown	Unit	RPD	Limit%
Ammonia Nitrogen	2434739	ND	ND	mg/L		20.0
Ammonia Nitrogen	2434740	ND	ND	mg/L		20.0

ICV

Parameter	Reading	Known	Units	Recover%	Limits%	File
Ammonia Nitrogen	2.19	2.00	mg/L	110	90.0 - 110	127928921

LCS Dup

Parameter	PrepSet	LCS	LCSD	Known	Limits%	LCS%	LCSD%	Units	RPD	Limit%
Ammonia Nitrogen	1189080	2.10	2.14	2.00	90.0 - 110	105	107	mg/L	1.89	20.0

Mat. Spike

Parameter	Sample	Spike	Unknown	Known	Units	Recovery %	Limits %	File
Ammonia Nitrogen	2434739	2.19	ND	2.00	mg/L	110	80.0 - 120	127928938
Ammonia Nitrogen	2434740	2.12	ND	2.00	mg/L	106	80.0 - 120	127928941

Analytical Set 1189537

SM 2540 D-2020

Blank

Parameter	PrepSet	Reading	MDL	MQL	Units	File
Total Suspended Solids	1189537	ND	2	2	mg/L	127932522

ControlBlk

Parameter	PrepSet	Reading	MDL	MQL	Units	File
Total Suspended Solids	1189537	0.0001			grams	127932521

Duplicate

Parameter	Sample	Result	Unknown	Unit	RPD	Limit%
Total Suspended Solids	2434656	1330	1350	mg/L	1.49	20.0
Total Suspended Solids	2435015	182	172	mg/L	5.65	20.0
Total Suspended Solids	2435036	128	118	mg/L	8.13	20.0

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LCS

Parameter	PrepSet	Reading	Known	Units	Recover%	Limits	File
Total Suspended Solids	1189537	48.0	50.0	mg/L	96.0	90.0 - 110	127932555

Standard

Parameter	Sample	Reading	Known	Units	Recover%	Limits%	File
Total Suspended Solids		98.0	100	mg/L	98.0	90.0 - 110	127932554

Analytical Set 1189553

EPA 1664B (HEM)

Blank

Parameter	PrepSet	Reading	MDL	MQL	Units	File
Oil and Grease (HEM)	1189553	ND	0.804	4.00	mg/L	127932927

ControlBlk

Parameter	PrepSet	Reading	MDL	MQL	Units	File
Oil and Grease (HEM)	1189553	0			grams	127932926
Oil and Grease (HEM)	1189553	0.0003			grams	127932951

LCS

Parameter	PrepSet	Reading	Known	Units	Recover%	Limits	File
Oil and Grease (HEM)	1189553	34.2	40.0	mg/L	85.5	78.0 - 114	127932928

MS

Parameter	Sample	MS	MSD	UNK	Known	Limits	MS%	MSD%	Units	RPD	Limit%
Oil and Grease (HEM)	2434421	36.2	0	1.37	40.0	78.0 - 114	90.5		mg/L		20.0

Analytical Set 1189734

SM 2540 C-2020

Blank

Parameter	PrepSet	Reading	MDL	MQL	Units	File
Total Dissolved Solids	1189734	ND	5.00	5.00	mg/L	127938676

ControlBlk

Parameter	PrepSet	Reading	MDL	MQL	Units	File
Total Dissolved Solids	1189734	0			grams	127938663

Duplicate

Parameter	Sample	Result	Unknown	Unit	RPD	Limit%
Total Dissolved Solids	2434111	260	262	mg/L	0.766	20.0

LCS

Parameter	PrepSet	Reading	Known	Units	Recover%	Limits	File
Total Dissolved Solids	1189734	194	200	mg/L	97.0	85.0 - 115	127938664

Analytical Set 1189279

EPA 300.0 2.1

AWRL/LOQ C

Parameter	Reading	Known	Units	Recover%	Limits%	File
Fluoride	0.078	0.100	mg/L	78.0	70.0 - 130	127927331

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Blank

<u>Parameter</u>	<u>PrepSet</u>	<u>Reading</u>	<u>MDL</u>	<u>MQL</u>	<u>Units</u>	<u>File</u>
Chloride	1189279	0.033	0.0163	0.300	mg/L	127927332
Fluoride	1189279	ND	0.0503	0.100	mg/L	127927332
Nitrate-Nitrogen Total	1189279	ND	0.00128	0.0226	mg/L	127927332
Sulfate	1189279	ND	0.123	0.300	mg/L	127927332

CCB

<u>Parameter</u>	<u>PrepSet</u>	<u>Reading</u>	<u>MDL</u>	<u>MQL</u>	<u>Units</u>	<u>File</u>
Chloride	1189279	0.016	0.0163	0.300	mg/L	127927328
Chloride	1189279	0.065	0.0163	0.300	mg/L	127927348
Chloride	1189279	0.017	0.0163	0.300	mg/L	127927360
Fluoride	1189279	0	0.0503	0.100	mg/L	127927328
Fluoride	1189279	0	0.0503	0.100	mg/L	127927348
Fluoride	1189279	0	0.0503	0.100	mg/L	127927360
Nitrate-Nitrogen Total	1189279	0	0.00128	0.0226	mg/L	127927328
Nitrate-Nitrogen Total	1189279	0	0.00128	0.0226	mg/L	127927348
Nitrate-Nitrogen Total	1189279	0	0.00128	0.0226	mg/L	127927360
Sulfate	1189279	0	0.123	0.300	mg/L	127927328
Sulfate	1189279	0	0.123	0.300	mg/L	127927348
Sulfate	1189279	0	0.123	0.300	mg/L	127927360

CCV

<u>Parameter</u>	<u>Reading</u>	<u>Known</u>	<u>Units</u>	<u>Recover%</u>	<u>Limits%</u>	<u>File</u>
Chloride	9.85	10.0	mg/L	98.5	90.0 - 110	127927327
Chloride	10.1	10.0	mg/L	101	90.0 - 110	127927347
Chloride	10.1	10.0	mg/L	101	90.0 - 110	127927359
Fluoride	10.1	10.0	mg/L	101	90.0 - 110	127927327
Fluoride	10.3	10.0	mg/L	103	90.0 - 110	127927347
Fluoride	10.4	10.0	mg/L	104	90.0 - 110	127927359
Nitrate-Nitrogen Total	2.23	2.26	mg/L	98.7	90.0 - 110	127927327
Nitrate-Nitrogen Total	2.30	2.26	mg/L	102	90.0 - 110	127927347
Nitrate-Nitrogen Total	2.31	2.26	mg/L	102	90.0 - 110	127927359
Sulfate	9.42	10.0	mg/L	94.2	90.0 - 110	127927327
Sulfate	9.74	10.0	mg/L	97.4	90.0 - 110	127927347
Sulfate	9.74	10.0	mg/L	97.4	90.0 - 110	127927359

LCS Dup

<u>Parameter</u>	<u>PrepSet</u>	<u>LCS</u>	<u>LCSD</u>	<u>Known</u>	<u>Limits%</u>	<u>LCS%</u>	<u>LCSD%</u>	<u>Units</u>	<u>RPD</u>	<u>Limit%</u>
Chloride	1189279	4.92	5.00	5.00	85.0 - 115	98.4	100	mg/L	1.61	20.0
Fluoride	1189279	5.23	5.32	5.00	88.0 - 118	105	106	mg/L	1.71	20.0
Nitrate-Nitrogen Total	1189279	1.14	1.18	1.13	86.3 - 117	101	104	mg/L	3.45	20.0
Sulfate	1189279	4.56	4.73	5.00	85.4 - 124	91.2	94.6	mg/L	3.66	20.0

MSD

<u>Parameter</u>	<u>Sample</u>	<u>MS</u>	<u>MSD</u>	<u>UNK</u>	<u>Known</u>	<u>Limits</u>	<u>MS%</u>	<u>MSD%</u>	<u>Units</u>	<u>RPD</u>	<u>Limit%</u>
Chloride	2432928	253	264	163	100	80.0 - 120	90.0	101	mg/L	11.5	20.0
Fluoride	2432928	96.5	99.7	ND	100	80.0 - 120	96.5	99.7	mg/L	3.26	20.0

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MSD

Parameter	Sample	MS	MSD	UNK	Known	Limits	MS%	MSD%	Units	RPD	Limit%
Nitrate-Nitrogen Total	2432928	25.8	25.7	2.46	22.6	80.0 - 120	103	103	mg/L	0.429	20.0
Sulfate	2432928	209	218	111	100	80.0 - 120	98.0	107	mg/L	8.78	20.0
Chloride	2433013	17.8	17.7	8.78	10.0	80.0 - 120	90.2	89.2	mg/L	1.11	20.0
Fluoride	2433013	9.22	9.43	ND	10.0	80.0 - 120	92.2	94.3	mg/L	2.25	20.0
Nitrate-Nitrogen Total	2433013	2.03	2.00	ND	2.26	80.0 - 120	89.8	88.5	mg/L	1.49	20.0
Sulfate	2433013	66.6	67.1	57.4	10.0	80.0 - 120	92.0	97.0	mg/L	5.29	20.0

Analytical Set

1189497

EPA 200.8 5.4

Blank

Parameter	PrepSet	Reading	MDL	MQL	Units	File
Aluminum, Total	1189311	ND	0.0039	0.005	mg/L	127931254

CCV

Parameter	Reading	Known	Units	Recover%	Limits%	File
Aluminum, Total	0.0507	0.05	mg/L	101	90.0 - 110	127931249
Aluminum, Total	0.0515	0.05	mg/L	103	90.0 - 110	127931253
Aluminum, Total	0.0515	0.05	mg/L	103	90.0 - 110	127931263
Aluminum, Total	0.0519	0.05	mg/L	104	90.0 - 110	127931274
Aluminum, Total	0.0512	0.05	mg/L	102	90.0 - 110	127931284
Aluminum, Total	0.0514	0.05	mg/L	103	90.0 - 110	127931295
Aluminum, Total	0.0516	0.05	mg/L	103	90.0 - 110	127931305

ICV

Parameter	Reading	Known	Units	Recover%	Limits%	File
Aluminum, Total	0.0509	0.05	mg/L	102	90.0 - 110	127931248

LCS Dup

Parameter	PrepSet	LCS	LCSD	Known	Limits%	LCS%	LCSD%	Units	RPD	Limit%
Aluminum, Total	1189311	0.496	0.498	0.500	85.0 - 115	99.2	99.6	mg/L	0.402	20.0

MSD

Parameter	Sample	MS	MSD	UNK	Known	Limits	MS%	MSD%	Units	RPD	Limit%
Aluminum, Total	2434664	1.09	1.09	0.613	0.500	70.0 - 130	95.4	95.4	mg/L	0	20.0
Aluminum, Total	2434855	0.542	0.556	0.050	0.500	70.0 - 130	98.4	101	mg/L	2.81	20.0

Analytical Set

1189842

SM 4500-P E-2011

AWRL/LOQ C

Parameter	Reading	Known	Units	Recover%	Limits%	File
Phosphorus (as P), total	0.0569	0.060	mg/L	94.8	70.0 - 130	127941159

Blank

Parameter	PrepSet	Reading	MDL	MQL	Units	File
Phosphorus (as P), total	1189842	0.00341	0.00311	0.030	mg/L	127941158

CCV

Parameter	Reading	Known	Units	Recover%	Limits%	File
Phosphorus (as P), total	0.310	0.300	mg/L	103	90.0 - 110	127941160

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CCV

<u>Parameter</u>	<u>Reading</u>	<u>Known</u>	<u>Units</u>	<u>Recover%</u>	<u>Limits%</u>	<u>File</u>
Phosphorus (as P), total	0.310	0.300	mg/L	103	90.0 - 110	127941175
Phosphorus (as P), total	0.308	0.300	mg/L	103	90.0 - 110	127941188

LCS Dup

<u>Parameter</u>	<u>PrepSet</u>	<u>LCS</u>	<u>LCSD</u>	<u>Known</u>	<u>Limits%</u>	<u>LCS%</u>	<u>LCSD%</u>	<u>Units</u>	<u>RPD</u>	<u>Limit%</u>
Phosphorus (as P), total	1189842	0.357	0.338	0.300	80.0 - 120	119	113	mg/L	5.47	20.0

MSD

<u>Parameter</u>	<u>Sample</u>	<u>MS</u>	<u>MSD</u>	<u>UNK</u>	<u>Known</u>	<u>Limits</u>	<u>MS%</u>	<u>MSD%</u>	<u>Units</u>	<u>RPD</u>	<u>Limit%</u>
Phosphorus (as P), total	2434864	0.436	0.431	0.393	0.150	70.0 - 130	28.7 *	25.3 *	mg/L	12.3	20.0
Phosphorus (as P), total	2435533	0.351	0.345	0.291	0.150	70.0 - 130	40.0 *	36.0 *	mg/L	10.5	20.0

Analytical Set

1190087

SM 2510 B-2011

Blank

<u>Parameter</u>	<u>PrepSet</u>	<u>Reading</u>	<u>MDL</u>	<u>MQL</u>	<u>Units</u>	<u>File</u>
Lab Spec. Conductance at 25 C	1190087	0.492			umhos/cm	127944750

Duplicate

<u>Parameter</u>	<u>Sample</u>	<u>Result</u>	<u>Unknown</u>	<u>Unit</u>	<u>RPD</u>	<u>Limit%</u>
Lab Spec. Conductance at 25 C	2433024	21800	21800	umhos/cm	0	20.0
Lab Spec. Conductance at 25 C	2435544	906	905	umhos/cm	0.110	20.0

ICV

<u>Parameter</u>	<u>Reading</u>	<u>Known</u>	<u>Units</u>	<u>Recover%</u>	<u>Limits%</u>	<u>File</u>
Lab Spec. Conductance at 25 C	13000	12900	umhos/cm	101	90.0 - 110	127944753

Standard

<u>Parameter</u>	<u>Sample</u>	<u>Reading</u>	<u>Known</u>	<u>Units</u>	<u>Recover%</u>	<u>Limits%</u>	<u>File</u>
Lab Spec. Conductance at 25 C	1190087	1420	1410	umhos/cm	101	90.0 - 110	127944751
Lab Spec. Conductance at 25 C	1190087	100	100	umhos/cm	100	90.0 - 110	127944752
Lab Spec. Conductance at 25 C	1190087	1420	1410	umhos/cm	101	90.0 - 110	127944771
Lab Spec. Conductance at 25 C	1190087	1420	1410	umhos/cm	101	90.0 - 110	127944772

Analytical Set

1191280

SM 2320 B-2011

Blank

<u>Parameter</u>	<u>PrepSet</u>	<u>Reading</u>	<u>MDL</u>	<u>MQL</u>	<u>Units</u>	<u>File</u>
Total Alkalinity (as CaCO3)	1191280	ND	1.00	1.00	mg/L	127969073
Total Alkalinity (as CaCO3)	1191280	ND	1.00	1.00	mg/L	127969100

CCV

<u>Parameter</u>	<u>Reading</u>	<u>Known</u>	<u>Units</u>	<u>Recover%</u>	<u>Limits%</u>	<u>File</u>
Total Alkalinity (as CaCO3)	25.5	25.0	mg/L	102	90.0 - 110	127969072
Total Alkalinity (as CaCO3)	25.3	25.0	mg/L	101	90.0 - 110	127969086
Total Alkalinity (as CaCO3)	25.1	25.0	mg/L	100	90.0 - 110	127969099
Total Alkalinity (as CaCO3)	25.3	25.0	mg/L	101	90.0 - 110	127969113
Total Alkalinity (as CaCO3)	25.4	25.0	mg/L	102	90.0 - 110	127969126

Email: Kilgore.ProjectManagement@spillabs.com



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QUALITY CONTROL



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WSS1-A

White Oak Shores Sewer Service
Sheila Smith
6435 N FM 17 Office A16
Yantis, TX 75497-

Project
1157266

Printed 08/20/2025

Duplicate

<u>Parameter</u>	<u>Sample</u>	<u>Result</u>	<u>Unknown</u>	<u>Unit</u>	<u>RPD</u>	<u>Limit%</u>
Total Alkalinity (as CaCO ₃)	2434010	321	329	mg/L	2.46	20.0
Total Alkalinity (as CaCO ₃)	2434639	105	102	mg/L	2.90	20.0
Total Alkalinity (as CaCO ₃)	2434745	82.2	84.2	mg/L	2.40	20.0
Total Alkalinity (as CaCO ₃)	2434856	76.0	71.5	mg/L	6.10	20.0

ICV

<u>Parameter</u>	<u>Reading</u>	<u>Known</u>	<u>Units</u>	<u>Recover%</u>	<u>Limits%</u>	<u>File</u>
Total Alkalinity (as CaCO ₃)	25.4	25.0	mg/L	102	90.0 - 110	127969071

Mat. Spike

<u>Parameter</u>	<u>Sample</u>	<u>Spike</u>	<u>Unknown</u>	<u>Known</u>	<u>Units</u>	<u>Recovery %</u>	<u>Limits %</u>	<u>File</u>
Total Alkalinity (as CaCO ₃)	2434010	359	329	25.0	mg/L	120	70.0 - 130	127969076
Total Alkalinity (as CaCO ₃)	2434639	129	102	25.0	mg/L	108	70.0 - 130	127969116
Total Alkalinity (as CaCO ₃)	2434745	105	84.2	25.0	mg/L	83.2	70.0 - 130	127969089
Total Alkalinity (as CaCO ₃)	2434856	97.7	71.5	25.0	mg/L	105	70.0 - 130	127969103

* Out RPD is Relative Percent Difference: $\text{abs}(r_1 - r_2) / \text{mean}(r_1, r_2) * 100\%$

Recover% is Recovery Percent: $\text{result} / \text{known} * 100\%$

Blank - Method Blank (reagent water or other blank matrices that contains all reagents except standard(s) and is processed simultaneously with and under the same conditions as samples; carried through preparation and analytical procedures exactly like a sample; monitors); CCB - Continuing Calibration Blank; CCV - Continuing

Calibration Verification (same standard used to prepare the curve; typically a mid-range concentration; verifies the continued validity of the calibration curve); MSD -

Matrix Spike Duplicate (replicate of the matrix spike; same solution and amount of target analyte added to the MS is added to a third aliquot of sample; quantifies

matrix bias and precision.); LCS Dup - Laboratory Control Sample Duplicate (replicate LCS; analyzed when there is insufficient sample for duplicate or MSD; quantifies

accuracy and precision.); AWRL/LOQ C - Ambient Water Reporting Limit/LOQ Check Std; ICV - Initial Calibration Verification; LCS - Laboratory Control Sample (reagent water or other blank matrices that is spiked with a known quantity of target analyte(s) and carried through preparation and analytical procedures exactly like a sample;

typically a mid-range concentration; verifies that bias and precision of the analytical process are within control limits; determines usability of the data.); MS - Matrix Spike (same solution and amount of target analyte added to the LCS is added to a second aliquot of sample; quantifies matrix bias.)

Email: Kilgore.ProjectManagement@spillabs.com



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1157266 CoC Print Group 001 of 001

2600 Dudley Rd, Kilgore, Texas 75662
Office: 903-984-0551 * Fax: 903-984-5914



SPL
The Science of Sure

Printed 07/29/2025 Page 1 of 2

CHAIN OF CUSTODY

White Oak Shores Sewer Service
Wanda Hammons
6435 N FM 17 Office A16
Yantis, TX 75497

WSS1 -A
103

Lab Number 2434745
PO Number _____
Phone 903/383-7571

Permit Renewal

☐ Hand Delivered by Client to Region or LAB

Matrix: Non-Potable Water

Sample Collection Start

Date: 8-6-25 Time: 7:00 Am

Sampler Printed Name: Drew Russell

Sampler Affiliation: Operator

Sampler Signature: [Signature]

Samples Radioactive? ☐

Samples Contains Dioxin? ☐

Samples Biological Hazard? ☐

☐ **1 Na2S2O3 (0.008%) Polystyrene-100 mL Sterilized, I**

NELAC Short Hold

MPNW

MPN, E.coli, Col.-18 - Non-Pot

SM 9223 B (Colilert-18 QT)-2016 (0.333 days)

☐ **2 H2SO4 to pH <2 GIQt w/Tef-lined lid, Q**

NELAC

HEM

Oil and Grease (HEM)

EPA 1664B (HEM) (28.0 days)

☐ **1 Polyethylene 1/2 gal (White), Q**

NELAC Short Hold

BODc

BOD Carbonaceous

SM 5210 B-2016 (TCMP Inhibitor) (2.04 days)

NELAC

TSS

Total Suspended Solids

SM 2540 D-2020 (7.00 days)

☐ **1 HNO3 to pH <2 Polyethylene 500 mL for Metals, Q**

NELAC

*AIM

Aluminum, Total

EPA 200.8 5.4 CAS:7429-90-5 (180 days)

301L

Liquid Metals Digestion

EPA 200.2 2.8 (180 days)

☐ **1 H2SO4 to pH <2 250 ml Polyethylene, Q**

NELAC

NHAN

Ammonia Nitrogen

EPA 350.1 2 (28.0 days)

NELAC

TKN

Total Kjeldahl Nitrogen

EPA 351.2 2 CAS:7727-37-9 (28.0 days)

NELAC

TPWB

Phosphorus (as P), total

SM 4500-P E-2011 CAS:7723-14-0 (28.0 days)

☐ **1 Polyethylene Quart, Q**

NELAC

!CIL

Chloride

EPA 300.0 2.1 (28.0 days)



1157266 CoC Print Group 001 of 001

2600 Dudley Rd. Kilgore, Texas 75662
Office: 903-984-0551 * Fax: 903-984-5914



CHAIN OF CUSTODY

White Oak Shores Sewer Service
Wanda Hammons
6435 N FM 17 Office A16
Yantis, TX 75497-
NELAC

WSS1 -A
103

NELAC **Short Hold**

NELAC

NELAC

NELAC

NELAC

!FIL	Fluoride	EPA 300.0 2.1 (28.0 days)
!N3L	Nitrate-Nitrogen Total	EPA 300.0 2.1 CAS:14797-55-8 (2.00 days)
!S4L	Sulfate	EPA 300.0 2.1 (28.0 days)
AlkT	Total Alkalinity (as CaCO3)	SM 2320 B-2011 (14.0 days)
CONL	Lab Spec. Conductance at 25 C	SM 2510 B-2011 (28.0 days)
TDS	Total Dissolved Solids	SM 2540 C-2020 (7.00 days)

Ambient Conditions/Comments

Date	Time	Relinquished	Received
8/25	1028	Printed Name: Drew Russell Signature: [Signature]	Printed Name: McCabe Wheeler SPL, Inc. Signature: [Signature]
		Printed Name: Affiliation	Printed Name: Affiliation
		Signature:	Signature:
		Printed Name: Affiliation	Printed Name: Affiliation
		Signature:	Signature:
		Printed Name: Affiliation	Printed Name: Affiliation
		Signature:	Signature:

Sample Received on Ice? ☒ Yes ☐ No

Cooler/Sample Secure? ☒ Yes ☐ No

If Shipped: Tracking Number & Temp - See Attached

The accredited column designates accreditation by A - A2LA, N - NELAC, or Z - not listed under scope of accreditation. Unless otherwise specified, SPL shall provide these ordered services pursuant to our Standard Terms & Conditions Agreement. SPL personnel collect samples as specified by SPL SOP #000323.

Comments

08/06/2025 1028 MMV

Temp: 2.2 / 2.6 C

Therm#: 6443 Corr Fact: 0.4 C



VII
Whiteoak Shores WWTP Renewal
Copy of Check



VIII
Whiteoak Shores WWTP Renewal
Summary Transmittal Letter



Bryan W. Shaw, Ph.D., P.E., *Chairman*
Toby Baker, *Commissioner*
Jon Niermann, *Commissioner*
Richard A. Hyde, P.E., *Executive Director*



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

Protecting Texas by Reducing and Preventing Pollution

June 30, 2016

CHARLES P. GILLESPIE, JR., P.E.
CONSULTING ENVIRONMENTAL ENGINEERS, INC.
150 NORTH HARBIN STREET, SUITE 408
STEPHENVILLE, TX 76401

Re: WHITE OAK SHORES SEWER SERVICE CORP.
WHITE OAK SHORES ADDITIONAL WWT PLANT
Permit No. WQ0014851-001
WWPR Log No. 0715/083
CN603246471, RN105345748
WOOD County

Dear MR. GILLESPIE:

We have received the project summary transmittal letter dated 7/28/2015.

The rules which regulate the design, installation and testing of domestic wastewater projects are found in 30 TAC, Chapter 217, of the Texas Commission on Environmental Quality (TCEQ) rules titled, Design Criteria for Wastewater Systems.

Section 217.6(d), relating to case-by-case reviews, states in part that upon submittal of a summary transmittal letter, the executive director may approve of the project without reviewing a complete set of plans and specifications.

Under the authority of §217.6(e) a technical review of complete plans and specifications is not required. **However, the project proposed in the summary transmittal letter is approved for construction. Please note, that this conditional approval does not relieve the applicant of any responsibilities to obtain all other necessary permits or authorizations, such as wastewater treatment permit or other authorization as required by Chapter 26 of the Texas Water Code.** Below are provisions of the Chapter 217 regulations, which must be met as a condition of approval. These items are provided as a reminder. If you have already met these requirements, please disregard this additional notice.

- You must keep certain materials on file for the life of the project and provide them to TCEQ upon request. These materials include an engineering report, test results, a summary transmittal letter, and the final version of the project plans and specifications. These materials shall be prepared and sealed by a Professional Engineer licensed in the State of Texas and must show substantial compliance with Chapter 217. All plans and specifications must conform to any waste discharge requirements authorized in a permit by the TCEQ. Certain specific items which shall be addressed in the engineering report are discussed in §217.6(c). Additionally, the engineering report must include all constants, graphs,

CHARLES P. GILLESPIE, JR., P.E.

Page 2

June 30, 2016

equations, and calculations needed to show substantial compliance with Chapter 217. The items which shall be included in the summary transmittal letter are addressed in §217.6(c)(1)-(10).

- Any deviations from Chapter 217 shall be disclosed in the summary transmittal letter and the technical justifications for those deviations shall be provided in the engineering report. Any deviations from Chapter 217 shall be based on the best professional judgement of the licensed professional engineer sealing the materials and the engineer's judgement that the design would not result in a threat to public health or the environment.
- Any variance from a Chapter 217 requirement disclosed in your summary transmittal letter is approved. If in the future, additional variances from the Chapter 217 requirements are desired for the project, each variance must be requested in writing by the design engineer. Then, the TCEQ will consider granting a written approval to the variance from the rules for the specific project and the specific circumstances.
- Within 60 days of the completion of construction, an appointed engineer shall notify both the Wastewater Permits Section of the TCEQ and the appropriate Region Office of the date of completion. The engineer shall also provide written certification that all construction, materials, and equipment were substantially in accordance with the approved project, the rules of the TCEQ, and any change orders filed with the TCEQ. All notifications, certifications, and change orders must include the signed and dated seal of a Professional Engineer licensed in the State of Texas.

This approval does not mean that future projects will be approved without a complete plans and specifications review. The TCEQ will provide a notification of intent to review whenever a project is to undergo a complete plans and specifications review. Please be reminded of 30 TAC §217.7(a) of the rules which states, "Approval given by the executive director or other authorized review authority does not relieve an owner of any liability or responsibility with respect to designing, constructing, or operating a collection system or treatment facility in accordance with applicable commission rules and the associated wastewater permit".

If you have any questions or if we can be of any further assistance, please call me at (512) 239-4552.

Sincerely,



Louis C. Herrin, III, P.E.
Wastewater Permits Section (MC 148)
Water Quality Division
Texas Commission on Environmental Quality

LCH/rb

cc: TCEQ, Region 05 Office

IX
Whiteoak Shores WWTP Renewal
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 DOMESTIC WASTEWATER/STORMWATER

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

White Oak Shores Sewer Service Corporation (CN603246471) operates White Oak Shores WWTP (RN105345748), an extended aeration activated sludge facility. The facility is located at 6435 N FM 17, in Yantis, Wood County, Texas 75497. This application is to renew a TPDES permit authorizing a discharge of 11,000 gallons per day.

Discharges from the facility are expected to contain five-day biological oxygen demand (BOD₅), total suspended solids (TSS) and Escherichia Coli. Additional pollutants are included in the Domestic Technical Report 1.0 in the permit application package. Domestic treated wastewater is treated by a bar screen, aeration basin, final clarifier, a chlorine chamber and a sludge digester.

X
Whiteoak Shores WWTP Renewal
Supplemental Permit Information Form



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

FOR AGENCIES REVIEWING DOMESTIC OR INDUSTRIAL TPDES WASTEWATER PERMIT APPLICATIONS

TCEQ USE ONLY:

Application type: ____Renewal ____Major Amendment ____Minor Amendment ____New

County: _____ Segment Number: _____

Admin Complete Date: _____

Agency Receiving SPIF:

____ Texas Historical Commission

____ U.S. Fish and Wildlife

____ Texas Parks and Wildlife Department

____ U.S. Army Corps of Engineers

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

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

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

The following applies to all applications:

1. Permittee: White Oak Shores Sewer Service Corporation

Permit No. WQ00 14851001

EPA ID No. TX 0129992

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

6435 N FM 17, Yantis, Wood County, Texas 75497

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

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

First and Last Name: Sheila Smith

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

Title: Manager

Mailing Address: 6435 N FM 17 A16 Office

City, State, Zip Code: Yantis, TX 75497

Phone No.: 903-383-7571 Ext.: Fax No.:

E-mail Address: wossewerservice@peoplescom.met

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

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

To an unnamed tributary, thence to Lake Fork Reservoir in Segment No. 0512 of the Sabine River Basin.

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

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

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

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

☐ Disturbance of vegetation or wetlands

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

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

There is an existing subdivision on site

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

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

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

XI
Whiteoak Shores WWTP Renewal
Core Data Form





TCEQ Core Data Form

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

SECTION I: General Information

1. Reason for Submission (If other is checked please describe in space provided.)		
☐ New Permit, Registration or Authorization (Core Data Form should be submitted with the program application.)		
☒ Renewal (Core Data Form should be submitted with the renewal form)	☐ Other	
2. Customer Reference Number (if issued)	Follow this link to search for CN or RN numbers in Central Registry**	3. Regulated Entity Reference Number (if issued)
CN 603246471		RN 105345748

SECTION II: Customer Information

4. General Customer Information		5. Effective Date for Customer Information Updates (mm/dd/yyyy)		7/9/2025	
☐ New Customer ☒ Update to Customer Information ☐ Change in Regulated Entity Ownership					
☐ Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)					
<i>The Customer Name submitted here may be updated automatically based on what is current and active with the Texas Secretary of State (SOS) or Texas Comptroller of Public Accounts (CPA).</i>					
6. Customer Legal Name (If an individual, print last name first: eg: Doe, John)				<i>If new Customer, enter previous Customer below:</i>	
White Oak Shores Sewer Service Corporation					
7. TX SOS/CPA Filing Number		8. TX State Tax ID (11 digits)		9. Federal Tax ID	10. DUNS Number (if applicable)
0800823627		32033055347		(9 digits)	
11. Type of Customer:		☒ Corporation		☐ Individual	Partnership: ☐ General ☐ Limited
Government: ☐ City ☐ County ☐ Federal ☐ Local ☐ State ☐ Other		☐ Sole Proprietorship		☐ Other: Municipal Utility District	
12. Number of Employees				13. Independently Owned and Operated?	
☒ 0-20 ☐ 21-100 ☐ 101-250 ☐ 251-500 ☐ 501 and higher				☒ Yes ☐ No	
14. Customer Role (Proposed or Actual) – as it relates to the Regulated Entity listed on this form. Please check one of the following					
☒ Owner ☐ Operator ☐ Owner & Operator ☐ Other:					
☐ Occupational Licensee ☐ Responsible Party ☐ VCP/BSA Applicant					
15. Mailing Address:					
6435 N FM 17 A16 Office					
City	Yantis	State	TX	ZIP	75497
ZIP + 4					
16. Country Mailing Information (if outside USA)				17. E-Mail Address (if applicable)	
				wossewerservice@peoplescom.net	

18. Telephone Number	19. Extension or Code	20. Fax Number (if applicable)
(903) 383-7571		() -

SECTION III: Regulated Entity Information

21. General Regulated Entity Information (If 'New Regulated Entity' is selected, a new permit application is also required.)								
☐ New Regulated Entity ☐ Update to Regulated Entity Name ☒ Update to Regulated Entity Information								
<i>The Regulated Entity Name submitted may be updated, in order to meet TCEQ Core Data Standards (removal of organizational endings such as Inc, LP, or LLC).</i>								
22. Regulated Entity Name (Enter name of the site where the regulated action is taking place.)								
White Oak Shores WWTP								
23. Street Address of the Regulated Entity: (No PO Boxes)	6435 N FM 17							
	City	Yantis	State	TX	ZIP	75497	ZIP + 4	
24. County	Wood							

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

25. Description to Physical Location:								
26. Nearest City					State	Nearest ZIP Code		
<i>Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).</i>								
27. Latitude (N) In Decimal:		32.90558			28. Longitude (W) In Decimal:		-95.603844	
Degrees	Minutes	Seconds		Degrees	Minutes	Seconds		
32	54	19		-95	36	13.5		
29. Primary SIC Code (4 digits)	30. Secondary SIC Code (4 digits)		31. Primary NAICS Code (5 or 6 digits)		32. Secondary NAICS Code (5 or 6 digits)			
4952			221320					
33. What is the Primary Business of this entity? (Do not repeat the SIC or NAICS description.)								
Provide Wastewater Service								
34. Mailing Address:	6435 N FM 17 A16 Office							
	City	Yantis	State	TX	ZIP	75497	ZIP + 4	
35. E-Mail Address:		wossewerservice@peoplescom.net						
36. Telephone Number			37. Extension or Code			38. Fax Number (if applicable)		
(903) 383-7571						() -		

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

☐ Dam Safety	☐ Districts	☐ Edwards Aquifer	☐ Emissions Inventory Air	☐ Industrial Hazardous Waste
☐ Municipal Solid Waste	☐ New Source Review Air	☐ OSSF	☐ Petroleum Storage Tank	☐ PWS
☐ Sludge	☐ Storm Water	☐ Title V Air	☐ Tires	☐ Used Oil
☐ Voluntary Cleanup	☒ Wastewater	☐ Wastewater Agriculture	☐ Water Rights	☐ Other:
	WQ0014851001			

SECTION IV: Preparer Information

40. Name:	Charles Gillespie		41. Title:	Vice-President
42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Mail Address	
(254) 968-8130		() -	ceeinc@ceeinc.org	

SECTION V: Authorized Signature

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

Company:	Consulting Environmental Engineers, Inc	Job Title:	Vice-President
Name (In Print):	Charles Gillespie	Phone:	(254) 968- 8130
Signature:		Date:	8/25/2025

XII
Whiteoak Shores WWTP Renewal
Domestic Administrative Report Form





TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the application.

APPLICANT NAME: White Oak Shores Sewer Service Corporation

PERMIT NUMBER (If new, leave blank): WQ0014851001

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

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

For TCEQ Use Only

Segment Number _____ County _____
Expiration Date _____ Region _____
Permit Number _____



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

**DOMESTIC WASTEWATER PERMIT APPLICATION
ADMINISTRATIVE REPORT 1.0**

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

Section 1. Application Fees (Instructions Page 26)

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

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

Minor Amendment (for any flow) \$150.00 ☐

Payment Information:

Mailed Check/Money Order Number: 3092
Check/Money Order Amount: \$315.00
Name Printed on Check: WhiteOak Shores Sewer Service Corp
EPAY Voucher Number: Click to enter text.
Copy of Payment Voucher enclosed? Yes ☐

Section 2. Type of Application (Instructions Page 26)

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

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

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

- ☒ Active ☐ Inactive

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

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

d. Check the box next to the appropriate application type

- | | |
|---|---|
| ☐ New | |
| ☐ Major Amendment <u>with</u> Renewal | ☐ Minor Amendment <u>with</u> Renewal |
| ☐ Major Amendment <u>without</u> Renewal | ☐ Minor Amendment <u>without</u> Renewal |
| ☒ Renewal without changes | ☐ Minor Modification of permit |

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

f. For existing permits:

Permit Number: WQ00 14851001

EPA I.D. (TPDES only): TX 0129992

Expiration Date: March 30, 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?

White Oak Shores Sewer Service Corporation

(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: 603246471

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: Ms.

Last Name, First Name: Smith, Sheila

Title: 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.)

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. XI

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: Ms.

Last Name, First Name: Smith, Sheila

Title: Manager

Credential: Click to enter text.

Organization Name: White Oak Shores Sewer Service Corporation

Mailing Address: 6435 N FM 17 A 16 Office City, State, Zip Code: Yantis, TX 75497

Phone No.: 903-383-7571

E-mail Address: wossewerservice@peoplesom.net

Check one or both: ☒ Administrative Contact ☐ Technical Contact

B. Prefix: Mr.

Last Name, First Name: Gillespie, Charles

Title: Vice-President

Credential: Click to enter text.

Organization Name: Consulting Environmental Engineers, Inc

Mailing Address: 150 N. Harbin Dr., Suite 408 City, State, Zip Code: Stephenville, TX 76401

Phone No.: 254-968-8130

E-mail Address: ceeinc@ceeinc.org

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: Smith Sheila

Title: Manager

Credential: Click to enter text.

Organization Name: White Oak Shores Sewer Service Corporation

Mailing Address: 6435 N FM 17 A16 Office City, State, Zip Code: Yantis, TX 75497

Phone No.: 903-383-7571

E-mail Address: wossewerservice@peoplescom.net

B. Prefix: Ms. Last Name, First Name: Simmons, Patricia
Title: President Credential: Click to enter text.
Organization Name: White Oak Shores Sewer Service Corporation
Mailing Address: 6435 N FM 17 A16 Office City, State, Zip Code: Yantis, TX 75497
Phone No.: 903-383-7553 E-mail Address: wossewerservice@peoplescom.net

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: Ms. Last Name, First Name: Smith, Sheila
Title: Manager Credential: Click to enter text.
Organization Name: White Oak Shores Sewer Service Corporation
Mailing Address: 6435 N FM 17 A16 Office City, State, Zip Code: Yantis, TX 75497
Phone No.: 903-383-7571 E-mail Address: wossewerservice@peoplescom.net

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

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

Prefix: Mr. Last Name, First Name: Russell, Drew
Title: Click to enter text. Credential: Click to enter text.
Organization Name: Click to enter text.
Mailing Address: 3115 N FM 14 City, State, Zip Code: Quitman, TX 75783
Phone No.: 903-530-8376 E-mail Address: Click to enter text.

Section 8. Public Notice Information (Instructions Page 27)

A. Individual Publishing the Notices

Prefix: Mr. Last Name, First Name: Gillespie, Charles
Title: Vice-President Credential: Click to enter text.
Organization Name: Consulting Environmental Engineers, Inc
Mailing Address: 150 N. Harbin Dr., Suite 408 City, State, Zip Code: Stephenville, TX 76401
Phone No.: 254-968-8130 E-mail Address: ceeinc@ceeinc.org

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

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

☒ ceeinc@ceeinc.org E-mail Address

☐ Fax

☒ 150N. Harbin Dr., Suite 408, Stephenville, TX 76401 Regular Mail

C. Contact permit to be listed in the Notices

Prefix: Ms.

Last Name, First Name: Smith, Sheila

Title: Manager

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

Organization Name: WhiteOak Shores Sewer Service Corporation

Mailing Address: 6435 N FM 17 A16 Office City, State, Zip Code: Yantis, TX 75497

Phone No.: 903-383-7571

E-mail Address: wossewerservice@peoplescom.net

D. Public Viewing Information

If the facility or outfall is located in more than one county, a public viewing place for each county must be provided.

Public building name: Yantis City Hall

Location within the building: Front Desk

Physical Address of Building: 103 City Cir

City: Yantis

County: Wood

Contact (Last Name, First Name): [Click to enter text.](#)

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

E. Bilingual Notice Requirements

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

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

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

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

☐ Yes ☒ No

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

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

☐ Yes ☒ No

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

☐ Yes ☒ No

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

☐ Yes ☒ No

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

F. Summary of Application in Plain Language Template

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

Attachment: IX

G. Public Involvement Plan Form

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

Attachment: N/A

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

A. If the site is currently regulated by TCEQ, provide the Regulated Entity Number (RN) issued to this site. RN 105345748

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

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

Whiteoak Shores WWTP

C. Owner of treatment facility: Whiteoak Shores Sewer Service Corporation

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

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

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

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

Organization Name: White Oak Shores Sewer Service Corporation

Mailing Address: 6435 N FM 17 A16 Office City, State, Zip Code: Yantis, TX 75497

Phone No.: 903-383-7571 E-mail Address: wossewerservice@peoplescom.net

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

Attachment: Click to enter text.

E. Owner of effluent disposal site:

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

Last Name, First Name: [Click to enter text.](#)

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

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

Organization Name: Whiteoak Shores Sewer Service Corporation

Mailing Address: 6435 N FM 17 A16 Office City, State, Zip Code: Yantis, TX 75497

Phone No.: 903-383-7571

E-mail Address: wossewerservice@peoplescom.net

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

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

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

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

Last Name, First Name: [Click to enter text.](#)

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

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

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

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

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

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

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

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

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

Section 10. TPDES Discharge Information (Instructions Page 31)

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



Yes



No

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

[Click to enter text.](#)

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



Yes



No

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

[Click to enter text.](#)

City nearest the outfall(s): Yantis

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

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



Yes



No

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

- ☐ Authorization granted ☐ Authorization pending

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

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

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

Section 11. TLAP Disposal Information (Instructions Page 32)

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

☐ Yes ☐ No

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

[Click to enter text.](#)

- B. City nearest the disposal site: [Click to enter text.](#)

- C. County in which the disposal site is located: [Click to enter text.](#)

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

[Click to enter text.](#)

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

Section 12. Miscellaneous Information (Instructions Page 32)

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

☐ Yes ☒ No

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

☐ Yes ☐ No ☒ Not Applicable

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

[Click to enter text.](#)

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

☐ Yes ☒ No

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

D. Do you owe any fees to the TCEQ?

☐ Yes ☒ No

If yes, provide the following information:

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

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

E. Do you owe any penalties to the TCEQ?

☐ Yes ☒ No

If yes, please provide the following information:

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

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

Section 13. Attachments (Instructions Page 33)

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

☐ Lease agreement or deed recorded easement, if the land where the treatment facility is located or the effluent disposal site are not owned by the applicant or co-applicant.

☒ Original full-size USGS Topographic Map with the following information:

- Applicant's property boundary
- Treatment facility boundary
- Labeled point of discharge for each discharge point (TPDES only)
- Highlighted discharge route for each discharge point (TPDES only)
- Onsite sewage sludge disposal site (if applicable)
- Effluent disposal site boundaries (TLAP only)
- New and future construction (if applicable)
- 1 mile radius information
- 3 miles downstream information (TPDES only)
- All ponds.

☐ Attachment 1 for Individuals as co-applicants

☐ Other Attachments. Please specify: [Click to enter text.](#)

Section 14. Signature Page (Instructions Page 34)

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

Permit Number: WQ0014851001

Applicant: Whiteoak Shores Sewer Service Corporation

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): Patricia Simmons

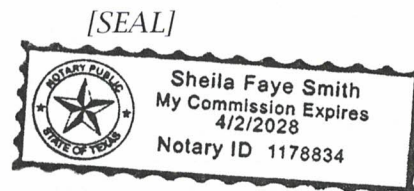
Signatory title: President

Signature: Patricia Simmons Date: 7/21/2025
(Use blue ink)

Subscribed and Sworn to before me by the said Patricia Simmons
on this 21st day of July, 20 25.
My commission expires on the 4th day of April, 20 28.

Sheila Smith
Notary Public

Wood
County, Texas



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: X

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

Texas Commission on Environmental Quality
Financial Administration Division
Cashier's Office, MC-214
P.O. Box 13088
Austin, Texas 78711-3088

BY OVERNIGHT/EXPRESS MAIL

Texas Commission on Environmental Quality
Financial Administration Division
Cashier's Office, MC-214
12100 Park 35 Circle
Austin, Texas 78753

Fee Code: WQP Waste Permit No: WQ0014851001

1. Check or Money Order Number: 3092
2. Check or Money Order Amount: \$315.00
3. Date of Check or Money Order: 7/21/2025
4. Name on Check or Money Order: WhiteOak Shores Sewer Service Corp
5. APPLICATION INFORMATION

Name of Project or Site: Whiteoak Shores WWTP

Physical Address of Project or Site: 6435 N FM 17

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) ☒ Yes
(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 ☒ Yes
(TCEQ Form Nos. 10053 and 10054. Version dated 6/25/2018 or later.)

Water Quality Permit Payment Submittal Form (Page 19) ☒ Yes
(Original payment sent to TCEQ Revenue Section. See instructions for mailing address.)

7.5 Minute USGS Quadrangle Topographic Map Attached ☒ Yes
(Full-size map if seeking "New" permit.
8 ½ x 11 acceptable for Renewals and Amendments)

Current/Non-Expired, Executed Lease Agreement or Easement ☒ N/A ☐ Yes

Landowners Map ☒ N/A ☐ Yes
(See instructions for landowner requirements)

Things to Know:

- All the items shown on the map must be labeled.
- The applicant's complete property boundaries must be delineated which includes boundaries of contiguous property owned by the applicant.
- The applicant cannot be its own adjacent landowner. You must identify the landowners immediately adjacent to their property, regardless of how far they are from the actual facility.
- If the applicant's property is adjacent to a road, creek, or stream, the landowners on the opposite side must be identified. Although the properties are not adjacent to applicant's property boundary, they are considered potentially affected landowners. If the adjacent road is a divided highway as identified on the USGS topographic map, the applicant does not have to identify the landowners on the opposite side of the highway.

Landowners Labels and Cross Reference List ☒ N/A ☐ Yes
(See instructions for landowner requirements)

Electronic Application Submittal ☒ Yes
(See application submittal requirements on page 23 of the instructions.)

Original signature per 30 TAC § 305.44 - Blue Ink Preferred ☒ Yes
(If signature page is not signed by an elected official or principle executive officer, a copy of signature authority/delegation letter must be attached)

Summary of Application (in Plain Language) ☒ Yes

XIII
Whiteoak Shores WWTP Renewal
Domestic Technical Report Form





TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION TECHNICAL REPORT 1.0

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

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

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

A. Existing/Interim I Phase

Design Flow (MGD): [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): 0.11

2-Hr Peak Flow (MGD): 0.033

Estimated construction start date: N/A

Estimated waste disposal start date: 08/2008

D. Current Operating Phase

Provide the startup date of the facility: 07/01/2008

Section 2. Treatment Process (Instructions Page 42)

A. Current Operating Phase

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

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

Final Phase: A Prepackaged extended aeration system in which sewage passes through a bar screen to a flow splitter thence to parallel aeration chambers and then to a central clarifying chamber. Sludge is transferred to sludge storage and then to a discharge or return as needed. Supernatant flows to a chlorine chamber thence to discharge.

B. Treatment Units

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

Table 1.0(1) - Treatment Units

Treatment Unit Type	Number of Units	Dimensions (L x W x D)
Aeration Chamber	2	1-11.25' x 9.5' x 17.5' 1- 11.25' x 9.5' x 10'
Digester	2	1 - 11.25' x 9.5' x 5.5' 1 - 11.25' x 9.5' x 6
Clarifier	1	12' dia. X 8.5' tall
Chlorine Chamber	1	11.25' x 5' x 3'

C. Process Flow Diagram

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

Attachment: IV

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

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

- Latitude: 32.905448
- Longitude: -95.603777

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

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

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

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

Attachment: V

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

The facility serves the Whiteoak Shores Subdivision

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

Collection System Information

Collection System Name	Owner Name	Owner Type	Population Served
Whiteoak Shores WWTP	Whiteoak shores Sewer Service Corporation	Privately Owned	145 Connections
		Choose an item.	
		Choose an item.	
		Choose an item.	

Section 4. Unbuilt Phases (Instructions Page 44)

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

☐ Yes ☒ No

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

☐ Yes ☐ No

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

Click to enter text.

Section 5. Closure Plans (Instructions Page 44)

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

☐ Yes ☒ No

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

☐ Yes ☒ No

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

Click to enter text.

Section 6. Permit Specific Requirements (Instructions Page 44)

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

A. Summary transmittal

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

☒ Yes ☐ No

If **yes**, provide the date(s) of approval for each phase: 6/30/2016

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

Exhibit VIII

B. Buffer zones

Have the buffer zone requirements been met?

☒ Yes ☐ No

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

Ownership

C. Other actions required by the current permit

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

☐ Yes ☒ No

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

Click to enter text.

D. Grit and grease treatment

1. Acceptance of grit and grease waste

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

☐ Yes ☒ No

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

2. Grit and grease processing

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

Click to enter text.

3. Grit disposal

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

☐ Yes ☐ No

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

Describe the method of grit disposal.

[Click to enter text.](#)

4. Grease and decanted liquid disposal

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

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

[Click to enter text.](#)

E. Stormwater management

1. Applicability

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

☐ Yes ☒ No

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

☐ Yes ☒ No

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

2. MSGP coverage

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

☐ Yes ☐ No

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

TXR05 [Click to enter text.](#) or TXRNE [Click to enter text.](#)

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

☐ Yes ☐ No

3. Conditional exclusion

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

☐ Yes ☐ No

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

Click to enter text.

4. Existing coverage in individual permit

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

☐ Yes ☐ No

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

Click to enter text.

5. Zero stormwater discharge

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

☐ Yes ☐ No

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

Click to enter text.

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

6. Request for coverage in individual permit

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

☐ Yes ☐ No

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

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

Click to enter text.

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

F. Discharges to the Lake Houston Watershed

Does the facility discharge in the Lake Houston watershed?

☐ Yes ☒ No

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

Click to enter text.

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

1. Acceptance of sludge from other WWTPs

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

☐ Yes ☒ No

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

In addition, provide the date the plant started or is anticipated to start accepting sludge, an estimate of monthly sludge acceptance (gallons or millions of gallons), an estimate of the BOD₅ concentration of the sludge, and the design BOD₅ concentration of the influent from the collection system. Also note if this information has or has not changed since the last permit action.

Click to enter text.

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

2. Acceptance of septic waste

Is the facility accepting or will it accept septic waste?

☐ Yes ☒ No

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

☐ Yes ☒ No

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

☐ Yes ☒ No

If **yes to any of the above**, provide the date the plant started or is anticipated to start accepting septic waste, an estimate of monthly septic waste acceptance (gallons or millions of gallons), an estimate of the BOD₅ concentration of the septic waste, and the design BOD₅ concentration of the influent from the collection system. Also note if this information has or has not changed since the last permit action.

Click to enter text.

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

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

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

☐ Yes ☒ No

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

Click to enter text.

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

Is the facility in operation?

☒ Yes ☐ No

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

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

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

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

Pollutant	Average Conc.	Max Conc.	No. of Samples	Sample Type	Sample Date/Time
CBOD ₅ , mg/l	4.27	-	1	Grab	8-6-25 7:00 AM
Total Suspended Solids, mg/l	6.17	-	1	Grab	8-6-25 7:00 AM
Ammonia Nitrogen, mg/l	0.247	-	1	Grab	8-6-25 7:00 AM
Nitrate Nitrogen, mg/l	19.3	-	1	Grab	8-6-25 7:00 AM
Total Kjeldahl Nitrogen, mg/l	1.76	-	1	Grab	8-6-25 7:00 AM
Sulfate, mg/l	44.0	-	1	Grab	8-6-25 7:00 AM
Chloride, mg/l	85.9	-	1	Grab	8-6-25 7:00 AM
Total Phosphorus, mg/l	5.49	-	1	Grab	8-6-25 7:00 AM
pH, standard units	7.3	-	1	Grab	8-6-25 7:00 AM
Dissolved Oxygen*, mg/l	6.0	-	1	Grab	8-6-25 7:00 AM
Chlorine Residual, mg/l	1.5	-	1	Grab	8-6-25 7:00 AM
<i>E.coli</i> (CFU/100ml) freshwater	<1.0	-	1	Grab	8-6-25 7:00 AM
Enterococci (CFU/100ml) saltwater	-	-	-	-	-
Total Dissolved Solids, mg/l	404	-	1	Grab	8-6-25 7:00 AM
Electrical Conductivity, µmohs/cm, †	-	-	-	-	-
Oil & Grease, mg/l	<4.21	-	1	Grab	8-6-25 7:00 AM
Alkalinity (CaCO ₃)*, mg/l	84.2	-	1	Grab	8-6-25 7:00 AM

*TPDES permits only

†TLAP permits only

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

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

Section 8. Facility Operator (Instructions Page 49)

Facility Operator Name: Richard A Russell

Facility Operator's License Classification and Level: Wastewater Treatment Operator B

Facility Operator's License Number: WW0067975

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

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

Check all that apply. See instructions for guidance

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

B. WWTP's Sewage Sludge or Biosolids Treatment Process

Check all that apply. See instructions for guidance.

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

C. Sewage Sludge or Biosolids Management

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

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

Biosolids Management

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

If “Other” is selected for Management Practice, please explain (e.g. monofill or transport to another WWTP): Transport to a Landfill

D. Disposal site

Disposal site name: Stouts Creek Compost

TCEQ permit or registration number: MSW 2282

County where disposal site is located: Hopkins

E. Transportation method

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

Name of the hauler: Northeast Texas Disposal

Hauler registration number: TR 23977

Sludge is transported as a:

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

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

A. Beneficial use authorization

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

☐ Yes ☐ No

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

☐ Yes ☒ No

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

☐ Yes ☒ No

B. Sludge processing authorization

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

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

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

☐ Yes ☒ No

Section 11. Sewage Sludge Lagoons (Instructions Page 53)

Does this facility include sewage sludge lagoons?

☐ Yes ☒ No

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

A. Location information

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

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

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

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

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

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

[Click to enter text.](#)

B. Temporary storage information

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Provide the following information:

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

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

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

C. Liner information

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

☐ Yes ☐ No

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

[Click to enter text.](#)

D. Site development plan

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

[Click to enter text.](#)

Attach the following documents to the application.

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

E. Groundwater monitoring

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

☐ Yes ☐ No

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

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

Section 12. Authorizations/Compliance/Enforcement (Instructions)

A. Additional authorizations

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

☐ Yes ☒ No

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

Click to enter text.

B. Permittee enforcement status

Is the permittee currently under enforcement for this facility?

☐ Yes ☒ No

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

☐ Yes ☒ No

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

Click to enter text.

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

A. RCRA hazardous wastes

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

☐ Yes ☒ No

B. Remediation activity wastewater

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

☐ Yes ☒ No

C. Details about wastes received

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

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

Section 14. Laboratory Accreditation (Instructions Page 55)

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

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

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

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

CERTIFICATION:

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

Printed Name: Patricia Simmons

Title: President

Signature: Patricia Simmons

Date: 7/21/25

DOMESTIC WASTEWATER PERMIT APPLICATION

WORKSHEET 2.0: RECEIVING WATERS

The following information is required for all TPDES permit applications.

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

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

☐ Yes ☒ No

If **no**, proceed to Section 2. If **yes**, provide the following:

Owner of the drinking water supply: [Click to enter text.](#)

Distance and direction to the intake: [Click to enter text.](#)

Attach a USGS map that identifies the location of the intake.

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

Section 2. Discharge into Tidally Affected Waters (Instructions Page 63)

Does the facility discharge into tidally affected waters?

☐ Yes ☒ No

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

A. Receiving water outfall

Width of the receiving water at the outfall, in feet: [Click to enter text.](#)

B. Oyster waters

Are there oyster waters in the vicinity of the discharge?

☐ Yes ☒ No

If **yes**, provide the distance and direction from outfall(s).

[Click to enter text.](#)

C. Sea grasses

Are there any sea grasses within the vicinity of the point of discharge?

☐ Yes ☒ No

If **yes**, provide the distance and direction from the outfall(s).

[Click to enter text.](#)

Section 3. Classified Segments (Instructions Page 63)

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

☐ Yes ☒ No

If **yes**, this Worksheet is complete.

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

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

Name of the immediate receiving waters: Unnamed Tributary

A. Receiving water type

Identify the appropriate description of the receiving waters.

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

Surface area, in acres: Click to enter text.

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

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

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

B. Flow characteristics

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

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

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

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

C. Downstream perennial confluences

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

Lake Fork Reservoir

D. Downstream characteristics

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

☒ Yes ☐ No

If yes, discuss how.

Lake Fork Reservoir

E. Normal dry weather characteristics

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

Usually very low flow or dry.

Date and time of observation: 7/15/2025 @ 11:21 AM

Was the water body influenced by stormwater runoff during observations?

☒ Yes ☐ No

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

A. Upstream influences

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

☐ Oil field activities

☐ Urban runoff

☐ Upstream discharges

☒ Agricultural runoff

☐ Septic tanks

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

B. Waterbody uses

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

- | | |
|--|--|
| ☐ Livestock watering | ☐ Contact recreation |
| ☐ Irrigation withdrawal | ☐ Non-contact recreation |
| ☐ Fishing | ☐ Navigation |
| ☐ Domestic water supply | ☐ Industrial water supply |
| ☐ Park activities | ☒ Other(s), specify: <u>None</u> |

C. Waterbody aesthetics

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

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



consulting **environmental** engineers, inc.

Main Office:

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Registered Firm: F-2323

September 8, 2025

Texas Commission on Environmental Quality
Water Quality Division (MC 148)
Austin, Texas 78711-3087

Attn: Ms. Rachel Ellis

Re: Deficient Information Response Permit No. WQ0014851001

Dear Ms. Ellis,

In response to your recent email dated September 4, 2025, we respectfully submit the following information:

Administrative

- 1) Administrative Report, Section 3, Item A: Ms. Patricia Simmons is the president who was intended to sign the application, Section 3 of the Administrative Report has been revised.
- 2) The Notice of Receipt of Application and Intent to Obtain a Water Quality Permit has one revision. In the address of the facility it should not say in the City of Yantis, it should say ...the facility is located at 6435 North Farm-to-Market 17, Yantis, in Wood County, Texas 75497.

I believe that is all that is required at this time. If you need further information, please contact us at your convenience.

Charles P. Gillespie III
President

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

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

d. Check the box next to the appropriate application type

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

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

f. For existing permits:

Permit Number: WQ00 14851001

EPA I.D. (TPDES only): TX 0129992

Expiration Date: March 30, 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?

White Oak Shores Sewer Service Corporation

(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: 603246471

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: Ms.

Last Name, First Name: Simmons, Patricia

Title: President

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

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

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

[Click to enter text.](#)

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