

# **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.

Quail Run Services, LLC (CN604553545) operates Tilden Wastewater Treatment Facility (RN106458250), a contract wastewater treatment plant. The facility is located at 1,030 feet northwest from the intersection of SH-72 and New Teal Rd., south side of SH-72, in Tilden, McMullen County, Texas 78072. A renewal application to discharge of treated domestic wastewater. << For TLAP applications include the following sentence, otherwise delete:>> This permit will not authorize a discharge of pollutants into water in the state.

Discharges from the facility are expected to contain CBOD, TSS, E-coli. Process wastewater is treated by complete mix variation of the activated sludge process designed for single stage nitrification – from pumps the wastewater will travel through a coarse barscreen then to the surge basin(s) then to the complete mix basin; from the basin the mix-liquor will be transferred to the clarifier where solids will be settled out and clear water will flow over the

weirs then into the chlorine contact basin. Thence through effluent filters. The settled solids will either be transferred to the digester or returned to the headworks

# **TEXAS COMMISSION ON ENVIRONMENTAL QUALITY**



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

#### PERMIT NO. WQ0015016001

**APPLICATION.** Quail Run Services, LLC, P.O. Box 340, Gainesville, Texas 76241, has applied to the Texas Commission on Environmental Quality (TCEQ) to renew Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0015016001 (EPA I.D. No. TX0133230) to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 100,000 gallons per day. The domestic wastewater treatment facility is located approximately 1,030 feet southwest of the intersection of New Teal Road and State Highway 72, near the city of Tilden, in McMullen County, Texas 78072. The discharge route is from the plant site to Sand Hollow Creek; thence to Frio River Above Choke Canyon Reservoir. TCEQ received this application on August 19, 2025. The permit application will be available for viewing and copying at McMullen County Courthouse, Bulletin Board, 501 River Street, Tilden, in McMullen County, Texas prior to the date this notice is published in the newspaper. The application, including any updates, and associated notices are available electronically at the following webpage: https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdesapplications. 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=-98.618611,28.47&level=18

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

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

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

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

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

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

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

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

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

**INFORMATION AVAILABLE ONLINE.** For details about the status of the application, visit the Commissioners' Integrated Database at <a href="https://www.tceq.texas.gov/goto/cid">www.tceq.texas.gov/goto/cid</a>. 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 <a href="https://www14.tceq.texas.gov/epic/eComment/">https://www14.tceq.texas.gov/epic/eComment/</a>, 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 <a href="https://www.tceq.texas.gov/goto/pep">www.tceq.texas.gov/goto/pep</a>. Si desea información en Español, puede llamar al 1-800-687-4040.

Further information may also be obtained from Quail Run Services, LLC at the address stated above or by calling Mr. Mike Luepnitz, Vice President, at 940-531-0235.

Issuance Date: September 9, 2025



August 18, 2025

Texas Commission on Environmental Quality
Water Quality Division
Application Review and Processing Team (MC148)
P.O. Box 13087
Austin, TX 78711-3087

Re: Application to Renew Permit No. WQ0015016001

(EPA I.D. No. TX 0133230)

Greetings,

Latitudes Environmental, LLC is pleased to submit a Domestic Wastewater Permit Renewal Application (WQ0015016001) on behalf of Quail Run Services, LLC (CN604553545).

In this package you will find the original application. The Supplemental Permit Information Form, all other relevant forms and attachments are included as well. A online version has also been submitted through FTPS.

We appreciate your time and effort with reviewing our request. If you have any questions, please contact me at (713) 636-9501, or via email at mzavala@latitudesenvironmental.com.

Sincerely,

Marjorie Zavala

Environmental Consultant

Marjorie Garla

Latitudes Environmental, LLC

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### TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

# DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the application.

APPLICANT NAME: Quail Run Services, LL
--

PERMIT NUMBER (If new, leave blank): WQ00<u>15016001</u>

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

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

\_Region\_

Expiration Date \_\_\_\_\_

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 <b>□</b>	\$2,015.00

Minor Amendment (for any flow) \$150.00 □

Mailed Check/Money Order Number: Click to enter text.

Check/Money Order Amount: Click to enter text.

Name Printed on Check: Click to enter text.

EPAY Voucher Number: 779827

Copy of Payment Voucher enclosed? Yes  $\boxtimes$ 

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

a.	Che	ck 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.
  - □ Inactive

Your transaction is complete. Thank you for using TCEQ ePay.

Note: It may take up to 3 working days for this electronic payment to be processed and be reflected in the TCEQ ePay system. Print this receipt and the vouchers for your records. An email receipt has also been sent.

#### -Transaction Information-

Trace Number: 582EA000681482

Date: 08/18/2025 12:55 PM

Payment Method: CC - Authorization 000001082Z

ePay Actor: MICHAEL LUEPNITZ
Actor Email: mluepnitz@rentpeak.com

IP: 135.84.159.138

TCEQ Amount: \$515.00 Texas.gov Fee: \$11.84 Texas.gov Price: \$526.84\*

\* This service is provided by Texas.gov, the official website of Texas. The price of this service includes funds that support the ongoing operations and enhancements of Texas.gov, which is provided by a third party in partnership with the State.

#### -Payment Contact Information-

Name: MICHAEL LUEPNITZ Company: PEAK RENTALS

Address: 1820 I-35 FRONTAGE RD, GAINESVILLE, TX 76240

Phone: 469-321-1584

#### Cart Items

Click on the voucher number to see the voucher details.

 Voucher
 Fee Description
 AR Number
 Amount

 779827
 WW PERMIT - FACILITY WITH FLOW >= .05 & < .10 MGD - RENEWAL</td>
 \$500.00

 779828
 30 TAC 305.53B WQ RENEWAL NOTIFICATION FEE
 \$15.00

 TCEQ Amount:
 \$515.00

ePay Again Exit ePay

Note: It may take up to 3 working days for this electronic payment to be processed and be reflected in the

c.	Che	ck the box next to the appropriate permit typ	e.	
	$\boxtimes$	TPDES Permit		
		TLAP		
		TPDES Permit with TLAP component		
		Subsurface Area Drip Dispersal System (SAD	DS)	
d.	Che	eck the box next to the appropriate application	ı typ	e
		New		
		Major Amendment <u>with</u> Renewal	$\boxtimes$	Minor Amendment with Renewal
		Major Amendment <u>without</u> Renewal		Minor Amendment without Renewal
		Renewal without changes		Minor Modification of permit
e.		amendments or modifications, describe the pansion not completed only need existing phase		
f.	For	existing permits:		
	Per	mit Number: WQ00 <u>15016001</u>		
	EPA	I.D. (TPDES only): TX <u>0133230</u>		
	Exp	iration Date: <u>2/3/2026</u>		

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

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

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

Ouail Run Services, LLC

(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 <a href="http://www15.tceq.texas.gov/crpub/">http://www15.tceq.texas.gov/crpub/</a>

CN: 604553545

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

Prefix: Mr. Last Name, First Name: Luepnitz, Mike

Title: Vice President Credential: Click to enter text.

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

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

Click to enter text.

(The legal name must be spelled exactly as filed with the TX SOS, with the County, or in the

legal documents forming the entity.)

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

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. A

## Section 4. Application Contact Information (Instructions Page 27)

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

A. Prefix: Ms. Last Name, First Name: Zavala, Marjorie

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

Organization Name: Latitudes Environmental

Mailing Address: 3200 Wilcrest Dr., Ste 170, City, State, Zip Code: Houston TX 77042

Phone No.: <u>713-636-9501</u> E-mail Address: <u>mzavala@latitudesenvironmental.com</u>

Check one or both: 

Administrative Contact

Technical Contact

**B.** Prefix: Mr. Last Name, First Name: Luepnitz, Mike

Title: Vice President Credential: Click to enter text.

Organization Name: Quail Run Services, LLC

Mailing Address: PO Box 340 City, State, Zip Code: Gainesville, TX 76241

Phone No.: 940-531-0235 E-mail Address: mluepnitz@rentpeak.com

Check one or both:

# 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: Zavala, Marjorie

Title: Consultant Credential: Click to enter text.

Organization Name: Latitudes Environmental

Mailing Address: 3200 Wilcrest Dr., Ste 170, City, State, Zip Code: Houston TX 77042

Phone No.: <u>713-636-9501</u> E-mail Address: <u>mzavala@latitudesenvironmental.com</u>

B. Prefix: Mr. Last Name, First Name: Luepnitz, Mike

Title: Vice President Credential: Click to enter text.

Organization Name: Quail Run Services, LLC

Mailing Address: PO Box 340 City, State, Zip Code: Gainesville, TX 76241

Phone No.: <u>940-531-0235</u> E-mail Address: <u>mluepnitz@rentpeak.com</u>

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

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

Prefix: Mr. Last Name, First Name: Luepnitz, Mike

Title: <u>Vice President</u> Credential: Click to enter text.

Organization Name: Quail Run Services, LLC

Mailing Address: PO Box 340 City, State, Zip Code: Gainesville, TX 76241

Phone No.: <u>940-531-0235</u> E-mail Address: <u>mluepnitz@rentpeak.com</u>

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

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

Prefix: Mr. Last Name, First Name: <u>Luepnitz</u>, <u>Mike</u>

Title: Vice President Credential: Click to enter text.

Organization Name: Quail Run Services, LLC

Mailing Address: PO Box 340 City, State, Zip Code: Gainesville, TX 76241

Phone No.: <u>940-531-0235</u> E-mail Address: <u>mluepnitz@rentpeak.com</u>

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

#### A. Individual Publishing the Notices

Prefix: <u>Ms.</u> Last Name, First Name: <u>Zavala, Marjorie</u>

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

Organization Name: Latitudes Environmental

Mailing Address: 3200 Wilcrest Dr., Ste 170 City, State, Zip Code: Houston TX 77042

Phone No.: 713-636-9501 E-mail Address: mzavala@latitudesenvironmental.com

B.		ethod fo ckage	or Receiving	Notic	e of Receipt and Intent to Obtain a Water Quality Permit
	Inc	licate by	y a check ma	ırk the	preferred method for receiving the first notice and instructions:
	$\boxtimes$	E-mai	l Address		
		Fax			
		Regul	ar Mail		
C.	Co	ntact p	ermit to be l	listed i	n the Notices
	Pre	efix: <u>Mr.</u>	<u>.</u>		Last Name, First Name: <u>Luepnitz, Mike</u>
	Tit	le: <u>Vice</u>	<u>President</u>		Credential: Click to enter text.
	Or	ganizati	ion Name: <u>Q</u> ı	uail Ru	n Services, LLC
	Ma	iling Ac	ddress: <u>PO B</u>	OX 340	City, State, Zip Code: Gainesville, TX 76241
	Ph	one No.	: 940-531-023	35	E-mail Address: mluepnitz@rentpeak.com
D.	Pu	blic Vie	wing Inforn	nation	
		•	ity or outfall ist be provide		ted in more than one county, a public viewing place for each
	Pu	blic buil	lding name:	<u>McMul</u>	<u>len County Courthouse</u>
	Lo	cation w	vithin the bu	ilding:	Bulletin Board
	Ph	ysical A	ddress of Bu	iilding	<u>501 River St.</u>
	Cit	y: <u>Tilde</u> ı	<u>n</u>		County: <u>McMullen</u>
	Co	ntact (L	ast Name, Fi	rst Na	me): Click to enter text.
	Ph	one No.:	: <u>361-274-390</u>	oo Ext.:	Click to enter text.
Ε.	Bil	ingual I	Notice Requ	iremei	nts
			mation <b>is re</b> cion, and ren		for <b>new, major amendment, minor amendment or minor</b> pplications.
	be	needed		nstruc	on is only used to determine if alternative language notices will tions on publishing the alternative language notices will be in
	ob				coordinator at the nearest elementary and middle schools and tion to determine whether an alternative language notices are
	1.				rogram required by the Texas Education Code at the elementary to the facility or proposed facility?
			Yes		No
		If <b>no</b> , p	oublication o	f an al	ternative language notice is not required; <b>skip to</b> Section 9
	2.				end either the elementary school or the middle school enrolled in gram at that school?
			Yes		Ю

	3.	Do the locatio		s at these so	hools atten	d a bilingua	l educa	tion prog	ram a	t another
			Yes		)					
	4.				ed to provio				gram l	out the school has
			Yes		)					
	5.				stion 1, 2, 3 s required b					tive language are enter text.
F.	Su	mmary	of Appli	cation in P	ain Langua	ge Templat	e			
	als	_	n as the	•	Application in age summar			_		) Form 20972), ment.
G.	Pu	blic Inv	olvemer	nt Plan Forn	a					
		-			ent Plan For nent to a pe				_	plication for a t.
	At	tachme	nt: <u>N/A</u>							
								- 6		-
Se	cti	on 9.	Regu Page		ity and I	'ermitted	Site	Inform	ation	(Instructions
Α.				tly regulate	d by TCEQ,	provide the	Regula	ited Entity	y Num	ber (RN) issued to
				Central Reg v regulated	-	:://www15.t	ceq.tex	as.gov/cr	<u>pub/</u>	to determine if
B.	Na	me of p	roject or	site (the na	me known l	oy the comr	nunity	where loc	ated):	
	<u>Til</u>	den Was	stewater T	reatment Fa	<u>cility</u>					
C.	Ov	vner of	treatmen	t facility: Q	uail Run Serv	ices, LLC				
	Ov	vnershij	of Facil	ity: 🗆 Pu	blic	Private		Both		Federal
D.	Ov	vner of	land whe	re treatmen	t facility is	or will be:				
	Pre	efix: Cli	ck to ente	er text.	Last Nan	ne, First Naı	me: Clic	ck to ente	r text.	
	Tit	le: Clicl	k to enter	text.	Credenti	al: Click to	enter to	ext.		
	Or	ganizat	ion Name	e: <u>Rancho Tr</u>	es Hijos LP.					
		Ü		814 Westgrov		City, State	, -		ston, T	<u>X 77027</u>
	Ph	one No.	: Click to	enter text.	E-mail A	Address: Cli	ck to e	nter text.		
					ne person as asement. Se			or co-ap	plican	t, attach a lease
		Attach	ment: <u>B</u>							

	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: Rancho Tres	Hihos L.P.
	Mailing Address: 2814 Westgrov	ve Lane City, State, Zip Code: Houston, TX 77027
	Phone No.: Click to enter text.	E-mail Address: Click to enter text.
	agreement or deed recorded eas	e person as the facility owner or co-applicant, attach a lease ement. See instructions.
	Attachment: <u>B</u>	
F.	Owner sewage sludge disposal s property owned or controlled by	ite (if authorization is requested for sludge disposal on the applicant)::
	Prefix: Click to enter text.	Last Name, First Name: Click to enter text.
	Title: Click to enter text.	Credential: Click to enter text.
	Organization Name: Click to ent	er text.
	Mailing Address: Click to enter t	ext. City, State, Zip Code: Click to enter text.
	Phone No.: Click to enter text.	E-mail Address: Click to enter text.
	If the landowner is not the same agreement or deed recorded eas	e person as the facility owner or co-applicant, attach a lease ement. See instructions.
	Attachment: Click to enter to	ext.
	I 10 EDDEODI I	T C -1 (T1 D 01)
		ge Information (Instructions Page 31)
		ge Information (Instructions Page 31) lity location in the existing permit accurate?
	Is the wastewater treatment faci  ✓ Yes □ No  If no, or a new permit application	
	Is the wastewater treatment faci	lity location in the existing permit accurate?
A.	Is the wastewater treatment faci  ✓ Yes □ No  If no, or a new permit application of the content text.	lity location in the existing permit accurate?  on, please give an accurate description:
A.	Is the wastewater treatment facions and the second	lity location in the existing permit accurate?
A.	Is the wastewater treatment facion  ✓ Yes □ No  If no, or a new permit application Click to enter text.  Are the point(s) of discharge and ✓ Yes □ No	lity location in the existing permit accurate?  on, please give an accurate description:  d the discharge route(s) in the existing permit correct?
A.	Is the wastewater treatment facing  ✓ Yes □ No  If no, or a new permit application of the content text.  Are the point(s) of discharge and of the content in the content i	lity location in the existing permit accurate?  on, please give an accurate description:  d the discharge route(s) in the existing permit correct?  permit application, provide an accurate description of the
A.	Is the wastewater treatment facing  ✓ Yes □ No  If no, or a new permit application of discharge and wastewater text.  Are the point(s) of discharge and wastewater wastewater with the point of discharge and the	lity location in the existing permit accurate?  on, please give an accurate description:  d the discharge route(s) in the existing permit correct?
A.	Is the wastewater treatment facing  ✓ Yes □ No  If no, or a new permit application of the content text.  Are the point(s) of discharge and waste of the content point of discharge and the discharge and the discharge and the discharge and the content property of the cont	lity location in the existing permit accurate?  on, please give an accurate description:  d the discharge route(s) in the existing permit correct?  permit application, provide an accurate description of the
A.	Is the wastewater treatment facing  ✓ Yes □ No  If no, or a new permit application of discharge and wastewater text.  Are the point(s) of discharge and wastewater wastewater with the point of discharge and the	lity location in the existing permit accurate?  on, please give an accurate description:  d the discharge route(s) in the existing permit correct?  permit application, provide an accurate description of the
A.	Is the wastewater treatment facing  ✓ Yes □ No  If no, or a new permit application of discharge and wastewater text.  Are the point(s) of discharge and wastewater wastewater with the point of discharge and the	lity location in the existing permit accurate?  on, please give an accurate description:  d the discharge route(s) in the existing permit correct?  permit application, provide an accurate description of the large route to the nearest classified segment as defined in 30
A.	Is the wastewater treatment facions Yes □ No  If no, or a new permit application Click to enter text.  Are the point(s) of discharge and waste or an ew or amendment proport of discharge and the discharge and the discharge and the discharge to the click to enter text.	lity location in the existing permit accurate?  on, please give an accurate description:  d the discharge route(s) in the existing permit correct?  permit application, provide an accurate description of the large route to the nearest classified segment as defined in 30
A.	Is the wastewater treatment facing Yes □ No  If no, or a new permit application Click to enter text.  Are the point(s) of discharge and waste Yes □ No  If no, or a new or amendment property of discharge and the discharge and th	lity location in the existing permit accurate?  on, please give an accurate description:  d the discharge route(s) in the existing permit correct?  permit application, provide an accurate description of the large route to the nearest classified segment as defined in 30 s/are located: McMullen discharge to a city, county, or state highway right-of-way, or

**E.** Owner of effluent disposal site:

	If <b>yes</b> , indicate by a check mark if:
	$\square$ Authorization granted $\square$ Authorization pending
	For <b>new and amendment</b> 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: $\underline{N/A}$
Se	ection 11. TLAP Disposal Information (Instructions Page 32)
A.	For TLAPs, is the location of the effluent disposal site in the existing permit accurate?
	□ Yes □ No
	If <b>no, or a new or amendment permit application</b> , provide an accurate description of the disposal site location:
	n/a
В.	City nearest the disposal site: Click to enter text.
C.	County in which the disposal site is located: Click to enter text.
D.	For <b>TLAPs</b> , describe the routing of effluent from the treatment facility to the disposal site:
	Click to enter text.
E.	For <b>TLAPs</b> , please identify the nearest watercourse to the disposal site to which rainfall runoff might flow if not contained: Click to enter text.
Co	ation 12 Missellements Information (Instructions Dega 22)
	ection 12. Miscellaneous Information (Instructions Page 32)
Α.	Is the facility located on or does the treated effluent cross American Indian Land?
	□ Yes ⊠ No
В.	If the existing permit contains an onsite sludge disposal authorization, is the location of the sewage sludge disposal site in the existing permit accurate?
	□ Yes □ No ⊠ Not Applicable
	If No, or if a new onsite sludge disposal authorization is being requested in this permit application, provide an accurate location description of the sewage sludge disposal site.
	Click to enter text.

C.	Did any person formerly employed by the TCEQ represent your company and get paid for service regarding this application?
	□ Yes ⊠ No
	If yes, list each person formerly employed by the TCEQ who represented your company and was paid for service regarding the application: Click to enter text.
D.	Do you owe any fees to the TCEQ?
	□ Yes ⊠ No
	If <b>yes</b> , 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 <b>yes</b> , please provide the following information:
	Enforcement order number: Click to enter text.
	Amount past due: Click to enter text.
Se	ection 13. Attachments (Instructions Page 33)
	ection 13. Attachments (Instructions Page 33) dicate which attachments are included with the Administrative Report. Check all that apply:
Inc	dicate which attachments are included with the Administrative Report. Check all that apply:  Lease agreement or deed recorded easement, if the land where the treatment facility is
Inc	dicate which attachments are included with the Administrative Report. Check all that apply:  Lease agreement or deed recorded easement, if the land where the treatment facility is located or the effluent disposal site are not owned by the applicant or co-applicant.
Inc	Lease agreement or deed recorded easement, if the land where the treatment facility is located or the effluent disposal site are not owned by the applicant or co-applicant.  Original full-size USGS Topographic Map with the following information:  • Applicant's property boundary  • Treatment facility boundary  • Labeled point of discharge for each discharge point (TPDES only)  • Highlighted discharge route for each discharge point (TPDES only)  • Onsite sewage sludge disposal site (if applicable)  • Effluent disposal site boundaries (TLAP only)  • New and future construction (if applicable)  • 1 mile radius information  • 3 miles downstream information (TPDES only)

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

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

Permit Number: <u>WQ0015016001</u> Applicant: <u>Quail Run Services</u>, <u>LLC</u>

Certification:

County, Texas

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): <u>Mike Luepnitz</u>
Signatory title: <u>Vice President</u>
Signature:
(Use blue ink)
Subscribed and Sworn to before me by the said
on this 1/th day of August , 2025.
My commission expires on the 164k day of December, 2026.
Aleie Adams
Notary Public  ALICE ADAMS Notary ID #129929201 My Commission Expires December 16, 2026  [SEAL]

# 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: C

# 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.

application until the items below have been addressed.				
Core Data Form (TCEQ Form No. 10400) (Required for all application types. Must be completed in its entirety Note: Form may be signed by applicant representative.)	and s	igned.	$\boxtimes$	Yes
Correct and Current Industrial Wastewater Permit Application Form (TCEQ Form Nos. 10053 and 10054. Version dated 6/25/2018 or late			$\boxtimes$	Yes
Water Quality Permit Payment Submittal Form (Page 19) (Original payment sent to TCEQ Revenue Section. See instructions fo	r mai	iling ad	□ ldress	Yes
7.5 Minute USGS Quadrangle Topographic Map Attached (Full-size map if seeking "New" permit. 8 ½ x 11 acceptable for Renewals and Amendments)				Yes
Current/Non-Expired, Executed Lease Agreement or Easement	$\boxtimes$	N/A		Yes
Landowners Map (See instructions for landowner requirements)	$\boxtimes$	N/A		Yes
<ul> <li>Things to Know:</li> <li>All the items shown on the map must be labeled.</li> <li>The applicant's complete property boundaries must be do boundaries of contiguous property owned by the applicant.</li> <li>The applicant cannot be its own adjacent landowner. You landowners immediately adjacent to their property, regar from the actual facility.</li> <li>If the applicant's property is adjacent to a road, creek, or on the opposite side must be identified. Although the property applicant's property boundary, they are considered potentif the adjacent road is a divided highway as identified on map, the applicant does not have to identify the landown the highway.</li> </ul>	nt. musedless strea pertially the U	t identics of how am, the les are a affect	ify th v far land not a ed lai pogra	e they are owners djacent to ndowners. aphic
Landowners Labels and Cross Reference List (See instructions for landowner requirements)		N/A		Yes
Electronic Application Submittal (See application submittal requirements on page 23 of the instruction	ns.)		$\boxtimes$	Yes
Original signature per 30 TAC § 305.44 - Blue Ink Preferred			$\boxtimes$	Yes

a copy of signature authority/delegation letter must be attached)

Summary of Application (in Plain Language)

(If signature page is not signed by an elected official or principle executive officer,

Yes

# THE TONMENTAL OUNT

### 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): <u>0.10</u> 2-Hr Peak Flow (MGD): <u>1.5</u>

Estimated construction start date: Constructed

Estimated waste disposal start date: 2012

#### **B.** Interim II Phase

Design Flow (MGD): Click to enter text.

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

Estimated construction start date: <u>Click to enter text.</u>

Estimated waste disposal start date: Click to enter text.

#### C. Final Phase

Design Flow (MGD): Click to enter text.

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

Estimated construction start date: Click to enter text.

Estimated waste disposal start date: Click to enter text.

#### D. Current Operating Phase

Provide the startup date of the facility: 8/6/2012

## 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**.

The facility will employ the complete mix variation of the activated sludge process designed for single stage nitrification – from pumps the wastewater will travel through a coarse barscreen then to the surge basin(s) then to the complete mix basin; from the basin the mix-liquor will be transferred to the clarifier where solids will be settled out and clear water will flow over the weirs then into the chlorine contact basin. Thence through effluent filters. The settled solids will either be transferred to the digester or returned to the headworks.

#### **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)
Clarifier	1	19.5' diameter x 12' (height)
Chlorine Contact	1	1504 cu ft
Aeration	1	7744 cu ft x 12' x 12'
Digester	1	4290 cu ft x 12' x 12'

#### C. Process Flow Diagram

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

Attachment: D

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

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

• Latitude: <u>: 28.462249</u>

• Longitude: <u>- 98.647308</u>

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

• Latitude: <u>N/A</u>

• Longitude: Click to enter text.

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

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

#### Attachment: E

Provide the name **and** a description of the area served by the treatment facility. Tilden Wastewater Treatment Facility (previously the RTH WTF) accepts domestic waste from drill site housing or "man camps" in the surrounding oil and gas extraction shale area 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
Tilden WWTF	Quail Run Services, LLC	Privately Owned	Varies; services oil field lodging camps
		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 conf	ntains an unbuilt phase or phases?
--	------------------------------------

$\boxtimes$	Yes		No
2	1 00	_	110

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

$\boxtimes$	Yes	No

If ves. 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.

The WWTP takes sanitary sewage from rig sights and man camps via trucks. As long as the customer base is active there could be a need for plant expansion in the future. Because our customer base is not typical residential/municipal, there is no basis for build out. Only the activity in the field of our customer base will determine when and if we need to expand.

#### 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 y	y <b>es</b> , was a closure plan submitted to the TCEQ?
	□ Yes □ No
If y	yes, provide a brief description of the closure and the date of plan approval.
C	lick to enter text.
Se	ction 6. Permit Specific Requirements (Instructions Page 44)
	r applicants with an existing permit, check the Other Requirements or Special ovisions of the permit.
A.	Summary transmittal
	Have plans and specifications been approved for the existing facilities and each proposed phase?
	□ Yes ⊠ No
	If yes, provide the date(s) of approval for each phase: Click to enter text.
	Provide information, including dates, on any actions taken to meet a <i>requirement or provision</i> pertaining to the submission of a summary transmittal letter. <b>Provide a copy of an approval letter from the TCEQ, if applicable</b> .
	Click to enter text.
B.	Buffer zones
	Have the buffer zone requirements been met?
	□ Yes □ No
	Provide information below, including dates, on any actions taken to meet the conditions of the buffer zone. If available, provide any new documentation relevant to maintaining the buffer zones.
	Click to enter text.

	su	es the <i>Other Requirements</i> or <i>Special Provisions</i> section in the existing permit require omission of any other information or other required actions? Examples include tification of Completion, progress reports, soil monitoring data, etc.  Yes No
		yes, provide information below on the status of any actions taken to meet the additions of an <i>Other Requirement</i> or <i>Special Provision</i> .
		lick to enter text.
D.	Gr	it and grease treatment
	1.	Acceptance of grit and grease waste
		Does the facility have a grit and/or grease processing facility onsite that treats and decants or accepts transported loads of grit and grease waste that are discharged directly to the wastewater treatment plant prior to any treatment?
		□ Yes ⊠ No
		If No, stop here and continue with Subsection E. Stormwater Management.
	2.	Grit and grease processing
		Describe below how the grit and grease waste is treated at the facility. In your description, include how and where the grit and grease is introduced to the treatment works and how it is separated or processed. Provide a flow diagram showing how grit and grease is processed at the facility.
		N <u>/A</u>
	3.	Grit disposal
		Does the facility have a Municipal Solid Waste (MSW) registration or permit for grit disposal?
		□ Yes □ No
		<b>If No</b> , 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.

C. Other actions required by the current permit

		n <u>/a</u>
	4.	Grease and decanted liquid disposal
		Note: A registration or permit is required for grease disposal. Grease shall not be combined with treatment plant sludge. For more information, contact the TCEQ Municipal Solid Waste team at 512-239-2335.
		Describe how the decant and grease are treated and disposed of after grit separation.
		n <u>/a</u>
Ε.	Sto	ormwater management
		Applicability
	1.	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
		<b>If no to both of the above</b> , 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
		<b>If yes</b> , 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

Describe the method of grit disposal.

	if yes, please explain below then proceed to Subsection F, Other wastes Received.
	Click to enter text.
ł.	Existing coverage in individual permit
	Is your stormwater discharge currently permitted through this individual TPDES or TLAP permit?
	□ Yes ⊠ No
	<b>If yes</b> , 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.
<u>.</u>	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.
5.	Request for coverage in individual permit
	Are you requesting coverage of stormwater discharges associated with your treatment plant under this individual permit?
	□ Yes ⊠ No
	<b>If yes</b> , 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.	Di	scharges to the Lake Houston Watershed
	Do	es the facility discharge in the Lake Houston watershed?
		□ Yes ⊠ No
		yes, attach a Sewage Sludge Solids Management Plan. See Example 5 in the instructions. ck to enter text.
G.	Ot	her wastes received including sludge from other WWTPs and septic waste
	1.	Acceptance of sludge from other WWTPs
		Does or will the facility accept sludge from other treatment plants at the facility site?
		□ Yes ⊠ No
		If yes, attach sewage sludge solids management plan. See Example 5 of instructions.
		In addition, provide the date the plant started or is anticipated to start accepting sludge, an estimate of monthly sludge acceptance (gallons or millions of gallons), an
		estimate of the $BOD_5$ concentration of the sludge, and the design $BOD_5$ concentration of the influent from the collection system. Also note if this information has or has not changed since the last permit action.
		Click to enter text.
		Note: Permits that accept sludge from other wastewater treatment plants may be required to have influent flow and organic loading monitoring.
	2.	Acceptance of septic waste
		Is the facility accepting or will it accept septic waste?
		□ Yes ⊠ No
		If yes, does the facility have a Type V processing unit?
		□ Yes □ No
		If yes, does the unit have a Municipal Solid Waste permit?
		□ Yes □ No

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

Click to enter text.

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		Yes	$\boxtimes$	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.

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

Pollutant	Average Conc.	Max Conc.	No. of Samples	Sample Type	Sample Date/Time
CBOD <sub>5</sub> , mg/l		4			7/15/2025
Total Suspended Solids, mg/l		6			
Ammonia Nitrogen, mg/l		<0.1			
Nitrate Nitrogen, mg/l		40.7			
Total Kjeldahl Nitrogen, mg/l		2			
Sulfate, mg/l		128			
Chloride, mg/l		283			
Total Phosphorus, mg/l		18.5			
pH, standard units		8.5			
Dissolved Oxygen*, mg/l					
Chlorine Residual, mg/l					
E.coli (CFU/100ml) freshwater		-			
Entercocci (CFU/100ml) saltwater		-			
Total Dissolved Solids, mg/l		1,292			
Electrical Conductivity, µmohs/cm, †		2,170			
Oil & Grease, mg/l					
Alkalinity (CaCO <sub>3</sub> )*, mg/l					

<sup>\*</sup>TPDES permits only

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

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

# Section 8. Facility Operator (Instructions Page 49)

Facility Operator Name: Brandon Mick

Facility Operator's License Classification and Level: Class B

Facility Operator's License Number: WWoo66426

<sup>†</sup>TLAP permits only

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

A.	WW	ΓP's Sewage Sludge or Biosolids Management Facility Type
	Che	ck all that apply. See instructions for guidance
		Design flow>= 1 MGD
		Serves >= 10,000 people
		Class I Sludge Management Facility (per 40 CFR § 503.9)
	$\boxtimes$	Biosolids generator
		Biosolids end user - land application (onsite)
		Biosolids end user - surface disposal (onsite)
		Biosolids end user - incinerator (onsite)
B.	ww	ΓP's Sewage Sludge or Biosolids Treatment Process
	Che	ck all that apply. See instructions for guidance.
	$\boxtimes$	Aerobic Digestion
		Air Drying (or sludge drying beds)
		Lower Temperature Composting
		Lime Stabilization
		Higher Temperature Composting
		Heat Drying
		Thermophilic Aerobic Digestion
		Beta Ray Irradiation
		Gamma Ray Irradiation
		Pasteurization
		Preliminary Operation (e.g. grinding, de-gritting, blending)
		Thickening (e.g. gravity thickening, centrifugation, filter press, vacuum filter)
		Sludge Lagoon
		Temporary Storage (< 2 years)
		Long Term Storage (>= 2 years)
		Methane or Biogas Recovery
		Other Treatment Process: Click to enter text.

#### C. 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: Transported to another facility for further processing	N/A: Trasporrted to another facility for further processing
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): <u>Transport to another WWTP</u>

#### D. Disposal site

Disposal site name: <u>Austin Wastewater Processing Facility</u>

TCEQ permit or registration number: MSW 2384A

County where disposal site is located: <u>Travis</u>

### E. Transportation method

Method of transportation (truck, train, pipe, other): <u>Truck</u>

Name of the hauler: Wastewater Transport Services

Hauler registration number: 24343

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

		s the completed <b>Application for Permit f</b> or Form No. 10451) attached to this permit a?				
		Yes □ No				
B.	Sludge j	processing authorization				
		e existing permit include authorization fo or disposal options?	r an	y of the	follov	ving sludge processing,
	Slud	ge Composting		Yes		No
	Mark	keting and Distribution of Biosolids		Yes		No
	Slud	ge Surface Disposal or Sludge Monofill		Yes		No
	Tem	porary storage in sludge lagoons		Yes		No
	authoriz	o any of the above sludge options and the zation, is the completed <b>Domestic Wastev</b> cal <b>Report (TCEQ Form No. 10056)</b> attach	vate	r Perm	it App	lication: Sewage Sludge
		Yes □ No				
Se	ection 1	11. Sewage Sludge Lagoons (Ins	tru	ctions	s Pag	e 53)
		acility include sewage sludge lagoons?				
	□ Yes	s 🗵 No				
If	yes, comj	plete the remainder of this section. If no,	proc	eed to	Section	n 12.
A.	Location	n information				
		owing maps are required to be submitted the Attachment Number.	as p	art of t	he app	olication. For each map,
	• 0	Original General Highway (County) Map:				
	A	Attachment: Click to enter text.				
	• U	JSDA Natural Resources Conservation Serv	vice :	Soil Ma	p:	
		Attachment: Click to enter text.				
		Federal Emergency Management Map:				
		Attachment: <u>Click to enter text.</u>				
		Site map: Attachment: Click to enter text.				
		in a description if any of the following ex	ist w	zithin t	he lago	oon area. Check all that
	apply.	in a description if any of the following ex	13( )	, , , , , , , , , , , , , , , , , , , ,	iic iage	on area. Check an that
		Overlap a designated 100-year frequency	floo	d plain		
		Soils with flooding classification				
		Overlap an unstable area				
		Wetlands				

	Located less than 60 meters from a fault
	None of the above
Atta	chment: Click to enter text.
-	tion of the lagoon(s) is located within the 100-year frequency flood plain, provide tective measures to be utilized including type and size of protective structures:
Click to	o 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: <u>Click to enter text.</u>

Potassium, mg/kg: <u>Click to enter text.</u> 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: <u>Click to enter text.</u>

Zinc: Click to enter text.

Total PCBs: <u>Click to enter text.</u> Provide the following information:

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

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

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

#### C. Liner information

Does the active/proposed sludge lagoon(s) have a liner with a maximum hydraulic conductivity of  $1x10^{-7}$  cm/sec?

		Yes □ No
	If yes	, describe the liner below. Please note that a liner is required.
	Click	to enter text.
D.	Site d	evelopment plan
	Provid	le a detailed description of the methods used to deposit sludge in the lagoon(s):
	Click	to enter text.
	Attacl	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.	Grour	ndwater monitoring
	groun	undwater monitoring currently conducted at this site, or are any wells available for dwater monitoring, or are groundwater monitoring data otherwise available for the e lagoon(s)?
		Yes □ No
	types	andwater monitoring data are available, provide a copy. Provide a profile of soil encountered down to the groundwater table and the depth to the shallowest dwater as a separate attachment.

Attachment: Click to enter text.

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

A. Additional authorizations
Does the permittee have additional authorizations for this facility, such as reuse authorization, sludge permit, etc?
□ Yes ⊠ No
If yes, provide the TCEQ authorization number and description of the authorization:
Click to enter text.
B. Permittee enforcement status
Is the permittee currently under enforcement for this facility?
□ Yes ⊠ No
Is the permittee required to meet an implementation schedule for compliance or enforcement?
□ Yes ⊠ No
<b>If yes</b> 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	$\boxtimes$	No

#### B. Remediation activity wastewater

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

□ Yes ⊠ No

#### C. Details about wastes received

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

Attachment: N/A

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

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

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

#### **CERTIFICATION:**

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

Printed Name: Mike Luepnitz

Title: Vice President

12025

## 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 <b>no</b> , proceed it Section 2. <b>If yes</b> , 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 <b>no</b> , proceed to Section 3. <b>If yes</b> , 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: Sand Hollow A. Receiving water type Identify the appropriate description of the receiving waters. $\boxtimes$ Stream Freshwater Swamp or Marsh Lake or Pond Surface area, in acres: Click to enter text. Average depth of the entire water body, in feet: Click to enter text. Average depth of water body within a 500-foot radius of discharge point, in feet: Click to enter text. Man-made Channel or Ditch Open Bay Tidal Stream, Bayou, or Marsh Other, specify: 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 $\boxtimes$ Personal observation Other, specify: Click to enter text.

C.	Downs	tream perennial confluences		
		e names of all perennial streams tha tream of the discharge point.	t joir	the receiving water within three miles
	Frio R	iver		
D.	Downs	tream characteristics		
		receiving water characteristics change (e.g., natural or man-made dams	_	ithin three miles downstream of the ds, reservoirs, etc.)?
	$\boxtimes$	Yes □ No		
	If yes,	discuss how.		
	Frio R	iver		
E.	Norma	l dry weather characteristics		
		•	ody	during normal dry weather conditions.
	N <u>o sto</u>	rmwater runoff		
	Date ar	nd time of observation: <u>8/6/2025</u>		
		e water body influenced by stormwa	ater r	unoff during observations?
		Yes ⊠ No		
			•	
Se	ection	5. General Characteristics Page 65)	10 8	the Waterbody (Instructions
Α.	Upstre	am influences		
		mmediate receiving water upstream ced by any of the following? Check		ne discharge or proposed discharge site at apply.
	$\boxtimes$	Oil field activities	$\boxtimes$	Urban runoff
		Upstream discharges	$\boxtimes$	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 $\boxtimes$ Industrial water supply Other(s), specify: Click to enter text. Park activities C. Waterbody aesthetics Check one of the following that best describes the aesthetics of the receiving water and 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 $\boxtimes$ fields, pastures, dwellings); water clarity discolored Common Setting: not offensive; developed but uncluttered; water may be colored or turbid

Offensive: stream does not enhance aesthetics; cluttered; highly developed;

dumping areas; water discolored

## DOMESTIC WASTEWATER PERMIT APPLICATION WORKSHEET 3.0: LAND DISPOSAL OF EFFLUENT

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

# Section 1. Type of Disposal System (Instructions Page 67) Identify the method of land disposal: Surface application Irrigation Drip irrigation system Subsurface soils absorption Subsurface area drip dispersal system

☐ Evaporation ☐ Evapotranspiration beds

Other (describe in detail): <u>Effluent line in place to transport effluent to Sand Hollow Creek</u>

NOTE: All applicants without authorization or proposing new/amended subsurface disposal MUST complete and submit Worksheet 7.0.

For existing authorizations, provide Registration Number: Click to enter text.

#### Section 2. Land Application Site(s) (Instructions Page 67)

In table 3.0(1), provide the requested information for the land application sites. Include the agricultural or cover crop type (wheat, cotton, alfalfa, bermuda grass, native grasses, etc.), land use (golf course, hayland, pastureland, park, row crop, etc.), irrigation area, amount of effluent applied, and whether or not the public has access to the area. Specify the amount of land area and the amount of effluent that will be allotted to each agricultural or cover crop, if more than one crop will be used.

#### Table 3.0(1) - Land Application Site Crops

Crop Type & Land Use	Irrigation Area (acres)	Effluent Application (GPD)	Public Access? Y/N
N/A			

## Section 3. Storage and Evaporation Lagoons/Ponds (Instructions Page 67)

#### Table 3.0(2) – Storage and Evaporation Ponds

Pond Number	Surface Area (acres)	Storage Volume (acre-feet)	Dimensions	Liner Type
N/A				

Attach a copy of a liner certification that was prepared, signed, and sealed by a Texas licensed professional engineer for each pond.
Attachment: Click to enter text.
Section 4. Flood and Runoff Protection (Instructions Page 67)
Is the land application site <u>within</u> the 100-year frequency flood level?
□ Yes ⊠ No
If yes, describe how the site will be protected from inundation.
Click to enter text.
Provide the source used to determine the 100-year frequency flood level:
Click to enter text.
Provide a description of tailwater controls and rainfall run-on controls used for the land application site.
Click to enter text.

#### Section 5. Annual Cropping Plan (Instructions Page 67)

Attach an Annual Cropping Plan which includes a discussion of each of the following items. If not applicable, provide a detailed explanation indicating why. **Attachment**: N/A

- Soils map with crops
- Cool and warm season plant species
- Crop yield goals
- Crop growing season
- Crop nutrient requirements
- Additional fertilizer requirements
- Minimum/maximum harvest height (for grass crops)
- Supplemental watering requirements
- Crop salt tolerances
- Harvesting method/number of harvests
- Justification for not removing existing vegetation to be irrigated

#### Section 6. Well and Map Information (Instructions Page 68)

Attach a USGS map with the following information shown and labeled. If not applicable, provide a detailed explanation indicating why. **Attachment**:  $\underline{F}$ 

- The boundaries of the land application site(s)
- Waste disposal or treatment facility site(s)
- On-site buildings
- Buffer zones
- Effluent storage and tailwater control facilities
- All water wells within 1-mile radius of the disposal site or property boundaries
- All springs and seeps onsite and within 500 feet of the property boundaries
- All surface waters in the state onsite and within 500 feet of the property boundaries
- All faults and sinkholes onsite and within 500 feet of the property

List and cross reference all water wells located within a half-mile radius of the disposal site or property boundaries shown on the USGS map in the following table. Attach additional pages as necessary to include all of the wells.

Table 3.0(3) - Water Well Data

Well ID	Well Use	Producing? Y/N	Open, cased, capped, or plugged?	Proposed Best Management Practice
198840	Domestic	Y	Open	
349329	Fracking Supply	Y	Open	
7836102	N/A	Y	Open	
			Choose an item.	
			Choose an item.	

If water quality data or well log information is available please include the information in an attachment listed by Well ID.

Attachment: Click to enter text.

#### Section 7. Groundwater Quality (Instructions Page 68)

Attach a Groundwater Quality Technical Report which assesses the impact of the wastewater disposal system on groundwater. This report shall include an evaluation of the water wells (including the information in the well table provided in Item 6. above), the wastewater application rate, and pond liners. Indicate by a check mark that this report is provided.

Attachment: Click to enter text.
Are groundwater monitoring wells available onsite? $\square$ Yes $\square$ No
Do you plan to install ground water monitoring wells or lysimeters around the land application site? $\Box$ Yes $\Box$ No
If yes, provide the proposed location of the monitoring wells or lysimeters on a site map.
Attachment: Click to enter text.

#### Section 8. Soil Map and Soil Analyses (Instructions Page 69)

#### A. Soil map

Attach a USDA Soil Survey map that shows the area to be used for effluent disposal.

Attachment: **F** 

#### B. Soil analyses

Attach the laboratory results sheets from the soil analyses. **Note**: for renewal applications, the current annual soil analyses required by the permit are acceptable as long as the test date is less than one year prior to the submission of the application.

**Attachment**: Click to enter text.

List all USDA designated soil series on the proposed land application site. Attach additional pages as necessary.

Table 3.0(4) - Soil Data

Soil Series	Depth from Surface	Permeability	Available Water Capacity	Curve Number
LaB – Laparita Clay loam, 0 to 3 percent slopes, rarely flooded	0 to 60 inches	Moderate to moderately slow	~0.15 to 0.20 in/inch	Group D
LnB - Leoncita fine sandy loam, 1 to 3 percent slopes	40 to 60 inches	moderately rapid to moderate	~0.10 to 0.15 in/inch	Group B
Outfall location is in a Unsurveyed Area				

Soil Series	Depth from Surface	Permeability	Available Water Capacity	Curve Number

#### **Section 9.** Effluent Monitoring Data (Instructions Page 70)

Is the facility in operation?

⊠ Yes □ No

**If no**, this section is not applicable and the worksheet is complete.

**If yes**, provide the effluent monitoring data for the parameters regulated in the existing permit. If a parameter is not regulated in the existing permit, enter N/A.

Table 3.0(5) - Effluent Monitoring Data

Date	30 Day Avg Flow MGD	BOD5 mg/l	TSS mg/l	рН	Chlorine Residual mg/l	Acres irrigated
7/1/2023	0.015	5.00	3.00	7.74	3.00	N/A
8/1/2023	0.014	<3	15.00	7.56	1.80	
9/1/2023	0.016	4.00	1.00	7.54	2.10	
10/12/2023	0.022	5.00	10.00	7.94	1.6	
11/14/2023	0.023	3.00	6.00	7.48	2.10	
12/21/2023	0.024	3.00	8.00	7.70	2.30	
1/16/2024	0.025	6.00	10.00	7.33	2.00	
2/1/2024	0.021	5.00	4.00	7.11	1.30	
3/1/2024	0.023	7.00	8.00	7.85	2.20	
4/21/2024	0.013	4.00	4.00	7.52	2.90	
5/7/2024	0.012	3.00	4.00	7.60	1.40	
6/4/2024	0.011	4.00	2.00	7.88	2.10	
7/9/2024	0.013	6.00	3.00	8.10	1.80	
8/6/2024	0.008	3.00	2.00	8.36	2.40	
9/3/2024	0.014	4.00	8.00	7.77	1.70	
10/1/2024	0.015	4.00	12.00	8.52	1.60	
11/5/2024	0.016	6.00	8.00	8.75	1.50	
12/3/2024	0.020	6.00	3.00	8.44	1.40	
1/14/2025	0.021	6.00	3.00	7.73	1.70	

Date	30 Day Avg Flow MGD	BOD5 mg/l	TSS mg/l	pН	Chlorine Residual mg/l	Acres irrigated
2/4/2025	0.021	8.00	7.00	8.06	3.00	
3/4/2025	0.018	6.00	12.00	8.05	1.40	
4/8/2025	0.018	5.00	2.00	8.03	3.90	
5/13/2025	0.018	5.00	4.00	8.15	1.80	
6/24/2025	0.015	7.00	4.00	8.35	1.80	

Provide a discussion of all persistent excursions above the permitted limits and any corrective actions taken.

Click to enter text.			

#### **Attachment A**

Core Data Form

**TCEQ Use Only** 



## **TCEQ Core Data Form**

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

#### **SECTION I: General Information**

N71	C D-1	'ann abould be aut 's	tad with the	rangual form			Ot	her				
⊠ Renewal (	Core Data F	form should be submit	ted with the i	renewai Jorm)				ner				
. Customer R	eference	Number (if issued)		Follow this lir			3. Reg	ulated I	Entity Refe	erence l	Number (if is.	sued)
CN 60455354	15			Central Re			RN 1	064582	50			
ECTION	II: (	Customer	Infori	<u>mation</u>								
1. General Cu	stomer in	formation	5. Effective	e Date for Cu	stomer	Infor	mation l	Jpdates	(mm/dd/y	ууу)		4/1/2025
New Custon				tomer Informati			_	-	gulated Enti	ty Owne	rship	1
☐Change in Le	gal Name (	Verifiable with the Te	as Secretary	of State or Texa	s Comp	troller	of Public	Account	s)			
		bmitted here may l		automatically	, based	on w	hat is cu	ırrent a	nd active	with the	e Texas Secre	etary of State
		e (If an individual, pri		first: eg: Doe, Jo	ohn)			<u>If new</u>	Customer, e	nter pre	vious Custome	er below:
Quail Run Servi	ces, LLC											
7. TX SOS/CP	A Filing Nu	umber	8. TX Stat	rate Tax ID (11 digits)					10. DUNS N	lumber (if		
3204488439			801468416				(9 digits) applicable)					
11. Type of C	ustomer:	☐ Corpora	tion				Individ	lual		Partne	rship: 🔲 Gen	eral 🛛 Limited
Government:	City 🔲 0	County 🔲 Federal 🔲	Local 🔲 Sta	ite 🔲 Other		[	Sole Pi	roprietor	ship	Oth	ner:	
12. Number o	of Employ	ees						13. In	dependen	tly Ow	ned and Ope	rated?
<b>⊠</b> 0-20			-500 🗆 50	)1 and higher			⊠ Yes □ No					
14. Custome	Role (Pro	posed or Actual) – as	it relates to th	he Regulated En	tity liste	ed on t	his form.	Please cl	heck one of	the follo	wing	
Owner	al Licensee	Operator Responsible Pa		Owner & Opera					Other:			
	,											
15. Mailing	PO Box 3	40										
Address:	City	Gainsville		State	TX		ZIP	76241			ZIP + 4	
16. Country I	 Vlailing In	formation (if outside	USA)			17. 6	E-Mail A	ddress (	if applicable	e)		
						mlue	pnitz@re	ntpeak.c	com			
				40.5				—-т	20		/if annliamb!-1	
18. Telephon	e Number	r		19. Extension	on or C	oae			∠u. rax N	umper	(if applicable)	

( 940 ) 531-0235	( ) -

#### **SECTION III: Regulated Entity Information**

21. General Regulated Ent	ity Informa	ition (If 'New Regula	ted Entity" is selecte	ed, a new pe	rmit applicat	tion is also	required.)		
☐ New Regulated Entity ☐	☐ New Regulated Entity								
The Regulated Entity Namas Inc, LP, or LLC).	ne submitte	d may be updated	, in order to mee	t TCEQ Core	Data Stan	dards (re	emoval of or	ganizationa	l endings such
22. Regulated Entity Name	<b>e</b> (Enter nan	e of the site where th	ne regulated action	is taking plac	ce.)			\$ ****************	
Tilden Wastewater Treatment	: Facility								
23. Street Address of the Regulated Entity:									
(No PO Boxes)	City		State		ZIP			ZIP + 4	
24. County	McMullen								
		If no Street A	Address is provid	ed, fields 2	5-28 are re	quired.			
25. Description to	I control at	the southwest interse	oction of New Teal P	oad and Stat	te Highway 7	2 west of	F New Teal Roa	d	
Physical Location:	Located at	the southwest intersc	ector of New Years						
26. Nearest City						State		Near	est ZIP Code
Tilden						TX		7807	
Latitude/Longitude are re used to supply coordinate					ata Standa	ırds. (Ge	ocoding of th	ne Physical A	Address may be
27. Latitude (N) In Decima	al:	28.470312		28. Lo	ongitude (V	V) In Dec	cimal:	-98.61857	6
Degrees	Minutes	Se	econds	Degre	es		Minutes		Seconds
28		28	13.1		98		37		6.9
29. Primary SIC Code	30	. Secondary SIC Co	de	31. Primar	y NAICS Co	ode	32. Seco	ndary NAIC	S Code
(4 digits)	(4	digits)		(5 or 6 digit	ts)		(5 or 6 di <sub>i</sub>	gits)	
4952				221320					
33. What is the Primary E	Business of	this entity? (Do n	ot repeat the SIC or	NAICS descr	iption.)				
Contract wastewater treatme	ent								
04 14-11	РО Вох 3	40							
34. Mailing									
Address:	City	Gainsville	State	тх	ZIP	76240		ZIP + 4	
35. E-Mail Address:		uepnitz@rentpeak.c	om						I
36. Telephone Number			37. Extension or	Code	38. I	Fax Num	ber (if applica	 ble)	
( 940 ) 531-0235					(	) -			

**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.

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

☐ Dam Safety	Districts	☐ Edwards Aquifer		Emissions Inventory Air	I 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	<b>⊠</b> Wastewater	☐ Wastewater Agricul	ture	☐ Water Rights	Other:
	WQ0015016001				
SECTION IV: P	reparer Inf	<u>ormation</u>			
40. Name: Marjorie Zav	ala		41. Title:	Consultant	
42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Ma	ail Address	
(713)636-9501 ( ) -		( ) -	mzavala@	Platitudes environmental.com	
SECTION V: A	uthorized S	<u>ignature</u>			
	tify, to the best of my kno	wledge, that the information	on provided in	n this form is true and complet	e, and that I have signature authority entified in field 39.

Company:	Quail Run Services, LLC	Job Title:	Vice Presi	dent	
Name (In Print):	Mike Luepnitz			Phone:	( 940 ) 531- <b>0235</b>
Signature:	My 28			Date:	08/14/2025

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



#### 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.

Quail Run Services, LLC (CN604553545) operates Tilden Wastewater Treatment Facility (RN106458250), a contract wastewater treatment plant. The facility is located at the southwest intersection of New Teal Road and State Highway 72, west of New Teal Road, in Tilden, McMullen County, Texas 78072. A renewal application to discharge of treated domestic wastewater. << For TLAP applications include the following sentence, otherwise delete:>> This permit will not authorize a discharge of pollutants into water in the state.

Discharges from the facility are expected to contain CBOD, TSS, E-coli. Process wastewater is treated by complete mix variation of the activated sludge process designed for single stage nitrification – from pumps the wastewater will travel through a coarse barscreen then to the surge basin(s) then to the complete mix basin; from the basin the mix-liquor will be transferred to the clarifier where solids will be settled out and clear water will flow over the

weirs then into the chlorine contact basin. Thence through effluent filters. The settled solids will either be transferred to the digester or returned to the headworks

#### **Attachment B**

Lease Agreement

#### FIRST AMENDMENT TO LEASE AGREEMENT

THIS FIRST AMENDMENT ("Amendment") to Lease Agreement is made this day of January, 2025 by and between RANCHO TRES HIJOS L.P., a Texas limited partnership ("Lessor"), and QUAIL RUN SERVICES, LLC, a Texas limited liability company ("Lessee").

WHEREAS, Lessor and Lessee are parties to that certain Physical Property Lease for Domestic Wastewater Treatment Facility, modified by that certain Modification #1 to the Agreement for the Physical Property Lease for Domestic Wastewater Treatment Facility dated March 1, 2015 (collectively, the "Lease"), for certain real property and improvements commonly known as 1899 Highway 72, Tilden, McMullen County, Texas 78072 (Parcel Identification Number: 4761) (the "Property"); and

WHEREAS, Lessor provided Lessee with two (2) five (5) year extension options, with Lessee having exercised the first extension option in Lessee's Extension Notice dated September 18, 2018;

WHEREAS, the first extension term has expired, and the term of the Lease is currently month to month, and Lessee desires to exercise its second extension option to extend the Term for an additional period of five (5) years; and

WHEREAS, Lessor agrees to grant Lessee three (3) additional five (5) year extension options to extend the Term, pursuant to the terms hereafter set forth; and

WHEREAS, the Lessor and Lessee wish to amend the Rent calculation method from a price per gallon to a percentage of gross revenue per gallon for domestic water received from third parties and treated at the Property; and

WHEREAS, Lessor and Lessee desire to reconcile any underpayment of Rent owed by Lessee to Lessor; and

WHEREAS, Lessor and Lessee agree to amend the Lease as follows.

NOW, THEREFORE, in consideration of the premises and the mutual covenants, conditions and agreements herein contained, and for such other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged and received, the parties hereto agree as follows:

- 1. <u>Capitalized Terms</u>. All capitalized terms used in this Amendment shall have the same meaning as set forth in the Lease, except as otherwise specifically defined herein.
- 2. Extension of Term. The Parties acknowledge and agree that Lessee is in possession of the Property under the terms of the Lease on a month to month basis. Lessee hereby elects to extend the term of the Lease for an additional term of 5 years commencing as of January 1, 2025 and continuing through December 31, 2029 (the "Second Extended Term") on the same terms and conditions as provided in the Lease, except as expressly amended herein, and Lessor hereby



accepts Tenant's exercise of the Second Extended Term. The parties acknowledge and agree that both the first extension term and the second extension term have been exercised.

- 3. Extension Option. Lessor hereby grants Lessee three (3) additional options to extend the Term of the Lease (each, an "Extension Option"), each for a period of five (5) years (each, an "Extension Term"). Lessee may exercise an Extension Option by providing written notice to Lessor no less than sixty (60) days prior to the expiration of the then-current Term.
  - 4. Rent. Effective as of January 1, 2025, the Lease shall be amended as follows:
- (a) The second paragraph of Section 3 of the Lease, which pertains to the calculation of Rent, is hereby replaced with the following:

"Rent for the Second Extended Term shall be 6.69% of the gross revenue per gallon charged for the domestic wastewater received from third parties and treated at the wastewater treatment facility located at the Property (the "Rent"). Rent for the Extension Option periods shall increase as follows: 8% of the gross revenue per gallon for the first Extension Option period, 9% of the gross revenue per gallon for the second Extension Option period, and 10% of the gross revenue per gallon for the third Extension Option period. Rent payment is to be made the 15th of the following month."

All other provisions of Section 3 of the Lease not expressly amended herein shall remain in full force and effect.

- (b) The first paragraph of Section 4 of the Lease, which pertains to the calculation of Rent, is hereby deleted in its entirety.
- 5. <u>Underpaid Rent and Waiver of Claims</u>. Lessee acknowledges that it has underpaid Rent under the Lease in the total amount of \$78,613.74 ("Underpaid Rent"). Lessee agrees to remit payment of the full amount of \$78,613.74 to Lessor contemporaneously with the execution of this Amendment by both parties. In consideration of Lessee's payment of the Underpaid Rent in full as agreed herein, Lessor agrees to waive and release any and all claims, rights, or remedies it may have against Lessee for the failure to pay the Underpaid Rent in a timely manner, including but not limited to claims for interest, late fees, or penalties related to such nonpayment.
- 6. <u>Estoppel</u>. Lessor acknowledges and agrees that Lessee is not in default of the Lease beyond any applicable notice and cure period, and that Lessor is unaware of any fact or matter which, with notice or the passage of time or both, may constitute a default under the Lease by Lessee.
- 7. Notices. Any notice or demand hereunder shall be made in writing and given (a) by personal delivery, (b) delivery by United States Postal Service certified mail, with postage prepaid and return receipt required, or (c) delivery by a reputable overnight courier at the addresses listed below:

aux

If to Lessor:

Rancho Tres Hijos L.P. 2814 Westgrove Lane Houston, Texas 77027

If to Lessee:

Quail Run Services, LLC

1899 Hwy 72 Tilden, TX 78072

Attn: General Manager

And a copy to:

Quail Run Services, LLC c/o Republic Services, Inc. 18500 N. Allied Way Phoenix, AZ 85054

Attn: Chief Legal Officer

And a copy to:

Spotts Fain, PC

411 E Franklin Street, Suite 600

Richmond, VA 23219 Attn: David A. Reed, Esq.

Notices shall be deemed to have been given when received after deposit in the U.S. mail in accordance with the requirements set forth herein or on the date of documented delivery or refusal to accept same if delivered in person or by overnight courier.

- 8. <u>Conflict</u>. Except as hereby amended, the Lease shall remain unchanged in full force and effect. If there is any conflict between the terms and provisions of the Lease and the terms and provisions of this Amendment, this Amendment shall control.
- 9. <u>Counterparts</u>. This Amendment may be executed in counterparts, each of which shall be deemed an original and all of which together shall constitute one document. An electronic or email .PDF signature of any party hereto shall be deemed an original.

[Signature Page Follows]

aux

IN WITNESS WHEREOF, the parties hereto have each executed this Amendment to be effective for all purposes as of the date first written above.

Lessor:

RANCHO TRES HIJOS L.P., a Texas limited partnership

Name: ARTHUR WI EXIET III
Title: MEMBER, EPLEY LLC.
GENERAL PARTNER

Lessee:

QUAIL RUN SERVICES, LLC, a Texas limited liability company

Name: Vince Scheerer

Title: Vice President

#### **Attachment C**

SPIF

## TEXAS COMMISSION ON ENVIRONMENTAL QUALITY SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

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

TO	TCEQ USE ONLY:	
Αţ	Application type:RenewalMajor AmendmentM	linor AmendmentNew
Co	County: Segment Numl	ber:
Ac	Admin Complete Date:	
Αį	Agency Receiving SPIF:	
	Texas Historical Commission U.S. Fish	h and Wildlife
	Texas Parks and Wildlife Department U.S. Arr	ny Corps of Engineers
Thi	This form applies to TPDES permit applications only. (Instruc	tions, Page 53)
our is n	Complete this form as a separate document. TCEQ will mail a coordinate our agreement with EPA. If any of the items are not completely is needed, we will contact you to provide the information before each item completely.	addressed or further information
atta app con may	Do not refer to your response to any item in the permit application application will not be declared administratively complete with completed in its entirety including all attachments. Questions of may be directed to the Water Quality Division's Application Revenual at	

answer specific questions about the property.
Prefix (Mr., Ms., Miss): Mr.
First and Last Name: <u>Mike Luepnitz</u>
Credential (P.E, P.G., Ph.D., etc.):
Title: <u>Vice President</u>
Mailing Address: <u>PO Box 340</u>
City, State, Zip Code: <u>Gainesville, TX 76241</u>
Phone No.: <u>940-531-0235</u> Ext.: Fax No.:
E-mail Address: <u>mluepnitz@rentpeak.com</u>
List the county in which the facility is located: <u>McMullen</u>
If the property is publicly owned and the owner is different than the permittee/applicant, please list the owner of the property.
Rancho Tres Hijos L.P.
Provide a description of the effluent discharge route. The discharge route must follow the flow of effluent from the point of discharge to the nearest major watercourse (from the point of discharge to a classified segment as defined in 30 TAC Chapter 307). If known, please identify the classified segment number.
The discharge route is to Sand Hollow Creek; thence to Frio River above Choke Canyon Reservoir in Segment No. 2117 of the Nueces River Basin
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

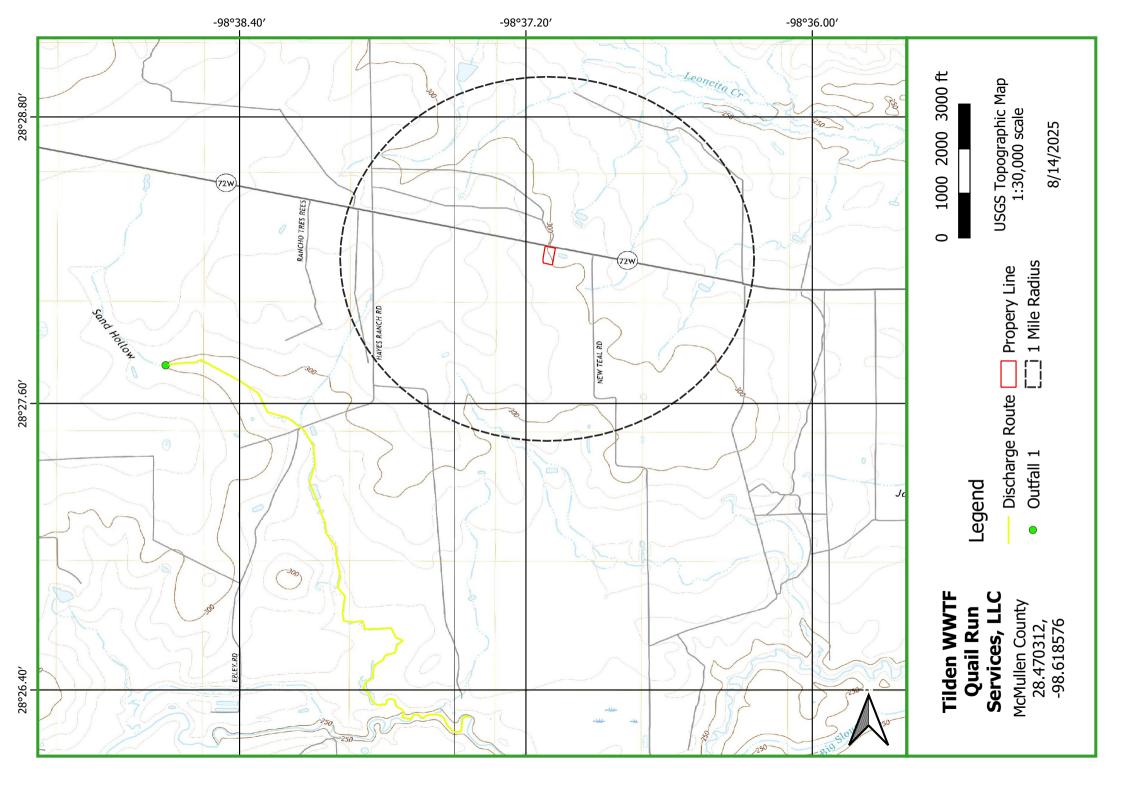
Provide the name, address, phone and fax number of an individual that can be contacted to

2.3.

4.

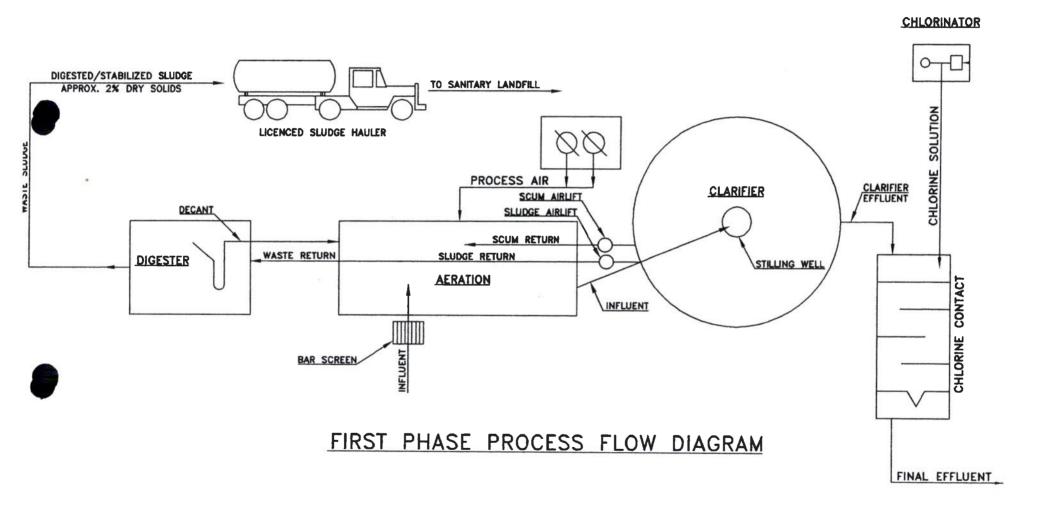
5.

	☐ 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):	ıg
	N/A	
2.	Describe existing disturbances, vegetation, and land use:  N/A	
	HE FOLLOWING ITEMS APPLY ONLY TO APPLICATIONS FOR NEW TPDES PERMITS AND MAJOR MENDMENTS TO TPDES PERMITS	 {
3.	List construction dates of all buildings and structures on the property:	
	Tick here to entertext	
4.	Provide a brief history of the property, and name of the architect/builder, if known.	
	Click here to enter text.	



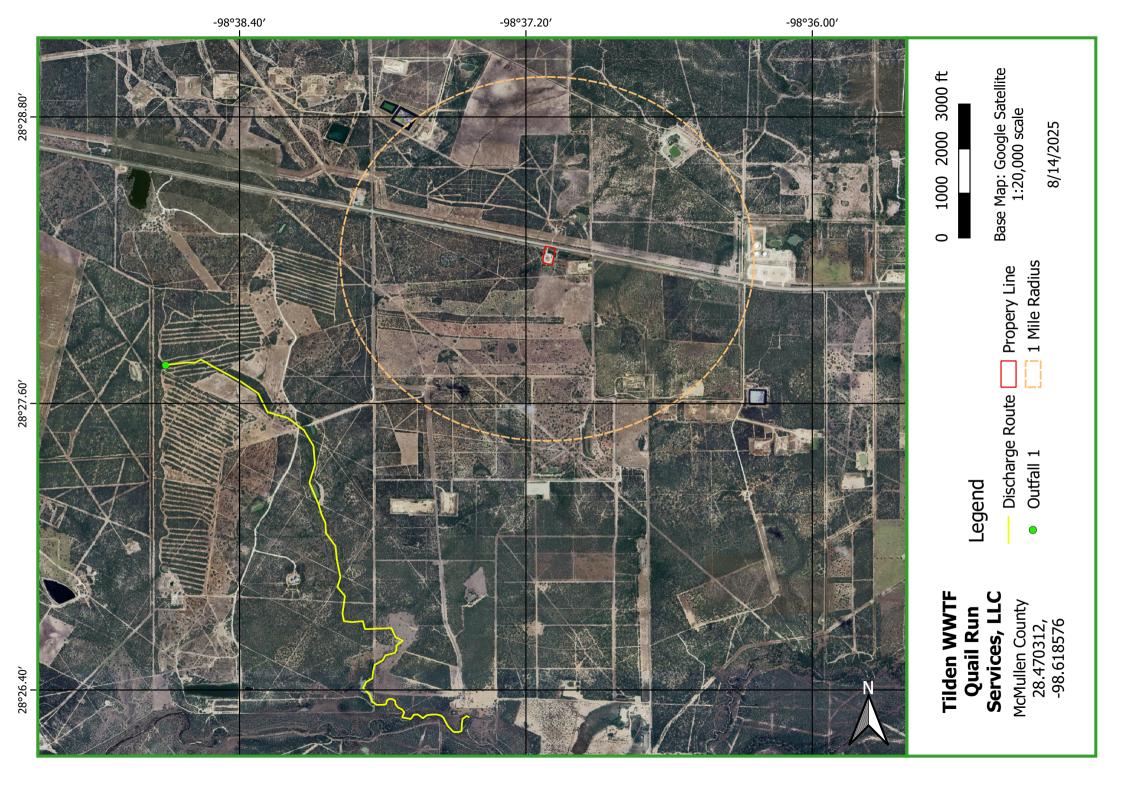
#### **Attachment D**

Process Flow Diagram



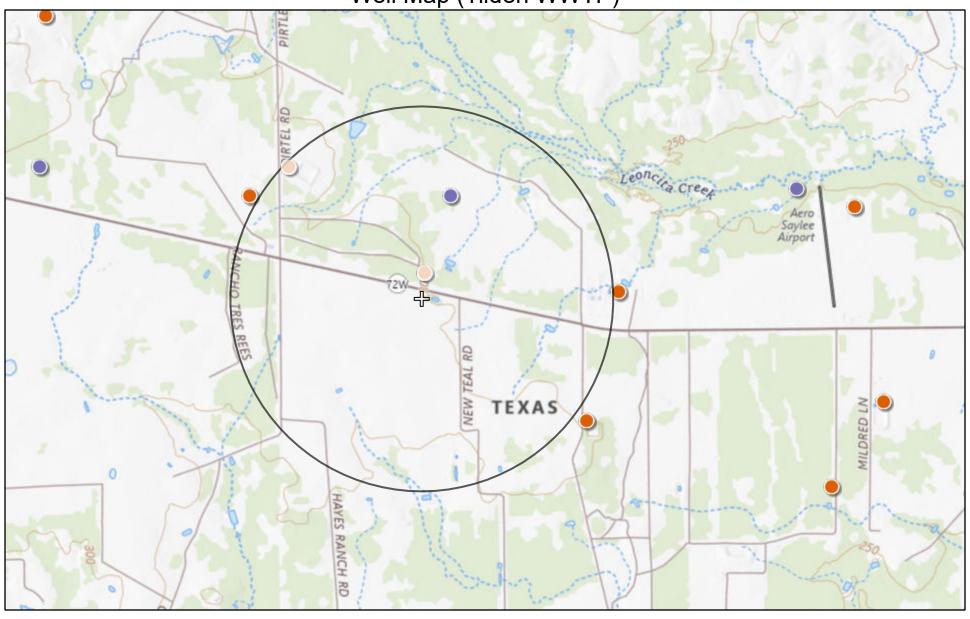
#### **Attachment E**

Site Drawing



#### **Attachment F**

Well Information And Soil Analysis Well Map (Tilden WWTP)



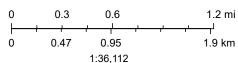




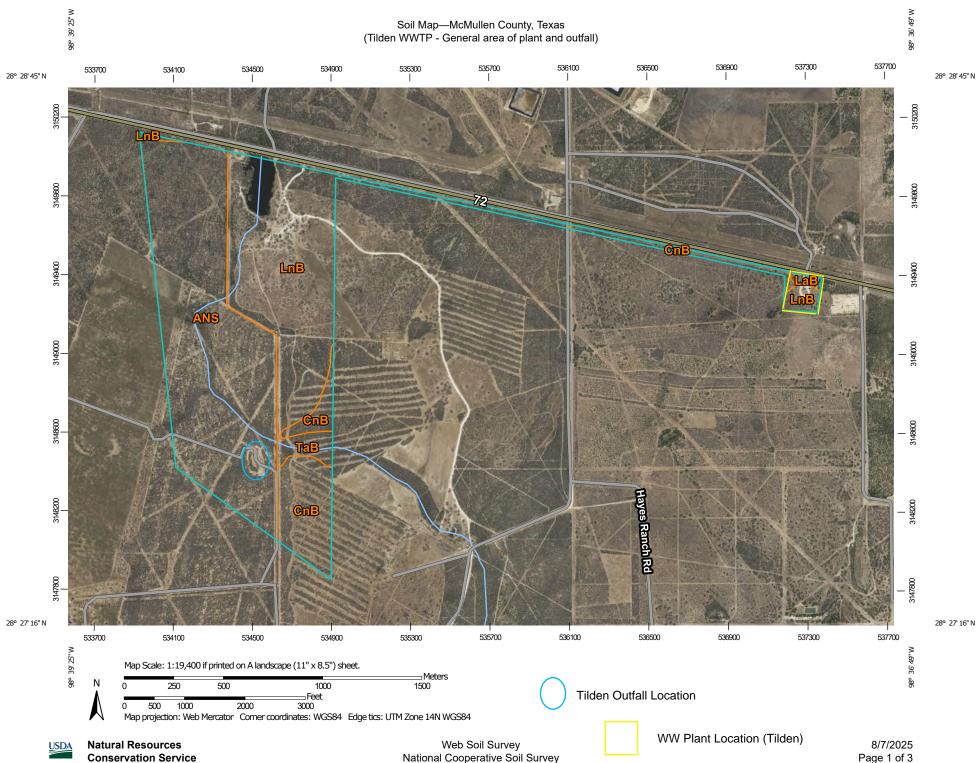
TWDB Groundwater

August 5, 2025





USGS The National Map: National Boundaries Dataset, 3DEP Elevation Program, Geographic Names Information System, National Hydrography



### MAP LEGEND

### Area of Interest (AOI)

### Area of Interest (AOI)

#### Soils

Soil Map Unit Polygons



Soil Map Unit Lines



Soil Map Unit Points

#### **Special Point Features**

Blowout

Borrow Pit

X

Clay Spot

Ж

Closed Depression



Gravel Pit



**Gravelly Spot** 



Landfill



Lava Flow



Marsh or swamp



Mine or Quarry

Miscellaneous Water



Perennial Water



Rock Outcrop



Saline Spot



Sandy Spot



Severely Eroded Spot



Sinkhole



Slide or Slip

Ø

Sodic Spot

### 8

Spoil Area



Stony Spot



Very Stony Spot



Wet Spot Other



Special Line Features

### Water Features

Streams and Canals

#### Transportation



Rails



Interstate Highways



US Routes



Major Roads



Local Roads

### Background



Aerial Photography

### MAP INFORMATION

The soil surveys that comprise your AOI were mapped at 1:24.000.

Please rely on the bar scale on each map sheet for map measurements.

Source of Map: Natural Resources Conservation Service Web Soil Survey URL:

Coordinate System: Web Mercator (EPSG:3857)

Maps from the Web Soil Survey are based on the Web Mercator projection, which preserves direction and shape but distorts distance and area. A projection that preserves area, such as the Albers equal-area conic projection, should be used if more accurate calculations of distance or area are required.

This product is generated from the USDA-NRCS certified data as of the version date(s) listed below.

Soil Survey Area: McMullen County, Texas Survey Area Data: Version 25, Aug 30, 2024

Soil map units are labeled (as space allows) for map scales 1:50,000 or larger.

Date(s) aerial images were photographed: Mar 20, 2021—Apr 10, 2021

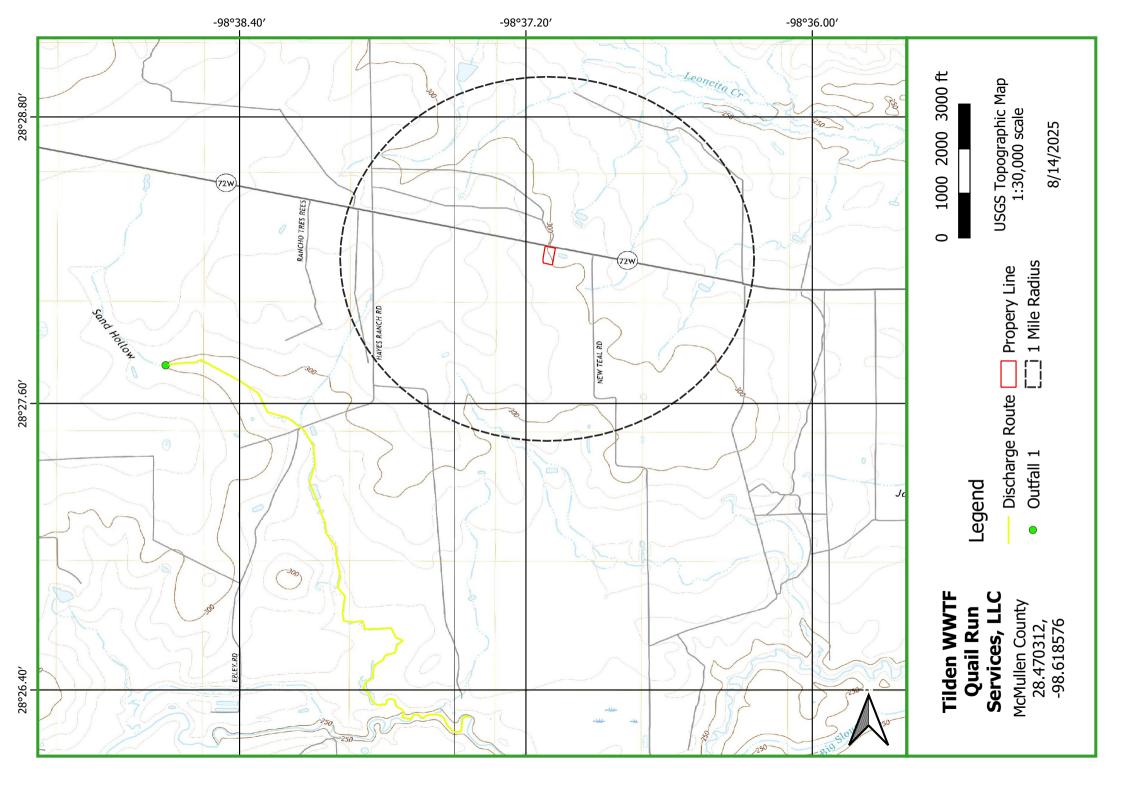
The orthophoto or other base map on which the soil lines were compiled and digitized probably differs from the background imagery displayed on these maps. As a result, some minor shifting of map unit boundaries may be evident.

# **Map Unit Legend**

Map Unit Symbol	Map Unit Name	Acres in AOI	Percent of AOI
ANS	Area not surveyed, access denied	217.1	49.7%
CnB	Colmena fine sandy loam, 0 to 3 percent slopes	52.2	11.9%
LaB Laparita clay loam, 0 to 3 percent slopes, rarely flooded		2.1	0.5%
Leoncita fine sandy loam, 1 to 3 percent slopes		156.3	35.8%
TaB Tela sandy clay loam, 0 to 1 percent slopes, occasionally flooded		9.3	2.1%
Totals for Area of Interest	·	437.0	100.0%

# **Attachment G**

USGS Map





September 2, 2025

Texas Commission on Environmental Quality Water Quality Division Application Review and Processing Team (MC148) P.O. Box 13087 Austin, TX 78711-3087

Re: Application to Renew Permit No. WQ0015016001

(EPA I.D. No. TX 0133230)

### Greetings,

Latitudes Environmental, LLC is pleased to submit a response to the NOD received August 26, 2025 for the Domestic Wastewater Permit Renewal Application (WQ0015016001) on behalf of Quail Run Services, LLC (CN604553545).

Below are our responses to the comments:

- 1. Verified and updated RN to the correct RN106228489
- 2. TX SOS/CPA Filing Number verified
- 3. TX State Tax ID verified
- 4. Mailing Address is as follows: PO Box 340, Gainesville, TX 76241-0340

## ZIP Code™ by Address

### You entered:

PO BOX 340 GAINSVILLE TX 76241

If more than one address matches the information provided, try narrowing your search entering a street address and, if applicable, a unit number. **Edit and search again.** 

PO BOX 340 GAINESVILLE TX **76241-0340** 

5. The facility location description has been updated in the four places within the application. Location Description: Tilden Wastewater Treatment Facility is located 1,030 feet northwest from the intersection of SH-72 and New Teal Rd., south side of SH-72.



6. NORI copy has been updated to reflect mailing address and facility location: APPLICATION. Quail Run Services, LLC, P.O. Box 340, Gainesville, Texas 76241-0340, has applied to the Texas Commission on Environmental Quality (TCEQ) to renew Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0015016001 (EPA I.D. No. TX0133230) to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 100,000 gallons per day. The domestic wastewater treatment facility is located approximately 1,030 feet northwest from the intersection of SH-72 and New Teal Rd., on the south side of SH-72, near the city of Tilden, in McMullen County, Texas 78072. The discharge route is from the plant site to Sand Hollow Creek; thence to Frio River Above Choke Canyon Reservoir. TCEQ received this application on August 19, 2025. The permit application will be available for viewing and copying at McMullen County Courthouse, Bulletin Board, 501 River Street, Tilden, in McMullen County, Texas prior to the date this notice is published in the newspaper. The application, including any updates, and associated notices are available electronically at the following webpage:

https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdesapplications. 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=-98.618611,28.47&level=18

We appreciate your time and effort with reviewing our request. If you have any questions, please contact me at (713) 636-9501, or via email at <a href="mailto:mzavala@latitudesenvironmental.com">mzavala@latitudesenvironmental.com</a>.

Sincerely,

Marjorie Zavala

Environmental Consultant Latitudes Environmental, LLC

Marjorie Garla

	3.	Do the locatio		ts at these	schools attend a bilingual education program at another
			Yes		No
	4.				uired to provide a bilingual education program but the school has rement under 19 TAC §89.1205(g)?
			Yes		No
	5.				<b>uestion 1, 2, 3, or 4</b> , public notices in an alternative language are e is required by the bilingual program? Click to enter text.
F.	Su	mmary	of App	lication in	Plain Language Template
	als	o know	n as the	•	of Application in Plain Language Template (TCEQ Form 20972), guage summary or PLS, and include as an attachment.
	At	tachme	nt: <u>N/A</u>		
G.	Pu	blic Inv	olveme	nt Plan Fo	orm
		-			ment Plan Form (TCEQ Form 20960) for each application for a <b>dment to a permit</b> and include as an attachment.
	At	tachme	nt: <u>N/A</u>		
Se	cti	on 9.		ulated E e 29)	Intity and Permitted Site Information (Instructions
Α.			is curre RN <u>1062</u> 2		ated by TCEQ, provide the Regulated Entity Number (RN) issued to
					legistry at <a href="http://www15.tceq.texas.gov/crpub/">http://www15.tceq.texas.gov/crpub/</a> to determine if ed by TCEQ.
B.	Na	me of p	roject o	r site (the	name known by the community where located):
	<u>Til</u>	den Was	stewater '	Γreatment	<u>Facility</u>
C.	Ov	vner of	treatme	nt facility:	Quail Run Services, LLC
	Ov	vnershij	p of Faci	lity: □	Public $\square$ Private $\square$ Both $\square$ Federal
D.	Ov	vner of	land wh	ere treatm	ent facility is or will be:
	Pre	efix: Cli	ck to en	ter text.	Last Name, First Name: Click to enter text.
	Tit	le: Clicl	k to ente	er text.	Credential: Click to enter text.
	Or	ganizat	ion Nan	ie: <u>Rancho</u>	Tres Hijos LP.
	Ma	iling A	ddress: <u>2</u>	2814 Westg	rove Lane City, State, Zip Code: <u>Houston, TX 77027</u>
	Ph	one No.	: Click t	o enter tex	kt. E-mail Address: Click to enter text.
					same person as the facility owner or co-applicant, attach a lease l easement. See instructions.
		Attach	ment: <u>B</u>		



# **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	Submissi	on (If other is checked	please describe	e in space pro	ovided.)						
☐ New Pern	nit, Registra	ation or Authorization	(Core Data Forn	n should be s	submitted	with the prog	gram applica	tion.)			
□ Renewal	(Core Data	Form should be submi	tted with the re	newal form)	)		Other				
2. Customer	Reference	Number (if issued)		Follow this li	link to sear	3. Re	gulated En	tity Refer	ence Numb	oer (if	issued)
for CN or RN					<u>N numbers</u> Registry**	in RN	106				
CN 6045535	45			KIN	100						
SECTIO	N II:	<u>Customer</u>	Inform	nation	1						
4. General Cu	istomer Ir	nformation	5. Effective	Date for Cu	ustomer l	nformation	Undates (n	nm/dd/\nn	.n.l		4/1/2025
											4/1/2023
New Custon		<del></del>	pdate to Custor			_	nge in Regula	ated Entity	Ownership		
Change in L	egal Name	(Verifiable with the Te	cas Secretary of	State or Tex	cas Compti	oller of Publi	c Accounts)				
The Custome	r Name su	ıbmitted here may l	be updated au	utomaticall	ly based	on what is o	current and	active w	ith the Texa	ıs Seci	retary of State
(SOS) or Texa	s Comptro	oller of Public Accou	ints (CPA).								
6. Customer	Legal Nan	ne (If an individual, pri	nt last name firs	st: eg: Doe, J	John)		If new Cus	stomer, ent	ter previous (	Custom	ner below:
Quail Run Serv	ices, LLC										
7. TX SOS/CP	A Filing N	umber	8. TX State	<b>Tax ID</b> (11 di	ligits)		9. Federa	9. Federal Tax ID 10. DUNS Number (			Number (if
7. 1. 1. C.				(12 (				applicable)			(9
0801468416			32044888439	3439			(9 digits)				
						1					
11. Type of C	ustomer:	☐ Corporat	tion			☐ Indivi	Individual Partnersh			ship:   General   Limited	
Government: [	City 🔲	County 🗌 Federal 🔲	Local   State	Other		☐ Sole I	Proprietorship	р [	Other:		
12. Number o	of Employ	ees				_ L	13. Inde	pendently	y Owned ar	nd Op	erated?
☑ 0-20 □ :	21-100 [	] 101-250   251-	500 🗌 501 a	and higher			⊠ Yes □ No				
14. Customer	Role (Pro	posed or Actual) – as i	t relates to the	Regulated Er	ntity listed	on this form.	Please check	k one of the	e following		
Owner		Operator	⊠ Ow	ner & Opera	ator						
Occupation	al Licensee	Responsible Pa	rty 🔲 V	/CP/BSA App	olicant			Other:			
	PO Box 340										
15. Mailing											
Address:	City.	CAINIFCYULIF		Chata	TV	710	76244		710.		0340
	City	GAINESVILLE		State	TX	ZIP	76241		ZIP +	- 4	0340
16. Country I	Mailing In	formation (if outside	USA)			L7. E-Mail A	ddress (if a	oplicable)			
					1	mluepnitz@r	entpeak.com				
18. Telephon	e Numbei	f	1	9. Extensio	on or Cod	e	20	. Fax Nun	nber (if appl	icahle)	

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

1.040 ) 524 0225	, ,	
( 940 ) 531-0235	( ) -	

# **SECTION III: Regulated Entity Information**

21. General Regulated En	tity Informa	ntion (If 'New Re	gulate	d Entity" is select	ted, a ne	w peri	mit applica	tion is a	Ilso required.)		
☐ New Regulated Entity ☐ Update to Regulated Entity Name ☐ Update to Regulated Entity Information											
The Regulated Entity Nan as Inc, LP, or LLC).	ne submitte	d may be updo	ited, i	in order to mee	t TCEQ	Core	Data Star	dards	(removal of or	ganizatio	nal endings such
22. Regulated Entity Nam	<b>e</b> (Enter nam	e of the site whe	re the	regulated action	is takin	g place	2.)				
Tilden Wastewater Treatment	t Facility										
23. Street Address of the Regulated Entity:											
(No PO Boxes)	City			State			ZIP			ZIP + 4	
24. County	McMullen			I					-		1
		If no Stre	et Ad	dress is provid	ed, fiel	ds 25	-28 are re	quired	•		
25. Description to Physical Location:		ewater Treatmer cMullen County,		-	30 feet r	northw	est from th	e inters	section of SH-72	and New Te	eal Rd., south side of
26. Nearest City								State		Nea	arest ZIP Code
Tilden								TX		780	72
Latitude/Longitude are re used to supply coordinate	-	-	-				ta Standa	rds. (G	eocoding of th	e Physical	l Address may be
27. Latitude (N) In Decima	al:	28.470312		28. Longitude (W) In Decimal			ecimal:	-98.618576			
Degrees	Minutes		Seco	nds	D	egrees	S		Minutes		Seconds
28		28		13.1			98		37		6.9
29. Primary SIC Code (4 digits)		Secondary SIC igits)	Code		<b>31. Primary NAICS Code</b> (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.)											
Contract wastewater treatme	ent										
24 24-11:	PO Box 34	0									
34. Mailing Address:											
Address.	City	Gainsville		State	тх		ZIP	7624	0	ZIP + 4	340
35. E-Mail Address:	mlu	epnitz@rentpea	k.com		1			1			1
36. Telephone Number			37.	Extension or 0	Code		38. F	ax Nur	nber (if applicab	ole)	
( 940 ) 531-0235							(	) -			

**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.

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

☐ 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 C	leanup		☐ Wastewater Agricul	ture	Water Rights	Other:
		WQ0015016001				
SECTION IV: Preparer Information						
40. Name:	Marjorie Zavala			41. Title:	Consultant	

40. Name:	Marjorie Zavala	3		41. Title:	Consultant	
42. Telephone Number		43. Ext./Code	44. Fax Number	45. E-Mail Address		
(713)636-9501			( ) -	mzavala@lat	itudesenvironmental.com	

# **SECTION V: Authorized Signature**

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

Company:	Latitudes Environmental	Job Title:	Consultant			
Name (In Print):	Marjorie Zavala			Phone:	(713)636- <b>9501</b>	
Signature:	MZavalo			Date:	9/2/2025	

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	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: Rancho Tres	Hihos L.P.
	Mailing Address: 2814 Westgrov	ve Lane City, State, Zip Code: Houston, TX 77027
	Phone No.: Click to enter text.	E-mail Address: Click to enter text.
	If the landowner is not the same agreement or deed recorded ease	person as the facility owner or co-applicant, attach a lease ement. See instructions.
	Attachment: <u>B</u>	
F.	Owner sewage sludge disposal si property owned or controlled by	ite (if authorization is requested for sludge disposal on the applicant)::
	Prefix: Click to enter text.	Last Name, First Name: Click to enter text.
	Title: Click to enter text.	Credential: Click to enter text.
	Organization Name: Click to ente	er text.
	Mailing Address: Click to enter to	ext. City, State, Zip Code: Click to enter text.
	Phone No.: Click to enter text.	E-mail Address: Click to enter text.
	If the landowner is not the same agreement or deed recorded ease	person as the facility owner or co-applicant, attach a lease ement. See instructions.
	Attachment: Click to enter te	xt.
•	' 10 TENDEOD' I	T C .! /T! D 01)
		ge Information (Instructions Page 31)
	Is the wastewater treatment facil	ge Information (Instructions Page 31) lity location in the existing permit accurate?
	Is the wastewater treatment facil  ✓ Yes □ No  If no, or a new permit application	bn, please give an accurate description:
	Is the wastewater treatment facil  Yes No  If no, or a new permit application  Tilden Wastewater Treatment Facil	lity location in the existing permit accurate?
A.	Is the wastewater treatment facility Yes  No  If no, or a new permit application Tilden Wastewater Treatment Facility 2 and New Teal Rd., south side of	bn, please give an accurate description: lity is located 1,030 feet northwest from the intersection of SH-
A.	Is the wastewater treatment facility Yes  No  If no, or a new permit application Tilden Wastewater Treatment Facility 2 and New Teal Rd., south side of	bn, please give an accurate description: lity is located 1,030 feet northwest from the intersection of SH-SH-72, in McMullen County, Texas 78072
A.	Is the wastewater treatment facil  ✓ Yes ☐ No  If no, or a new permit application Tilden Wastewater Treatment Facility and New Teal Rd., south side of the point(s) of discharge and the wastewater Treatment Facility and New Teal Rd., south side of the point (s) of discharge and the point of discharge and the discharg	bn, please give an accurate description: lity is located 1,030 feet northwest from the intersection of SH-SH-72, in McMullen County, Texas 78072
A.	Is the wastewater treatment facil  ✓ Yes □ No  If no, or a new permit application Tilden Wastewater Treatment Facility 72 and New Teal Rd., south side of the point(s) of discharge and the wastewater Treatment Facility 72 and New Teal Rd., south side of the point(s) of discharge and the discharge an	bity location in the existing permit accurate?  on, please give an accurate description: lity is located 1,030 feet northwest from the intersection of SH-SH-72, in McMullen County, Texas 78072  I the discharge route(s) in the existing permit correct?  ermit application, provide an accurate description of the
A.	Is the wastewater treatment facil  ✓ Yes ☐ No  If no, or a new permit application Tilden Wastewater Treatment Facility and New Teal Rd., south side of the point(s) of discharge and the wastewater Treatment Facility and New Teal Rd., south side of the point (s) of discharge and the point of discharge and the discharg	Don, please give an accurate description: lity is located 1,030 feet northwest from the intersection of SH-SH-72, in McMullen County, Texas 78072  I the discharge route(s) in the existing permit correct?  Description, provide an accurate description of the arge route to the nearest classified segment as defined in 30
A.	Is the wastewater treatment facil  ✓ Yes ☐ No  If no, or a new permit application Tilden Wastewater Treatment Facility and New Teal Rd., south side of the point (s) of discharge and the wastewater Treatment Facility and New Teal Rd., south side of the point (s) of discharge and the discharge and th	on, please give an accurate description: lity is located 1,030 feet northwest from the intersection of SH-SH-72, in McMullen County, Texas 78072  I the discharge route(s) in the existing permit correct?  ermit application, provide an accurate description of the arge route to the nearest classified segment as defined in 30
А.	Is the wastewater treatment facil    Yes □ No  If no, or a new permit application  Tilden Wastewater Treatment Facility 72 and New Teal Rd., south side of the point (s) of discharge and the point of discharge and the discharge	Den, please give an accurate description: lity is located 1,030 feet northwest from the intersection of SH-SH-72, in McMullen County, Texas 78072  I the discharge route(s) in the existing permit correct?  Dermit application, provide an accurate description of the arge route to the nearest classified segment as defined in 30 solvents of the located: McMullen discharge to a city, county, or state highway right-of-way, or

**E.** Owner of effluent disposal site:



## 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.

Quail Run Services, LLC (CN604553545) operates Tilden Wastewater Treatment Facility (RN106458250), a contract wastewater treatment plant. The facility is located at 1,030 feet northwest from the intersection of SH-72 and New Teal Rd., south side of SH-72, in Tilden, McMullen County, Texas 78072. A renewal application to discharge of treated domestic wastewater. << For TLAP applications include the following sentence, otherwise delete:>> This permit will not authorize a discharge of pollutants into water in the state.

Discharges from the facility are expected to contain CBOD, TSS, E-coli. Process wastewater is treated by complete mix variation of the activated sludge process designed for single stage nitrification – from pumps the wastewater will travel through a coarse barscreen then to the surge basin(s) then to the complete mix basin; from the basin the mix-liquor will be transferred to the clarifier where solids will be settled out and clear water will flow over the

veirs then into the chlorine contact basin. Thence through effluent filters. The vill either be transferred to the digester or returned to the headworks	ne settled solids

# TEXAS COMMISSION ON ENVIRONMENTAL QUALITY SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

# FOR AGENCIES REVIEWING DOMESTIC OR INDUSTRIAL TPDES WASTEWATER PERMIT APPLICATIONS

TCEQ USE ONLY: Application type:RenewalMajor Ar	mendment Minor Amendment New
County:	
Admin Complete Date:	
Agency Receiving SPIF:	_
Texas Historical Commission	U.S. Fish and Wildlife
Texas Parks and Wildlife Department	
read ranks and whome Bepartment	6.5.7 Hilly Corps of Engineers
This form applies to TPDES permit application	ns only. (Instructions, Page 53)
	CEQ will mail a copy to each agency as required by e not completely addressed or further information aformation before issuing the permit. Address
Do not refer to your response to any item in the attachment for this form separately from the Application will not be declared administratively completed in its entirety including all attachmentary be directed to the Water Quality Division's temail at <a href="mailto:WQ-ARPTeam@tceq.texas.gov">WQ-ARPTeam@tceq.texas.gov</a> or by phonon.	Administrative Report of the application. The ly complete without this SPIF form being ents. Questions or comments concerning this form a Application Review and Processing Team by
The following applies to all applications:	
l. Permittee: <u>Quail Run Services, LLC</u>	
Permit No. WQ00 <u>15016001</u>	EPA ID No. TX <u>0133230</u>
Address of the project (or a location descripand county):	otion that includes street/highway, city/vicinity,
<u>Tilden Wastewater Treatment Facility is loo</u> of SH-72 and New Teal Rd., south side of S	cated 1,030 feet northwest from the intersection H-72.

### Francesca Findlay

From: Marjorie Zavala <mzavala@latitudesenvironmental.com>

**Sent:** Tuesday, September 2, 2025 2:56 PM

**To:** Francesca Findlay

**Cc:** mluepnitz@rentpeak.com

**Subject:** Tilden WQ0015016001 : NOD Response

Attachments: Letter to Agency (Tilden NOD Response, 9-2-2025).pdf

Follow Up Flag: Follow up Flag Status: Flagged

Hello Francesca,

Please find attached Quail Run Services, LLC response to the NOD received last week.

Best Regards,

### Marjorie Zavala



3200 Wilcrest Dr., Ste 170,

Houston TX 77042 **Office: 713-636-9501** 

Office Hours: MON-THURS 8 AM-4PM

From: Marjorie Zavala

Sent: Tuesday, August 26, 2025 3:23 PM

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

Cc: mluepnitz@rentpeak.com

Subject: Tilden WQ0015016001: Quail Run Services, LLC

Hello Francesca,

Thank you, we will review and send a repose to your comments.

Best,

## Marjorie Zavala



3200 Wilcrest Dr., Ste 170, Houston TX 77042

Office: 713-636-9501

Office Hours: MON-THURS 8 AM-4PM

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

Sent: Tuesday, August 26, 2025 3:03 PM

To: Marjorie Zavala <mzavala@latitudesenvironmental.com>

Cc: mluepnitz@rentpeak.com

Subject: FW: WQ0015016001: Quail Run Services, LLC

Dear Ms. Zavala:

The attached Notice of Deficiency letter sent on August 26, 2025, requesting additional information needed to declare the application administratively complete. Please send the complete response to my attention September 10, 2025.

Thank you,

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



Please consider whether it is necessary to print this e-mail

How is our customer service? Fill out our online customer satisfaction survey at <a href="http://www.tceq.texas.gov/customersurvey">http://www.tceq.texas.gov/customersurvey</a>.