

This file contains the following documents:

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



Este archivo contiene los siguientes documentos:

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

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY



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

PERMIT NO. WQ0015483001

APPLICATION. 290 Kickapoo Development Inc., 26830 Kuykendahl Road, Suite 200, Tomball, Texas 77375, has applied to the Texas Commission on Environmental Quality (TCEQ) to renew Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0015483001 (EPA I.D. No. TX0137162) to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 45,000 gallons per day. The domestic wastewater treatment facility is located at 35515 Highway 290 Bypass, near the city of Waller, in Harris County, Texas 77484. The discharge route is from the plant site to a Harris County Flood Control Ditch; thence to Little Cypress Creek; thence to Cypress Creek. TCEQ received this application on October 16, 2024. The permit application will be available for viewing and copying at Lone Star College-CyFair Library (HCPL), reference desk, 9191 Barker Cypress Road, Cypress, in Harris 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/pendingpermits/tpdes-applications. This link to an electronic map of the site or facility's general location is provided as a public courtesy and not part of the application or notice. For the exact location, refer to the application.

https://gisweb.tceq.texas.gov/LocationMapper/?marker=-95.8775,30.043055&level=18

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

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

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

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

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

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

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

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

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

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

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

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

Further information may also be obtained from 290 Kickapoo Development Inc. at the address stated above or by calling Ms. Shelley Young, P.E., WaterEngineers, Inc., at 281-373-0500.

Issuance Date: October 30, 2024

Comisión de Calidad Ambiental del Estado de Texas



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

PERMISO PROPUESTO NO. WQoo15483001

SOLICITUD. 290 Kickapoo Development Inc., 26830 Camino Kuykendahl, Oficina 200, Tomball, Tejas 77375, ha solicitado a la Comisión de Calidad Ambiental del Estado de Texas (TCEQ) para renovar Permiso No. WQ0015483001 (EPA I.D. No. TX0137162) del Sistema de Eliminación de Descargas de Contaminantes de Texas (TPDES) para autorizar la descarga de aguas residuales tratadas en un volumen que no sobrepasa un flujo medio diario de 45,000 galones por día. La planta está ubicada 35515 Circunvalación de la Carretera 290, cerca de la ciudad de Waller, en el Condado de Harris, Tejas 77484. La ruta de descarga es del sitio a zanja de Control de Inundaciones del Condado de Harris, de ahí a Little Cypress Creek; de ahí a Cypress Creek. La TCEQ recibió esta solicitud el 16 de octubre de 2024. La solicitud para el permiso está disponible para leerla y copiarla en Biblioteca de Lone Star College-CyFair (HCPL), escritorio de referencia, 9191 Camino Barker-Cypress, Cypress, en Condado de Harris, Tejas, antes de la fecha de publicación de este aviso en el periódico. Este enlace a un mapa electrónico de la ubicación general del sitio o de la instalación es proporcionado como una cortesía y no es parte de la solicitud o del aviso. Para la ubicación exacta, consulte la solicitud.

https://gisweb.tceq.texas.gov/LocationMapper/?marker=-95.8775,30.043055&level=18

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

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

OPORTUNIDAD DE UNA AUDIENCIA ADMINISTRATIVA DE LO CONTENCIOSO.

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

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

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

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

CONTACTOS E INFORMACIÓN A LA AGENCIA. Todos los comentarios públicos y

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

Tambien se puede obener informacion adicional del 290 Kickapoo Development, Inc., a la dirección indicada arriba o llamando a Shelley Young, P.E., WaterEngineers, Inc., al 281-373-0500.

Fecha de emission: 30 de octubre de 2024



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

PLAIN LANGUAGE SUMMARY FOR TPDES OR TLAP PERMIT APPLICATIONS

Plain Language Summary 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 as required by <u>Title 30, Texas Administrative Code (30 TAC), Chapter 39, Subchapter H.</u> Applicants may modify the template as necessary to accurately describe their 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 the applicant 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.

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

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

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

290 Kickapoo Development, Inc. (CN605155779) operates the 290 Kickapoo Wastewater Treatment Plant (RN109226522), an activated sludge process with nitrification operated in the complete mix mode. The facility is located at 35515 Highway 290 Bypass, in Waller, Harris County, Texas 77484. This application for a renewal application to discharge a daily average flow of 45,000 gallons per day of treated domestic wastewater..

Discharges from the facility are expected to contain five-day carbonaceous biochemical oxygen demand (CBOD₅), total suspended solids (TSS), ammonia nitrogen (NH₃-N), and *Escherichia coli*. Additional potential pollutants are included in the Domestic Technical Report 1.0, Section 7. Pollutant Analysis of Treated Effluent in the permit application package. Domestic wastewater is treated by an activated sludge process plant and the treatment units include a bar screen, selector basin, aeration basin, final clarifier, sludge digester, and chlorine contact chamber.

PLANTILLA EN ESPAÑOL PARA SOLICITUDES NUEVAS/RENOVACIONES/ENMIENDAS DE TPDES o TLAP

AGUAS RESIDUALES Introduzca 'INDUSTRIALES' o 'DOMÉSTICAS' aquí /AGUAS PLUVIALES

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

290 Kickapoo Development, Inc. (CN605155779) opera la Planta de Tratamiento de Aguas Residuales de 290 Kickapoo (RN 109226522), un proceso de lodos activados con nitrificación operado en el modo de mezcla completa. La instalación está ubicada en 35515 Highway 290 Bypass, en Waller, Condado de Harris, Texas 77484.. Esta solicitud es para una renovación aplicación para descargar a un flujo promedio diario de 45,000 galones por día de aguas residuales domésticas tratadas.

Se espera que las descargas de la instalación contengan demanda bioquímica de oxígeno carbonoso de cinco días (CBOD₅), solidos totalmente suspendidos (TSS), nitrógeno amoniacal (NH_e-N), y *Escherichia coli*. Los contaminantes potenciales adicionales se incluyen en el Informe Técnico Domésticas 1.0, Seccion 7 Análisis de Contaminantes de Efluente Tratado en el paquete de solicitud de permisos. Las aguas residuales domésticas. está tratado por una planta de proceso de lodos activados y las unidades de tratamiento incluirán una pantalla de barras, balsa de selector, balsa de aireación, clarificador finale, digestora de lodos, y cámara de contacto de cloro.



WATER & WASTEWATER TREATMENT CONSULTANTS

17230 HUFFMEISTER ROAD, SUITE A~CYPRESS, TEXAS 77429-1643 Tel: 281-373-0500 Fax: 281-373-1113

Overnight by UPS

October 15, 2024

Executive Director Water Quality Applications Team (MC 148) Texas Commission on Environmental Quality 12100 Park 35 Circle Austin, Texas 78753

Re: 290 Kickapoo Development, Inc.

Application for a Renewal to TPDES No. WQ0015483001 290 Kickapoo Wastewater Treatment Plant in Harris County

Dear Sir/Ms:

Enclosed please find the original and one copy of the Application for a Renewal to TPDES No. WQ0015483001 for the 290 Kickapoo Wastewater Treatment Plant in Harris County.

Please contact Shelley Young, P.E. at 281-373-0500 or at <u>syoung@waterengineers.com</u> if there are any questions related to the material presented in the application.

Sincerely,

WATERENGINEERS, INC.

Shelley Young, P.E.

Encl: As noted

APPLICATION FOR A MAJOR AMENDMENT TO TEXAS POLLUTION DISCHARGE ELIMINATION SYSTEM PERMIT NO. WQ0015483001

FOR

290 KICKAPOO WASTEWATER TREATMENT PLANT

290 KICKAPOO DEVELOPMENT, INC. 26830 KUYKENDAHL ROAD, SUITE 200 TOMBALL, TX 77375

PREPARED BY:

WATERENGINEERS, INC.

WATER & WASTEWATER TREATMENT CONSULTANTS 17230 HUFFMEISTER ROAD, SUITE A, CYPRESS, TEXAS 77429 TEL: 281-373-0500 FAX: 281-373-1113

OCTOBER 2024

APPLICATION FOR A RENEWAL TO TEXAS POLLUTION DISCHARGE ELIMINATION SYSTEM PERMIT NO. WQ0015483001

FOR

290 KICKAPOO

WASTEWATER TREATMENT PLANT

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TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the application.

APPLICANT NAME	290 Kickapoo	Development, Inc.
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PERMIT NUMBER (If new, leave blank): WQ00 15483001

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

	\mathbf{Y}	N		\mathbf{Y}	N
Administrative Report 1.0	\boxtimes		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
Public Involvement Plan Form			Flow Diagram	\boxtimes	
Technical Report 1.0	\boxtimes		Site Drawing	\boxtimes	
Technical Report 1.1			Original Photographs		
Worksheet 2.0	\boxtimes		Design Calculations		\boxtimes
Worksheet 2.1			Solids Management Plan		
Worksheet 3.0			Water Balance		\boxtimes
Worksheet 3.1					
Worksheet 3.2					
Worksheet 3.3		\boxtimes			
Worksheet 4.0		\boxtimes			
Worksheet 5.0		\boxtimes			
Worksheet 6.0		\boxtimes			
Worksheet 7.0		\boxtimes			
For TCEQ Use Only					Z 1
Segment Number			County		

Permit Number

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TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION ADMINISTRATIVE REPORT 1.0

Yes 🗆

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 N	/IGD	\$550.00 □	\$515.00 □
≥0.10 but <0.25 N	/IGD	\$850.00 □	\$815.00 □
≥0.25 but <0.50 N	1GD	\$1,250.00 □	\$1,215.00
≥0.50 but <1.0 M	GD	\$1,650.00 □	\$1,615.00 □
≥1.0 MGD		\$2,050.00 □	\$2,015.00 □
Minor Amendment	(for any flo	ow) \$150.00 □	
Payment Informat	tion:		
Mailed	Check/Mo	oney Order Number: <u>1417</u>	
	Check/Mo	oney Order Amount: <u>\$315.00</u>	
	Name Prir	nted on Check: <u>WaterEngineers, I</u>	nc.
EPAY	Voucher N	Jumber: Click to enter text.	

Section 2. Type of Application (Instructions Page 26)

a.	Che	ck the box r	ext 1	to the appropriate authorization type.					
		☐ Publicly-Owned Domestic Wastewater							
	\boxtimes	Privately-Owned Domestic Wastewater							
		Conventional Wastewater Treatment							
b.	Che	ck the box r	ext t	to the appropriate facility status.					
	\boxtimes	Active		Inactive					

Copy of Payment Voucher enclosed?

c.	Che	eck the box next to the appropriate permit typ	e.	
	\boxtimes	TPDES Permit		
		TLAP		
		TPDES Permit with TLAP component		
		Subsurface Area Drip Dispersal System (SAD	DS)	
d.	Che	eck the box next to the appropriate application	ı typ	e
		New		
		Major Amendment with Renewal		Minor Amendment with Renewal
		Major Amendment without Renewal		Minor Amendment without Renewal
	\boxtimes	Renewal without changes		Minor Modification of permit
e.	For	amendments or modifications, describe the p	ropo	osed changes: <u>N/A</u>
f.	For	existing permits:		
	Peri	mit Number: WQ00 <u>15483001</u>		
	EPA	I.D. (TPDES only): TX <u>0137162</u>		
	Exp	iration Date: <u>April 3, 2025</u>		
So	ctic	on 2 Facility Owner (Applicant) a	nd	Co Applicant Information
36	cuc	on 3. Facility Owner (Applicant) a (Instructions Page 26)	IIu	Co-Applicant information
Δ	The	owner of the facility must apply for the per	mit	
Α.		at is the Legal Name of the entity (applicant) a		
		Kickapoo Development, Inc.	ppry	ing for this permit.
	(The	e legal name must be spelled exactly as filed w legal documents forming the entity.)	ith ti	he Texas Secretary of State, County, or in
		ne applicant is currently a customer with the T may search for your CN on the TCEQ website		
	(CN: <u>605155779</u>		
		at is the name and title of the person signing t cutive official meeting signatory requirements		

Prefix: Mr. Last Name, First Name: Maknojia, Rahim
Title: President Credential: Click to enter text.

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

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

Click to enter text.

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

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

CN: Click to enter text.

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

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

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

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

C. Core Data Form

Complete the Core Data Form for each customer and include as an attachment. If the customer type selected on the Core Data Form is **Individual**, complete **Attachment 1** of Administrative Report 1.0. ADMIN.03

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: Young, Shelley

Title: Engineer Credential: P.E.

Organization Name: WaterEngineers, Inc.

Mailing Address: 17230 Huffmeister Road, Suite A City, State, Zip Code: Cypress, TX 77429

Phone No.: 281-373-0500 E-mail Address: syoung@waterengineers.com

Check one or both:

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

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

Organization Name: Click to enter text.

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

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

Check one or both:

Administrative Contact

Technical Contact

Section 5. Permit Contact Information (Instructions Page 27)

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

A. Prefix: Mr. Last Name, First Name: Maknojia, Rahim

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

Organization Name: 290 Kickapoo Development, Inc.

Mailing Address: 26830 Kuykendahl Road, Suite 200 City, State, Zip Code: Tomball, TX 77375

Phone No.: 281-386-0006 E-mail Address: rahim@fuelmaxx.net

B. Prefix: Ms.

Last Name, First Name: Maknojia, Zulfikarali

Title: Secretary

Credential: Click to enter text.

Organization Name: 290 Kickapoo Development, Inc.

Mailing Address: 26830 Kuykendahl Road, Suite 200 City, State, Zip Code: Tomball, TX 77375

Phone No.: <u>281-386-0006</u>

E-mail Address: zulfi@fuelmaxx.net

Section 6. Billing Contact Information (Instructions Page 27)

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

Prefix: Mr.

Last Name, First Name: Maknojia, Rahim

Title: President

Credential: Click to enter text.

Organization Name: 290 Kickapoo Development, Inc.

Mailing Address: 26830 Kuykendahl Road, Suite 200 City, State, Zip Code: Tomball, TX 77375

Phone No.: 281-386-0006

E-mail Address: rahim@fuelmaxx.net

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

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

Prefix: Mr.

Last Name, First Name: Maknojia, Rahim

Title: President

Credential: Click to enter text.

Organization Name: 290 Kickapoo Development, Inc.

Mailing Address: 26830 Kuykendahl Road, Suite 200 City, State, Zip Code: Tomball, TX 77375

Phone No.: 281-386-0006

E-mail Address: rahim@fuelmaxx.net

Section 8. Public Notice Information (Instructions Page 27)

A. Individual Publishing the Notices

Prefix: Ms.

Last Name, First Name: Young, Shelley

Title: Engineer

Credential: P.E.

Organization Name: WaterEngineers, Inc.

Mailing Address: 17230 Huffmeister Rd, Ste A City, State, Zip Code: Cypress, TX 77429

Phone No.: 281-373-0500

E-mail Address: syoung@waterengineers.com

	Pa	ckage							
	Inc	dicate b	y a check m	ark t	the preferred method for receiving the first notice and instructions:				
	\boxtimes	E-mai	il Address						
		Fax							
		Regul	ar Mail						
C.	Co	ntact p	ermit to be	liste	d in the Notices				
	Pro	efix: <u>Ms</u>	ı.		Last Name, First Name: Young, Shelley				
	Tit	le: <u>Engi</u>	neer		Credential: P.E.				
	Or	ganizat	ion Name: <u>W</u>	/ater	Engineers, Inc.				
	Ma	iling A	dress: <u>17230</u>	o Huf	ffmeister Rd, Ste A City, State, Zip Code: Cypress, TX 77429				
	Ph	one No.	: 281-373-05	00	E-mail Address: syoung@waterengineers.com				
D.	Pu	blic Vie	wing Inform	natio	on				
		If the facility or outfall is located in more than one county, a public viewing place for each county must be provided.							
	Pu	Public building name: Lone Star College-Cy-Fair Library							
	Lo	cation v	vithin the bu	ıildin	ng: Reference Desk				
	Ph	ysical A	ddress of Bu	uildir	ng: 9191 Barker Cypress Road				
	Cit	y: <u>Cypre</u>	ess ess		County: <u>Harris</u>				
	Co	ntact (L	ast Name, F	irst N	Name): Melanie Wachsmann				
	Ph	one No.	: <u>281-290-59</u>	17 Ex	ct.: Click to enter text.				
E.		•	Notice Requ						
					ed for new, major amendment, minor amendment or minor l applications.				
	be	needed		nstrı	tion is only used to determine if alternative language notices will uctions on publishing the alternative language notices will be in				
	ob				SL coordinator at the nearest elementary and middle schools and nation to determine whether an alternative language notices are				
	1.				program required by the Texas Education Code at the elementary st to the facility or proposed facility?				
			Yes		No				
		If no , p below.	oublication o	of an	alternative language notice is not required; skip to Section 9				
	2.				ttend either the elementary school or the middle school enrolled in rogram at that school?				
		\boxtimes	Yes		No				

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

	3.	Do the locatio	students at n?	these	e schools a	attend	a bilingual	educa	ition prog	ram a	t another
			Yes	\boxtimes	No						
	4.		the school b							gram l	out the school has
			Yes	\boxtimes	No						
	5.		inswer is yes ed. Which lar								tive language are
F.	Pla	in Lang	guage Summ	ary T	Геmplate						
	Co	mplete	the Plain Lar	nguag	ge Summa	ry (TCE	Q Form 20)972) a	and includ	de as a	ın attachment.
	At	tachme	nt: ADMIN.o.	4							
G.	Pu	blic Inv	olvement Pl	an F	orm						
						ı Form	(TCEQ For	m 209	060) for ea	ach ap	plication for a
			it or major a								
	At	tachme	nt: <u>N/A</u>								
-				, ,		1.5		OI.			/ *
Se	cti	on 9.	Regulat Page 29		entity ar	nd Pe	rmitted	Site	Informa	ation	(Instructions
A.			is currently 1 N 109226522		ated by TO	CEQ, pr	ovide the	Regula	ited Entity	/ Num	ber (RN) issued to
			TCEQ's Cen				/www15.to	eq.tex	as.gov/cr	pub/	to determine if
B.	Na	me of p	roject or site	e (the	name kno	own by	the comm	unity	where loc	ated):	
	<u> 29</u> (Kickap	oo WWTP								
C.	Ow	mer of	treatment fa	cility	290 Kicka	poo De	velopment,	Inc.			
	Ow	nership	of Facility:		Public	\boxtimes	Private		Both		Federal
D.	Ow	mer of l	and where t	reatn	nent facilit	y is or	will be:				
	Pre	fix: <u>Mr.</u>			Last	Name	, First Nan	ne: <u>Ma</u>	knojia, Ral	<u>nim</u>	
	Tit	le: <u>Presi</u>	<u>dent</u>		Cre	dential	Click to e	nter t	ext.		
	Or	ganizati	on Name: 29	o Kic	kapoo Dev	elopme	nt, Inc.				
	Ma	iling Ad	ldress: <u>26830</u>	Kuy	kendahl Ro	ad, Sui	<u>te 200</u> City	, State	, Zip Cod	e: <u>Tom</u>	ball, TX 77375
	Ph	one No.:	281-386-000	06	E-n	nail Ad	dress: <u>rahi</u>	m@fue	elmaxx.net	Ē	
			owner is not or deed rec						or co-ap	plican	t, attach a lease
		Attach	ment: Click	to en	ter text.						

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

E. Owner of effluent disposal site:

	If yes , indicate by a check mark if:
	■ Authorization granted □ Authorization pending
	For new and amendment applications, provide copies of letters that show proof of contact and the approval letter upon receipt.
	Attachment: Click to enter text.
D.	For all applications involving an average daily discharge of 5 MGD or more, provide the names of all counties located within 100 statute miles downstream of the point(s) of discharge: Click to enter text.
C	THE ADDITIONAL OF THE PROPERTY
<u>Se</u>	ection 11. TLAP Disposal Information (Instructions Page 32)
A.	For TLAPs, is the location of the effluent disposal site in the existing permit accurate?
	□ Yes □ No
	If no, or a new or amendment permit application , provide an accurate description of the disposal site location:
	Click to enter text.
В.	City nearest the disposal site: Click to enter text.
C.	County in which the disposal site is located: Click to enter text.
D.	For TLAPs , describe the routing of effluent from the treatment facility to the disposal site:
	Click to enter text.
E.	For TLAPs , please identify the nearest watercourse to the disposal site to which rainfall runoff might flow if not contained: Click to enter text.
Se	ction 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 yes , provide the following information:
	Account number: Click to enter text.
	Amount past due: Click to enter text.
E.	Do you owe any penalties to the TCEQ?
	□ Yes ⊠ No
	If yes , please provide the following information:
	Enforcement order number: Click to enter text.
	Amount past due: Click to enter text.
Se	ction 13. Attachments (Instructions Page 33)
	ction 13. Attachments (Instructions Page 33) icate which attachments are included with the Administrative Report. Check all that apply:
Inc	icate 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	icate 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	icate which attachments are included with the Administrative Report. Check all that apply: Lease agreement or deed recorded easement, if the land where the treatment facility is located or the effluent disposal site are not owned by the applicant or co-applicant. Original full-size USGS Topographic Map with the following information: • Applicant's property boundary • Treatment facility boundary • Labeled point of discharge for each discharge point (TPDES only) • Highlighted discharge route for each discharge point (TPDES only) • Onsite sewage sludge disposal site (if applicable) • Effluent disposal site boundaries (TLAP only) • New and future construction (if applicable) • 1 mile radius information • 3 miles downstream information (TPDES only)

Section 14. Signature Page (Instructions Page 34)

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

Permit Number: WQ0015483001

Applicant: 290 Kickapoo Development, Inc.

Certification:

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

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

signatory name (typed or printed): <u>Maknojia, Rahim</u>
Signatory title: <u>President</u>
Signature: Date: 10/x/29
(Use blue ink)
Subscribed and Sworn to before me by the said RAMIM MAKNOJIA
on this of day of October , 20 24.
on this day of <u>October</u> , $20 \frac{24}{28}$. My commission expires on the <u>30 th</u> day of <u>June</u> , $20 \frac{24}{28}$.
Jepager R Gratacto (SEAL)
JENNIFER R. MITRICK Notary Public, State of Texas County, Texas Notary ID 126010225

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: Admin.09

STORMISSION OF THE PROPERTY OF

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION TECHNICAL REPORT 1.0

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

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

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

A. Existing/Interim I Phase

Design Flow (MGD): <u>0.045</u>

2-Hr Peak Flow (MGD): 0.180

Estimated construction start date: existing

Estimated waste disposal start date: existing

B. Interim II Phase

Design Flow (MGD): Click to enter text.

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

Estimated construction start date: Click to enter text.

Estimated waste disposal start date: Click to enter text.

C. Final Phase

Design Flow (MGD): 0.045

2-Hr Peak Flow (MGD): 0.180

Estimated construction start date: existing

Estimated waste disposal start date: existing

D. Current Operating Phase

Provide the startup date of the facility: 9/2019

Section 2. Treatment Process (Instructions Page 43)

A. Current Operating Phase

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

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

Flow enters the activated sludge process with nitrification process through a coarse bar screen into the equalization/anoxic zone; thence to the aeration basin; thence to the clarifier; thence to the chlorine contact chamber for disinfection and discharge. Sludge from the bottom of the clarifier is either returned to the equalization/anoxic zone or wasted to the digester.

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)
Equalization Basin	1	197.3 sq. ft. x 10.5 ft. SWD
Aeration Basins	2	226.5 sq. ft. x 10.35 ft. SWD (each)
Clarifier	1	15 ft. diam. x 10.28 ft. SWD
Chlorine Contact	1,	36.4 sq. ft. x 9.18 ft. SWD
Digester	1	197.3 sq. ft. x 10.5 ft. SWD

C. Process Flow Diagram

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

Attachment: TECH.02

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

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

Latitude: 30.04305

Longitude: <u>-95.877742</u>

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

• Latitude: N/A

Longitude: N/A

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

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

Provide the name and a desc	cription of the area	served by the treatment	facility.		
290 Kickapoo commercial dev convenience store, several fas	relopment which incl t food establishment	udes a Fuel Maxx truck sto s and two motels.	p/fueling center and		
each uniquely owned collect satellite collection systems. examples.	Collection System Information for wastewater TPDES permits only: Provide information for ach 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		
290 Kickapoo Collection System	290 Kickapoo Development Inc.	Privately Owned			
		Choose an item.			
		Choose an item.			
		Choose an item.			
Section 4. Unbuilt P Is the application for a renew	hases (Instruct wal of a permit that		ase or phases?		
□ Yes ⊠ No					
If yes, does the existing periyears of being authorized by		that has not been const	ructed within five		
□ Yes □ No					
If yes, provide a detailed dis Failure to provide sufficien recommending denial of the	t justification may	result in the Executive			
Click to enter text.					
			I		

Section 5. Closure Plans (Instructions Page 45)

Attachment: TECH.03

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

	□ Yes ⊠ No
If	yes, was a closure plan submitted to the TCEQ?
	□ Yes □ No
If	yes, provide a brief description of the closure and the date of plan approval.
C	lick to enter text.
Se	ection 6. Permit Specific Requirements (Instructions Page 45)
	or 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: 9/20/2019
	Provide information, including dates, on any actions taken to meet a <i>requirement or provision</i> pertaining to the submission of a summary transmittal letter. Provide a copy of an approval letter from the TCEQ, if applicable.
	N <u>/A</u>
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.
	N <u>/A</u>

·-	O	ner actions required by the current permit
	su	bes the Other Requirements or Special Provisions section in the existing permit require bmission of any other information or other required actions? Examples include otification of Completion, progress reports, soil monitoring data, etc.
		□ Yes ⊠ No
		yes , provide information below on the status of any actions taken to meet the nditions of an <i>Other Requirement</i> or <i>Special Provision</i> .
	C	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.
		Click to enter text.
	3.	Grit disposal
		Does the facility have a Municipal Solid Waste (MSW) registration or permit for grit disposal?
		□ Yes ⊠ No
		If No, contact the TCEQ Municipal Solid Waste team at 512-239-2335. Note: A registration or permit is required for grit disposal. Grit shall not be combined with treatment plant sludge. See the instruction booklet for additional information on grit disposal requirements and restrictions.
		Describe the method of grit disposal.

		Click to enter text.
	4.	Grease and decanted liquid disposal
		Note: A registration or permit is required for grease disposal. Grease shall not be combined with treatment plant sludge. For more information, contact the TCEQ Municipal Solid Waste team at 512-239-2335.
		Describe how the decant and grease are treated and disposed of after grit separation.
		Click to enter text.
E.	Sto	ormwater management
	1.	Applicability
		Does the facility have a design flow of 1.0 MGD or greater in any phase?
		□ Yes ⊠ No
		Does the facility have an approved pretreatment program, under 40 CFR Part 403?
		□ Yes ⊠ No
		If no to both of the above, then skip to Subsection F, Other Wastes Received.
	2.	MSGP coverage
		Is the stormwater runoff from the WWTP and dedicated lands for sewage disposal currently permitted under the TPDES Multi-Sector General Permit (MSGP), TXR050000?
		□ Yes □ No
		If yes , please provide MSGP Authorization Number and skip to Subsection F, Other Wastes Received:
		TXR05 Click to enter text, or TXRNE Click to enter text.
		If no, do you intend to seek coverage under TXR050000?
		□ Yes □ No
	3.	Conditional exclusion
		Alternatively, do you intend to apply for a conditional exclusion from permitting based TXR050000 (Multi Sector General Permit) Part II B.2 or TXR050000 (Multi Sector General Permit) Part V, Sector T 3(b)?
		□ Yes □ No
		If yes, please explain below then proceed to Subsection F, Other Wastes Received:

	Click to enter text.
4.	Existing coverage in individual permit
	Is your stormwater discharge currently permitted through this individual TPDES or TLAP permit?
	□ Yes □ No
	If yes , provide a description of stormwater runoff management practices at the site that are authorized in the wastewater permit then skip to Subsection F, Other Wastes Received.
	Click to enter text.
5.	Zero stormwater discharge
	Do you intend to have no discharge of stormwater via use of evaporation or other means?
	□ Yes □ No
	If yes, explain below then skip to Subsection F. Other Wastes Received.
	Click to enter text.
	Note: If there is a potential to discharge any stormwater to surface water in the state as the result of any storm event, then permit coverage is required under the MSGP or an individual discharge permit. This requirement applies to all areas of facilities with treatment plants or systems that treat, store, recycle, or reclaim domestic sewage, wastewater or sewage sludge (including dedicated lands for sewage sludge disposal located within the onsite property boundaries) that meet the applicability criteria of above. You have the option of obtaining coverage under the MSGP for direct discharges, (recommended), or obtaining coverage under this individual permit.
6.	Request for coverage in individual permit
	Are you requesting coverage of stormwater discharges associated with your treatment plant under this individual permit?
	□ Yes □ No
	If yes, provide a description of stormwater runoff management practices at the site for which you are requesting authorization in this individual wastewater permit and describe whether you intend to comingle this discharge with your treated effluent or discharge it via a separate dedicated stormwater outfall. Please also indicate if you intend to divert stormwater to the treatment plant headworks and indirectly discharge

it to water in the state.

	Click to enter text.
	Note: Direct stormwater discharges to waters in the state authorized through this individual permit will require the development and implementation of a stormwater pollution prevention plan (SWPPP) and will be subject to additional monitoring and reporting requirements. Indirect discharges of stormwater via headworks recycling will require compliance with all individual permit requirements including 2-hour peak flow limitations. All stormwater discharge authorization requests will require additional information during the technical review of your application.
F.	Discharges to the Lake Houston Watershed
	Does the facility discharge in the Lake Houston watershed?
	⊠ Yes □ No
	If yes, attach a Sewage Sludge Solids Management Plan. See Example 5 in the instructions. See Attachment TECH.04
G.	Other wastes received including sludge from other WWTPs and septic waste
	1. Acceptance of sludge from other WWTPs
	Does or will the facility accept sludge from other treatment plants at the facility site?
	□ Yes ⊠ No
	If yes, attach sewage sludge solids management plan. See Example 5 of the instructions.
	In addition, provide the date the plant started or is anticipated to start accepting sludge, an estimate of monthly sludge acceptance (gallons or millions of gallons), an
	estimate of the 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_5 concentration of the septic waste, and the design BOD_5 concentration of the influent from the collection system. Also note if this information has or has not changed since the last permit action.

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	\bowtie	No
_	1 0		- 10

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 50)

Is the facility in operation?

⊠ Yes □ No

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

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

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

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

Pollutant	Average Conc.	Max Conc.	No. of Samples	Sample Type	Sample Date/Time
CBOD ₅ , mg/l	<3.0	<3.0	1	Grab	9/26/2024 @ 08:55
Total Suspended Solids, mg/l	2.6	2.6	1	Grab	9/26/2024 @ 08:55
Ammonia Nitrogen, mg/l	<0.1	<0.1	1	Grab	9/26/2024 @ 08:55
Nitrate Nitrogen, mg/l	40.3	40.3	1	Grab	9/26/2024 @ 08:55

5.0 15.7 182.7 5.0 7.8 7.8	1 1 1 1 1 1	Grab Grab Grab Grab Grab Grab	9/26/2024 @ 08:55 9/26/2024 @ 08:55 9/26/2024 @ 08:55 9/26/2024 @ 08:55 9/26/2024 @ 08:55 9/26/2024 @ 08:55
182.7 5.0 7.8 7.8	1 1 1	Grab Grab Grab	9/26/2024 @ 08:55 9/26/2024 @ 08:55 9/26/2024 @ 08:55
5.0 7.8 7.8	1 1 1	Grab Grab	9/26/2024 @ 08:55 9/26/2024 @ 08:55
7.8 7.8	1	Grab	9/26/2024 @ 08:55
7.8	1		
		Grab	9/26/2024 @ 08:55
1.5	1		
1.0	1	Grab	9/26/2024 @ 08:55
1.0	1	Grab	9/26/2024 @ 08:55
N/A			
620.0	1	Grab	9/26/2024 @ 08:55
N/A			
N/A			
108.0	1	Grab	9/26/2024 @ 08:55
	1.0 N/A 620.0 N/A N/A	1.0 1 N/A 620.0 1 N/A N/A	1.0 1 Grab N/A 620.0 1 Grab N/A N/A

^{*}TPDES permits only

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

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

Section 8. Facility Operator (Instructions Page 50)

Facility Operator Name: FloWatch, Inc.

Facility Operator's License Classification and Level: C or higher

Facility Operator's License Number: OCoooo181

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

A. WWTP's Biosolids Management Facility Type

Check all that apply. See instructions for guidance

☐ Design flow>= 1 MGD

[†]TLAP permits only

		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	TP's 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. Biosolids Management

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

Biosolids Management

Management Practice	Handler or Preparer Type	Bulk or Bag Container	Amount (dry metric tons)	Pathogen Reduction Options	Vector Attraction Reduction Option
Other	Off-site Third-Party Handler or Preparer	Not Applicable		Class B: PSRP Lime Stabilization	Choose an item.
Choose an item.	Choose an item.	Choose an item.		Choose an item.	Choose an item.
Choose an item.	Choose an item.	Choose an item.		Choose an item.	Choose an item.

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

D. Disposal site

Disposal site name: Mt. Houston Road MUD WWTP
TCEQ permit or registration number: WQ0011154001

County where disposal site is located: Harris

E. Transportation method

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

Name of the hauler: Magna Flow Environmental

Hauler registration number: 21484

Sludge is transported as a:

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

A. Beneficial use authorization

		JC UU		
Does the benefic			g permit include authorization for land application of sewage sludge for	
	Yes	\boxtimes	No	
If yes, benefic			questing to continue this authorization to land apply sewage sludge for	
	Yes		No	
If yes, is the completed Application for Permit for Beneficial Land Use of Sewage Sludge (TCEQ Form No. 10451) attached to this permit application (see the instructions for details)?				
	Yes		No	

ь.	Siduge	e processing audiorization				
		he existing permit include authorization for e or disposal options?	or an	y of the	follow	ving sludge processing,
	Slu	dge Composting		Yes	\boxtimes	No
	Ma	rketing and Distribution of sludge		Yes	\boxtimes	No
	Slu	dge Surface Disposal or Sludge Monofill		Yes	\boxtimes	No
	Ter	mporary storage in sludge lagoons		Yes	\boxtimes	No
	author	to any of the above sludge options and the rization, is the completed Domestic Waster ical Report (TCEQ Form No. 10056) attach	wate	r Permi	t Appl	ication: Sewage Sludge
		Yes □ No				
Se	ction	11. Sewage Sludge Lagoons (Ins	tru	ctions	Page	e 53)
		facility include sewage sludge lagoons?				
	□ Ye	es 🛛 No				
If y	es, con	nplete the remainder of this section. If no,	proc	eed to S	ection	12.
A.	Locatio	on information				
		llowing maps are required to be submitted e the Attachment Number.	as p	art of th	ne app	lication. For each map,
	•	Original General Highway (County) Map:		á)		
		Attachment: Click to enter text.				
	•	USDA Natural Resources Conservation Ser	vice S	Soil Map):	
		Attachment: Click to enter text.				
		Federal Emergency Management Map:				
		Attachment: Click to enter text.				
		Site map:				0
		Attachment: Click to enter text.				
	Discus apply.	s in a description if any of the following ex	ast w	ithin th	e Iago	on area. Check all 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				
	Att	achment: Click to enter text.				

Click to enter text.
Temporary storage information
Provide the results for the pollutant screening of sludge lagoons. These results are in addition to pollutant results in <i>Section 7 of Technical Report 1.0</i> .
Nitrate Nitrogen, mg/kg: Click to enter text.
Total Kjeldahl Nitrogen, mg/kg: Click to enter text.
Total Nitrogen (=nitrate nitrogen + TKN), mg/kg: Click to enter text.
Phosphorus, mg/kg: Click to enter text.
Potassium, mg/kg: Click to enter text.
pH, standard units: Click to enter text.
Ammonia Nitrogen mg/kg: Click to enter text.
Arsenic: Click to enter text.
Cadmium: Click to enter text.
Chromium: Click to enter text.
Copper: Click to enter text.
Lead: Click to enter text.
Mercury: Click to enter text.
Molybdenum: Click to enter text.
Nickel: Click to enter text.
Selenium: Click to enter text.
Zinc: Click to enter text.
Total PCBs: Click to enter text.
Provide the following information:
Volume and frequency of sludge to the lagoon(s): Click to enter text.
Total dry tons stored in the lagoons(s) per 365-day period: Click to enter text.
Total dry tons stored in the lagoons(s) over the life of the unit: Click to enter text.
Liner information
Does the active/proposed sludge lagoon(s) have a liner with a maximum hydraulic conductivity of $1x10^{-7}$ cm/sec?
□ Ves □ No

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

	-	
	Click	t to enter text.
D.	Site d	evelopment plan
	Provid	le a detailed description of the methods used to deposit sludge in the lagoon(s):
		to enter text.
	Attacl	n 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.	Groun	dwater 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 lagoon(s)?
		Yes □ No
	types groun	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.
	Δt	tachment: Click to enter text

Section 12. Authorizations/Compliance/Enforcement (Instructions

E.

Page 55)

A.	. Additional authorizations
	Does the permittee have additional authorizations for this facility, such as reuse authorization, sludge permit, etc?
	□ Yes ⊠ No
	If yes, provide the TCEQ authorization number and description of the authorization:
C	Click to enter text.
B.	Permittee enforcement status
	Is the permittee currently under enforcement for this facility?
	□ Yes ⊠ No
	Is the permittee required to meet an implementation schedule for compliance or enforcement?
	□ Yes ⊠ No
	If yes to either question, provide a brief summary of the enforcement, the implementation schedule, and the current status:
С	Click to enter text.
Se	ection 13. RCRA/CERCLA Wastes (Instructions Page 55)
A.	RCRA hazardous wastes Has the facility received in the past three years, does it currently receive, or will it receive RCRA hazardous waste? □ Yes 🗵 No

B. Remediation activity wastewater

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

□ Yes ⊠ No

C. Details about wastes received

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

Attachment: Click to enter text.

Section 14. Laboratory Accreditation (Instructions Page 56)

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

- The laboratory is an in-house laboratory and is:
 - o periodically inspected by the TCEQ; or
 - 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: Rahim Maknojia

Title: President

Signature: Date: 10/

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 6-	Section 1.	Domestic Drinking	Water Supply	(Instructions Page	64
---	------------	-------------------	--------------	--------------------	----

Is there a surface water intake for domestic drinking water supply located within 5 miles downstream from the point or proposed point of discharge?
□ Yes ⊠ No
If no , proceed it Section 2. If yes , provide the following:
Owner of the drinking water supply: 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 64)
Does the facility discharge into tidally affected waters?
□ Yes ⊠ No
If no , proceed to Section 3. If yes , complete the remainder of this section. If no, proceed to Section 3.
A. Receiving water outfall
Width of the receiving water at the outfall, in feet: Click to enter text.
B. Oyster waters
Are there oyster waters in the vicinity of the discharge?
□ Yes □ No
If yes, provide the distance and direction from outfall(s).
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 64) Is the discharge directly into (or within 300 feet of) a classified segment? Yes 🛛 No If yes, this Worksheet is complete. If no, complete Sections 4 and 5 of this Worksheet. **Description of Immediate Receiving Waters (Instructions** Section 4. Page 65) Name of the immediate receiving waters: Harris County Flood Control District Ditch L120-00-00 A. Receiving water type Identify the appropriate description of the receiving waters. Stream Freshwater Swamp or Marsh Lake or Pond Surface area, in acres: Click to enter text. Average depth of the entire water body, in feet: Click to enter text. Average depth of water body within a 500-foot radius of discharge point, in feet: Click to enter text. \boxtimes 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). \boxtimes 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.

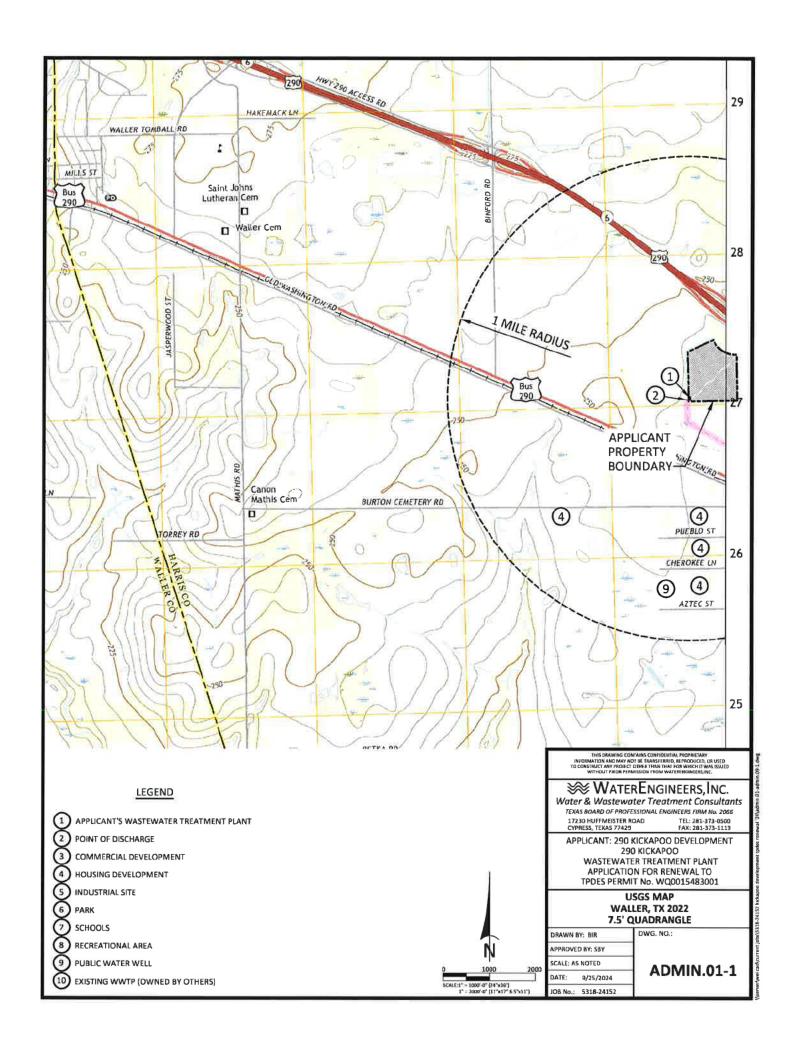
		e names of all perennial str tream of the discharge poir		n the receiving water within three miles
	Little	Cypress Creek		
D.	Down	stream characteristics		
		receiving water characteris rge (e.g., natural or man-ma		vithin three miles downstream of the nds, reservoirs, etc.)?
		Yes ⊠ No		
	If yes,	discuss how.		
	Click	to enter text.		
E.	Provid	al dry weather characterist e general observations of the rainage ditch is normally dry.		during normal dry weather conditions.
	Date a	nd time of observation: 7/7/	2016 @ 09:0	0
	Was th	e water body influenced by	stormwater i	runoff during observations?
		Yes ⊠ No		
Se	ction	5. General Characte Page 66)	eristics of	the Waterbody (Instructions
A.	Upstre	am influences		
		mmediate receiving water unced by any of the following		he discharge or proposed discharge site nat apply.
		Oil field activities	\boxtimes	Urban runoff
		Upstream discharges	\boxtimes	Agricultural runoff
		Septic tanks		Other(s), specify: Click to enter text.

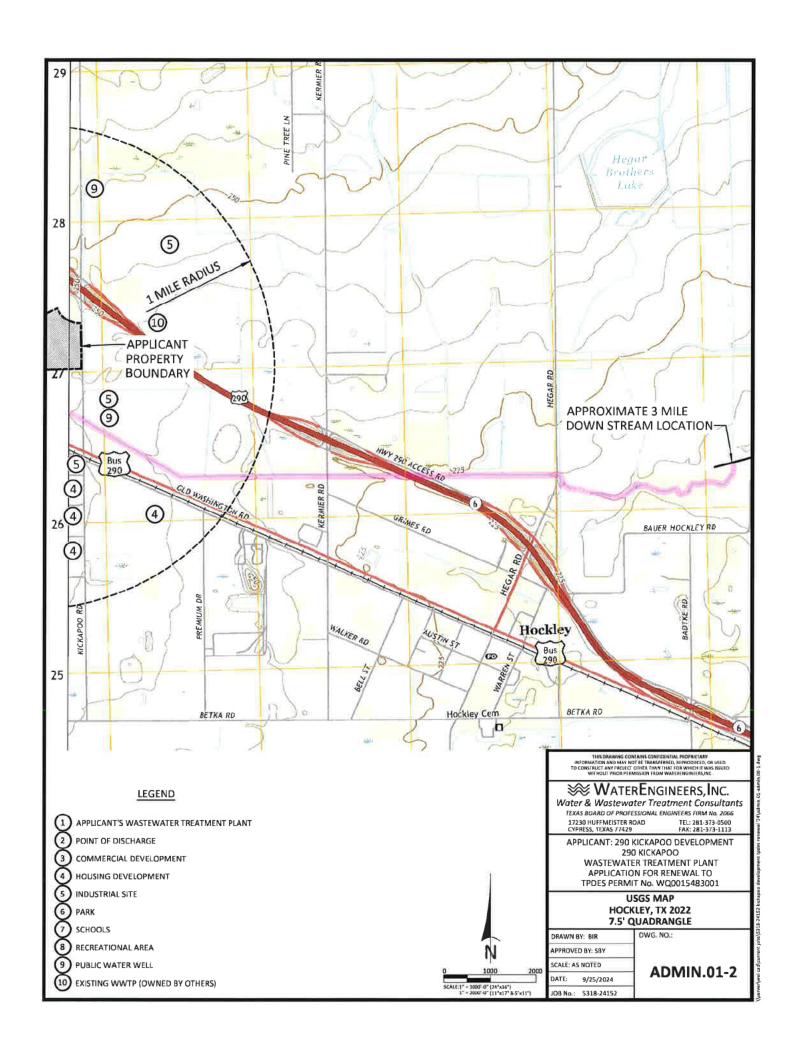
C. Downstream perennial confluences

B.	Waterk	terbody uses						
	Observed or evidences of the following uses. Check all that apply.							
	☐ Livestock watering ☐ Contact recreation							
	☐ Irrigation withdrawal ☐ Non-contact recreation							
		Fishing		Navigation				
		Domestic water supply		Industrial water supply				
		Park activities	\boxtimes	Other(s), specify: unknown				
C.	Waterb	oody aesthetics						
		one of the following that best descri rounding area.	ibes	the aesthetics of the receiving water and				
	Wilderness: outstanding natural beauty; usually wooded or unpastured area; wat clarity exceptional							
	☐ Natural Area: trees and/or native vegetation; some development evident (from fields, pastures, dwellings); water clarity discolored							
	Common Setting: not offensive; developed but uncluttered; water may be colored or turbid							
		Offensive: stream does not enhance aesthetics; cluttered; highly developed; dumping areas; water discolored						

ATTACHMENT ADMIN.01 USGS Topographic Map

(Reference Administrative Report 1.0, Page 10, Question 13)





ATTACHMENT ADMIN.02

Proof of Payment

(Reference Administrative Report 1.0, Page 10, Question 13)

WATER QUALITY PERMIT

PAYMENT SUBMITTAL FORM

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

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

Mail this form and the check or money order to:

BY REGULAR U.S. MAIL

BY OVERNIGHT/EXPRESS MAIL

Texas Commission on Environmental Quality

Financial Administration Division

Cashier's Office, MC-214

P.O. Box 13088

Austin, Texas 78711-3088

Texas Commission on Environmental Quality

Financial Administration Division

Cashier's Office, MC-214

12100 Park 35 Circle

Austin, Texas 78753

Fee Code: WQP Waste Permit No: WQoo15483001

1. Check or Money Order Number: 1417

2. Check or Money Order Amount: \$315.00

3. Date of Check or Money Order: 9/25/2024

4. Name on Check or Money Order: WaterEngineers, Inc.

5. APPLICATION INFORMATION

Name of Project or Site: 290 Kickapoo WWTP

Physical Address of Project or Site: 35515 Highway 290 Bypass, Waller, TX 77484

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

ATTACHMENT ADMIN.03

Core Data Form

(Reference Administrative Report 1.0, Page 4, Section 3C)



TCEQ Use Only

TCEQ Core Data Form

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

SECTION	I: Ger	ieral Inforn	<u> 1ation</u>											
1. Reason fo	or Submis	sion (If other is	checked plea	se desc	ribe ir	n space	provide	d.)						
☐ New Pe	rmit, Regis	stration or Authori	zation (Core L	Data Fo	rm sho	ould be	submitt	ed wit	h the	orogra	m applica	tion.)		
Renewal (Core Data Form should be submitted with the renewal form)														
2. Customer Reference Number (if issued) Follow this link to search 3. Regulated Entity Reference Number (if issued)									(if issued)					
CN 605155779					N or RI	N numbe Registry	ers in	RN	109	2265	22			
ECTION II: Customer Information														
4. General C	ustomer	Information	5. Effective	Date fo	or Cus	stomer	Inform	ation	Upda	tes (mi	m/dd/yyyy	/)		
☐ New Cus	tomer		\boxtimes	Update	to Cu	stomer	Informa	tion] Change	in Reg	julated E	Entity Ownership
		me (Verifiable wit												
				-				•				curre	nt and	active with the
Texas Sec	retary o	f State (SOS)	or Texas C	ompti	roller	r of Pu	ıblic A	CCO	ınts	(CPA).			
6. Customer	Legal Na	me (If an individua	l, print last nam	e first: e	g: Doe	, John)		<u>If r</u>	iew Cu	ıstomei	, enter pre	evious (Custome	er below:
290 Kicka	apoo De	velopment, I	nc.											
7. TX SOS/C			8. TX State	Tax ID	(11 digit	ts)		9.	Feder	al Tax	ID (9 digits) 10	0. DUNS	Number (if applicable)
80241270	_		3205984								, ,			, ,,
11. Type of (Customer	: 🛛 Corporati	on	☐ Individual				Partnership: General Limited						
Government:	☐ City ☐	County Federal	☐ State ☐ Other	r		Sole Pr	roprietor	ship		Other	:			
12. Number ⊠ 0-20	of Employ 21-100	/ees	251-500		501 aı	nd high	er	13	Inde Yes	pende	ntly Own		d Opera	ted?
14. Custome	r Role (Pr	oposed or Actual) -	- as it relates to					his for	m. Plea	se che	ck one of t	he follo	wing:	
Owner	`	☐ Opera					Operat							
Occupatio	nal Licens		nsible Party				y Clean		olicant		Other:			
	26830	Kuykendahl	Road, Suit	te 200):									
15. Mailing														
Address:	City	Tomball		St	ate	TX	7	IP	773	75		ZIP	9 + 4	;
16. Country		formation (if outsi	de (ISA)				17. E-N				nlicahle)	1		
ioi ocanay		TOTTINGETOTI (# OBIO	ac corij				rahin							
18. Telephor	ne Numbe	r		19. Ex	tensio	on or C					ax Num	ber (if a	applicab	le)
(281)38	6-0006									1	١	_ `		,
(201) 50										`	,			
ECTION	III: Re	gulated En	tity Infor	mati	<u>on</u>									
	_	_	-	_								•	nied by	a permit application)
New Regu			to Regulated B				•				Informati			
_		ity Name subi ndings such a	-	-		ed in (order	o me	eet T	CEQ	Agency	Data	Stand	lards (removal
		ame (Enter name d				action is	s taking i	olace 1						
		stewater Trea			unutou	aonon n	s taking j	,,au6.)						
LJU ILIUNA	noo wa	swwater 110	miioill I lal	ııı										

TCEQ-10400 (04/15) Page 1 of 2

23. Street Address of	35515	Highway 29	90 By	pass								
the Regulated Entity:												
(No PO Boxes)	City	Waller		State	TX	ZIP		77484		ZIP+4		
24. County	Harris	}			1		1					
		Enter Physical I	ocatio	on Description	if no	street add	ress is	provided	i.			
25. Description to												
Physical Location:												
26. Nearest City								State		, Ne	arest ZIP Code	
Waller							1	ГХ		77	7484	
27. Latitude (N) In Decir	nal:	30.04300	3			28. Longit	ude (W		cimal:	95.8774	19	
Degrees	Minutes		Seco	nds		Degrees		Mi	nutes		Seconds	
29. Primary SIC Code (4 di	igits) 3	0. Secondary S	IC Cod	le (4 digits)		rimary NA digits)	CS Co	de	32. Se	condary NA	AICS Code	
6519					531	120						
33. What is the Primary B	usiness o	of this entity?	(Do not	repeat the SIC or	NAICS (description.)						
Land developer	1											
24 Mailing				26	830 K	uykendahl	, Suite	200				
34. Mailing Address:												
7.44.1000	City Tomball Stat			State	TX ZIP			77	375	ZIP + 4		
35. E-Mail Address:					r	ahim@fuel	maxx.r	net	_			
36. Telepho		ег	1	37. Extensio	sion or Code 38. Fax Number (if applicable)						cable)	
(281) 3									_ () +		
 TCEQ Programs and ID I orm. See the Core Data Form in: 	Numbers structions fo	Check all Program or additional guida	ns and w nce.	rite in the permi	ts/regis	tration numb	ers that	will be aff	ected by t	he updates si	ubmitted on this	
☐ Dam Safety	☐ Distric			Edwards Aquifer		☐ Emi	ssions Ir	nventory A	ir [Industrial F	lazardous Waste	
☐ Municipal Solid Waste	☐ New S	Source Review Air		OSSF		☐ Petr	oleum S	torage Ta	nk [PWS		
			1	T'		——————————————————————————————————————				¬		
Sludge	☐ Storm	Water	$+$ \square	Title V Air		Tire	S			Used Oil		
☐ Voluntary Cleanup	Waste ■ Waste	Water	+	Wastewater Agri	iculture	■ Water Rights			-	Other:		
		5483001		- I do to mator / ign		State Water ragins						
SECTION IV: Prep												
		IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII				44 Title		14*	Г			
40. Name: Shelley Yo		t./Code	44 Eas	Number		41. Title:		onsultir	ig Eng	ineer		
42. Telephone Number	43. EX					45. E-Ma						
(281) 373-0500 (281) 373-1113 syoung@waterengineers.com												
SECTION V: Auth								_				
By my signature below, I ignature authority to submit t	certify, to his form o	the best of my ken behalf of the e	nowled ntity sp	dge, that the int pecified in Sect	formation II,	ion provide Field 6 and	d in thi l/or as r	s form is equired f	true and or the up	complete, and dates to the	nd that I have ID numbers	

identified in field 39.

Company:	WaterEngineers, Inc.	Job Title:	Consulting Engineer						
Name(In Print):	Shelley Young			Phone:	(281) 373-0500				
Signature:	Shelly young			Date:	9/30/2024				

ATTACHMENT ADMIN.04

Plain Language Summary

(Reference Administrative Report 1.0, Page 7, Section 8F)



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

PLAIN LANGUAGE SUMMARY FOR TPDES OR TLAP PERMIT APPLICATIONS

Plain Language Summary 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 as required by <u>Title 30, Texas Administrative Code (30 TAC), Chapter 39, Subchapter H.</u> Applicants may modify the template as necessary to accurately describe their 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 the applicant 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.

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

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

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

290 Kickapoo Development, Inc. (CN605155779) operates the 290 Kickapoo Wastewater Treatment Plant (RN109226522), an activated sludge process with nitrification operated in the complete mix mode. The facility is located at 35515 Highway 290 Bypass, in Waller, Harris County, Texas 77484. This application for a renewal application to discharge a daily average flow of 45,000 gallons per day of treated domestic wastewater..

Discharges from the facility are expected to contain five-day carbonaceous biochemical oxygen demand (CBOD₅), total suspended solids (TSS), ammonia nitrogen (NH₃-N), and *Escherichia coli*. Additional potential pollutants are included in the Domestic Technical Report 1.0, Section 7. Pollutant Analysis of Treated Effluent in the permit application package. Domestic wastewater is treated by an activated sludge process plant and the treatment units include a bar screen, selector basin, aeration basin, final clarifier, sludge digester, and chlorine contact chamber.

PLANTILLA EN ESPAÑOL PARA SOLICITUDES NUEVAS/RENOVACIONES/ENMIENDAS DE TPDES o TLAP

AGUAS RESIDUALES Introduzca 'INDUSTRIALES' o 'DOMÉSTICAS' aquí /AGUAS PLUVIALES

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

290 Kickapoo Development, Inc. (CN605155779) opera la Planta de Tratamiento de Aguas Residuales de 290 Kickapoo (RN 109226522), un proceso de lodos activados con nitrificación operado en el modo de mezcla completa. La instalación está ubicada en 35515 Highway 290 Bypass, en Waller, Condado de Harris, Texas 77484.. Esta solicitud es para una renovación aplicación para descargar a un flujo promedio diario de 45,000 galones por día de aguas residuales domésticas tratadas.

Se espera que las descargas de la instalación contengan demanda bioquímica de oxígeno carbonoso de cinco días (CBOD₅), solidos totalmente suspendidos (TSS), nitrógeno amoniacal (NHe-N), y Escherichia coli. Los contaminantes potenciales adicionales se incluyen en el Informe Técnico Domésticas 1.0, Seccion 7 Análisis de Contaminantes de Efluente Tratado en el paquete de solicitud de permisos. Las aguas residuales domésticas. está tratado por una planta de proceso de lodos activados y las unidades de tratamiento incluirán una pantalla de barras, balsa de selector, balsa de aireación, clarificador finale, digestora de lodos, y cámara de contacto de cloro.

ATTACHMENT ADMIN.09 Supplemental Permit Information Form and USGS Map

(Reference Administrative Report Page 14)

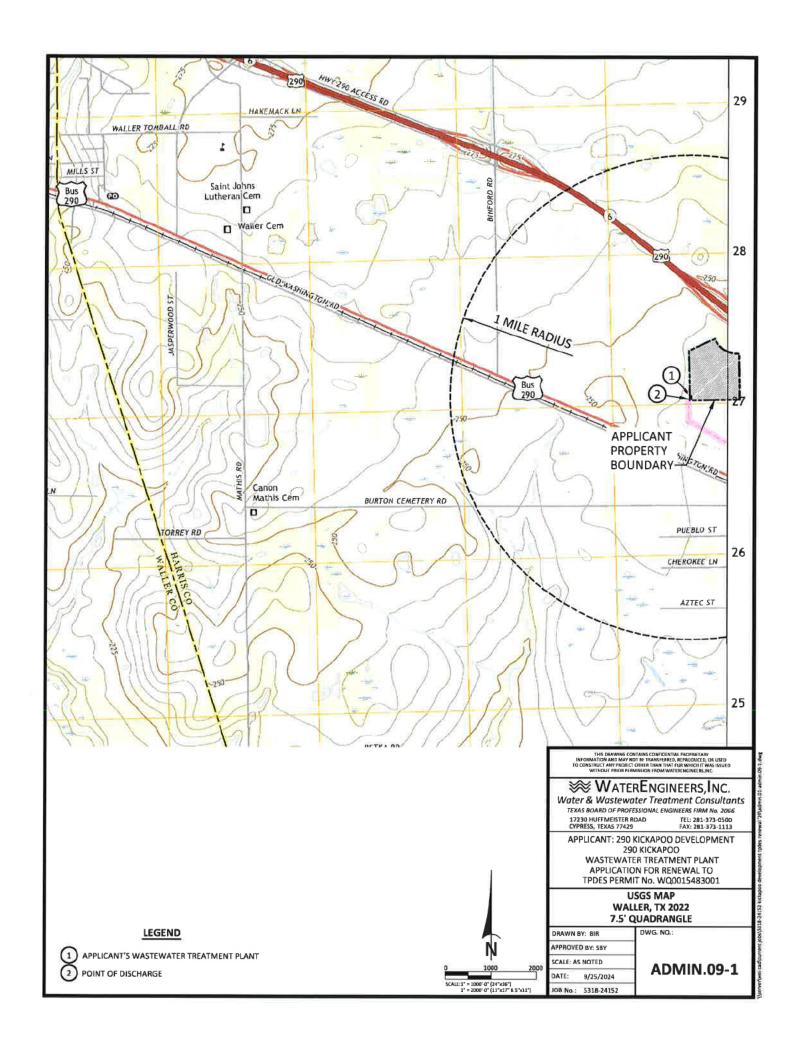
TEXAS COMMISSION ON ENVIRONMENTAL QUALITY SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

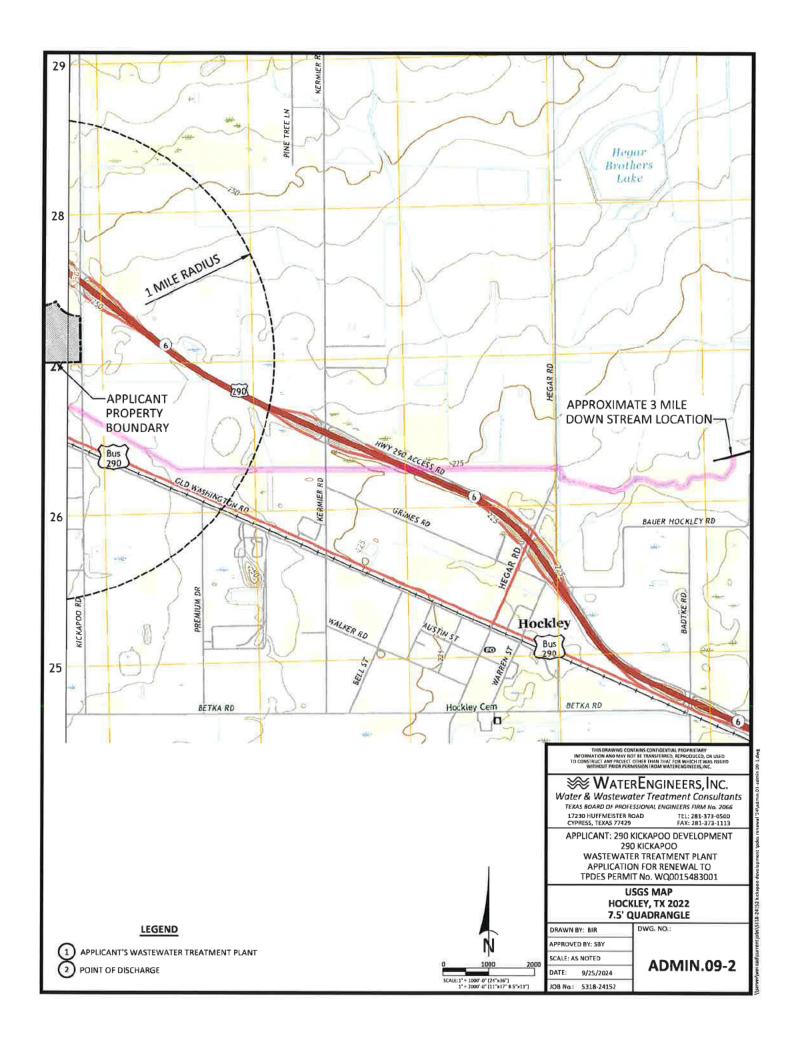
FOR AGENCIES REVIEWING DOMESTIC OR INDUSTRIAL TPDES WASTEWATER PERMIT APPLICATIONS

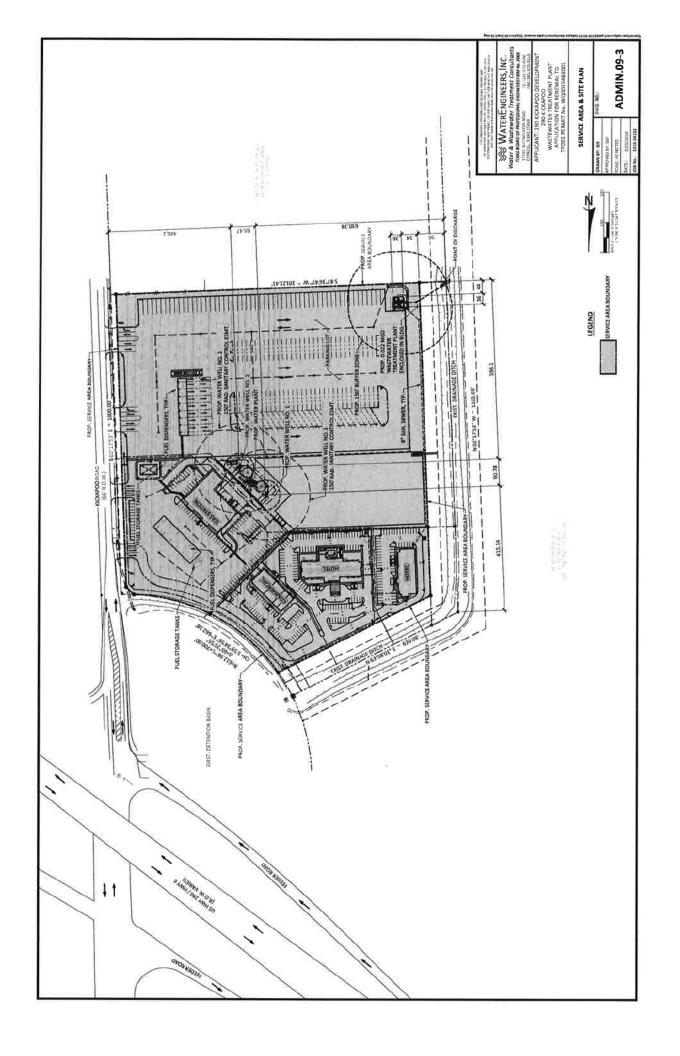
TCEQ USE ONLY: Application type:RenewalMajor AmendmentMinor AmendmentNew County:Segment Number: Admin Complete Date: Agency Receiving SPIF: Texas Historical Commission U.S. Fish and Wildlife Texas Parks and Wildlife Department U.S. Army Corps of Engineers
This form applies to TPDES permit applications only. (Instructions, Page 53)
Complete this form as a separate document. TCEQ will mail a copy to each agency as required by our agreement with EPA. If any of the items are not completely addressed or further information is needed, we will contact you to provide the information before issuing the permit. Address each item completely.
Do not refer to your response to any item in the permit application form. Provide each attachment for this form separately from the Administrative Report of the application. The application will not be declared administratively complete without this SPIF form being completed in its entirety including all attachments. Questions or comments concerning this form may be directed to the Water Quality Division's Application Review and Processing Team by email at WO-ARPTeam@tceq.texas.gov or by phone at (512) 239-4671.
The following applies to all applications:
1. Permittee: 290 Kickapoo Development, Inc.
Permit No. WQ00 <u>15483001</u> EPA ID No. TX <u>0137162</u>
Address of the project (or a location description that includes street/highway, city/vicinity, and county):
35515 Highway 290 Bypass, Waller, Harris County, Texas 77484

		r specific questions about the property.
	Prefix	(Mr., Ms., Miss): <u>Ms.</u>
	First a	nd Last Name: Shelley Young
	Creder	ntial (P.E, P.G., Ph.D., etc.): <u>P.E.</u>
	Title: <u>F</u>	Engineer
	Mailing	g Address: <u>17230 Huffmeister Road, Suite A</u>
	City, St	tate, Zip Code: <u>Cypress, TX 77429</u>
	Phone	No.: <u>281-373-0500</u> Ext.: Click here to enter text. Fax No.: <u>281-373-1113</u>
	E-mail	Address: syoung@waterengineers.com
2.	List the	e county in which the facility is located: <u>Harris</u>
3.		property is publicly owned and the owner is different than the permittee/applicant, list the owner of the property.
	N/A	
4.	of efflu dischar	e a description of the effluent discharge route. The discharge route must follow the flow ent from the point of discharge to the nearest major watercourse (from the point of rge to a classified segment as defined in 30 TAC Chapter 307). If known, please identify
		ssified segment number.
	From Little Basin.	the plant site to Harris County Flood Control District Ditch L120-00-00, thence to Cypress Creek, thence to Cypress Creek in Segment No. 1009 of the SanJacinto River
5.	plotted route f	provide a separate 7.5-minute USGS quadrangle map with the project boundaries and a general location map showing the project area. Please highlight the discharge rom the point of discharge for a distance of one mile downstream. (This map is
	Dwarida	ed in addition to the map in the administrative report).
	Provide	e original photographs of any structures 50 years or older on the property.
		e original photographs of any structures 50 years or older on the property.
	Does y	e original photographs of any structures 50 years or older on the property. our project involve any of the following? Check all that apply.
	Does y	e original photographs of any structures 50 years or older on the property. our project involve any of the following? Check all that apply. Proposed access roads, utility lines, construction easements
	Does y	e original photographs of any structures 50 years or older on the property. Our 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

	☐ Disturbance of vegetation or wetlands
of	t proposed construction impact (surface acres to be impacted, depth of excavation, sealing caves, or other karst features): o additional construction is proposed.
	scribe existing disturbances, vegetation, and land use: and is currently used as a wastewater treatment plant facility and has for several years.
	OLLOWING ITEMS APPLY ONLY TO APPLICATIONS FOR NEW TPDES PERMITS AND MAJOR DMENTS TO TPDES PERMITS
	t construction dates of all buildings and structures on the property: <u>A- renewal</u>
4. Pro	wide a brief history of the property, and name of the architect/builder, if known.
N	'A- renewal



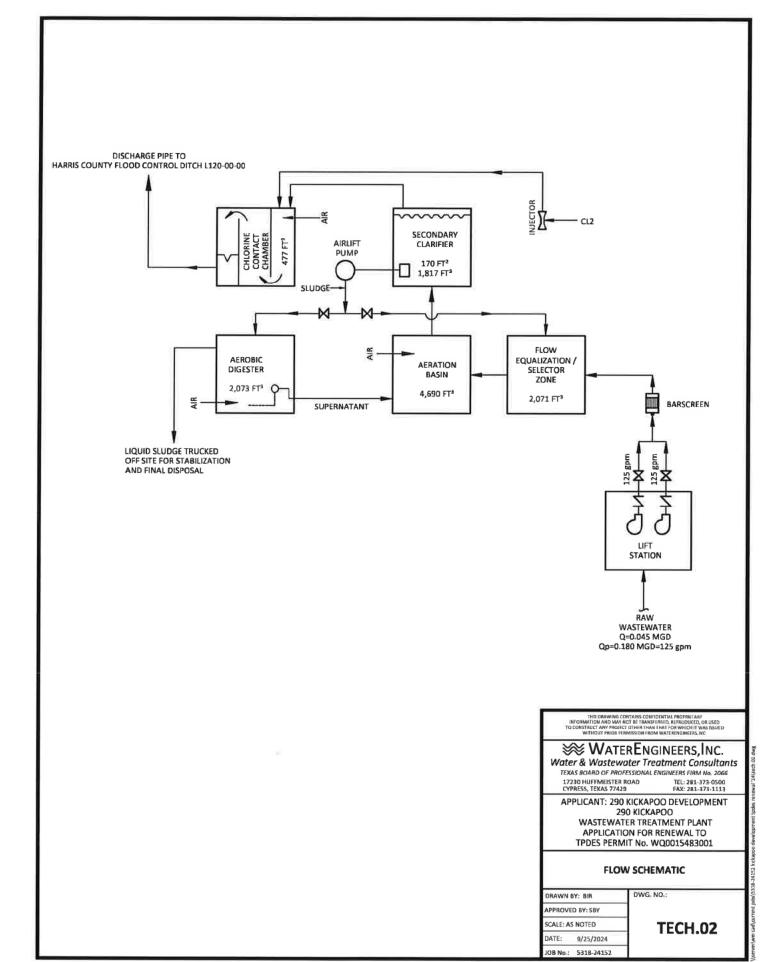




ATTACHMENT TECH.02

Process Flow Diagram

(Reference Technical Report Page 2, Question 2c)



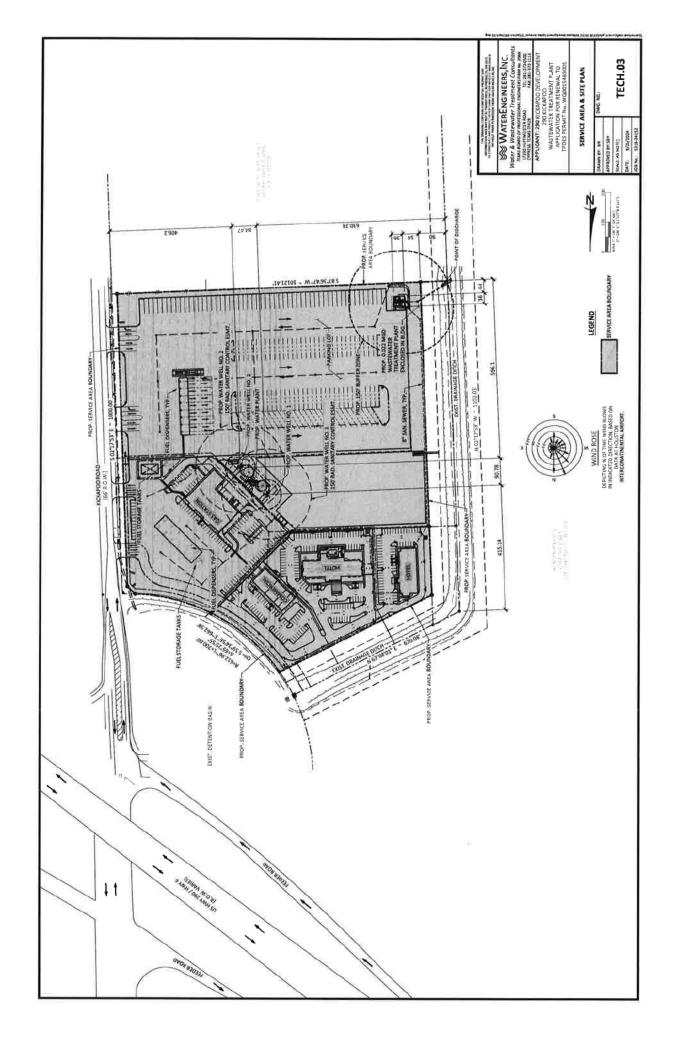
ATTACHMENT TECH.03

Site Drawing

(Reference Technical Report Page 2, Question 3)

(Including Wind Rose)

(Reference Technical Report Page 23, Question 7)



ATTACHMENT TECH.05

Pollutant Analysis

(Reference Technical Report Page 9, Section 7)





861 State Hwy 19 P.O. Box 1622 Huntsville, TX 77342-1622 www.chaparrallabs.com Phone: 936-291-1881 Fax: 936-295-1731

Certificate of Analysis

FloWatch

Attn: Shelley Young 17230 Huffmeister Suite A Cypress, TX 77429-1643

Location: Harris County, TX

Project: Kickapoo Fuel Maxx

Customer ID: FLOWATCH
Sample ID: 24091074
Date Received: 09/26/2024

Date Reported: 10/02/2024

Analytical Results

Collection Point: Effluent Flow (MGD): 0.0011 Collected: 09/26/2024 08:55

Sample Type: Grab Collector: JFL

<u>Parameter</u>	<u>Result</u>	<u>Units</u>	<u>Date/Time</u>	<u>Analyst</u>	Bottle	Method	<u>QC ID</u>	Acrd
CBOD5	<3.0	mg/L	09/27/2024 07:49	EIB	-01	SM 5210 B	QC2409535	NELAP
TSS	2.6	mg/L	09/27/2024 10:20	JAM	-02	SM 2540 D	QC2409530	NELAP
Ammonia Nitrogen	< 0.1	mg/L	09/27/2024 11:11	JFL	-03	SM 4500-NH3 D	QC2409525	NELAP
Total Kjeldahl Nitrogen	5.0	mg/L	09/30/2024 07:58	JCG	-03	SM 4500-NH3 C	QC2409556	NELAP
Total Phosphorus	5.0	mg/L	09/27/2024 07:38	JCG	-03	SM 4500-P E	QC2409552	NELAP
Alkalinity	108.0	mg/L CaCO3	09/27/2024 09:00	DKH	-04	SM 2320 B	QC2409508	NELAP
Chloride	182.7	mg/L	09/27/2024 10:03	DKH	-04	EPA 300.0	QC2409547	NELAP
Nitrate Nitrogen	40.3	mg/L	09/27/2024 10:03	DKH	-04	EPA 300.0	QC2409548	NELAP
Sulfate	15.7	mg/L	09/27/2024 10:03	DKH	-04	EPA 300.0	QC2409549	NELAP
Total Dissolved Solids	620.0	mg/L	09/27/2024 14:44	DKH	-04	SM 2540 C	QC2410004	NELAP
Escherichia coli	1.0	MPN/100mL	09/26/2024 16:20	DKH	-05	SM 9223 B	QC2409510	NELAP
Chlorine, Residual (Total)	1.5	mg/L	09/26/2024 08:58	JFL	-06	SM 4500-Cl F	QC2409505	Field
Dissolved Oxygen	7.8	mg/L	09/26/2024 08:58	JFL	-06	SM 4500-O G	QC2409504	Field
pH	7.8	SU	09/26/2024 08:58	JFL	-06	SM 4500-H+B	QC2409503	Field

Quality Control OC Type OC ID **Units** Flag **Param** Result QC2409503 pΗ Duplicate %RPD QC2409504 Dissolved Oxygen Duplicate %RPD Chlorine, Residual (Total) QC2409505 Duplicate %RPD LCS 100 Method Blank < 0.1 mg/L





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Certificate of Analysis

FloWatch	Customer ID: FLOWATCH
Attn: Shelley Young	Sample ID: 24091074
17230 Huffmeister Suite A	Date Received: 09/26/2024
Cypress, TX 77429-1643	Date Reported: 10/02/2024

Cypress, TX 77429	-1643	I	Date Reported:	10/02/2024
Project: Kickap Location: Harris O	oo Fuel Maxx County, TX			
QC2409508	Alkalinity			
		Duplicate %RPD	1.3	%
		LCS	100.8	%
		Method Blank	<5.0 n	ng/L CaCO3
QC2409510	Escherichia coli			
		Method Blank	<1.0 N	MPN/100mL
		Precision Criteria	Acceptable	
QC2409525	Ammonia Nitrogen			
		LCS	104	%
		Matrix Spike Recovery	104	%
		Matrix Spike Recovery	100	%
		Matrix Spike RPD	0	%
		Matrix Spike RPD	0	%
		Method Blank	< 0.1	mg/L
		RPD	0	%
		RPD	0	%
QC2409530	TSS			
		Duplicate %RPD	0	%
		Duplicate %RPD	0	%
		LCS	95	%
		Method Blank	<2.5	mg/L
QC2409535	CBOD5			
		Duplicate %RPD	0	%
		Duplicate % RPD	0	%
		LCS	107.8	%
		Method Blank	0.1	mg/L

Wednesday, October 2, 2024 Certificate of Analysis Page 2 of 4





861 State Hwy 19 P.O. Box 1622 Huntsville, TX 77342-1622 www.chaparrallabs.com Phone: 936-291-1881 Fax: 936-295-1731

Certificate of Analysis

FloWatch	Customer ID: FLOWATCH
Attn: Shelley Young	Sample ID: 24091074
17230 Huffmeister Suite A	Date Received: 09/26/2024
Cypress, TX 77429-1643	Date Reported: 10/02/2024

31			•	
Project: Kick	kapoo Fuel Maxx			
Location: Harr	ris County, TX			
QC2409547	Chloride			
		Duplicate % RPD	0	%
		LCS	96.3	%
		Method Blank	< 0.3	mg/L
		MS %R	96.4	%
		MSD %R	96.4	%
QC2409548	Nitrate Nitrogen			
		Duplicate %RPD	0	%
		LCS	95	%
		Method Blank	< 0.1	mg/L
		MS %R	95.3	%
		MSD %R	95.2	%
QC2409549	Sulfate			
		Duplicate %RPD	0	%
		LCS	100.6	%
		Method Blank	< 0.3	mg/L
		MS %R	100.8	%
		MSD %R	100.9	%
QC2409552	Total Phosphorus			
		Duplicate %RPD	2.4	%
		LCS	100	%
		Method Blank	< 0.01	mg/L
		MS %R	98.5	%
		MSD %R	96.5	%
QC2409556	Total Kjeldahl Nitrogen			
		Duplicate %RPD	0	%
		LCS	101	%
		Method Blank	<1.1	mg/L
		MS %R	95	%
		MSD %R	95	%





861 State Hwy 19 P.O. Box 1622 Huntsville, TX 77342-1622 www.chaparrallabs.com Phone: 936-291-1881 Fax: 936-295-1731

Certificate of Analysis

FloWatch Customer ID: FLOWATCH

Attn: Shelley Young

Sample ID: 24091074

17230 Huffmeister Suite A

Date Received: 09/26/2024

Cypress, TX 77429-1643 **Date Reported:** 10/02/2024

Project: Kickapoo Fuel Maxx **Location:** Harris County, TX

QC2410004 Total Dissolved Solids

 Duplicate % RPD
 3.1
 %

 LCS
 103.2
 %

 Method Blank
 <5.0</td>
 mg/L

The analytical results in this Certificate of Analysis relate only to the samples tested. This Certificate of Analysis, with its corresponding Chain of Custody, completes the data package. This data package may not be reproduced, except in full, without the written approval of Chaparral Laboratories, Inc.

Unacceptable = does not meet Precision Criteria.

Samples analyzed for Oxygen Uptake Rate are diluted to <2% total solids for analysis.

Results reported as mg/kg, %, or CFU/g/TS are calculated on a dry weight basis, unless otherwise noted.

Precision Criteria for Fecal Coliform, Escherichia coli and Enterococci analyses are calculated according to SM 9020 B 8.5.b.

Approved by David H. Veinotte Laboratory Director

^{(&}lt;) = Result was below quantitation limits.

^{(&}gt;) = Result was above quantitation limits.

Acceptable = meets Precision Criteria

^{*}Note 1: Laboratory Approval by TCEQ

^{*}Note 11: The form TCEQ-10525 (Rev. 11/2023) submitted to Chaparral Laboratories, Inc. is TCEQ's required documentation for all active PWS Total Coliform analysis on Drinking Water in the State of Texas. Please refer to the completed form TCEQ-10525 (Rev. 11/2023) for all reporting purposes.



861 State Hwy 19 P.O. Box 1622 Huntsville, TX. 77342 www.chaparrallabs.com reports@chaparrallabs.com Phone: 936-291-1881 FAX: 936-295-1731

Pator						Chain	Chain of Custody Record	y Re	cord					
CL1-727	COC Page	e 1 of 1	Report to:			Sample Type	Type Bottle Code	ode		Preserva	Preservative Code Lab re	Lab remarks:		
Client:	FloWatch					3 pt Con 6 pt Con		GA = Glass Amber P = Plastic	J° 9>= 1					
	Shelley Young	ang				24 Hr. Comp. 48 Hr. Comp.		V = VOA W = Thiowhirlbag	2=H2SO4 RIL- 3=HNO3 RIL-	RIL-				
ess:	7230 Huff	17230 Huffmeister Suite A	Invoicing to:	0:					4=NaOH RIL- 5=HCl RIL-	RIL-				
te, Zip:	ypress, T	Cypress, TX 77429-1643				Matrix (D = Drin	Matrix Code D = Drinking Water		6 = Na2S2O3 7 = On-Site Analysis	Analysis				
_	281-373-0500	00	РО#			NP = Non-Pot ' S = Solids/Soil	n-Pot Water ls/Soil		9 = EDA RIL	F. F.				
Project ID:	Kickapoo	Kickapoo Fuel Maxx			Projec	Project Address:	35515 US-290, Waller, TX 77484, USA	aller, TX	77484, [ISA		Collection Schedule:	schedule:	Thursday
Sampled by:	'And	This Speakey/Combo:	nbo:	4283	Wier Angle:		22.5 Oper	Operator Name:	ne:		Gilberto	Operator Cell:	r Cell:	832-967-2782
Lab Use Only	ıly		Sample		Date	Time	Flow	Во	Bottle Vol	_				
Sample #	Bottle #	Collection Point	Type	Matrix	Collected	Collected	H	Co		Code			Analysis	
41011014	1.0	EFF	Grab	NP	9-26-4	8:55	001)	P 1000	1			CBOD5	
	40	EFF	Grab	NP	_			_	P 1000	1			TSS	
	03	EFF	Grab	NP					P 500	1, 2		NH3	NH3N, TKN, T-P	
	40	EFF	Grab	NP					P 1000	1		Chloride, NO3N	Chloride, NO3N, SO4, TDS, Alkalinity	ty
	05	EFF	Grab	NP		\			P 250	1, 6			E. coli	S of
+	06	EFF	Grab	NP	<	8:58		L		7	pH: 7.8 su	su @ 26.4 °C	D.O.: 7.8 mg/	mg/l CL2: 1.5 mg/l
											1			D.
								+						
Sample Conditions	is Received f	Sample Conditions as Received from Client (in field):		Relinquished by:	by:		Date:	Th	Time:		Received by:		Date:	Time:
Temp (Client Therm):Actual Temp (CLI Therm):	erm):			1	San San	Wen-	9.26.2	24	1:5	5				
Corrected Temp (CLI Therm): CLI Thermometer ID:	Therm):	°C												
Sample Conditions as Received by Lab:	s Received b	- C - C						_			When We	Winnicke	45/26/24	1515
Cooler ID #:	~	C	Notes:	s:	12 ar	ter A	rsenic	0	2		,		8	
Actual Temperature: Corrected Temperature:	 	30000	T	6	Trec+	00	C							
21.17		-												

Candice Calhoun

From: Shelley Young <syoung@waterengineers.com>

Sent: Monday, October 21, 2024 4:40 PM

To: Candice Calhoun

Subject: RE: Application to Renew Permit No. WQ0015483001 - 290 Kickapoo Development, Inc.;

290 Kickapoo WWTP

Attachments: municipal-discharge-renew-spanish-nori.docx

Follow Up Flag: Follow up Flag Status: Flagged

Hi Candice,

Please find attached the Spanish version of the NORI.

Regards, Shelley

Shelley B. Young, P.E. WaterEngineers, Inc. 17230 Huffmeister Rd. Cypress, TX ~ 77429

tel: 281-373-0500 fax: 281-373-1113 www.waterengineers.com

The contents of this e-mail and any attachment(s) are confidential, and the property of WaterEngineers, Inc.

From: Candice Calhoun < Candice.Calhoun@tceq.texas.gov>

Sent: Monday, October 21, 2024 4:13 PM

To: Shelley Young <syoung@waterengineers.com>

Subject: Application to Renew Permit No. WQ0015483001 - 290 Kickapoo Development, Inc.; 290 Kickapoo WWTP

Importance: High

Dear Ms. Young,

The attached Notice of Deficiency (NOD) letter dated <u>October 21, 2024</u>, requests additional information needed to declare the application administratively complete. Please send complete response to my attention by <u>November 4, 2024</u>.

Please let me know if you have any questions.

Regards,