



Administrative Package Cover Page

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
-



Portada de Paquete Administrativo

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

PLAIN LANGUAGE SUMMARY

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

Quadvest, LP (CN602944746) operates the Olympia Falls Wastewater Treatment Facility (RN110581097), an activate sludge processing plant operating in the conventional plug flow mode. The facility is located at 410 ½ Lake Olympia Parkway, Fresno, Texas 77545. The effluent will discharge from the facility into a 12' pipe, thence to a 24" pipe; thence to Mustang Bayou, thence to Chocolate Bay in Segment No. 2432 of the Bays and Estuaries.

This application is for a renewal to discharge at a volume not to exceed an average flow of 250,000 gallons per day.

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 will be treated by an activated sludge process plant and the treatment units will include a bar screen, aeration basins, final clarifiers, sludge digesters and chlorine contact chambers.

RESUMEN EN LENGUAJE SENCILLO

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

Quadvest, LP (CN602944746) opera la Planta de Tratamiento de Aguas Residuales (RN110581097) de Olympia Falls, una planta de procesamiento de lodos activos que opera en el modo de flujo de tapón convencional. La instalación está ubicada en 410 1/2 Lake Olympia Parkway, Fresno, Texas 77545. El efluente se descargará de la instalación en una tubería de 12 pies, de allí a una tubería de 24 pulgadas; de allí a Mustang Bayou, de allí a Chocolate Bay en el Segmento No. 2432 de las Bahías y Estuarios.

Esta solicitud es para una renovación para descargar a un volumen que no exceda un flujo promedio de 250,000 galones por día.

Se espera que las descargas de la instalación contengan una demanda bioquímica carbonosa de oxígeno (CBOD5) de cinco días, sólidos suspendidos totales (TSS), nitrógeno amoniacal (NH3-N) y *Escherichia coli*. En la sección 7 del Informe Técnico Doméstico 1.0 se incluyen contaminantes potenciales adicionales. Análisis de Contaminantes de Efluentes Tratados en el paquete de solicitud de permisos. Las aguas residuales domésticas serán tratadas por una planta de procesamiento de lodos activados y las unidades de tratamiento incluirán una criba de barras, balsas de aireación, clarificadores finales, digestores de lodos y cámaras de contacto de cloro.

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY



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

PERMIT NO. WQ0015747001

APPLICATION. Quadvest, L.P., 26926 Farm-to-Market Road 2978, Magnolia, Texas 77354, has applied to the Texas Commission on Environmental Quality (TCEQ) to amend Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0015747001 (EPA I.D. No. TX0138894) to authorize relocating the outfall. The domestic wastewater treatment facility is located at 410 1/2 Lake Olympia Parkway, near Fresno, in Fort Bend County, Texas 77459. The discharge route is from the plant site via pipe to Mustang Bayou, thence to Chocolate Bay. TCEQ received this application on January 17, 2025. The permit application will be available for viewing and copying at Fort Bend County Libraries - Fulshear Branch, 6350 GM Library Road, Fulshear, in Fort Bend County, Texas prior to the date this notice is published in the newspaper. The application, including any updates, and associated notices are available electronically at the following webpage:

<https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications>.

This link to an electronic map of the site or facility's general location is provided as a public courtesy and not part of the application or notice. For the exact location, refer to the application.

<https://gisweb.tceq.texas.gov/LocationMapper/?marker=-95.496666,29.554722&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 county-wide mailing list and to those who are on the mailing list for this application. That notice will contain the deadline for submitting public comments.**

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

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

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

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

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

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 Quadvest, L.P. at the address stated above or by calling Mr. Jacob Gifford, P.E., Director of Engineering, at 281-305-1120.

Issuance Date: February 21, 2025

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 MODIFICACION

PERMISO NO. WQ0015747001

SOLICITUD. Quadvest, L.P. 26926 Farm-to-Market Road 2978, Magnolia, Texas 77354, ha solicitado a la Comisión de Calidad Ambiental del Estado de Texas (TCEQ) para modificar el Permiso No. WQ0015747001 (EPA I.D. No. TX0138894) del Sistema de Eliminación de Descargas de Contaminantes de Texas (TPDES) para autorizar reubicación del emisario. La planta está ubicada 410 ½ Lake Olympia Parkway, cerca Fresno, en el Condado de Fort Bend County, Texas 77459. La ruta de descarga es del sitio de la planta a través de una tubería hasta Mustang Bayou y de allí hasta Chocolate Bay. La TCEQ recibió esta solicitud el 17 de enero de 2025. La solicitud para el permiso estará disponible para leerla y copiarla en Bibliotecas del condado de Fort Bend: sucursal Fulshear, 6350 GM Library Road, Fulshear, Texas antes de la fecha de publicación de este aviso en el periódico. La solicitud (cualquier actualización y aviso inclusive) está disponible electrónicamente en la siguiente página web: <https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications>.

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=-95.496666,29.554722&level=18>

AVISO DE IDIOMA ALTERNATIVO. El aviso de idioma alternativo en español está disponible en <https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications>.

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. Además, puede pedir que la TCEQ ponga su nombre en una o más 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 agregue su nombre en una de las listas designe cual lista(s) y envía por correo su pedido a la Oficina del Secretario Principal de la

TCEQ.

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

También se puede obtener información adicional del Quadvest, L.P. a la dirección indicada arriba o llamando a Sr. Jacob Gifford, P.E. Director of Engineering al 281-305-1120.

Fecha de emisión el 21 de febrero de 2025

Leah Whallon

From: April Trader <atrader@quadvest.com>
Sent: Wednesday, February 12, 2025 4:08 PM
To: Leah Whallon; Jacob Gifford
Subject: RE: Application to Amend Permit No. WQ0015747001; Quadvest, L.P.; Olympia Falls WWTF
Attachments: Response to Deficiency Letter dated 1.29.2025.pdf; Adjacent Landowner Labels.docx; Municipal Discharge Amendment Spanish NORI.docx
Follow Up Flag: Follow up
Flag Status: Flagged

Good Afternoon –

Please find attached our response to the Notice of Deficiency letter dated January 29, 2025.

Should you have any questions or need anything further, please feel free to reach out to me.

Thank you,

April



April Trader
Special Projects Manager -
Engineering
d: 281-305-1153
c:
www.quadvest.com

From: Leah Whallon <Leah.Whallon@Tceq.Texas.Gov>
Sent: Wednesday, January 29, 2025 4:51 PM
To: Jacob Gifford <jgifford@quadvest.com>; April Trader <atrader@quadvest.com>
Subject: Application to Amend Permit No. WQ0015747001; Quadvest, L.P.; Olympia Falls WWTF

WARNING: This email is from outside the organization. Please use caution opening links or attachments.

Good Afternoon,

Please see the attached Notice of Deficiency letter dated January 29, 2025 requesting additional information needed to declare the application administratively complete. Please send the complete response by February 12, 2025.

Please let me know if you have any questions.

Thank you,



Leah Whallon

Texas Commission on Environmental Quality

Water Quality Division

512-239-0084

leah.whallon@tceq.texas.gov

How is our customer service? Fill out our online customer satisfaction survey at
[//www.tceq.texas.gov/customersurvey](http://www.tceq.texas.gov/customersurvey)



Quadvest, L.P.
26926 FM 2978
Magnolia, TX 77354

Main: 281-356-5347
Fax: 281-356-5382
Quadvest.com

February 11, 2025

Leah Whallon
Applications Review and Processing Team (MC-148)
Water Quality Division
Texas Commission on Environmental Quality
12100 Park 35 Circle
Austin, Texas 78753

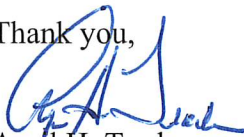
Re: Application to Renew Permit No. WQ0015747001 (EPA I.D. TX0138894)
Quadvest, L.P.
CN602944746; RN110581097

Dear Ms Whallon:

In response to your letter dated January 29, 2025, please find the following completed responses for the Domestic Wastewater Discharge Permit application according to the following:

1. Administrative Report 1.0, Section 1: Attached, please find revised Payment Submittal Form sent via overnight to the Financial Administration Division.
2. Administrative Report 1.0, Section 8.F: Attached please find the revised Plain Language Summaries in English and Spanish that now includes the proposed output (flow) of the facility.
3. Administrative Report 1.1, Section 1: The affected landowner list formatted for mailing labels (Avery 5160) in Microsoft Word document is attached.
4. The NORI is showing the incorrect area code for Jacob Gifford – it should read “281-305-1120”. Other than this correction, everything else is reviewed and approved.
5. The translated NORI is attached in Word Format.

Should you have any questions or need any further information, please do not hesitate to contact me @ 281-305-1153 or email atrader@quadvest.com.

Thank you,


April H. Trader
Special Projects Manager - Engineering



PLAIN LANGUAGE SUMMARY

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

Quadvest, LP (CN602944746) operates the Olympia Falls Wastewater Treatment Facility (RN110581097), an activate sludge processing plant operating in the conventional plug flow mode. The facility is located at 410 ½ Lake Olympia Parkway, Fresno, Texas 77545. The effluent will discharge from the facility into a 12' pipe, thence to a 24" pipe; thence to Mustang Bayou, thence to Chocolate Bay in Segment No. 2432 of the Bays and Estuaries.

This application is for a renewal to discharge at a volume not to exceed an average flow of 250,000 gallons per day.

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 will be treated by an activated sludge process plant and the treatment units will include a bar screen, aeration basins, final clarifiers, sludge digesters and chlorine contact chambers.

RESUMEN EN LENGUAJE SENCILLO

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

Quadvest, LP (CN602944746) opera la Planta de Tratamiento de Aguas Residuales (RN110581097) de Olympia Falls, una planta de procesamiento de lodos activos que opera en el modo de flujo de tapón convencional. La instalación está ubicada en 410 1/2 Lake Olympia Parkway, Fresno, Texas 77545. El efluente se descargará de la instalación en una tubería de 12 pies, de allí a una tubería de 24 pulgadas; de allí a Mustang Bayou, de allí a Chocolate Bay en el Segmento No. 2432 de las Bahías y Estuarios.

Esta solicitud es para una renovación para descargar a un volumen que no exceda un flujo promedio de 250,000 galones por día.

Se espera que las descargas de la instalación contengan una demanda bioquímica carbonosa de oxígeno (CBOD5) de cinco días, sólidos suspendidos totales (TSS), nitrógeno amoniacal (NH3-N) y *Escherichia coli*. En la sección 7 del Informe Técnico Doméstico 1.0 se incluyen contaminantes potenciales adicionales. Análisis de Contaminantes de Efluentes Tratados en el paquete de solicitud de permisos. Las aguas residuales domésticas serán tratadas por una planta de procesamiento de lodos activados y las unidades de tratamiento incluirán una criba de barras, balsas de aireación, clarificadores finales, digestores de lodos y cámaras de contacto de cloro.

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 MODIFICACION

PERMISO NO. WQ00_____

SOLICITUD. Quadvest, L.P. 26926 FM 2978, Magnolia, Texas 77354 ha solicitado a la Comisión de Calidad Ambiental del Estado de Texas (TCEQ) para modificar el Permiso No. WQ0015747001 (EPA I.D. No. TX0138894) 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 promedio diario de 250,000 galones por día. La planta está ubicada 410 1/2 Lake Olympoia Parkway, Near Fresno, en el Condado de Fort Bend County, Texas. La ruta de descarga es del sitio de la planta a via pipe to Mustang Bayou, thence to Chocolate Bay. La TCEQ recibió esta solicitud el January 17, 2025. La solicitud para el permiso estará disponible para leerla y copiarla en Fort Bend County Librariries – Fulshear Branch, 6350 GM Library Road, Fulshear, in Fort Bend County, Texas antes de la fecha de publicación de este aviso en el periódico. Este enlace a un mapa electrónico de la ubicación general del sitio o de la instalación es proporcionado como una cortesía y no es parte de la solicitud o del aviso. Para la ubicación exacta, consulte la solicitud.

<https://gisweb.tceq.texas.gov/LocationMapper/?marker+-95.49666629.554722&level+18>

[Include the following non-italicized sentence if the facility is located in the Coastal Management Program boundary and is an application for a major amendment which will increase the pollutant loads to coastal waters or would result in relocation of an outfall to a critical areas, or a renewal with such a major amendment. The Coastal Management Program boundary is the area along the Texas Coast of the Gulf of México as depicted on the map in 31 TAC §503.1 and includes part or all of the following counties: Cameron, Willacy, Kenedy, Kleberg, Nueces, San Patricio, Aransas, Refugio, Calhoun, Victoria, Jackson, Matagorda, Brazoria, Galveston, Harris, Chambers, Jefferson y Orange. If the application is for amendment that does ot meet the above description, do not include the sentence: El Director Ejecutivo de la TCEQ ha revisado esta medida para ver si está de acuerdo con los objetivos y las regulaciones del Programa de Administración Costero de Texas (CMP) de acuerdo con las regulaciones del Consejo Coordinador de la Costa (CCC) y ha determinado que la acción es conforme con las metas y regulaciones pertinentes del CMP.]

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 todos 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. Además, puede pedir que la TCEQ ponga su nombre en una o más de las listas de 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 agregue su nombre en una de las listas designe cual lista(s) y envía por correo su pedido a la Oficina del Secretario Principal de la TCEQ.

CONTACTOS E INFORMACIÓN A LA AGENCIA. Todos los comentarios públicos y solicitudes deben ser presentadas electrónicamente vía

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

También se puede obtener información adicional del Quadvest, L.P. a la dirección indicada arriba o llamando a Mr. Jacob Gifford, P.E. Director of Engineering al 281-305-1120.

Fecha de emisión _____ *[Date notice issued]*



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

**DOMESTIC WASTEWATER PERMIT APPLICATION
CHECKLIST**

Complete and submit this checklist with the application.

APPLICANT NAME: Quadvest, LP

PERMIT NUMBER (If new, leave blank): WQ00 15747001

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

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

For TCEQ Use Only

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



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION ADMINISTRATIVE REPORT 1.0

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

Section 1. Application Fees (Instructions Page 26)

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

Flow	New/Major Amendment	Renewal
<0.05 MGD	\$350.00 <input type="checkbox"/>	\$315.00 <input type="checkbox"/>
≥0.05 but <0.10 MGD	\$550.00 <input type="checkbox"/>	\$515.00 <input type="checkbox"/>
≥0.10 but <0.25 MGD	\$850.00 <input type="checkbox"/>	\$815.00 <input type="checkbox"/>
≥0.25 but <0.50 MGD	\$1,250.00 <input checked="" type="checkbox"/>	\$1,215.00 <input type="checkbox"/>
≥0.50 but <1.0 MGD	\$1,650.00 <input type="checkbox"/>	\$1,615.00 <input type="checkbox"/>
≥1.0 MGD	\$2,050.00 <input type="checkbox"/>	\$2,015.00 <input type="checkbox"/>

Minor Amendment (for any flow) \$150.00 ☐

Payment Information:

Mailed Check/Money Order Number: 14604 dated 5/10/2024
Check/Money Order Amount: \$1,215.00
Name Printed on Check: Quadvest, LP
EPAY Voucher Number: Click to enter text.
Copy of Payment Voucher enclosed? Yes ☒

Section 2. Type of Application (Instructions Page 26)

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

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

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

- ☒ Active ☐ Inactive

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

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

d. Check the box next to the appropriate application type

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

e. For amendments or modifications, describe the proposed changes: Correct the discharge route.

f. For existing permits:

Permit Number: WQ00 15747001

EPA I.D. (TPDES only): TX 0138894

Expiration Date: 10/16/2024

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

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

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

Quadvest, LP

(The legal name must be spelled exactly as filed with the Texas Secretary of State, County, or in the legal documents forming the entity.)

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

CN: 602944746

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

Prefix: Mr.

Last Name, First Name: Mark L. Urback

Title: VP Construction and Engineering Credential: P.E.

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. [A](#)

Section 4. Application Contact Information (Instructions Page 27)

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

A. Prefix: Mr.

Last Name, First Name: Jacob Gifford

Title: Director of Engineer

Credential: P.E.

Organization Name: Quadvest, LP

Mailing Address: 26926 FM 2978

City, State, Zip Code: Magnolia, TX 77354

Phone No.: 281-305-1120

E-mail Address: jgifford@quadvest.com

Check one or both: ☒ Administrative Contact ☒ Technical Contact

B. Prefix: Mrs.

Last Name, First Name: April Trader

Title: Special Projects Mgr - Engineering

Credential: Click to enter text.

Organization Name: Quadvest, LP

Mailing Address: 26926 FM 2978

City, State, Zip Code: Magnolia, Texas 77354

Phone No.: 281-305-1153

E-mail Address: atrader@quadvest.com

Check one or both: ☒ Administrative Contact ☐ Technical Contact

Section 5. Permit Contact Information (Instructions Page 27)

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

A. Prefix: Mr.

Last Name, First Name: Jacob Gifford

Title: Director of Engineering

Credential: P.E.

Organization Name: Quadvest, LP

Mailing Address: 26926 FM 2978

City, State, Zip Code: Magnolia, Texas 77354

Phone No.: 281-305-1120

E-mail Address: ygifford@quadvest.com

B. Prefix: Click to enter text

Last Name, First Name: Click to enter text

Title: Click to enter text

Credential: Click to enter text

Organization Name: Click to enter text

Mailing Address: Click to enter text

City, State, Zip Code: Click to enter text

Phone No.: Click to enter text

E-mail Address: Click to enter text

Section 6. Billing Contact Information (Instructions Page 27)

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

Prefix: Click to enter text

Last Name, First Name: Mary Downey

Title: Controller

Credential: Click to enter text

Organization Name: Quadvest, LP

Mailing Address: 26926 FM 2978

City, State, Zip Code: Magnolia, Texas 77354

Phone No.: 281-356-5347

E-mail Address: mdowney@quadvest.com

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

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

Prefix: Click to enter text

Last Name, First Name: Chance Lee

Title: Compliance Reporting Coordinator

Credential: Click to enter text

Organization Name: Quadvest, LP

Mailing Address: 26926 FM 2978

City, State, Zip Code: Magnolia, Texas 77354

Phone No.: 281-305-1154

E-mail Address: mwatson@quadvest.com

Section 8. Public Notice Information (Instructions Page 27)

A. Individual Publishing the Notices

Prefix: Mrs.

Last Name, First Name: April Trader

Title: Special Projects Mgr. - Engineering

Credential: Click to enter text

Organization Name: Quadvest, LP

Mailing Address: 26926 FM 2978

City, State, Zip Code: Magnolia, Texas 77354

Phone No.: 281-305-1153

E-mail Address: atrader@quadvest.com

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

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

☒ E-mail Address

☐ Fax

☐ Regular Mail

C. Contact permit to be listed in the Notices

Prefix: Click to enter text.

Last Name, First Name: Jacob Gifford

Title: Director of Engineering

Credential: P.E.

Organization Name: Quadvest, LP

Mailing Address: 26926 FM 2978

City, State, Zip Code: Magnolia, Texas 77354

Phone No.: 281-305-1120

E-mail Address: jgifford@quadvest.com

D. Public Viewing Information

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

Public building name: Fort Bend County Libraries – Fulshear Branch

Location within the building: Reference Desk

Physical Address of Building: 6350 GM Library Road

City: Fulshear

County: Fort Bend

Contact (Last Name, First Name): Librarian

Phone No.: 346-481-6800 Ext.: Click to enter text.

E. Bilingual Notice Requirements

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

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

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

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

☒ Yes ☐ No

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

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

☒ Yes ☐ No

3. Do the students at these schools attend a bilingual education program at another location?
- ☐ Yes ☒ No
4. Would the school be required to provide a bilingual education program but the school has waived out of this requirement under 19 TAC §89.1205(g)?
- ☐ Yes ☒ No
5. If the answer is **yes** to **question 1, 2, 3, or 4**, public notices in an alternative language are required. Which language is required by the bilingual program? Spanish

F. Plain Language Summary Template

Complete the Plain Language Summary (TCEQ Form 20972) and include as an attachment.

Attachment: B

G. Public Involvement Plan Form

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

Attachment: Click to enter text.

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

- A. If the site is currently regulated by TCEQ, provide the Regulated Entity Number (RN) issued to this site. RN 110581097

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

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

Olympia Falls WWTF

- C. Owner of treatment facility: Quadvest, LP

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

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

Prefix: Click to enter text.

Last Name, First Name: Click to enter text.

Title: Click to enter text.

Credential: Click to enter text.

Organization Name: Quadvest, LP

Mailing Address: 26926 FM 2978

City, State, Zip Code: Magnolia, Texas 77354

Phone No.: 281-356-5347

E-mail Address: Click to enter text.

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

Attachment: Click to enter text.

E. Owner of effluent disposal site:

Prefix: Click to enter text:

Last Name, First Name: Click to enter text:

Title: Click to enter text:

Credential: Click to enter text:

Organization Name: Click to enter text:

Mailing Address: Click to enter text:

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

Phone No.: Click to enter text:

E-mail Address: Click to enter text:

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

Attachment: Click to enter text:

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

Prefix: Click to enter text:

Last Name, First Name: Click to enter text:

Title: Click to enter text:

Credential: Click to enter text:

Organization Name: Click to enter text:

Mailing Address: Click to enter text:

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

Phone No.: Click to enter text:

E-mail Address: Click to enter text:

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

Attachment: Click to enter text:

Section 10. TPDES Discharge Information (Instructions Page 31)

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

☒

Yes

☐

No

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

Click to enter text:

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

☐

Yes

☒

No

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

From the facility into a 12" pipe; then to a 24" pipe; thence to Mustang Bayou, thence to Chocolate Bay in Segment No. 2432 of the Bays and Estuaries.

City nearest the outfall(s): Houston

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

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

☐

Yes

☒

No

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

- ☐ Authorization granted ☐ Authorization pending

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

Attachment: Click to enter text

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

Section 11. TLAP Disposal Information (Instructions Page 32)

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

☐ Yes ☐ No

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

Click to enter text

- B. City nearest the disposal site: Click to enter text

- C. County in which the disposal site is located: Click to enter text

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

Click to enter text

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

Section 12. Miscellaneous Information (Instructions Page 32)

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

☐ Yes ☒ No

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

☐ Yes ☐ No ☒ Not Applicable

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

Click to enter text

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

☐ Yes ☒ No

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

D. Do you owe any fees to the TCEQ?

☐ Yes ☒ No

If yes, provide the following information:

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

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

E. Do you owe any penalties to the TCEQ?

☐ Yes ☒ No

If yes, please provide the following information:

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

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

Section 13. Attachments (Instructions Page 33)

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

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

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

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

☐ Attachment 1 for Individuals as co-applicants

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

Section 14. Signature Page (Instructions Page 34)

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

Permit Number: WQ0015747001

Applicant: Quadvest, LP

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): Mark L. Urback

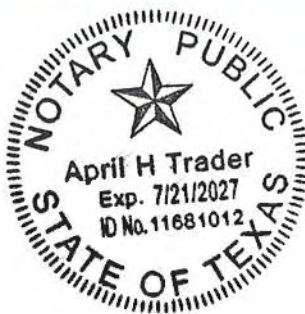
Signatory title: VP Construction and Engineering

Signature:  Date: 1/17/25
(Use blue ink)

Subscribed and Sworn to before me by the said Mark L. Urback
on this 17th day of January, 2025.
My commission expires on the 21st day of July, 2027.


Notary Public

Montgomery
County, Texas



[SEAL]

DOMESTIC WASTEWATER PERMIT APPLICATION ADMINISTRATIVE REPORT 1.0

The following information is required for new and amendment applications.

Section 1. Affected Landowner Information (Instructions Page 36)

A. Indicate by a check mark that the landowners map or drawing, with scale, includes the following information, as applicable:

- ☒ The applicant's property boundaries
- ☒ The facility site boundaries within the applicant's property boundaries
- ☐ The distance the buffer zone falls into adjacent properties and the property boundaries of the landowners located within the buffer zone
- ☒ The property boundaries of all landowners surrounding the applicant's property (Note: if the application is a major amendment for a lignite mine, the map must include the property boundaries of all landowners adjacent to the new facility (ponds).)
- ☒ The point(s) of discharge and highlighted discharge route(s) clearly shown for one mile downstream
- ☒ The property boundaries of the landowners located on both sides of the discharge route for one full stream mile downstream of the point of discharge
- ☐ The property boundaries of the landowners along the watercourse for a one-half mile radius from the point of discharge if the point of discharge is into a lake, bay, estuary, or affected by tides
- ☐ The boundaries of the effluent disposal site (for example, irrigation area or subsurface drainfield site) and all evaporation/holding ponds within the applicant's property
- ☐ The property boundaries of all landowners surrounding the effluent disposal site
- ☐ The boundaries of the sludge land application site (for land application of sewage sludge for beneficial use) and the property boundaries of landowners surrounding the applicant's property boundaries where the sewage sludge land application site is located
- ☐ The property boundaries of landowners within one-half mile in all directions from the applicant's property boundaries where the sewage sludge disposal site (for example, sludge surface disposal site or sludge monofill) is located

B. ☒ Indicate by a check mark that a separate list with the landowners' names and mailing addresses cross-referenced to the landowner's map has been provided.

C. Indicate by a check mark in which format the landowners list is submitted:

- ☐ USB Drive ☒ Four sets of labels

D. Provide the source of the landowners' names and mailing addresses: Fort Bend County Tax Assessor

E. As required by *Texas Water Code* § 5.115, is any permanent school fund land affected by this application?

- ☐ Yes ☒ No

If **yes**, provide the location and foreseeable impacts and effects this application has on the land(s):

Click to enter text.

Section 2. Original Photographs (Instructions Page 38)

Provide original ground level photographs. Indicate with checkmarks that the following information is provided.

- ☐ At least one original photograph of the new or expanded treatment unit location
- ☒ At least two photographs of the existing/proposed point of discharge and as much area downstream (photo 1) and upstream (photo 2) as can be captured. If the discharge is to an open water body (e.g., lake, bay), the point of discharge should be in the right or left edge of each photograph showing the open water and with as much area on each respective side of the discharge as can be captured.
- ☐ At least one photograph of the existing/proposed effluent disposal site
- ☐ A plot plan or map showing the location and direction of each photograph

Section 3. Buffer Zone Map (Instructions Page 38)

A. Buffer zone map. Provide a buffer zone map on 8.5 x 11-inch paper with all of the following information. The applicant's property line and the buffer zone line may be distinguished by using dashes or symbols and appropriate labels.

- The applicant's property boundary;
- The required buffer zone; and
- Each treatment unit; and
- The distance from each treatment unit to the property boundaries.

B. Buffer zone compliance method. Indicate how the buffer zone requirements will be met. Check all that apply.

- ☐ Ownership
- ☒ Restrictive easement
- ☐ Nuisance odor control
- ☐ Variance

C. Unsuitable site characteristics. Does the facility comply with the requirements regarding unsuitable site characteristic found in 30 TAC § 309.13(a) through (d)?

- ☐ Yes
- ☐ No

DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST OF COMMON DEFICIENCIES

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

Core Data Form (TCEQ Form No. 10400) ☒ Yes
*(Required for all application types. Must be completed in its entirety and signed.
 Note: Form may be signed by applicant representative.)*

Correct and Current Industrial Wastewater Permit Application Forms ☒ Yes
(TCEQ Form Nos. 10053 and 10054. Version dated 6/25/2018 or later.)

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

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

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

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

Things to Know:

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

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

Landowners Labels or USB Drive attached ☐ N/A ☒ Yes
(See instructions for landowner requirements)

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

Plain Language Summary ☒ Yes

ADMINISTRATIVE REPORTS 1.0 AND 1.1

ATTACHMENTS

- A. Core Data
- B. Plain Language Summaries
- C. Public Involvement Plan / Form
- D. USGS Topo Map – Effluent Discharge Route
- E. Affected Landowners – Maps and Labels
- F. Original Photographs
- G. Buffer Zone Map
- H. SPIF
- I. Copy of Application Check

ATTACHMENT A

CORE DATA



TCEQ Core Data Form

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

SECTION I: General Information

1. Reason for Submission (If other is checked please describe in space provided.)		
<input type="checkbox"/> New Permit, Registration or Authorization (Core Data Form should be submitted with the program application.)		
<input checked="" type="checkbox"/> Renewal (Core Data Form should be submitted with the renewal form)	<input checked="" type="checkbox"/> Other	WITH MAJOR AMENDMENT
2. Customer Reference Number (if issued)	Follow this link to search for CN or RN numbers in Central Registry**	3. Regulated Entity Reference Number (if issued)
CN 602944746		RN 110581097

SECTION II: Customer Information

4. General Customer Information		5. Effective Date for Customer Information Updates (mm/dd/yyyy)		1/23/2024	
<input type="checkbox"/> New Customer <input checked="" type="checkbox"/> Update to Customer Information <input type="checkbox"/> Change in Regulated Entity Ownership					
<input type="checkbox"/> Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)					
<i>The Customer Name submitted here may be updated automatically based on what is current and active with the Texas Secretary of State (SOS) or Texas Comptroller of Public Accounts (CPA).</i>					
6. Customer Legal Name (If an individual, print last name first: eg: Doe, John)				<i>If new Customer, enter previous Customer below:</i>	
QUADVEST, LP					
7. TX SOS/CPA Filing Number		8. TX State Tax ID (11 digits)		9. Federal Tax ID (9 digits)	
08000539284		17421243712			
10. DUNS Number (if applicable)					
11. Type of Customer:		<input type="checkbox"/> Corporation		<input type="checkbox"/> Individual	
Government: <input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Federal <input type="checkbox"/> Local <input type="checkbox"/> State <input type="checkbox"/> Other		<input type="checkbox"/> Sole Proprietorship		Partnership: <input type="checkbox"/> General <input checked="" type="checkbox"/> Limited	
12. Number of Employees				13. Independently Owned and Operated?	
<input type="checkbox"/> 0-20 <input checked="" type="checkbox"/> 21-100 <input type="checkbox"/> 101-250 <input type="checkbox"/> 251-500 <input type="checkbox"/> 501 and higher				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
14. Customer Role (Proposed or Actual) – as it relates to the Regulated Entity listed on this form. Please check one of the following					
<input type="checkbox"/> Owner <input type="checkbox"/> Operator <input checked="" type="checkbox"/> Owner & Operator <input type="checkbox"/> Other:					
<input type="checkbox"/> Occupational Licensee <input type="checkbox"/> Responsible Party <input type="checkbox"/> VCP/BSA Applicant					
15. Mailing Address:		26926 FM 2978			
City		MAGNOLIA		State TX	
ZIP		77354		ZIP + 4	
16. Country Mailing Information (if outside USA)			17. E-Mail Address (if applicable)		
18. Telephone Number		19. Extension or Code		20. Fax Number (if applicable)	

SECTION III: Regulated Entity Information**21. General Regulated Entity Information** (If "New Regulated Entity" is selected, a new permit application is also required.)☐ New Regulated Entity ☐ Update to Regulated Entity Name ☐ Update to Regulated Entity Information

The Regulated Entity Name submitted may be updated, in order to meet TCEQ Core Data Standards (removal of organizational endings such as Inc, LP, or LLC).

22. Regulated Entity Name (Enter name of the site where the regulated action is taking place.)

Olympia Falls WWTF

23. Street Address of the Regulated Entity:

410 1/2 Lake Olympia Parkway

(No PO Boxes)

City

Fresno

State

TX

ZIP

77459

ZIP + 4

24. County

Fort Bend

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

25. Description to Physical Location:

2800' East of the Intersection of the Fort Bend County Tollway and Lake Olympia Parkway, in Fort Bend County, Texas.

26. Nearest City

State

Nearest ZIP Code

Fresno

TX

77459

Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).

27. Latitude (N) In Decimal:

29.554912

28. Longitude (W) In Decimal:

95.496675

Degrees

Minutes

Seconds

Degrees

Minutes

Seconds

29

33

17.682

95

29

48.031

29. Primary SIC Code**30. Secondary SIC Code****31. Primary NAICS Code****32. Secondary NAICS Code**

(4 digits)

(4 digits)

(5 or 6 digits)

(5 or 6 digits)

4952

33. What is the Primary Business of this entity? (Do not repeat the SIC or NAICS description.)

Water and Wastewater

34. Mailing Address:

26926 FM 2978

City

MAGNOLIA

State

TX

ZIP

77354

ZIP + 4

35. E-Mail Address:

jgifford@quadvest.com

36. Telephone Number**37. Extension or Code****38. Fax Number** (if applicable)

(281) 356-5347

() -

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


<input type="checkbox"/> Dam Safety	<input type="checkbox"/> Districts	<input type="checkbox"/> Edwards Aquifer	<input type="checkbox"/> Emissions Inventory Air	<input type="checkbox"/> Industrial Hazardous Waste
<input type="checkbox"/> Municipal Solid Waste	<input type="checkbox"/> New Source Review Air	<input type="checkbox"/> OSSF	<input type="checkbox"/> Petroleum Storage Tank	<input type="checkbox"/> PWS
<input type="checkbox"/> Sludge	<input type="checkbox"/> Storm Water	<input type="checkbox"/> Title V Air	<input type="checkbox"/> Tires	<input type="checkbox"/> Used Oil
<input type="checkbox"/> Voluntary Cleanup	<input checked="" type="checkbox"/> Wastewater	<input type="checkbox"/> Wastewater Agriculture	<input type="checkbox"/> Water Rights	<input type="checkbox"/> Other:
	WQ0015747001			

SECTION IV: Preparer Information

40. Name:	JACOB GIFFORD, P.E.	41. Title:	DIRECTOR OF ENGINEERING
42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Mail Address
{ 281 } 305-1120		{ } -	JGIFORD@QUADVEST.COM

SECTION V: Authorized Signature

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

Company:	QUADVEST, LP	Job Title:	DIRECTOR OF ENGINEERING
Name (In Print):	JACOB GIFFORD	Phone:	{ 281 } 305- 1120
Signature:		Date:	1/17/2025

ATTACHMENT B

PLAIN LANGUAGE SUMMARIES

(ADMIN 1.0, SECTION 8F)

PLAIN LANGUAGE SUMMARY

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

Quadvest, LP (CN602944746) operates the Olympia Falls Wastewater Treatment Facility (RN110581097), an activate sludge processing plant operating in the conventional plug flow mode. The facility is located at 410 ½ Lake Olympia Parkway, Fresno, Texas 77545. The effluent will discharge from the facility into a 12' pipe, thence to a 24" pipe; thence to Mustang Bayou, thence to Chocolate Bay in Segment No. 2432 of the Bays and Estuaries.

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 will be treated by an activated sludge process plant and the treatment units will include a bar screen, aeration basins, final clarifiers, sludge digesters and chlorine contact chambers.

RESUMEN EN LENGUAJE SENCILLO

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

Quadvest, LP (CN602944746) opera la Planta de Tratamiento de Aguas Residuales (RN110581097) de Olympia Falls, una planta de procesamiento de lodos activos que opera en el modo de flujo de tapón convencional. La instalación está ubicada en 410 1/2 Lake Olympia Parkway, Fresno, Texas 77545. El efluente se descargará de la instalación en una tubería de 12 pies, de allí a una tubería de 24 pulgadas; de allí a Mustang Bayou, de allí a Chocolate Bay en el Segmento No. 2432 de las Bahías y Estuarios.

Se espera que las descargas de la instalación contengan una demanda bioquímica carbonosa de oxígeno (CBOD5) de cinco días, sólidos suspendidos totales (TSS), nitrógeno amoniacal (NH3-N) y *Escherichia coli*. En la sección 7 del Informe Técnico Doméstico 1.0 se incluyen contaminantes potenciales adicionales. Análisis de Contaminantes de Efluentes Tratados en el paquete de solicitud de permisos. Las aguas residuales domésticas serán tratadas por una planta de procesamiento de lodos activados y las unidades de tratamiento incluirán una criba de barras, balsas de aireación, clarificadores finales, digestores de lodos y cámaras de contacto de cloro.

ATTACHMENT C

PIP – PUBLIC INVOLVEMENT PLAN FORM



Texas Commission on Environmental Quality

Public Involvement Plan Form for Permit and Registration Applications

The Public Involvement Plan is intended to provide applicants and the agency with information about how public outreach will be accomplished for certain types of applications in certain geographical areas of the state. It is intended to apply to new activities; major changes at existing plants, facilities, and processes; and to activities which are likely to have significant interest from the public. This preliminary screening is designed to identify applications that will benefit from an initial assessment of the need for enhanced public outreach.

All applicable sections of this form should be completed and submitted with the permit or registration application. For instructions on how to complete this form, see TCEQ-20960-inst.

Section 1. Preliminary Screening

- ☒ New Permit or Registration Application
- ☒ New Activity - modification, registration, amendment, facility, etc. (see instructions)

If neither of the above boxes are checked, completion of the form is not required and does not need to be submitted.

Section 2. Secondary Screening

- ☒ Requires public notice,
- ☐ Considered to have significant public interest, and
- ☒ Located within any of the following geographical locations:

- Austin
- Dallas
- Fort Worth
- Houston
- San Antonio
- West Texas
- Texas Panhandle
- Along the Texas/Mexico Border
- Other geographical locations should be decided on a case-by-case basis

**If all the above boxes are not checked, a Public Involvement Plan is not necessary.
Stop after Section 2 and submit the form.**

- ☒ Public Involvement Plan not applicable to this application. Provide **brief** explanation.

All of the above boxes are not checked; therefore, PIP is not necessary.

Section 3. Application Information

Type of Application (check all that apply):

Air ☐ Initial ☐ Federal ☐ Amendment ☐ Standard Permit ☐ Title V
Waste ☐ Municipal Solid Waste ☐ Industrial and Hazardous Waste ☐ Scrap Tire
 ☐ Radioactive Material Licensing ☐ Underground Injection Control

Water Quality

- ☐ Texas Pollutant Discharge Elimination System (TPDES)
- ☐ Texas Land Application Permit (TLAP)
- ☐ State Only Concentrated Animal Feeding Operation (CAFO)
- ☐ Water Treatment Plant Residuals Disposal Permit
- ☐ Class B Biosolids Land Application Permit
- ☐ Domestic Septage Land Application Registration

Water Rights New Permit

- ☐ New Appropriation of Water
- ☐ New or existing reservoir

Amendment to an Existing Water Right

- ☐ Add a New Appropriation of Water
- ☐ Add a New or Existing Reservoir
- ☐ Major Amendment that could affect other water rights or the environment

Section 4. Plain Language Summary

Provide a brief description of planned activities.

Section 5. Community and Demographic Information

Community information can be found using EPA's EJ Screen, U.S. Census Bureau information, or generally available demographic tools.

Information gathered in this section can assist with the determination of whether alternative language notice is necessary. Please provide the following information.

(City)

(County)

(Census Tract)

Please indicate which of these three is the level used for gathering the following information.

☐

City

☐

County

☐

Census Tract

(a) Percent of people over 25 years of age who at least graduated from high school

(b) Per capita income for population near the specified location

(c) Percent of minority population and percent of population by race within the specified location

(d) Percent of Linguistically Isolated Households by language within the specified location

(e) Languages commonly spoken in area by percentage

(f) Community and/or Stakeholder Groups

(g) Historic public interest or involvement

Section 6. Planned Public Outreach Activities

(a) Is this application subject to the public participation requirements of Title 30 Texas Administrative Code (30 TAC) Chapter 39?

☐ Yes ☐ No

(b) If yes, do you intend at this time to provide public outreach other than what is required by rule?

☐ Yes ☐ No

If Yes, please describe.

If you answered "yes" that this application is subject to 30 TAC Chapter 39, answering the remaining questions in Section 6 is not required.

(c) Will you provide notice of this application in alternative languages?

☐ Yes ☐ No

Please refer to Section 5. If more than 5% of the population potentially affected by your application is Limited English Proficient, then you are required to provide notice in the alternative language.

If yes, how will you provide notice in alternative languages?

- ☐ Publish in alternative language newspaper
- ☐ Posted on Commissioner's Integrated Database Website
- ☐ Mailed by TCEQ's Office of the Chief Clerk
- ☐ Other (specify)

(d) Is there an opportunity for some type of public meeting, including after notice?

☐ Yes ☐ No

(e) If a public meeting is held, will a translator be provided if requested?

☐ Yes ☐ No

(f) Hard copies of the application will be available at the following (check all that apply):

- ☐ TCEQ Regional Office ☐ TCEQ Central Office
- ☐ Public Place (specify)

Section 7. Voluntary Submittal

For applicants voluntarily providing this Public Involvement Plan, who are not subject to formal public participation requirements.

Will you provide notice of this application, including notice in alternative languages?

☐ Yes ☐ No

What types of notice will be provided?

- ☐ Publish in alternative language newspaper
- ☐ Posted on Commissioner's Integrated Database Website
- ☐ Mailed by TCEQ's Office of the Chief Clerk
- ☐ Other (specify)

ATTACHMENT D

USGS TOPOGRAPHIC MAP

(7.5 minute)

EFFLUENT DISCHARGE ROUTE

(ADMIN 1.0, SECTION 13)

[illegible]

Diagram illustrating the intersection of a vertical line (MAGNETIC NORTH) and a horizontal line (GRID NORTH). The intersection point is labeled 'MAGNETIC NORTH' and 'GRID NORTH'.

Grid North	Magnetic North	Difference
1000000	1000000	0

MAGNETIC NORTH IS THE SAME AS GRID NORTH

SCALE 1:24 000

0 0.5 1 KILOMETERS 0 1 2 MILES

0 100 200 300 400 500 600 700 800 900 1000 METERS

CONTOUR INTERVAL 5 FEET
NORTH AMERICAN VERTICAL DATUM OF 1988

This map was produced to conform with the
National Geospatial Program US Topographic Standard










Question 1 (1 point)

1	2	3	4
4	5	6	7
5	7	8	9

Cell Content: 5

ROAD CLASSIFICATION

Expressway  Local Through Road 
Secondary Artery  Local Road 
Lump A/D

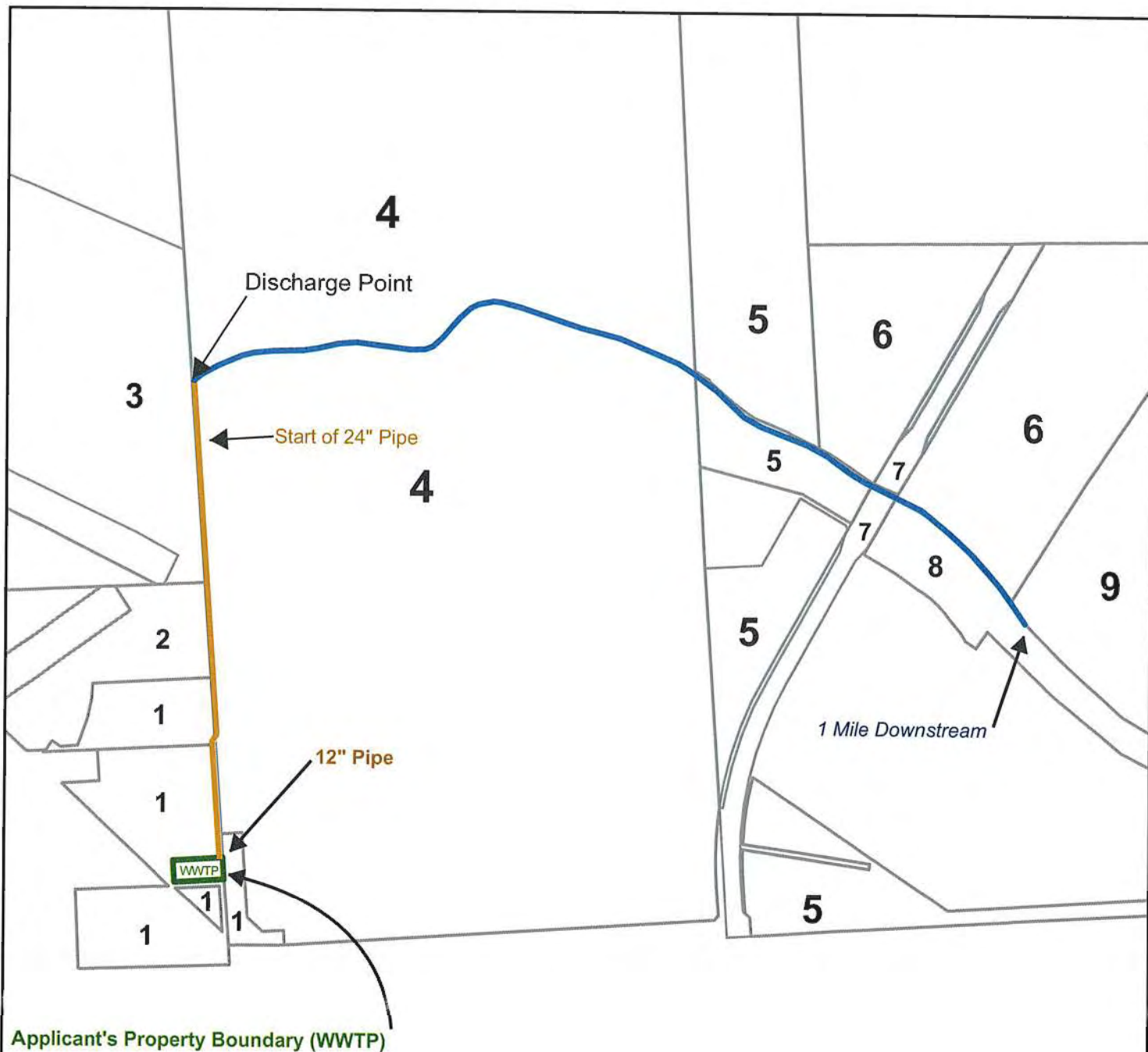
 Interstate Route  US Route  Metro Route

ALMEDA, TX
2022



ATTACHMENT E

AFFECTED LANDOWNERS MAP & LABELS



Adjacent and Downstream Landowners

Quadvest Water and Sewer Utility
Olympia Falls in Fort Bend County

- WWTP
- Discharge Pipe
- 1 Mile Downstream
- Landowner Parcels

0 400 800 Feet

Map by: Suzanne Burt
Date: January 15, 2025
Base: Fort Bend CAD Parcels 2024

1. KB HOME LONE STAR INC
4127 E VAN BUREN ST STE 150
PHOENIX AZ 85008-6934
2. BPM2 FAIRWAY HOLDINGS LP
ATTN: M KEITH BEHRENS
931 PHEASANT VALLEY DR STE 200
MISSOURI CITY TX 77489-1323
3. KHOU TV LP
MAIL STOP 3351
PO BOX 6020
PORTLAND OR 97228-6020
4. TELETOWER INC
C/O KTRK
3310 BISSONNET ST
HOUSTON TX 77005-2195
5. HANNOVER ESTATES LTD
ATTN: AMVEST CORPORATION
1616 VOSS STE 618
HOUSTON TX 77057
6. SUNLAKE LIMITED
1616 VOSS RD STE 618
HOUSTON TX 77057-2620
7. FORT BEND COUNTY
301 JACKSON
RICHMOND TX 77469-3108
8. WOODMERE DEVELOPMENT CO LTD
15915 KATY FWY STE 405
HOUSTON TX 77094-1710
9. HEADWAY ESTATES LTD
1616 VOSS RD STE 618
HOUSTON TX 77057-2620

KB HOME LONE STAR INC
4127 E VAN BUREN ST STE 150
PHOENIX, AZ 85008-6934

BPM2 FAIRWAY HOLDINGS LP
ATTN: M KEITH BEHRENS
931 PHEASANT VALLEY DR STE 200
MISSOURI CITY, TX 77489-1323

KHOU TV LP
MAIL STOP 3351
PO BOX 6020
PORTLAND, OR 97228-6020

TELETOWER INC
C/O KTRK
3310 BISSONNET ST
HOUSTON, TX 77005-2195

HANNOVER ESTATES LTD
ATTN: AMVEST CORPORATION
1616 VOSS STE 618
HOUSTON, TX 77057

SUNLAKE LIMITED
1616 VOSS RD STE 618
HOUSTON, TX 77057-2620

FORT BEND COUNTY
301 JACKSON
RICHMOND, TX 77469-3108

WOODMERE DEVELOPMENT CO
LTD
15915 KATY FWY STE 405
HOUSTON, TX 77094-1710

HEADWAY ESTATES LTD
1616 VOSS RD STE 618
HOUSTON, TX 77057-2620

ATTACHMENT F

ORIGINAL PHOTOS



OUTFALL LOCATION (IMAGE 1 OF 2)





QUADVEST LP
Olympia Falls 2025 Major Discharge Permit Amendment
Outfall Images



DOWNSTREAM OF OUTFALL

ATTACHMENT G

BUFFER ZONE MAP

ATTACHMENT H

SPIF

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

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

TCEQ USE ONLY:

Application type: ☐ Renewal ☐ Major Amendment ☐ Minor Amendment ☐ New

County: _____ Segment Number: _____

Admin Complete Date: _____

Agency Receiving SPIF:

☐ Texas Historical Commission

☐ U.S. Fish and Wildlife

☐ Texas Parks and Wildlife Department

☐ U.S. Army Corps of Engineers

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

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

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

The following applies to all applications:

1. Permittee: Quadvest, LP

Permit No. WQ00 15747001

EPA ID No. TX 0138894

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

410 ½ Lake Olympia Parkway, Fresno, Texas 77545

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

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

First and Last Name: Jacob Gifford

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

Title: Director of Engineering

Mailing Address: 26926 FM 2978

City, State, Zip Code: Magnolia, Texas 77354

Phone No.: 281-305-1120 Ext.: Fax No.:

E-mail Address: jgifford@quadvest.com

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

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

From the facility into a 12" pipe, thence to a 24" pipe; thence to Mustang Bayou, thence to Chocolate Bay in Segment No. 2432 of the Bays and Estuaries.

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

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

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

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

☐ Disturbance of vegetation or wetlands

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

none

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

none

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

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

None

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

none

ATTACHMENT I

APPLICATION CHECK



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): 0.065

2-Hr Peak Flow (MGD): 0.260

Estimated construction start date: Completed 08/10/2023

Estimated waste disposal start date: 1/3/2023

B. Interim II Phase

Design Flow (MGD): 0.130

2-Hr Peak Flow (MGD): 0.520

Estimated construction start date: June 2025

Estimated waste disposal start date: June 2026

C. Final Phase

Design Flow (MGD): 0.250

2-Hr Peak Flow (MGD): 1.000

Estimated construction start date: TBD

Estimated waste disposal start date: TBD

D. Current Operating Phase

Provide the startup date of the facility: PHASE I

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.**

Attachment 1

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)
Attachment 2		

C. Process Flow Diagram

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

Attachment: 3

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

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

- Latitude: N29 33' 17.682"
- Longitude: W95 29' 48.031"

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

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

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

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

Attachment: 4

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

Lake Olympia Parkway Subdivision – Single Family Residences

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

Collection System Information

Collection System Name	Owner Name	Owner Type	Population Served
Olympia Falls	Quadvest	Privately Owned	600ESFC→ 2100
		Choose an item.	
		Choose an item.	
		Choose an item.	

Section 4. Unbuilt Phases (Instructions Page 45)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

<u>The area where the Wastewater Treatment Plant is built has much growth potential for additional development that will need wastewater treatment.</u>

Section 5. Closure Plans (Instructions Page 45)

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.

N/A

Section 6. Permit Specific Requirements (Instructions Page 45)

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

A. Summary transmittal

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

☒ Yes ☐ No

If **yes**, provide the date(s) of approval for each phase: 2/16/2022

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

SSL submitted 1/28/2022

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.

Buffer zone requirements are being met by ownership.

C. Other actions required by the current permit

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

☐ Yes ☒ No

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

Click to enter text.

D. Grit and grease treatment

1. *Acceptance of grit and grease waste*

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

☐ Yes ☒ No

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

2. *Grit and grease processing*

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

Click to enter text.

3. *Grit disposal*

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

☐ Yes ☐ No

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

Describe the method of grit disposal.

Click to enter text.

4. Grease and decanted liquid disposal

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

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

Click to enter text.

E. Stormwater management

1. Applicability

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

☐ Yes ☒ No

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

☐ Yes ☒ No

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

2. MSGP coverage

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

☐ Yes ☒ No

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

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

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

☐ Yes ☒ No

3. Conditional exclusion

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

☐ Yes ☒ No

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

Click to enter text.

4. Existing coverage in individual permit

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

☐ Yes ☒ No

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

Click to enter text.

5. Zero stormwater discharge

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

☐ Yes ☒ No

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

Click to enter text.

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

6. Request for coverage in individual permit

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

☐ Yes ☒ No

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

Click to enter text.

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

F. Discharges to the Lake Houston Watershed

Does the facility discharge in the Lake Houston watershed?

☐ Yes ☒ No

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

Click to enter text

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

1. Acceptance of sludge from other WWTPs

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

☐ Yes ☒ No

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

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

Click to enter text.

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

2. Acceptance of septic waste

Is the facility accepting or will it accept septic waste?

☐ Yes ☒ No

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

☐ Yes ☐ No

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

☐ Yes ☐ No

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

Click to enter text.

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

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

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

☐ Yes ☒ No

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

Click to enter text.

Section 7. Pollutant Analysis of Treated Effluent (Instructions Page 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	3.1	3.1	1	GRAB	3-28-24/1554
Total Suspended Solids, mg/l	6.0	6.0	1	GRAB	3-28-24/1554
Ammonia Nitrogen, mg/l	<0.20	<0.20	1	GRAB	3-28-24/1554
Nitrate Nitrogen, mg/l	36.6	36.6	1	GRAB	3-28-24/1554

Total Kjeldahl Nitrogen, mg/l	<.50	<.50	1	GRAB	3-28-24/1554
Sulfate, mg/l	41.6	41.6	1	GRAB	3-28-24/1554
Chloride, mg/l	234	234	1	GRAB	3-28-24/1554
Total Phosphorus, mg/l	4.00	4.00	1	GRAB	3-28-24/1554
pH, standard units	7.11	7.11	1	GRAB	3-28-24/1554
Dissolved Oxygen*, mg/l	6.95	6.95	1	GRAB	3-28-24/1554
Chlorine Residual, mg/l	3.60	3.60	1	GRAB	3-28-24/1554
<i>E.coli</i> (CFU/100ml) freshwater	<1	<1	1	GRAB	3-28-24/1554
Enterococci (CFU/100ml) saltwater	<1	<1	1	GRAB	3-28-24/1554
Total Dissolved Solids, mg/l	880	880	1	GRAB	3-28-24/1554
Electrical Conductivity, μ mohs/cm, †	1450	1450	1	GRAB	3-28-24/1554
Oil & Grease, mg/l	<5.0	<5.00	1	GRAB	3-28-24/1554
Alkalinity (CaCO ₃)*, mg/l	86.1	86.1	1	GRAB	3-28-24/1554

*TPDES permits only

†TLAP permits only

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

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

Section 8. Facility Operator (Instructions Page 50)

Facility Operator Name: Quadvest, LP

Facility Operator's License Classification and Level: WWOL/C

Facility Operator's License Number: WW0029446

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 \geq 1 MGD

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

B. WWTP's Biosolids Treatment Process

Check all that apply. See instructions for guidance.

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

C. Biosolids Management

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

Biosolids Management

Management Practice	Handler or Preparer Type	Bulk or Bag Container	Amount (dry metric tons)	Pathogen Reduction Options	Vector Attraction Reduction Option
Other	Off-site Third-Party Handler or Preparer	Bulk	0.017 (generated per day by plant)	Class B: PSRP Aerobic Digestion	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): Transported offsite by 3rd party

D. Disposal site

Disposal site name: Mount Houston Road MUD

TCEQ permit or registration number: WQ00111154001

County where disposal site is located: Harris

E. Transportation method

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

Name of the hauler: Magna-Flow

Hauler registration number: 21484

Sludge is transported as a:

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

Section 10. Permit Authorization for Sewage Sludge Disposal
(Instructions Page 53)**A. Beneficial use authorization**

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

☐ Yes ☒ No

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

☐ Yes ☐ No

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

☐ Yes ☐ No

B. Sludge processing authorization

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

Sludge Composting	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Marketing and Distribution of sludge	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Sludge Surface Disposal or Sludge Monofill	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Temporary storage in sludge lagoons	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

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

☐ Yes ☐ No

Section 11. Sewage Sludge Lagoons (Instructions Page 53)

Does this facility include sewage sludge lagoons?

☐ Yes ☒ No

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

A. Location information

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

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

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

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

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

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

[Click to enter text.](#)

B. Temporary storage information

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Provide the following information:

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

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

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

C. Liner information

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

☐ Yes ☐ No

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

Click to enter text.

D. Site development plan

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

Click to enter text.

Attach the following documents to the application.

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

E. Groundwater monitoring

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

☐ Yes ☐ No

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

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

Section 12. Authorizations/Compliance/Enforcement (Instructions)

A. Additional authorizations

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

☐ Yes ☒ No

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

Click to enter text.

B. Permittee enforcement status

Is the permittee currently under enforcement for this facility?

☐ Yes ☒ No

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

☐ Yes ☒ No

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

Click to enter text.

Section 13. RCRA/CERCLA Wastes (Instructions Page 55)**A. RCRA hazardous wastes**

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

☐ Yes ☒ No

B. Remediation activity wastewater

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

☐ Yes ☒ No

C. Details about wastes received

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

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

Section 14. Laboratory Accreditation (Instructions Page 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:
 - periodically inspected by the TCEQ; or
 - located in another state and is accredited or inspected by that state; or
 - performing work for another company with a unit located in the same site; or
 - performing pro bono work for a governmental agency or charitable organization.
- The laboratory is accredited under federal law.
- The data are needed for emergency-response activities, and a laboratory accredited under the Texas Laboratory Accreditation Program is not available.
- The laboratory supplies data for which the TCEQ does not offer accreditation.

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

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

CERTIFICATION:

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

Printed Name: Jacob Gifford

Title: Director of Engineering

Signature: 

Date: 1/17/2025

DOMESTIC WASTEWATER PERMIT APPLICATION

TECHNICAL REPORT 1.1

The following information is required for new and amendment major applications.

Section 1. Justification for Permit (Instructions Page 57)

A. Justification of permit need

Provide a detailed discussion regarding the need for any phase(s) not currently permitted. Failure to provide sufficient justification may result in the Executive Director recommending denial of the proposed phase(s) or permit.

This is a renewal with a major amendment to correct the discharge route. The original permit, prepared by a different firm, showed the discharge route to be to a detention pond then a man-made ditch and ultimately to Mustang Bayou. During construction of the detention pond, it was decided that the effluent would be conveyed from the WWTP via pipe to Mustang Bayou.

B. Regionalization of facilities

For additional guidance, please review [TCEQ's Regionalization Policy for Wastewater Treatment](#)¹.

Provide the following information concerning the potential for regionalization of domestic wastewater treatment facilities:

1. Municipally incorporated areas

If the applicant is a city, then Item 1 is not applicable. Proceed to Item 2 Utility CCN areas.

Is any portion of the proposed service area located in an incorporated city?

☐ Yes ☒ No ☐ Not Applicable

If yes, within the city limits of: [Click to enter text.](#)

If yes, attach correspondence from the city.

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

If consent to provide service is available from the city, attach a justification for the proposed facility and a cost analysis of expenditures that includes the cost of connecting to the city versus the cost of the proposed facility or expansion attached.

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

2. Utility CCN areas

Is any portion of the proposed service area located inside another utility's CCN area?

☐ Yes ☒ No

¹ <https://www.tceq.texas.gov/permitting/wastewater/tceq-regionalization-for-wastewater>

If **yes**, attach a justification for the proposed facility and a cost analysis of expenditures that includes the cost of connecting to the CCN facilities versus the cost of the proposed facility or expansion.

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

3. *Nearby WWTPs or collection systems*

Are there any domestic permitted wastewater treatment facilities or collection systems located within a three-mile radius of the proposed facility?

☐ Yes ☐ No

If **yes**, attach a list of these facilities and collection systems that includes each permittee's name and permit number, and an area map showing the location of these facilities and collection systems.

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

If **yes**, attach proof of mailing a request for service to each facility and collection system, the letters requesting service, and correspondence from each facility and collection system.

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

If the facility or collection system agrees to provide service, attach a justification for the proposed facility and a cost analysis of expenditures that includes the cost of connecting to the facility or collection system versus the cost of the proposed facility or expansion.

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

Section 2. Proposed Organic Loading (Instructions Page 59)

Is this facility in operation?

☒ Yes ☐ No

If **no**, proceed to Item B, Proposed Organic Loading.

If **yes**, provide organic loading information in Item A, Current Organic Loading

A. Current organic loading

Facility Design Flow (flow being requested in application): 250,000

Average Influent Organic Strength or BOD₅ Concentration in mg/l: 300

Average Influent Loading (lbs/day = total average flow X average BOD₅ conc. X 8.34): 605

Provide the source of the average organic strength or BOD₅ concentration.

[Click to enter text.](#)

B. Proposed organic loading

This table must be completed if this application is for a facility that is not in operation or if this application is to request an increased flow that will impact organic loading.

Table 1.1(1) – Design Organic Loading

Source	Total Average Flow (MGD)	Influent BOD5 Concentration (mg/l)
Municipality		
Subdivision		
Trailer park – transient		
Mobile home park		
School with cafeteria and showers		
School with cafeteria, no showers		
Recreational park, overnight use		
Recreational park, day use		
Office building or factory		
Motel		
Restaurant		
Hospital		
Nursing home		
Other		
TOTAL FLOW from all sources		
AVERAGE BOD ₅ from all sources		

Section 3. Proposed Effluent Quality and Disinfection (Instructions Page 59)

A. Existing/Interim I Phase Design Effluent Quality

Biochemical Oxygen Demand (5-day), mg/l: 10

Total Suspended Solids, mg/l: 15

Ammonia Nitrogen, mg/l: 3

Total Phosphorus, mg/l: Click to enter text.

Dissolved Oxygen, mg/l: 5

Other: Click to enter text.

B. Interim II Phase Design Effluent Quality

Biochemical Oxygen Demand (5-day), mg/l: 10

Total Suspended Solids, mg/l: 15

Ammonia Nitrogen, mg/l: 3

Total Phosphorus, mg/l: Click to enter text.

Dissolved Oxygen, mg/l: 5

Other: Click to enter text.

C. Final Phase Design Effluent Quality

Biochemical Oxygen Demand (5-day), mg/l: 10

Total Suspended Solids, mg/l: 15

Ammonia Nitrogen, mg/l: 3

Total Phosphorus, mg/l: Click to enter text.

Dissolved Oxygen, mg/l: 5

Other: Click to enter text.

D. Disinfection Method

Identify the proposed method of disinfection.

☒ Chlorine: 1 mg/l after 20 minutes detention time at peak flow

Dechlorination process: Click to enter text.

☐ Ultraviolet Light: Click to enter text. seconds contact time at peak flow

☐ Other: Click to enter text.

Section 4. Design Calculations (Instructions Page 59)

Attach design calculations and plant features for each proposed phase. Example 4 of the instructions includes sample design calculations and plant features.

Attachment: 5

Section 5. Facility Site (Instructions Page 60)

A. 100-year floodplain

Will the proposed facilities be located above the 100-year frequency flood level?

☒ Yes ☐ No

If **no**, describe measures used to protect the facility during a flood event. Include a site map showing the location of the treatment plant within the 100-year frequency flood level. If applicable, provide the size and types of protective structures.

Click to enter text.

Provide the source(s) used to determine 100-year frequency flood plain.

FEMA Maps

For a new or expansion of a facility, will a wetland or part of a wetland be filled?

☐ Yes ☒ No

If **yes**, has the applicant applied for a US Corps of Engineers 404 Dredge and Fill Permit?

☐ Yes ☐ No

If **yes**, provide the permit number: Click to enter text

If **no**, provide the approximate date you anticipate submitting your application to the Corps: Click to enter text

B. Wind rose

Attach a wind rose: 6

Section 6. Permit Authorization for Sewage Sludge Disposal (Instructions Page 60)

A. Beneficial use authorization

Are you requesting to include authorization to land apply sewage sludge for beneficial use on property located adjacent to the wastewater treatment facility under the wastewater permit?

☐ Yes ☒ No

If **yes**, attach the completed **Application for Permit for Beneficial Land Use of Sewage Sludge (TCEQ Form No. 10451)**: Click to enter text

B. Sludge processing authorization

Identify the sludge processing, storage or disposal options that will be conducted at the wastewater treatment facility:

- ☐ Sludge Composting
- ☐ Marketing and Distribution of sludge
- ☐ Sludge Surface Disposal or Sludge Monofill

If **any of the above**, sludge options are selected, attach the completed **Domestic Wastewater Permit Application: Sewage Sludge Technical Report (TCEQ Form No. 10056)**: Click to enter text

Section 7. Sewage Sludge Solids Management Plan (Instructions Page 61)

Attach a solids management plan to the application.

Attachment: 7

The sewage sludge solids management plan must contain the following information:

- Treatment units and processes dimensions and capacities

- Solids generated at 100, 75, 50, and 25 percent of design flow
- Mixed liquor suspended solids operating range at design and projected actual flow
- Quantity of solids to be removed and a schedule for solids removal
- Identification and ownership of the ultimate sludge disposal site
- For facultative lagoons, design life calculations, monitoring well locations and depths, and the ultimate disposal method for the sludge from the facultative lagoon

An example of a sewage sludge solids management plan has been included as Example 5 of the instructions.

DOMESTIC WASTEWATER PERMIT APPLICATION

WORKSHEET 2.0: RECEIVING WATERS

The following information is required for all TPDES permit applications.

Section 1. Domestic Drinking Water Supply (Instructions Page 64)

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

☐ Yes ☒ No

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

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

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

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

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

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

Section 4. Description of Immediate Receiving Waters (Instructions Page 65)

Name of the immediate receiving waters: [Click to enter text](#)

A. Receiving water type

Identify the appropriate description of the receiving waters.

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

Surface area, in acres: [Click to enter text](#)

Average depth of the entire water body, in feet: [Click to enter text](#)

Average depth of water body within a 500-foot radius of discharge point, in feet:
[Click to enter text](#)

- ☒ Man-made Channel or Ditch
- ☐ Open Bay
- ☐ Tidal Stream, Bayou, or Marsh
- ☐ Other, specify: [Click to enter text](#)

B. Flow characteristics

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

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

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

- ☐ USGS flow records
- ☒ Historical observation by adjacent landowners
- ☐ Personal observation
- ☒ Other, specify: Man Made Detention Pond and Drainage Ditch

C. Downstream perennial confluences

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

Mustang Bayou

D. Downstream characteristics

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



Yes



No

If yes, discuss how.

Mustang Bayou

E. Normal dry weather characteristics

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

Low Flow

Date and time of observation: 4/26/24

Was the water body influenced by stormwater runoff during observations?



Yes



No

Section 5. General Characteristics of the Waterbody (Instructions Page 66)

A. Upstream influences

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



Oil field activities



Urban runoff



Upstream discharges



Agricultural runoff



Septic tanks



Other(s), specify: [Click to enter text](#)

B. Waterbody uses

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

- | | |
|--|--|
| <input type="checkbox"/> Livestock watering | <input type="checkbox"/> Contact recreation |
| <input type="checkbox"/> Irrigation withdrawal | <input type="checkbox"/> Non-contact recreation |
| <input type="checkbox"/> Fishing | <input type="checkbox"/> Navigation |
| <input type="checkbox"/> Domestic water supply | <input type="checkbox"/> Industrial water supply |
| <input type="checkbox"/> Park activities | <input checked="" type="checkbox"/> Other(s), specify: <u>Drainage</u> |

C. Waterbody aesthetics

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

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

DOMESTIC WASTEWATER PERMIT APPLICATION

WORKSHEET 2.1: STREAM PHYSICAL CHARACTERISTICS

Required for new applications, major facilities, and applications adding an outfall.

Worksheet 2.1 is not required for discharges to intermittent streams or discharges directly to (or within 300 feet of) a classified segment.

Section 1. General Information (Instructions Page 66)

Date of study: [Click to enter text.](#) Time of study: [Click to enter text.](#)

Stream name: [Click to enter text.](#)

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

Type of stream upstream of existing discharge or downstream of proposed discharge (check one).

☐ Perennial ☐ Intermittent with perennial pools

Section 2. Data Collection (Instructions Page 66)

Number of stream bends that are well defined: [Click to enter text.](#)

Number of stream bends that are moderately defined: [Click to enter text.](#)

Number of stream bends that are poorly defined: [Click to enter text.](#)

Number of riffles: [Click to enter text.](#)

Evidence of flow fluctuations (check one):

☐ Minor ☐ moderate ☐ severe

Indicate the observed stream uses and if there is evidence of flow fluctuations or channel obstruction/modification.

[Click to enter text.](#)

Stream transects

In the table below, provide the following information for each transect downstream of the existing or proposed discharges. Use a separate row for each transect.

Table 2.1(1) - Stream Transect Records

Stream type at transect Select riffle, run, glide, or pool. See Instructions, Definitions section.	Transect location	Water surface width (ft)	Stream depths (ft) at 4 to 10 points along each transect from the channel bed to the water surface. Separate the measurements with commas.
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.			

Section 3. Summarize Measurements (Instructions Page 66)

Streambed slope of entire reach, from USGS map in feet/feet: [Click to enter text.](#)

Approximate drainage area above the most downstream transect (from USGS map or county highway map, in square miles): [Click to enter text](#)

Length of stream evaluated, in feet: [Click to enter text.](#)

Number of lateral transects made: [Click to enter text.](#)

Average stream width, in feet: [Click to enter text.](#)

Average stream depth, in feet: [Click to enter text.](#)

Average stream velocity, in feet/second: [Click to enter text.](#)

Instantaneous stream flow, in cubic feet/second: [Click to enter text.](#)

Indicate flow measurement method (type of meter, floating chip timed over a fixed distance, etc.): [Click to enter text.](#)

Size of pools (large, small, moderate, none): [Click to enter text.](#)

Maximum pool depth, in feet: [Click to enter text.](#)

TECHNICAL REPORTS 1.0, 1.1 AND 2.0

ATTACHMENTS

- 1.Current Operating Phase
- 2.Treatment Units
- 3.Process Flow Diagram
- 4.Site Drawings
- 5.Design Calculations
- 6.Wind Rose

ATTACHMENT 1

Current Operating Phase

TECHNICAL DESIGN REPORT

FOR

Lake Olympia Parkway WWTP

1. **PURPOSE** The purpose of this report is to present the basis of design and summary of unit sizing and hydraulic calculations for the Sewage Treatment Plant.
2. **DESCRIPTION OF PROPERTY** The project under development is a residential community that will include some light commercial centers.
3. **POPULATION SERVED** The location of the proposed facility is shown on Sheet One of the Plans. The population flow is based on 100 gallons per capita per day.
4. **INFLUENT QUALITY CHARACTERISTICS** The raw sewage quality characteristics used for design are estimates based on past experience and on State Design Criteria and are as follows:

<u>PARAMETER</u>	<u>CONCENTRATION - MG/L</u>	<u>PER CAPITA CONTRIBUTION - LB/DAY</u>
BOD ₅	300	0.1668
TSS	300	0.2000

5. **INFLUENT FLOW CHARACTERISTICS** The hydraulic design of the plant must be conservative to insure that the plant will operate under the most extreme conditions anticipated. Future enlargement to the plant will be based on actual Influent flow data. The plant process and hydraulic design for this phase are based on the following flows:

First Phase		
Average Daily Flow (Qav)	65,000 GPD	45 GPM
Peak 2-Hr. Flow (Qpk) 4	200,000 GPD	139 GPM
Second Phase		
Average Daily Flow (Qav)	130,000 GPD	90 GPM
Peak 2-Hr. Flow (Qpk) 4	520,000 GPD	361 GPM
Third Phase		
Average Daily Flow (Qav)	250,000 GPD	174 GPM
Peak 2-Hr. Flow (Qpk) 4	1,000,000 GPD	694 GPM

Refer to Attachment "A" - Process Design Calculations, Hydraulic Profile Calculations, Process Flow Diagrams, and Plant Discharge relationship for the 100 year flood.

6. **PROCESS DESIGN** The Sewage Treatment Plant has been designed to produce an effluent

In compliance with permitted parameters of: $BOD_5 = 10 \text{ mg/l}$, $TSS = 15 \text{ mg/l}$, and Chlorine Residual $= 1 \text{ mg/l}$ after 20 minutes contact, $NH_3 = 3 \text{ mg/l}$ and $DO = 5 \text{ mg/l}$.

In order to achieve the required removal efficiencies, and, considering the hydraulic conditions probable, the complete mix modifications of the activated sludge process was selected. The effluent will be disinfected with chlorine prior to discharge into the receiving stream. Waste activated sludge will be aerobically digested then disposed of utilizing a contract hauler to a licensed Disposal site.

Compressed air will be supplied to the process units by multiple blowers.

7. **FLOOD HAZARD ANALYSIS** The 100 Year Flood Elevation is _____ feet and is confined to the flood control and drainage, which has a bank elevation of _____ feet. The plant is capable of discharging at peak flow against the 100 year flood elevation.

8. **SLUDGE DISPOSAL**

Digester.....	Aerobic
Transportation.....	Contract Hauler
Final Disposition	To be Determined by Contract Hauler

ATTACHMENT 2

TREATMENT UNITS

Facility Dimensions & Facility Features

The facility will employ the contact stabilization variation of the activated sludge process. From the lift station the wastewater passes through an primary clarifier (bar screen) to remove large solids and into an a contact aeration basin where it mixes with the mixed liquor from the reaeration basin and then into the clarifier where the clear supernatant overflows the weirs into a disinfecting chamber and then to outfall. Sludge from the clarifier is returned to the reaeration basin or wasted to the aerobic digester.

Phase I

<u>Unit</u>	<u>Length</u>	<u>Width</u>	<u>Height</u>
Clarifier		27' Diameter	12'
Chlorine Contact	12'	12'	10'
Aeration 1@	52'	12'	12'
Digester 1@	40'	12'	12'

Phase II

<u>Unit</u>	<u>Length</u>	<u>Width</u>	<u>Height</u>
Clarifier		27' Diameter	12'
Chlorine Contact	12'	12'	10'
Aeration 2@	52'	12'	12'
Digester 2@	40'	12'	12'

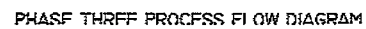
Phase III

<u>Unit</u>	<u>Length</u>	<u>Width</u>	<u>Height</u>
Clarifier 2@		27' Diameter	12'
Chlorine Contact			
2@	12'	12'	10'
Aeration 4@	52'	12'	12'
Digester 4@	40'	12'	12'

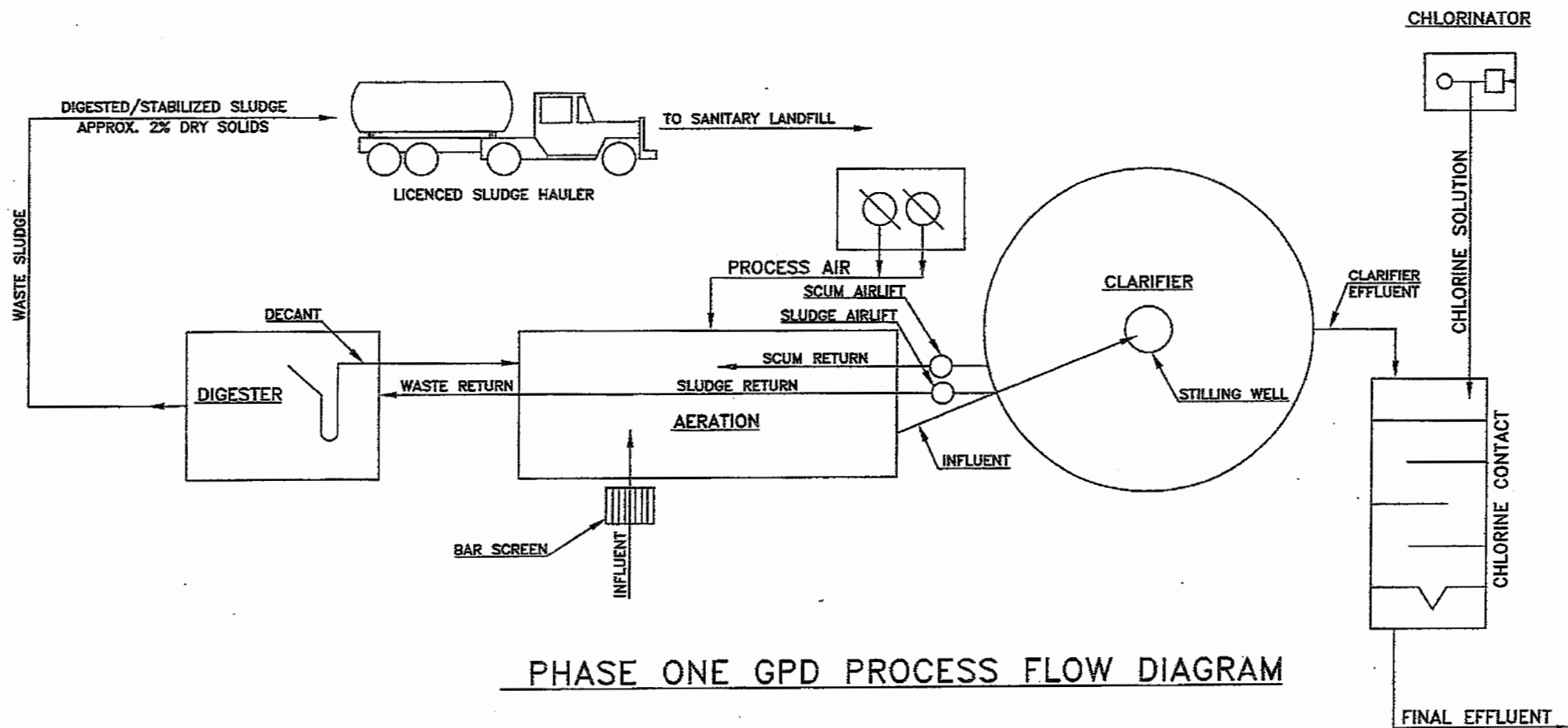
- An Autodialer will be installed to detect power outages; equipment failure (i.e. clarifier drive and blowers). The Autodialer will incorporate high lever sensors on the wastewater treatment plant units as well as the effluent storage facility. Once a problem is detected the Autodialer will call preprogrammed numbers to notify the operator of the situation. Once this notification is answered, the operation company will dispatch an operator to the facility.
- Electricity will be served to the site by Center Point. This is a grid system served by multiple generating stations. Extended power outages are not anticipated, however a onsite generator will be in service. For short power outages the sewage will be contained in the collection system. Influent is from a triplex lift station which will not function during a general power outage. The plant features one digesters, chlorinator, and stand-by blowers. The collection system will be new, and minimum infiltration is anticipated. The plant is to be maintained and operated by personnel licensed by the State of Texas.
- The plant is designed to be maintained without bypassing. Replacement or repair of the interior coating system is the only maintenance item that would necessitate bypassing and the epoxy system should last 25-30 years.
- An intruder resistant fence will be placed around the facility.

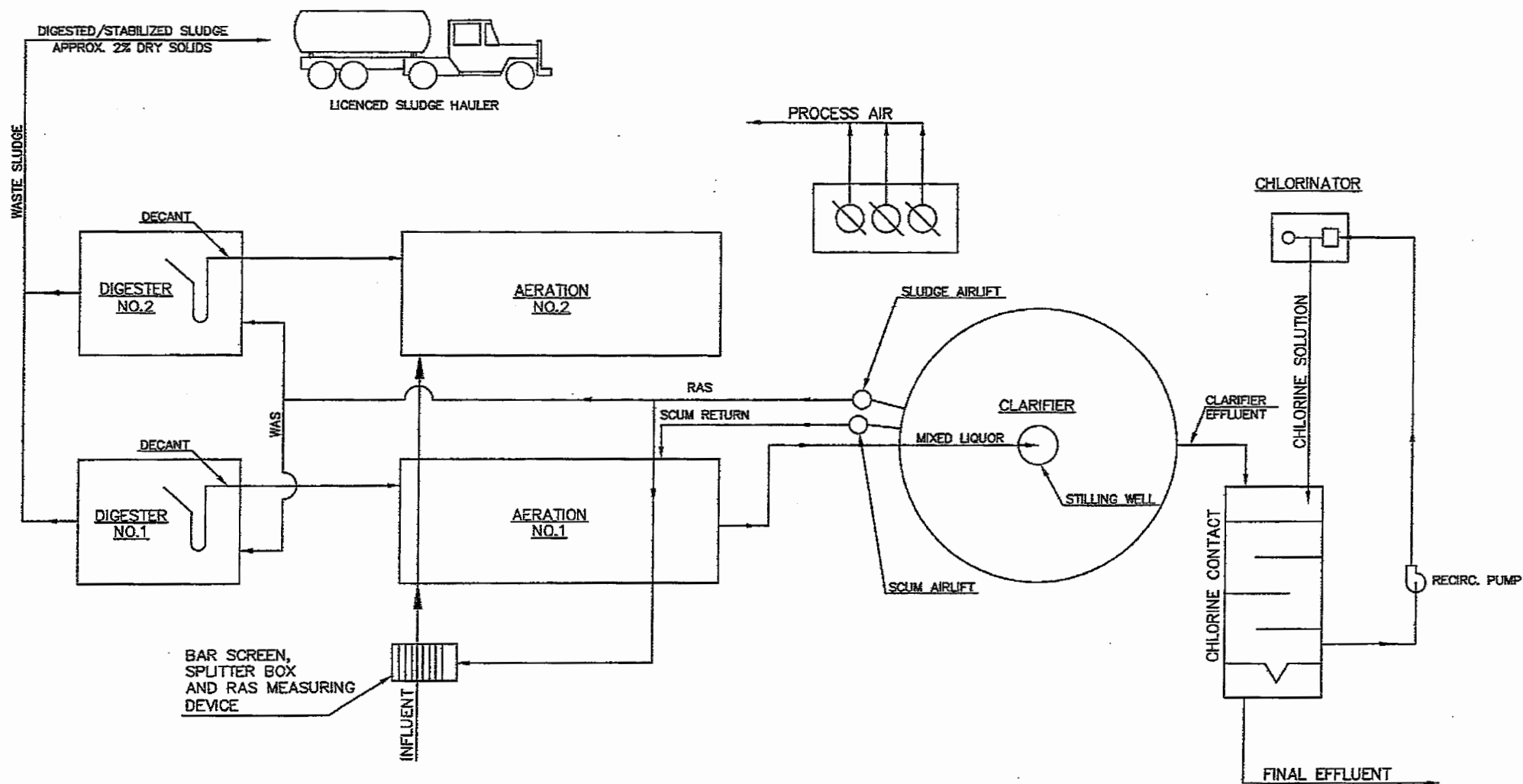
ATTACHMENT 3

FLOW DIAGRAMS



PHASE THREE PROCESS FLOW DIAGRAM





PHASE TWO PROCESS FLOW DIAGRAM

ATTACHMENT 4

SITE DRAWING



REV #	DATE	DESCRIPTION



28018 FM 2978
MAGNOLIA, TX 77354

SURVEYED BY:



STATE OF TEXAS
MAIN L. LIPSCOMB
2010
PROFESSIONAL ENGINEER

PROJ. NO.

OLYMPIA FALLS WASTEWATER OVERALL PLAN

DRAWN BY: MLU	DRAWING SCALE:
DESIGNED BY: MLU	JOB NO.
CHECKED BY: MLU	SHEET NO. 03 OF 10
APPROVED BY: MLU	

ATTACHMENT 5

DESIGN CALCULATIONS

TECHNICAL DESIGN REPORT

FOR

Lake Olympia Parkway WWTP

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Digester..... Aerobic
Transportation..... Contract Hauler
Final Disposition To be Determined by Contract Hauler

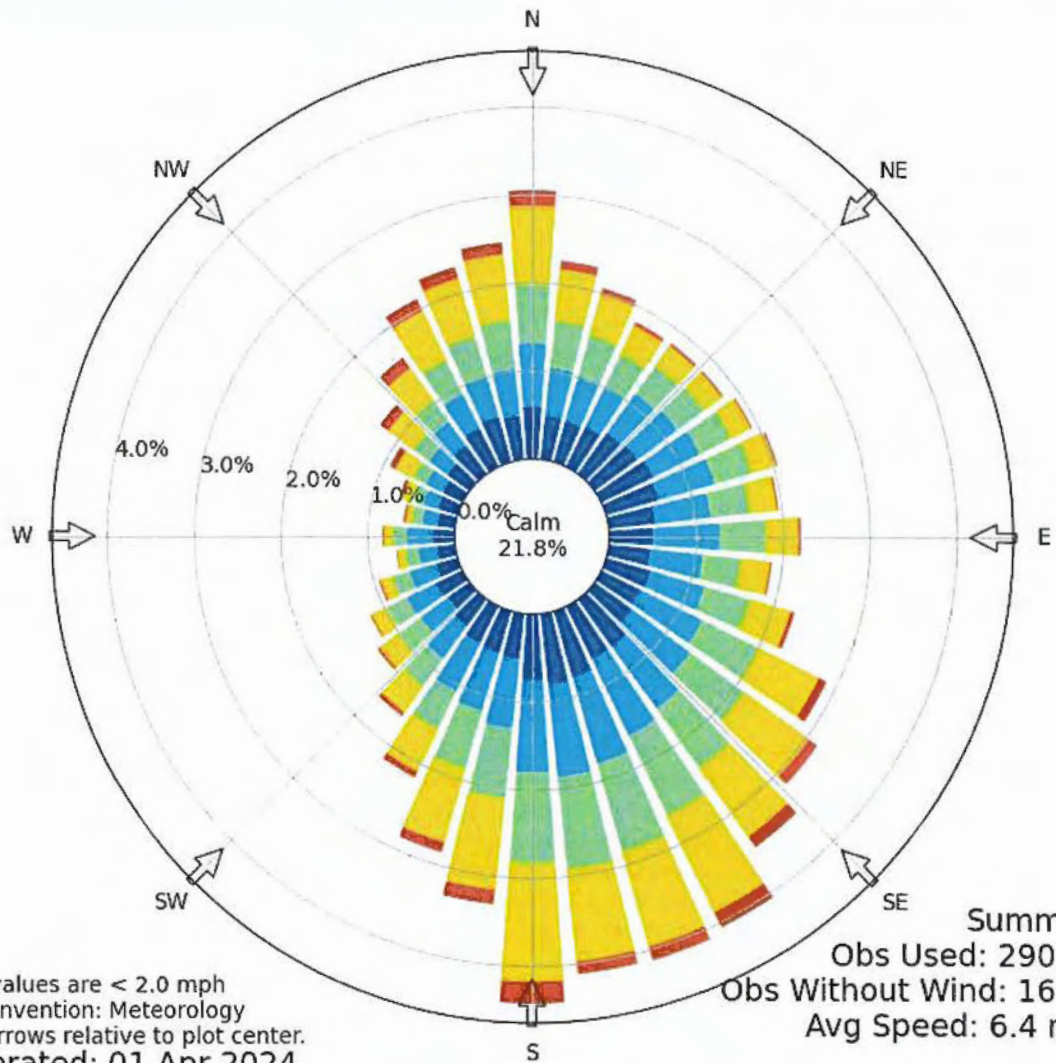
ATTACHMENT 6

WIND ROSE



Windrose Plot for [DWH] HOUSTON/D.W. HOOKS

Obs Between: 16 Sep 1986 10:00 AM - 01 Apr 2024 03:53 AM America/Chicago



Calm values are < 2.0 mph
Bar Convention: Meteorology
Flow arrows relative to plot center.
Generated: 01 Apr 2024

Wind Speed [mph]

2 - 4.9 5 - 6.9 7 - 9.9 10 - 14.9 15 - 19.9 20+