



Administrative Package Cover Page

This file contains the following documents:

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



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

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

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

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

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

Union Water Supply Corporation (CN 600703599) operates the Union Water Supply Wastewater Treatment Plant (RN102915501), an activated sludge plant. The facility is located approximately 2.2 miles southeast of the intersection of Farm-to-Market Road 1430 and U.S. Highway 83, in the community of Garciasville, Starr County, Texas 78547.

Union Water Supply Corporation has applied to the Texas Commission on Environmental Quality (TCEQ) to renew the permit that authorizes the discharge of treated domestic wastewater effluent at a daily average flow not to exceed 0.774 million gallon per day (MGD) via Outfall 001.

Discharges from the facility are expected to contain coliform bacteria, total suspended solids, ammonia nitrogen, nitrate nitrogen, total Kjeldahl nitrogen, sulfate, chloride, total phosphorous, total dissolved solids, oil and grease. Domestic wastewater is treated by an activated sludge process plant and the treatment units include a bar screen, aeration basins, clarifiers, and a chlorine contact chamber.

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

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

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

La Corporación de Abastecimiento de Agua Unión (CN 600703599) opera La Planta para el Tratamiento de Aguas Residuales Unión Water Supply (RN102915501), un planta de lodos activados. La planta está ubicada aproximadamente 2.2 millas al sureste de la intersección del Camino de Granja a Mercado 1430 y la Carretera de Los Estados Unidos 83, en la comunidad de Garciasville, en el Condado de Starr, Texas 78547.

La Corporación de Abastecimiento de Agua Unión ha solicitado a la Comisión de Calidad Ambiental del Estado de Texas (TCEQ) para renovar el permiso que autoriza la descarga de aguas residuales tratadas en un volumen que no sobrepasa un flujo promedio diario de 774,000 galones por día por medio del Desagüe 001.

Se espera que las descargas de 1a planta contengan bacterias coliformes, sólidos suspendidos totales, nitrógeno amoniacal, nitrógeno nitrato, nitrógeno total Kjeldahl, sulfato, cloruro, fósforo, sólidos disueltos totales, aceites y grasas. Las aguas residuales serán tratadas por una planta que utiliza el sistema de lodos activados y las unidades de tratamiento incluyen una malla, tanques de aireación, clarificadores y la cámara de contacto de cloro.

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY



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

PERMIT NO. WQ0015867001

APPLICATION. Union Water Supply Corporation, P.O. Box 31, Garciasville, Texas 78547, has applied to the Texas Commission on Environmental Quality (TCEQ) to renew Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0015867001 (EPA I.D. No. TX0140163) to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 774,000 gallons per day. The domestic wastewater treatment facility is located approximately 2.2 Miles southeast of the intersection of Farm-to-Market Road 1430 and U.S. Highway 83, in Starr County, Texas 78547. The discharge route is from the plant site to a county drainage ditch; thence to Santo Domingo Banco No. 55; thence to Rio Grande Below Falcon Reservoir. TCEQ received this application on March 31, 2025. The permit application will be available for viewing and copying at U.S. Post Office, Main Lobby, 6648 FM 1430, Garciasville, in Starr 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=-98.7156,26.320655&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.**

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

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

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

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

Further information may also be obtained from Union Water Supply Corporation at the address stated above or by calling Mr. Jorge Bazan, General Manager, at 956-487-3744.

Issuance Date: April 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 RENOVACION

PERMISO NO. WQ0015867001

SOLICITUD. La Corporación de Abastecimiento de Agua Unión, Apartado Postal Número 31, Garciasville, Texas 78547 ha solicitado a la Comisión de Calidad Ambiental del Estado de Texas (TCEQ) para renovar el Permiso No. WQ0015867001 (EPA I.D. No. TX 0140163) 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 774,000 galones por día. La planta está ubicada aproximadamente 2.2 millas al sureste de la intersección del Camino de Granja a Mercado 1430 y la Carretera de Los Estados Unidos 83 en el Condado de Starr, Texas 78547. La ruta de descarga es del sitio de la planta a una acequia del condado; de ahí al Banco Santo Domingo Número 55; de ahí al Río Grande abajo de la Presa Falcón en el Segmento No. 2032 de la cuenca del Rio Grande. La TCEQ recibió esta solicitud el 31 de Marzo del 2025. La solicitud para el permiso estará disponible para leerla y copiarla en la Corporación de Abastecimiento de Agua Unión, Camino de Granja a Mercado 1430 Número 5992, Garciasville, 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=-98.7156,26.320655&level=1>

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. Si ciertos criterios se cumplen, la TCEQ puede actuar sobre una solicitud para renovar un permiso sin proveer una oportunidad de

una audiencia administrativa de lo contencioso.

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 del solicitante indicado por nombre y número del permiso específico y/o (2) la lista de correo de todas las solicitudes en un condado específico. Si desea que se agrega su nombre en una de las listas designe cual lista(s) y envíe por correo su pedido a la Oficina del Secretario Principal de la TCEQ.

INFORMACIÓN DISPONIBLE EN LÍNEA. Para detalles sobre el estado de la solicitud, favor de visitar la Base de Datos Integrada de los Comisionados en www.tceq.texas.gov/goto/cid. Para buscar en la base de datos, utilizar el número de permiso para esta solicitud que aparece en la parte superior de este aviso.

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 de la Corporación de Abastecimiento de Agua Unión a la dirección indicada arriba o llamando a Sr. Jorge Bazán, Gerente General, al teléfono 956-487-3744.

Fecha de emisión: *21 de abril de 2025*



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the application.

APPLICANT NAME: Union Water Supply Corporation

PERMIT NUMBER (If new, leave blank): WQ0015867001

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 checked="" type="checkbox"/>	<input type="checkbox"/>
Administrative Report 1.1	<input type="checkbox"/>	<input checked="" 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"/>
Summary of Application (PLS)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Flow Diagram	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Public Involvement Plan Form	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Site Drawing	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Technical Report 1.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Original Photographs	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Technical Report 1.1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Design Calculations	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Worksheet 2.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Solids Management Plan	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Worksheet 2.1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Water Balance	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Worksheet 3.0	<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 checked="" type="checkbox"/>	<input 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 type="checkbox"/>	\$1,215.00 <input type="checkbox"/>
≥0.50 but <1.0 MGD	\$1,650.00 <input type="checkbox"/>	\$1,615.00 <input checked="" 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: 6201

Check/Money Order Amount: \$1615.00

Name Printed on Check: Texas Commission on Environmental Quality

EPAY Voucher Number:

Copy of Payment Voucher enclosed? Yes

Section 2. Type of Application (Instructions Page 26)

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

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

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

- Active
- Inactive

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

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

d. Check the box next to the appropriate application type

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

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

f. For existing permits:

Permit Number: WQ00 15867001

EPA I.D. (TPDES only): TX 0140163

Expiration Date: 1/25/2026

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

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

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

Union Water Supply Corporation

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

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

CN: 600703599

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: Mrs.

Last Name, First Name: Mendoza-De La Torre, Marlen

Title: President

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

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

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

[Click to enter text.](#)

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

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

CN: Click to enter text.

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

Prefix: Click to enter text.

Last Name, First Name: Click to enter text.

Title: Click to enter text.

Credential: Click to enter text.

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

C. Core Data Form

Complete the Core Data Form for each customer and include as an attachment. If the customer type selected on the Core Data Form is **Individual**, complete **Attachment 1** of Administrative Report 1.0. **Attachment:** [Form 10400](#)

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: Bazan, Jorge

Title: General Manager Credential: Click to enter text.

Organization Name: Union Water Supply Corporation

Mailing Address: P.O. Box 31 City, State, Zip Code: Garciasville, TX 78547

Phone No.: (956) 487-3744 E-mail Address: unionwatersupply@yahoo.com

Check one or both: Administrative Contact Technical Contact

B. Prefix: Mr. Last Name, First Name: Perez, Samuel

Title: Wastewater Plant Supervisor Credential: Class C Wastewater License

Organization Name: Union Water Supply Corporation

Mailing Address: P.O. Box 31 City, State, Zip Code: Garciasville, TX 78547

Phone No.: (956) 487-3744 E-mail Address: unionwatersupply@yahoo.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: Bazan, Jorge

Title: General Manager Credential: Click to enter text.

Organization Name: Union Water Supply Corporation

Mailing Address: P.O. Box 31 City, State, Zip Code: Garciasville, TX 78547

Phone No.: (956) 487-3744 E-mail Address: unionwatersupply@yahoo.com

B. Prefix: Mr. Last Name, First Name: Perez, Samuel
Title: Wastewater Plant Supervisor Credential: Class C Wastewater License
Organization Name: Union Water Supply Corporation
Mailing Address: P.O. Box 31 City, State, Zip Code: Garciasville, TX 78547
Phone No.: (956) 487-3744 E-mail Address: unionwatersupply@yahoo.com

Section 6. Billing Contact Information (Instructions Page 27)

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

Prefix: Ms. Last Name, First Name: Barrera, Teresa
Title: AP Specialist Credential: Acountant
Organization Name: Union Water Supply Corporation
Mailing Address: P.O. Box City, State, Zip Code: Garciasville 78547
Phone No.: (956) 487-3744 E-mail Address: unionwatersupply15@yahoo.com

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

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

Prefix: Mr. Last Name, First Name: Peres, Samuel
Title: Wastewater Plant Supervisor Credential: Class C Wastewater License
Organization Name: Union Water Supply Corporation
Mailing Address: P.O. Box 31 City, State, Zip Code: Garciasville, TX 78547
Phone No.: (956) 487-3744 E-mail Address: unionwatersupply@yahoo.com

Section 8. Public Notice Information (Instructions Page 27)

A. Individual Publishing the Notices

Prefix: Mr. Last Name, First Name: Bazan, Jorge
Title: General Manager Credential:
Organization Name: Union Water Supply Corporation
Mailing Address: P.O. Box 31 City, State, Zip Code: Garciasville, TX 78547
Phone No.: (956) 487-3744 E-mail Address: unionwatersupply@yahoo.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: Mr.

Last Name, First Name: Bazan, Jorge

Title: General Manager

Credential:

Organization Name: Union Water Supply Corporation

Mailing Address: P.O. Box 31

City, State, Zip Code: Garciasville, TX 78547

Phone No.: (956) 487-3744

E-mail Address: unionwatersupply@yahoo.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: U.S. Post Office

Location within the building: Main Lobby

Physical Address of Building: 6648 FM 1430

City: Garciasville

County: Starr

Contact (Last Name, First Name): Maldonado, Jr., Agustin

Phone No.: (956) 487-3575 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. Summary of Application in Plain Language Template

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

Attachment: [Form 20972](#)

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 102915501

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

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

Union Water Supply WWTP

C. Owner of treatment facility: Union Water Supply Corporation

Ownership of Facility: Public Private Both Federal

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

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

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

Organization Name: Union Water Supply Corporation

Mailing Address: P.O. Box 31 City, State, Zip Code: Garciasville, TX 78547

Phone No.: (956) 487-3744 E-mail Address: unionwatersupply@yahoo.com

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:

[Click to enter text.](#)

City nearest the outfall(s): Garciasville

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

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: [Click to enter text.](#)

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: [Form 10400](#), [Form 20972](#)

Section 14. Signature Page (Instructions Page 34)

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

Permit Number: WQ0015867001

Applicant: Union Water Supply Corporation

Certification:

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

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

Signatory name (typed or printed): Marlen Mendoza-De La Torre

Signatory title: President

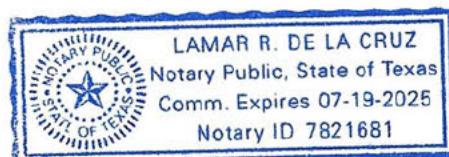
Signature: Marlen Mendoza De La Torre Date: 2-18-2025
(Use blue ink)

Subscribed and Sworn to before me by the said Marlen Mendoza De La Torre
on this 18 day of July, 2025.
My commission expires on the 19 day of July, 2025.

Marlen Q De La Torre
Notary Public

[SEAL]

Harris
County, Texas



DOMESTIC WASTEWATER PERMIT APPLICATION

SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

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

Attachment: [Form 20971](#)

WATER QUALITY PERMIT

PAYMENT SUBMITTAL FORM

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

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

Mail this form and the check or money order to:

BY REGULAR U.S. MAIL

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

BY OVERNIGHT/EXPRESS MAIL

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

Fee Code: WQP Waste Permit No: WQ0015867001

1. Check or Money Order Number: 6201
2. Check or Money Order Amount: \$1615.00
3. Date of Check or Money Order: 2/25/2025
4. Name on Check or Money Order: Texas Commission on Environmental Quality
5. APPLICATION INFORMATION

Name of Project or Site: Union Water Supply Wastewater Treatment Plant

Physical Address of Project or Site: Located approximately 2.2 miles southeast of the intersection of Farm-to-Market Road 1430 and U.S. Highway 83

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



TCEQ Core Data Form

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

SECTION I: General Information

1. Reason for Submission (If other is checked please describe in space provided.)

New Permit, Registration or Authorization (*Core Data Form should be submitted with the program application.*)

Renewal (*Core Data Form should be submitted with the renewal form*)

Other

2. Customer Reference Number (if issued)

[Follow this link to search for CN or RN numbers in Central Registry**](#)

CN 600703599

3. Regulated Entity Reference Number (if issued)

RN 102915501

SECTION II: Customer Information

4. General Customer Information	5. Effective Date for Customer Information Updates (mm/dd/yyyy)		2/20/2025					
<p><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)</p>								
<p>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).</p>								
6. Customer Legal Name (If an individual, print last name first: eg: Doe, John)		<i>If new Customer, enter previous Customer below:</i>						
Union Water Supply Corporation								
7. TX SOS/CPA Filing Number	8. TX State Tax ID (11 digits)	9. Federal Tax ID	10. DUNS Number (if applicable)					
0021247401	32020715309	(9 digits) 74-1671334	090810904					
11. Type of Customer:	<input checked="" type="checkbox"/> Corporation	<input type="checkbox"/> Individual	Partnership: <input type="checkbox"/> General <input type="checkbox"/> Limited					
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	<input type="checkbox"/> Other:					
12. Number of Employees		13. Independently Owned and Operated?						
<input checked="" type="checkbox"/> 0-20 <input 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 checked="" type="checkbox"/> Owner <input type="checkbox"/> Operator <input type="checkbox"/> Owner & Operator <input type="checkbox"/> Occupational Licensee <input type="checkbox"/> Responsible Party <input type="checkbox"/> VCP/BSA Applicant		<input type="checkbox"/> Other:						
15. Mailing Address:	P.O. Box 31							
	City	Garciasville	State	TX	ZIP	78547	ZIP + 4	0031

16. Country Mailing Information (if outside USA)		17. E-Mail Address (if applicable)	
		unionwatersupply@yahoo.com	
18. Telephone Number (956) 487-3744	19. Extension or Code	20. Fax Number (if applicable) (956) 487-6573	

SECTION III: Regulated Entity Information

21. General Regulated Entity Information (If "New Regulated Entity" is selected, a new permit application is also required.)							
<input type="checkbox"/> New Regulated Entity <input type="checkbox"/> Update to Regulated Entity Name <input checked="" type="checkbox"/> Update to Regulated Entity Information							
<i>The Regulated Entity Name submitted may be updated, in order to meet TCEQ Core Data Standards (removal of organizational endings such as Inc, LP, or LLC).</i>							
22. Regulated Entity Name (Enter name of the site where the regulated action is taking place.)							
Union WSC Wastewater Treatment Facility							
23. Street Address of the Regulated Entity: (No PO Boxes)							
	City		State		ZIP		ZIP + 4
24. County	Starr						

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

25. Description to Physical Location:	Located approximately 2.2 miles southeast of the intersection of Farm-to-Market Road 1430 and U.S.Highway 83, in Starr County, Texas						
26. Nearest City				State	Nearest ZIP Code		
Garciasville				TX	78547		
<i>Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).</i>							
27. Latitude (N) In Decimal:		26.320655		28. Longitude (W) In Decimal:		-98.715608	
Degrees	Minutes	Seconds		Degrees	Minutes	Seconds	
26	19	14.3574		-98	42	56.1888	
29. Primary SIC Code (4 digits)	30. Secondary SIC Code (4 digits)		31. Primary NAICS Code (5 or 6 digits)		32. Secondary NAICS Code (5 or 6 digits)		
4952			22132				
33. What is the Primary Business of this entity? (Do not repeat the SIC or NAICS description.)							
Collection,treatment,disposal of sewage							
34. Mailing Address:	P.O. Box 31						

	City	Garciasville	State	TX	ZIP	78547	ZIP + 4	0031
35. E-Mail Address:	unionwatersupply@yahoo.com							
36. Telephone Number		37. Extension or Code			38. Fax Number (if applicable)			
(956) 487-3744					(956) 487-6573			

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:
	WQ0015867001			

SECTION IV: Preparer Information

40. Name:	Jorge Bazan		41. Title:	General Manager	
42. Telephone Number		43. Ext./Code	44. Fax Number	45. E-Mail Address	
(956) 487-3744			(956) 487-6573	unionwatersupply@yahoo.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:	Union Water Supply Corporation		Job Title:	General Manager	
Name (In Print):	Jorge Bazan			Phone:	(956) 487-3744
Signature:				Date:	2/17/2025



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

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

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

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

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

Union Water Supply Corporation (CN 600703599) operates the Union Water Supply Wastewater Treatment Plant (RN102915501), an activated sludge plant. The facility is located approximately 2.2 miles southeast of the intersection of Farm-to-Market Road 1430 and U.S. Highway 83, in the community of Garciasville, Starr County, Texas 78547.

Union Water Supply Corporation has applied to the Texas Commission on Environmental Quality (TCEQ) to renew the permit that authorizes the discharge of treated domestic wastewater effluent at a daily average flow not to exceed 0.447 million gallon per day (MGD) via Outfall 001.

Discharges from the facility are expected to contain coliform bacteria, total suspended solids, ammonia nitrogen, nitrate nitrogen, total Kjeldahl nitrogen, sulfate, chloride, total phosphorous, total dissolved solids, oil and grease. Domestic wastewater is treated by an activated sludge process plant and the treatment units include a bar screen, aeration basins, clarifiers, and a chlorine contact chamber.

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

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

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

La Corporación de Abastecimiento de Agua Unión (CN 600703599) opera La Planta para el Tratamiento de Aguas Residuales Unión Water Supply (RN102915501), un planta de lodos activados. La planta está ubicada aproximadamente 2.2 millas al sureste de la intersección del Camino de Granja a Mercado 1430 y la Carretera de Los Estados Unidos 83, en la comunidad de Garciasville, en el Condado de Starr, Texas 78547.

La Corporación de Abastecimiento de Agua Unión ha solicitado a la Comisión de Calidad Ambiental del Estado de Texas (TCEQ) para renovar el permiso que autoriza la descarga de aguas residuales tratadas en un volumen que no sobrepasa un flujo promedio diario de 774,000 galones por día por medio del Desagüe 001.

Se espera que las descargas de 1a planta contengan bacterias coliformes, sólidos suspendidos totales, nitrógeno amoniacal, nitrógeno nitrato, nitrógeno total Kjeldahl, sulfato, cloruro, fósforo, sólidos disueltos totales, aceites y grasas. Las aguas residuales serán tratadas por una planta que utiliza el sistema de lodos activados y las unidades de tratamiento incluyen una malla, tanques de aireación, clarificadores y la cámara de contacto de cloro.

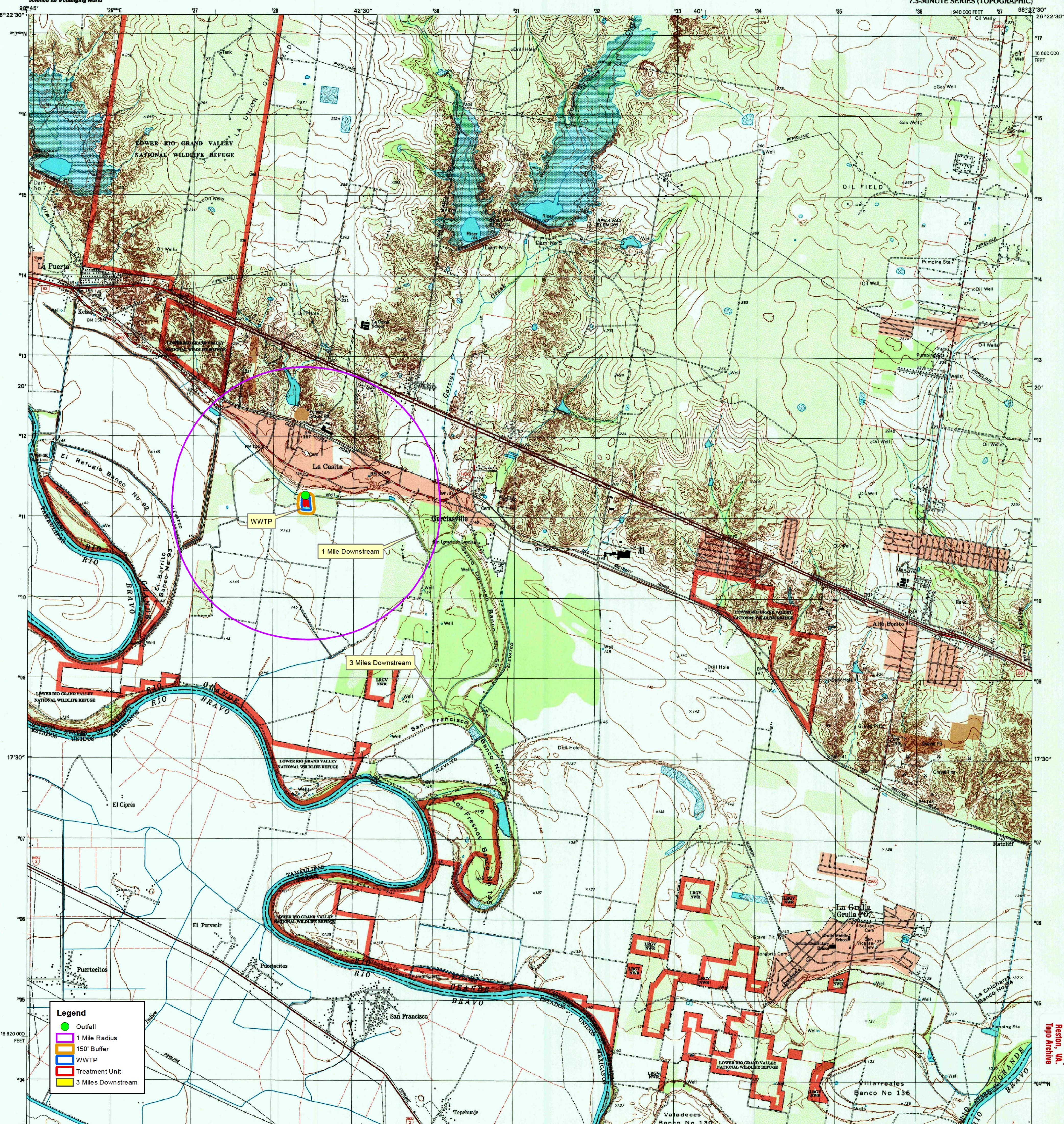


U.S. DEPARTMENT OF THE INTERIOR
U.S. GEOLOGICAL SURVEY

LA GRULLA QUADRANGLE

TEXAS-TAMAULIPAS

7.5-MINUTE SERIES (TOPOGRAPHIC)



Produced by the United States Geological Survey
Topography compiled 1964. Planimetry derived from Imagery
taken 2002. Survey control current as of 1965
Boundaries current as of 2002
North American Datum of 1983 (NAD 83). Projection and
Datum: UTM Zone 14 North American Datum of 1983, zone 14
10,000-foot ticks, Texas Coordinate System of 1983
(south zone)
Map produced from Instituto Nacional de
Estadística, Geografía e Informática (INEGI) data, dated 1996
North American Datum of 1927 (NAD 27) is shown by dashed
corner ticks. The values of the shift between NAD 83 and NAD 27
at the corners of the quadrangle are obtainable from National Geodetic
Survey NADCON software
Houses of worship, schools, and other labeled buildings verified 1965



CONTOUR INTERVAL 5 FEET IN THE UNITED STATES
U.S. PORTION ON NATIONAL GEODETIC VERTICAL DATUM OF 1929
CONTOUR INTERVAL 10 METERS IN MEXICO
MEXICO DATUM IS MEAN SEA LEVEL
(TO CONVERT ELEVATIONS TO THE NORTH AMERICAN VERTICAL DATUM OF 1988, SUBTRACT 0 FEET)
TO CONVERT FROM FEET TO METERS, MULTIPLY BY 0.3048
TO CONVERT FROM METERS TO FEET, DIVIDE BY 3.2808
UNITED STATES PORTION FILES WITH NATIONAL MAP ACCURACY STANDARDS
1:250,000 SCALE
CARTOGRAPHIC DATA SOURCE: U.S. GEOLOGICAL SURVEY
CARTOGRAPHY: U.S. GEOLOGICAL SURVEY
CHIEF CARTOGRAFIC EDITOR: JAMES C. ORLANDO
CHIEF MAP CHECKER: ROBERT L. COOPER
CHIEF MAP CHECKER: ROBERT L. COOPER
FOR SALE BY U.S. GEOLOGICAL SURVEY
1801 LEESBURG AVENUE, SUITE 100, RESTON, VA 20192
HEROE DE NACOZARI 2301 PUERTA 11, COL. DEL PARQUE C.P. 20290, AGUASCALIENTES, AGS, MEXICO
A FOLIER DESCRIBING U.S. TOPOGRAPHIC MAPS AND SYMBOLS IS AVAILABLE ON REQUEST
1801 LEESBURG AVENUE, SUITE 100, RESTON, VA 20192
HEROE DE NACOZARI 2301 PUERTA 11, COL. DEL PARQUE C.P. 20290, AGUASCALIENTES, AGS, MEXICO
A FOLIER DESCRIBING U.S. TOPOGRAPHIC MAPS AND SYMBOLS IS AVAILABLE ON REQUEST

SCALE 1:24 000
1 KILOMETERS
1 MILES
1000 2000 3000 4000 5000 6000 7000 8000 9000 10000



QUADRANGLE LOCATION

1	2	3	4	5	6	7	8
1 Rio Grande City North 2 Seguinda Ranch 3 Camp Garcia 4 Rio Grande City South 5 Sullivan City 6 7 Los Ebanos NW 7 Los Ebanos 8 La Grulla	1 Rio Grande City North 2 Seguinda Ranch 3 Camp Garcia 4 Rio Grande City South 5 Sullivan City 6 7 Los Ebanos NW 7 Los Ebanos 8 La Grulla	1 Rio Grande City North 2 Seguinda Ranch 3 Camp Garcia 4 Rio Grande City South 5 Sullivan City 6 7 Los Ebanos NW 7 Los Ebanos 8 La Grulla	1 Rio Grande City North 2 Seguinda Ranch 3 Camp Garcia 4 Rio Grande City South 5 Sullivan City 6 7 Los Ebanos NW 7 Los Ebanos 8 La Grulla	1 Rio Grande City North 2 Seguinda Ranch 3 Camp Garcia 4 Rio Grande City South 5 Sullivan City 6 7 Los Ebanos NW 7 Los Ebanos 8 La Grulla	1 Rio Grande City North 2 Seguinda Ranch 3 Camp Garcia 4 Rio Grande City South 5 Sullivan City 6 7 Los Ebanos NW 7 Los Ebanos 8 La Grulla	1 Rio Grande City North 2 Seguinda Ranch 3 Camp Garcia 4 Rio Grande City South 5 Sullivan City 6 7 Los Ebanos NW 7 Los Ebanos 8 La Grulla	1 Rio Grande City North 2 Seguinda Ranch 3 Camp Garcia 4 Rio Grande City South 5 Sullivan City 6 7 Los Ebanos NW 7 Los Ebanos 8 La Grulla
1 Rio Grande City North 2 Seguinda Ranch 3 Camp Garcia 4 Rio Grande City South 5 Sullivan City 6 7 Los Ebanos NW 7 Los Ebanos 8 La Grulla	1 Rio Grande City North 2 Seguinda Ranch 3 Camp Garcia 4 Rio Grande City South 5 Sullivan City 6 7 Los Ebanos NW 7 Los Ebanos 8 La Grulla	1 Rio Grande City North 2 Seguinda Ranch 3 Camp Garcia 4 Rio Grande City South 5 Sullivan City 6 7 Los Ebanos NW 7 Los Ebanos 8 La Grulla	1 Rio Grande City North 2 Seguinda Ranch 3 Camp Garcia 4 Rio Grande City South 5 Sullivan City 6 7 Los Ebanos NW 7 Los Ebanos 8 La Grulla	1 Rio Grande City North 2 Seguinda Ranch 3 Camp Garcia 4 Rio Grande City South 5 Sullivan City 6 7 Los Ebanos NW 7 Los Ebanos 8 La Grulla	1 Rio Grande City North 2 Seguinda Ranch 3 Camp Garcia 4 Rio Grande City South 5 Sullivan City 6 7 Los Ebanos NW 7 Los Ebanos 8 La Grulla	1 Rio Grande City North 2 Seguinda Ranch 3 Camp Garcia 4 Rio Grande City South 5 Sullivan City 6 7 Los Ebanos NW 7 Los Ebanos 8 La Grulla	1 Rio Grande City North 2 Seguinda Ranch 3 Camp Garcia 4 Rio Grande City South 5 Sullivan City 6 7 Los Ebanos NW 7 Los Ebanos 8 La Grulla

ADJOINING 7.5 QUADRANGLES
2698-232



ROAD CLASSIFICATION
Primary highway Light-duty road, hard or improved surface
Secondary highway Hard surface Unimproved road
Interstate Route U.S. Route State Route
Mexico Route
DEC 19 2003
LA GRULLA, TX-TAM
2002

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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: Union Water Supply Corporation

Permit No. WQ00 15867001

EPA ID No. TX 0140163

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

Located approximately 2.2 miles southeast of the intersection of Farm-to-Market Road 1430 and U.S. Highway 83

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: Jorge Bazan

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

Title: General Manager

Mailing Address: P.O. Box 31

City, State, Zip Code: Garciasville, TX 78547

Phone No.: (956) 487-3744 Ext.: [REDACTED] Fax No.: (956) 487-6573

E-mail Address: unionwatersupply@yahoo.com

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

Via outfall to a county drainage ditch; thence to Santo Domingo Banco No. 55; thence to the Rio Grande River below Falco Reservoir in Segment No. 2032 of the Rio Grande Basin

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

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

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

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

Disturbance of vegetation or wetlands

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

No construction-related land use impacts are projected on this site.

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

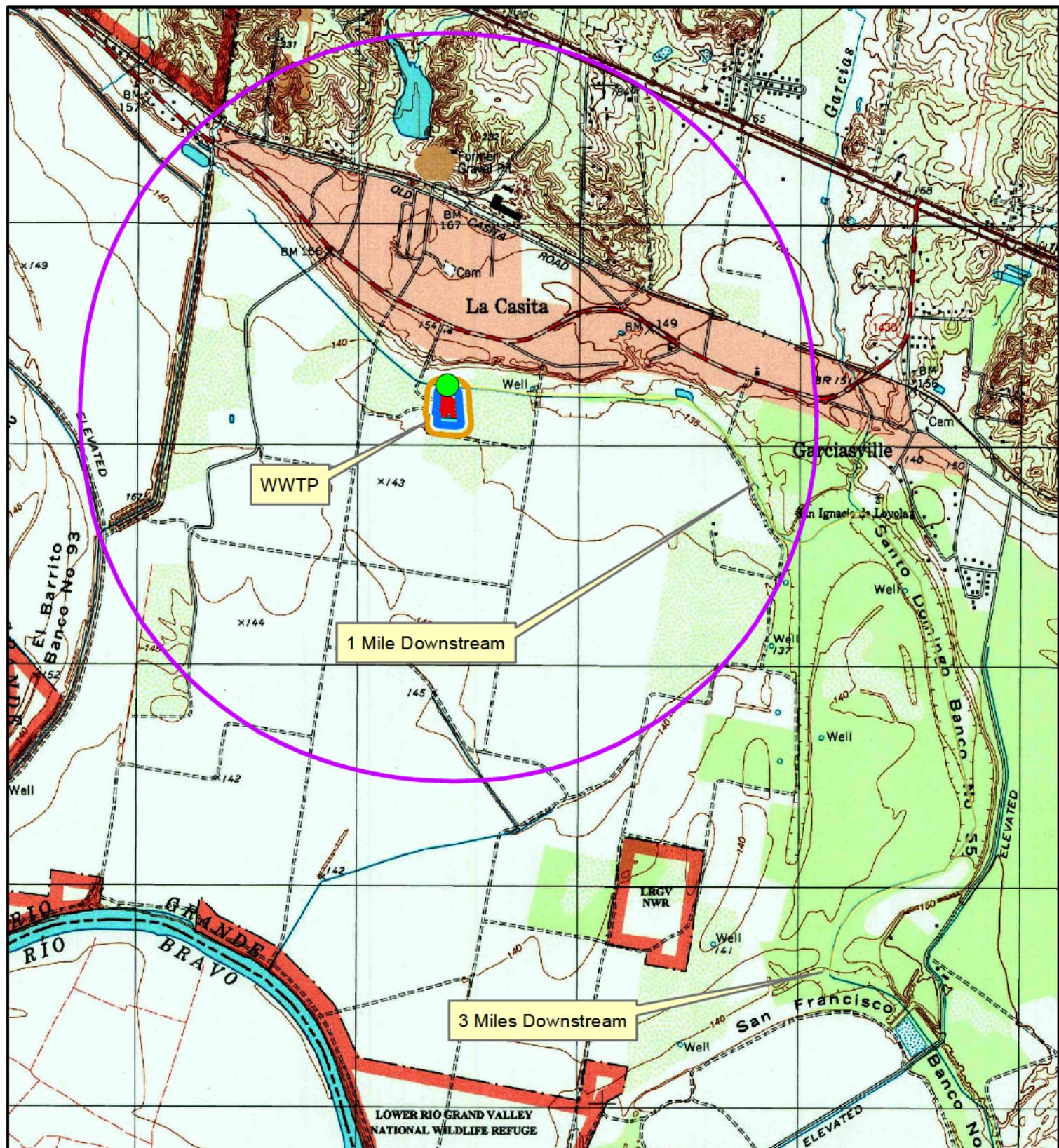
The site consists of a vacant lot with minimal vegetation consisting primarily of weeds.

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

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

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





Union Water Supply Corp.
Wastewater Treatment Plant
Topographic Map

Source:USGS Topographic Map 2002
La Grulla, Texas

All information displayed on this map is subject to verification by field survey or by the agency responsible for maintaining the information. This map is intended for general information only.



0 1,000 2,000 Feet

Legend

- 1 Mile Radius
- Outfall
- 150' Buffer
- WWTP
- Treatment Unit
- 3 Miles Downstream



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION TECHNICAL REPORT 1.0

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

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

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

A. Existing/Interim I Phase

Design Flow (MGD): 0.774

2-Hr Peak Flow (MGD): 2.323

Estimated construction start date: N/A

Estimated waste disposal start date: N/A

B. Interim II Phase

Design Flow (MGD): [Click to enter text.](#)

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

Estimated construction start date: [Click to enter text.](#)

Estimated waste disposal start date: [Click to enter text.](#)

C. Final Phase

Design Flow (MGD): [Click to enter text.](#)

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

Estimated construction start date: [Click to enter text.](#)

Estimated waste disposal start date: [Click to enter text.](#)

D. Current Operating Phase

Provide the startup date of the facility: 2002

Section 2. Treatment Process (Instructions Page 42)

A. Current Operating Phase

Provide a detailed description of the treatment process. **Include the type of treatment plant, mode of operation, and all treatment units.** Start with the plant's head works and finish with the point of discharge. **Include all sludge processing and drying units.** If more than one phase exists or is proposed, a description of *each phase* must be provided.

The plant consists of an activated sludge plant. Influent wastewater from the plant lift station is pumped to the head works where it passes through a mechanical bar screen. From there, the influent flows into two aeration basins and into two clarifiers. The effluent then passes through a chlorine contact chamber for disinfection and then dechlorination with sulfur dioxide before it discharges through the outfall.

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)
Mechanical Bar Screen	1	10.6' x 2' x 6'
Aeration Basin	2	143' x 69' x 5'
Clarifier	2	55' Dia. x 16' Depth
Chlorine Contact Chamber	1	49.33' x 22.67' x 8'
Sludge Drying Beds	8	70' x 25' x 3'

C. Process Flow Diagram

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

Attachment: [Process Flow Diagram](#)

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

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

- Latitude: 26.321076
- Longitude: -98.715498

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: Site Drawing

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

La Casita-Garciasville Community Area

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

Collection System Information

Collection System Name	Owner Name	Owner Type	Population Served
		Choose an item.	

Section 4. Unbuilt Phases (Instructions Page 44)

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

Yes No

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

Yes No

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

Click to enter text.

Section 5. Closure Plans (Instructions Page 44)

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

Yes No

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

Yes No

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

Click to enter text.

Section 6. Permit Specific Requirements (Instructions Page 44)

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

A. Summary transmittal

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

Yes No

If yes, provide the date(s) of approval for each phase: 2002 Existing Phase

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.**

Click to enter text.

B. Buffer zones

Have the buffer zone requirements been met?

Yes No

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

Click to enter text.

C. Other actions required by the current permit

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

Yes No

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

Click to enter text.

D. Grit and grease treatment

1. Acceptance of grit and grease waste

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

Yes No

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

2. Grit and grease processing

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

Click to enter text.

3. Grit disposal

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

Yes No

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

Describe the method of grit disposal.

Click to enter text.

4. Grease and decanted liquid disposal

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

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

Click to enter text.

E. Stormwater management

1. Applicability

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

Yes No

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

Yes No

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

2. MSGP coverage

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

Yes No

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

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

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

Yes No

3. Conditional exclusion

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

Yes No

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

Click to enter text.

4. Existing coverage in individual permit

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

Yes No

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

Click to enter text.

5. Zero stormwater discharge

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

Yes No

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

Click to enter text.

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

6. Request for coverage in individual permit

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

Yes No

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

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

[Click to enter text.](#)

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

F. Discharges to the Lake Houston Watershed

Does the facility discharge in the Lake Houston watershed?

Yes No

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

[Click to enter text.](#)

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

1. Acceptance of sludge from other WWTPs

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

Yes No

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

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

[Click to enter text.](#)

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

2. Acceptance of septic waste

Is the facility accepting or will it accept septic waste?

Yes No

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

Yes No

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

Yes No

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

Click to enter text.

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

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

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

Yes No

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

Click to enter text.

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

Is the facility in operation?

Yes No

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

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

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

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

Pollutant	Average Conc.	Max Conc.	No. of Samples	Sample Type	Sample Date/Time
CBOD ₅ , mg/l	5.31	5.31	1	Grab	3-13-2025/9.00 a.m.
Total Suspended Solids, mg/l	4.30	4.30	1	Grab	3-13-2025/9.00 a.m.
Ammonia Nitrogen, mg/l	6.54	6.54	1	Grab	3-13-2025/9.00 a.m.
Nitrate Nitrogen, mg/l	6.18	6.18	1	Grab	3-13-2025/9.00 a.m.
Total Kjeldahl Nitrogen, mg/l	6.70	6.70	1	Grab	3-13-2025/9.00 a.m.
Sulfate, mg/l	349	349	1	Grab	3-13-2025/9.00 a.m.
Chloride, mg/l	247	247	1	Grab	3-13-2025/9.00 a.m.
Total Phosphorus, mg/l	5.75	5.75	1	Grab	3-13-2025/9.00 a.m.
pH, standard units	6.7	6.7	1	Grab	3-13-2025/9.00 a.m.
Dissolved Oxygen*, mg/l	6.0	6.0	1	Grab	3-13-2025/9.00 a.m.
Chlorine Residual, mg/l	0	0	1	Grab	3-13-2025/9.00 a.m.
<i>E.coli</i> (CFU/100ml) freshwater	3.1	3.1	1	Grab	3-13-2025/9.00 a.m.
Enterocci (CFU/100ml) saltwater	>2419.6	>2419.6	1	Grab	3-13-2025/9.00 a.m.
Total Dissolved Solids, mg/l	980	980	1	Grab	3-13-2025/9.00 a.m.
Electrical Conductivity, $\mu\text{mhos}/\text{cm}$, †	1640	1640	1	Grab	3-13-2025/9.00 a.m.
Oil & Grease, mg/l	<4.49	<4.49	1	Grab	3-13-2025/9.00 a.m.
Alkalinity (CaCO_3)*, mg/l	112	112	1	Grab	3-13-2025/9.00 a.m.

*TPDES permits only

†TLAP permits only

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

Pollutant	Average Conc.	Max Conc.	No. of Samples	Sample Type	Sample Date/Time
Total Suspended Solids, mg/l					
Total Dissolved Solids, mg/l					
pH, standard units					
Fluoride, mg/l					
Aluminum, mg/l					
Alkalinity (CaCO_3), mg/l					

Section 8. Facility Operator (Instructions Page 49)

Facility Operator Name: Samuel Perez

Facility Operator's License Classification and Level: Class C Wastewater

Facility Operator's License Number: WWooo7564

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

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

Check all that apply. See instructions for guidance.

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

B. WWTP's Sewage Sludge or Biosolids Treatment Process

Check all that apply. See instructions for guidance.

- Aerobic Digestion
- Air Drying (or sludge drying beds)
- Lower Temperature Composting
- Lime Stabilization
- Higher Temperature Composting
- Heat Drying
- Thermophilic Aerobic Digestion
- Beta Ray Irradiation
- Gamma Ray Irradiation
- Pasteurization
- Preliminary Operation (e.g. grinding, de-gritting, blending)
- Thickening (e.g. gravity thickening, centrifugation, filter press, vacuum filter)
- Sludge Lagoon
- Temporary Storage (< 2 years)
- Long Term Storage (\geq 2 years)
- Methane or Biogas Recovery

Other Treatment Process: [Click to enter text.](#)

C. Sewage Sludge or Biosolids Management

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

Biosolids Management

Management Practice	Handler or Preparer Type	Bulk or Bag Container	Amount (dry metric tons)	Pathogen Reduction Options	Vector Attraction Reduction Option
Choose an item.	Choose an item.	Choose an item.		Choose an item.	Choose an item.
Choose an item.	Choose an item.	Choose an item.		Choose an item.	Choose an item.
Choose an item.	Choose an item.	Choose an item.		Choose an item.	Choose an item.

If "Other" is selected for Management Practice, please explain (e.g. monofill or transport to another WWTP): [Click to enter text.](#)

D. Disposal site

Disposal site name: La Gloria Ranch Landfill

TCEQ permit or registration number: 2348

County where disposal site is located: Hidalgo

E. Transportation method

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

Name of the hauler: Denali Water Solutions

Hauler registration number: 24979

Sludge is transported as a:

Liquid semi-liquid semi-solid solid

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

A. Beneficial use authorization

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

Yes No

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

Yes No

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

Yes No

B. Sludge processing authorization

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

Sludge Composting	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Marketing and Distribution of Biosolids	<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 Page 54)

A. Additional authorizations

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

Yes No

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

Click to enter text.

B. Permittee enforcement status

Is the permittee currently under enforcement for this facility?

Yes No

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

Yes No

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

Click to enter text.

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

A. RCRA hazardous wastes

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

Yes No

B. Remediation activity wastewater

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

Yes No

C. Details about wastes received

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

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

Section 14. Laboratory Accreditation (Instructions Page 55)

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

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

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

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

CERTIFICATION:

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

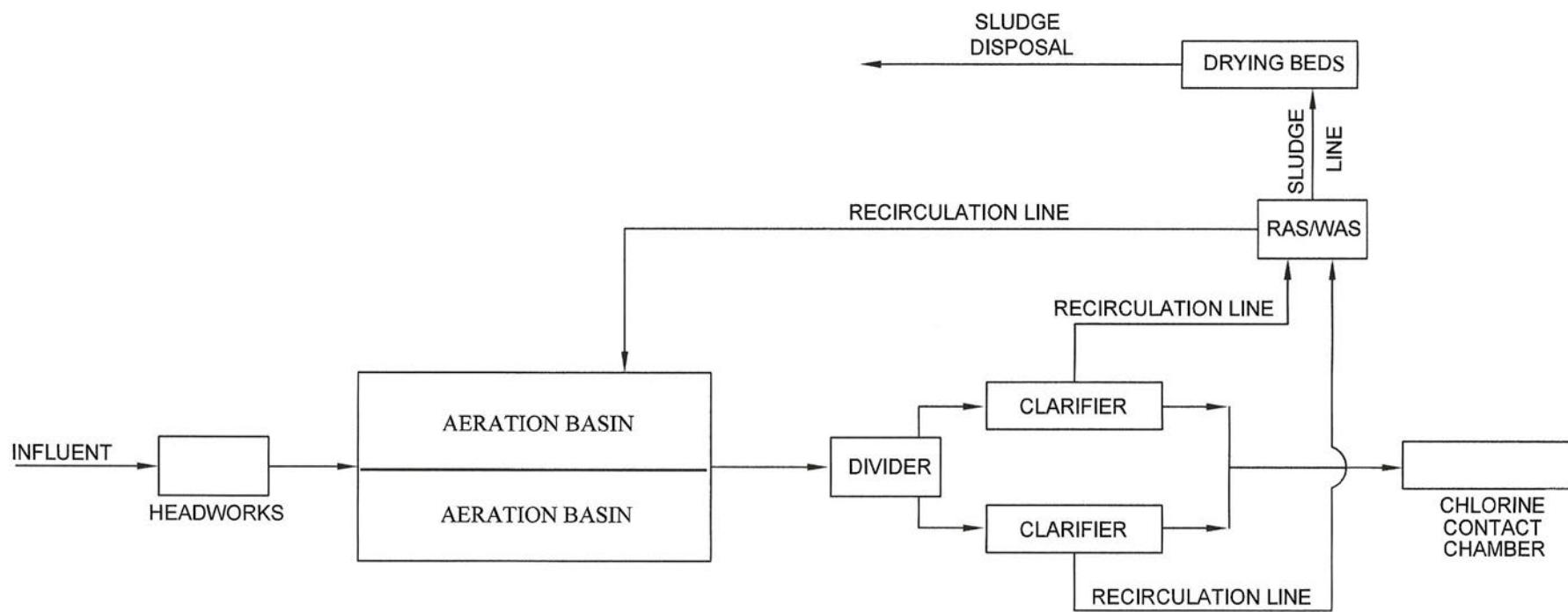
Printed Name: Jorge Bazan

Title: General Manager

Signature: Jorge Bazan

Date: 2/18/2025

UNION WSC WWTP PROCESS FLOW DIAGRAM





Union Water Supply Corp.
Wastewater Treatment Plant
Site Map

Source: USDA NAIP 2015 Aerial

Legend

- 150' Buffer
- WWTP
- Treatment Unit



0 100 200 Feet

All information displayed on this map is subject to verification by field survey or by the agency responsible for maintaining the information. This map is intended for general information only.



Union Water Supply Corp.
Wastewater Treatment Plant
Service Area Map

Source: USDA NAIP 2015 Aerial

Legend

- 150' Buffer
- WWTP
- Service Area
- Treatment Unit



0 0.5 1 Miles

All information displayed on this map is subject to verification by field survey or by the agency responsible for maintaining the information. This map is intended for general information only.

Project
1139880

UWS1-R

Union Water Supply Corporation
Jorge Bazan
P.O. Box 31
Garciasville, TX 78547-

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17:51

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1139880_r03_03_ProjectResults	SPL Kilgore Project P:1139880 C:UWS1 Project Results t:304	5
1139880_r10_05_ProjectQC	SPL Kilgore Project P:1139880 C:UWS1 Project Quality Control Groups	8
1139880_r99_09_CoC_1_of_1	SPL Kilgore CoC UWS1 1139880_1_of_1	6
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Email: Kilgore.ProjectManagement@spllabs.com



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SAMPLE CROSS REFERENCE

Project

1139880

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WWTP Permit Renewal

Union Water Supply Corporation
 Jorge Bazan
 P.O. Box 31
 Garciasville, TX 78547-

Sample	Sample ID	Taken	Time	Received
2390105	WWTP Permit Renewal	03/13/2025	09:00:00	03/14/2025

Bottle 01 Polyethylene 1/2 gal (White)
 Bottle 02 Plastic 1 liter unpreserved
 Bottle 03 H₂SO₄ to pH <2 Glass Qt w/Teflon lined lid
 Bottle 04 H₂SO₄ to pH <2 Glass Qt w/Teflon lined lid
 Bottle 05 HNO₃ to pH <2 Polyethylene 250 mL for Metals
 Bottle 06 8 oz Plastic H₂SO₄ pH < 2
 Bottle 07 Prepared Bottle: NH₃N TRAACS Autosampler Vial (Batch 1165504) Volume: 6.00000 mL <== Derived from 06 (6 ml)
 Bottle 08 BOD Titration Beaker A (Batch 1165507) Volume: 100.00000 mL <== Derived from 01 (100 ml)
 Bottle 09 BOD Analytical Beaker B (Batch 1165507) Volume: 100.00000 mL <== Derived from 01 (100 ml)
 Bottle 10 Prepared Bottle: ICP Preparation for Metals (Batch 1165553) Volume: 50.00000 mL <== Derived from 05 (50 ml)
 Bottle 11 Prepared Bottle: TKN TRAACS Autosampler Vial (Batch 1165790) Volume: 20.00000 mL <== Derived from 06 (20 ml)

Method	Bottle	PrepSet	Preparation	QcGroup	Analytical
EPA 300.0 2.1	01	1165895	03/14/2025	1165895	03/14/2025
EPA 300.0 2.1	01	1167068	03/24/2025	1167068	03/24/2025
EPA 200.7 4.4	10	1165553	03/17/2025	1165754	03/17/2025
SM 2320 B-2011	01	1166192	03/19/2025	1166192	03/19/2025
SM 5210 B-2016 (TCMP Inhibitor)	01	1165507	03/20/2025	1165507	03/20/2025
SM 2510 B-2011	01	1165929	03/17/2025	1165929	03/17/2025
EPA 1664B (HEM)	03	1166742	03/21/2025	1166742	03/21/2025
EPA 350.1 2	07	1165504	03/14/2025	1166440	03/20/2025
SM 2540 C-2015	02	1166484	03/19/2025	1166484	03/19/2025
EPA 351.2 2	11	1165790	03/18/2025	1166403	03/20/2025
SM 2540 D-2015	01	1166201	03/19/2025	1166201	03/19/2025
SM 4500-H+ B-2011		1165400	03/13/2025	1165400	03/13/2025

Sample	Sample ID	Taken	Time	Received
2390106	WWTP Permit Renewal	03/13/2025	09:00:00	03/14/2025

Method	Bottle	PrepSet	Preparation	QcGroup	Analytical
SM 4500-C1 G-2011		1165401	03/13/2025	1165401	03/13/2025
SM 4500-O G-2016		1165402	03/13/2025	1165402	03/13/2025
Enterolert Subcontract			03/13/2025		03/13/2025
Subcontract			03/13/2025		03/13/2025

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Union Water Supply Corporation
 Jorge Bazan
 P.O. Box 31
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Project
1139880

Printed: 03/25/2025

RESULTS

Sample Results

2390105 WWTP Permit Renewal

Received: 03/14/2025

Non-Potable Water	Collected by:	RDL	SPL Kilgore	PO:
	Taken:	03/13/2025	09:00:00	
<hr/>				
EPA 1664B (HEM)	Prepared:	1166742 03/21/2025	07:43:00	Analyzed 1166742 03/21/2025 07:43:00 MAX
NELAC Parameter Oil and Grease (HEM)	Results <4.49	Units mg/L	RL 4.49	Flags CAS Bottle 03
<hr/>				
EPA 200.7 4.4	Prepared:	1165553 03/17/2025	06:30:00	Analyzed 1165754 03/17/2025 14:44:00 CAS
NELAC Parameter Phosphorus	Results 5.75	Units mg/L	RL 0.040	Flags CAS Bottle 7723-14-0 10
<hr/>				
EPA 300.0 2.1	Prepared:	1165895 03/14/2025	15:22:00	Analyzed 1165895 03/14/2025 15:22:00 KRA
NELAC Parameter Chloride	Results 247	Units mg/L	RL 3.00	Flags CAS Bottle 01
NELAC Nitrate-Nitrogen Total	Results 6.18	Units mg/L	RL 0.226	Flags CAS Bottle 14797-55-8 01
<hr/>				
EPA 300.0 2.1	Prepared:	1167068 03/24/2025	14:47:00	Analyzed 1167068 03/24/2025 14:47:00 KRA
NELAC Parameter Sulfate	Results 349	Units mg/L	RL 30.0	Flags CAS Bottle 01
<hr/>				
EPA 350.1 2	Prepared:	1165504 03/14/2025	17:06:44	Analyzed 1166440 03/20/2025 06:32:00 AMB
NELAC Parameter Ammonia Nitrogen	Results 6.54	Units mg/L	RL 0.100	Flags CAS Bottle 07
<hr/>				
EPA 351.2 2	Prepared:	1165790 03/18/2025	08:45:46	Analyzed 1166403 03/20/2025 07:51:00 AMB
NELAC Parameter Total Kjeldahl Nitrogen	Results 6.70	Units mg/L	RL 0.050	Flags CAS Bottle 7727-37-9 11
<hr/>				



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Union Water Supply Corporation
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Project
1139880

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2390105 WWTP Permit Renewal

Received: 03/14/2025

Non-Potable Water

Collected by: RDL

SPL Kilgore

PO:

Taken: 03/13/2025

09:00:00

SM 2320 B-2011

Prepared: 1166192 03/19/2025

11:14:00

Analyzed 1166192

03/19/2025

11:14:00

MRG

Parameter	Results	Units	RL	Flags	CAS	Bottle
NELAC Total Alkalinity (as CaCO3)	112	mg/L	1.00			01

SM 2510 B-2011

Prepared: 1165929 03/17/2025

08:15:00

Analyzed 1165929

03/17/2025

08:15:00

ANC

Parameter	Results	Units	RL	Flags	CAS	Bottle
NELAC Lab Spec. Conductance at 25 C	1640	umhos/cm				01

SM 2540 C-2015

Prepared: 1166484 03/19/2025

08:40:00

Analyzed 1166484

03/19/2025

08:40:00

JMB

Parameter	Results	Units	RL	Flags	CAS	Bottle
NELAC Total Dissolved Solids	980	mg/L	50.0			02

SM 2540 D 2015

Prepared: 1166201 03/19/2025

07 25 00

Analyzed 1166201

03/19/2025

07 25 00

BEK

Parameter	Results	Units	RL	Flags	CAS	Bottle
NELAC Total Suspended Solids	4.30	mg/L	2 00			01

SM 4500-H+ B-2011

Prepared: 1165400 03/13/2025

09:01:00

Analyzed 1165400

03/13/2025

09:01:00

RDL

Parameter	Results	Units	RL	Flags	CAS	Bottle
NELAC pH (Onsite)	6.7	SU				

SM 5210 B 2016 (TCMP Inhibitor)

Prepared: 1165507 03/15/2025

Analyzed 1165507

03/20/2025

12 09 18

JWI

Parameter	Results	Units	RL	Flags	CAS	Bottle
NELAC BOD Carbonaceous	5.31	mg/L	2 00			01

2390106 WWTP Permit Renewal

Received: 03/14/2025

Non Potable Water

Collected by: RDL

SPL Kilgore

PO

Taken: 03/13/2025

09:00:00



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Project

1139880

Union Water Supply Corporation
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2390106 WWTP Permit Renewal

Received: 03/14/2025

Non-Potable Water Collected by: RDL SPL Kilgore
 Taken: 03/13/2025 09:00:00

PO:

Enterolert Subcontract		Prepared:	03/13/2025	15:08:00	Analyzed	03/13/2025	15:08:00	SUB
Parameter	Results	Units	RL	Flags	CAS		Bottle	
Enterococci (RGV Subcontract)	See Attached				CCWU			
SM 4500-CI G-2011	Prepared: 1165401	03/13/2025	09:07:00	Analyzed 1165401	03/13/2025	09:07:00	RDL	
Parameter	Results	Units	RL	Flags	CAS		Bottle	
NELAC Cl2 Res,Total(Onsite)Spec Mid [RL 0.05 mg/L]	0.00	mg/L	0.05					
SM 4500-O G-2016	Prepared: 1165402	03/13/2025	09:05:00	Analyzed 1165402	03/13/2025	09:05:00	RDL	
Parameter	Results	Units	RL	Flags	CAS		Bottle	
NELAC Dissolved Oxygen Onsite	6.0	mg/L	1.0					
Subcontract	Prepared:	03/13/2025	15:30:00	Analyzed	03/13/2025	15:30:00	SUB	
Parameter	Results	Units	RL	Flags	CAS		Bottle	
MPN, E.coli, Coli-18 - WW sub	See Attached				CCWU			

Sample Preparation

2390105 WWTP Permit Renewal

Received: 03/14/2025

03/13/2025

Prepared:	03/14/2025	11:01:02	Calculated	03/14/2025	11:01:02	CAL
Enviro Fee (per Sampling Group)	Verified					
EPA 1664B (HEM)	Prepared: 1166590	03/21/2025	07:43:00	Analyzed 1166590	03/21/2025	07:43:00



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Project
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2390105 WWTP Permit Renewal

Received: 03/14/2025

03/13/2025

EPA 1664B (HEM) Prepared: 1166590 03/21/2025 07:43:00 Analyzed 1166590 03/21/2025 07:43:00 MAX

NELAC	O&G HEM Started	Started					
	EPA 200.2 2.8	Prepared:	1165553	03/17/2025	06:30:00	Analyzed	1165553 03/17/2025 06:30:00 HLT
z	Liquid Metals Digestion	50/50	ml				05
	EPA 350.1, Rev. 2.0	Prepared:	1165504	03/14/2025	17:06:44	Analyzed	1165504 03/14/2025 17:06:44 JR1
NELAC	Ammonia Distillation	6/6	ml				06
	EPA 351.2, Rev 2.0	Prepared:	1165790	03/18/2025	08:45:46	Analyzed	1165790 03/18/2025 08:45:46 MEG
NELAC	TKN Block Digestion	20/20	ml				06
	SM 2540 C-2015	Prepared:	1166027	03/19/2025	08:40:00	Analyzed	1166027 03/19/2025 08:40:00 JMB
NELAC	Total Dissolved Solids Started	Started					
	SM 2540 D-2011	Prepared:	1165914	03/19/2025	07:25:00	Analyzed	1165914 03/19/2025 07:25:00 BEK
NELAC	TSS Set Started	Started					
	SM 5210 B-2016 (TCMP Inhibitor)	Prepared:	1165507	03/15/2025		Analyzed	1165507 03/15/2025 06:20:46 JW1
NELAC	BODc Set Started	Started					



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Union Water Supply Corporation
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Project

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Qualifiers:

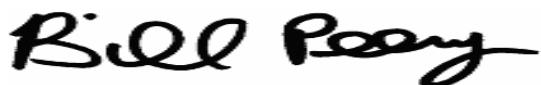
We report results on an As Received (or Wet) basis unless marked Dry Weight.

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

(N)ELAC - Covered in our NELAC scope of accreditation
z -- Not covered by our NELAC scope of accreditation

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

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



Bill Peery, MS, VP Technical Services



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QUALITY CONTROL



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UWS1-R

Union Water Supply Corporation
Jorge Bazan
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Project

1139880

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Analytical Set	1165507						SM 5210 B-2016 (TCMP Inhibitor)		
Blank									
<u>Parameter</u>	<u>PrepSet</u>	<u>Reading</u>	<u>MDL</u>	<u>MQL</u>	<u>Units</u>		<u>File</u>		
BOD Carbonaceous	1165507	0.1	0.200	0.500	mg/L		127407181		
Duplicate									
<u>Parameter</u>	<u>Sample</u>	<u>Result</u>	<u>Unknown</u>		<u>Unit</u>		<u>RPD</u>		<u>Limit%</u>
BOD Carbonaceous	2389955	4.87	2.59		mg/L		61.1	*	30.0
BOD Carbonaceous	2390347	4.07	4.23		mg/L		3.86		30.0
Seed Drop									
<u>Parameter</u>	<u>PrepSet</u>	<u>Reading</u>	<u>MDL</u>	<u>MQL</u>	<u>Units</u>		<u>File</u>		
BOD Carbonaceous	1165507	0.503	0.200	0.500	mg/L		127407183		
Standard									
<u>Parameter</u>	<u>Sample</u>	<u>Reading</u>	<u>Known</u>	<u>Units</u>	<u>Recover%</u>	<u>Limits%</u>	<u>File</u>		
BOD Carbonaceous	213	198	mg/L	108	83.7 - 116		127407184		

Analytical Set	1166403						EPA 351.2.2		
AWRL/LOQ C									
<u>Parameter</u>	<u>Reading</u>	<u>Known</u>	<u>Units</u>	<u>Recover%</u>	<u>Limits%</u>		<u>File</u>		
Total Kjeldahl Nitrogen	0.054	0.050	mg/L	108	75.0 - 125		127426485		
Blank									
<u>Parameter</u>	<u>PrepSet</u>	<u>Reading</u>	<u>MDL</u>	<u>MQL</u>	<u>Units</u>		<u>File</u>		
Total Kjeldahl Nitrogen	1165790	0.015	0.00712	0.050	mg/L		127426492		
CCV									
<u>Parameter</u>	<u>Reading</u>	<u>Known</u>	<u>Units</u>	<u>Recover%</u>	<u>Limits%</u>		<u>File</u>		
Total Kjeldahl Nitrogen	5.48	5.00	mg/L	110	90.0 - 110		127426478		
Total Kjeldahl Nitrogen	5.45	5.00	mg/L	109	90.0 - 110		127426479		
Total Kjeldahl Nitrogen	5.45	5.00	mg/L	109	90.0 - 110		127426480		
Total Kjeldahl Nitrogen	5.47	5.00	mg/L	109	90.0 - 110		127426483		
Total Kjeldahl Nitrogen	5.33	5.00	mg/L	107	90.0 - 110		127426494		
Total Kjeldahl Nitrogen	5.49	5.00	mg/L	110	90.0 - 110		127426504		
Total Kjeldahl Nitrogen	5.38	5.00	mg/L	108	90.0 - 110		127426511		
Total Kjeldahl Nitrogen	5.48	5.00	mg/L	110	90.0 - 110		127426512		
Duplicate									
<u>Parameter</u>	<u>Sample</u>	<u>Result</u>	<u>Unknown</u>		<u>Unit</u>		<u>RPD</u>		<u>Limit%</u>
Total Kjeldahl Nitrogen	2389062	ND	ND		mg/L				20.0
Total Kjeldahl Nitrogen	2390376	0.618	0.534		mg/L		14.6		20.0
ICV									
<u>Parameter</u>	<u>Reading</u>	<u>Known</u>	<u>Units</u>	<u>Recover%</u>	<u>Limits%</u>		<u>File</u>		
Total Kjeldahl Nitrogen	5.34	5.00	mg/L	107	90.0 - 110		127426477		
LCS Dup									
<u>Parameter</u>	<u>PrepSet</u>	<u>LCS</u>	<u>LCSD</u>	<u>Known</u>	<u>Limits%</u>	<u>LCS%</u>	<u>LCSD%</u>	<u>Units</u>	<u>RPD</u>

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QUALITY CONTROL



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Project

1139880

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LCS Dup

<u>Parameter</u>	<u>PrepSet</u>	<u>LCS</u>	<u>LCSD</u>	<u>Known</u>	<u>Limits%</u>	<u>LCS%</u>	<u>LCSD%</u>	<u>Units</u>	<u>RPD</u>	<u>Limit%</u>
Total Kjeldahl Nitrogen	1165790	5.41	5.21	5.00	90.0 - 110	108	104	mg/L	3.77	20.0

Mat. Spike

<u>Parameter</u>	<u>Sample</u>	<u>Spike</u>	<u>Unknown</u>	<u>Known</u>	<u>Units</u>	<u>Recovery %</u>	<u>Limits %</u>	<u>File</u>
Total Kjeldahl Nitrogen	2389062	5.45	ND	5.00	mg/L	109	80.0 - 120	127426498
Total Kjeldahl Nitrogen	2390376	6.17	0.534	5.00	mg/L	113	80.0 - 120	127426501

Analytical Set

1166440

EPA 350.1 2

Blank

<u>Parameter</u>	<u>PrepSet</u>	<u>Reading</u>	<u>MDL</u>	<u>MQL</u>	<u>Units</u>	<u>File</u>
Ammonia Nitrogen	1165504	ND	0.00336	0.020	mg/L	127427590

CCV

<u>Parameter</u>	<u>Reading</u>	<u>Known</u>	<u>Units</u>	<u>Recover%</u>	<u>Limits%</u>	<u>File</u>
Ammonia Nitrogen	1.93	2.00	mg/L	96.5	90.0 - 110	127427569
Ammonia Nitrogen	1.97	2.00	mg/L	98.5	90.0 - 110	127427570
Ammonia Nitrogen	1.94	2.00	mg/L	97.0	90.0 - 110	127427578
Ammonia Nitrogen	1.86	2.00	mg/L	93.0	90.0 - 110	127427589
Ammonia Nitrogen	1.87	2.00	mg/L	93.5	90.0 - 110	127427600
Ammonia Nitrogen	1.87	2.00	mg/L	93.5	90.0 - 110	127427611
Ammonia Nitrogen	1.95	2.00	mg/L	97.5	90.0 - 110	127427622
Ammonia Nitrogen	1.83	2.00	mg/L	91.5	90.0 - 110	127427633
Ammonia Nitrogen	1.83	2.00	mg/L	91.5	90.0 - 110	127427641
Ammonia Nitrogen	1.81	2.00	mg/L	90.5	90.0 - 110	127427650
Ammonia Nitrogen	1.80	2.00	mg/L	90.0	90.0 - 110	127427661
Ammonia Nitrogen	2.11	2.00	mg/L	106	90.0 - 110	127427671
Ammonia Nitrogen	2.14	2.00	mg/L	107	90.0 - 110	127427680
Ammonia Nitrogen	2.14	2.00	mg/L	107	90.0 - 110	127427689
Ammonia Nitrogen	2.15	2.00	mg/L	108	90.0 - 110	127427700
Ammonia Nitrogen	2.04	2.00	mg/L	102	90.0 - 110	127427703
Ammonia Nitrogen	2.02	2.00	mg/L	101	90.0 - 110	127427713
Ammonia Nitrogen	2.10	2.00	mg/L	105	90.0 - 110	127427715

Duplicate

<u>Parameter</u>	<u>Sample</u>	<u>Result</u>	<u>Unknown</u>	<u>Unit</u>	<u>RPD</u>	<u>Limit%</u>
Ammonia Nitrogen	2390068	0.029	0.010	mg/L	97.4	*

ICV

<u>Parameter</u>	<u>Reading</u>	<u>Known</u>	<u>Units</u>	<u>Recover%</u>	<u>Limits%</u>	<u>File</u>
Ammonia Nitrogen	1.92	2.00	mg/L	96.0	90.0 - 110	127427568

LCS Dup

<u>Parameter</u>	<u>PrepSet</u>	<u>LCS</u>	<u>LCSD</u>	<u>Known</u>	<u>Limits%</u>	<u>LCS%</u>	<u>LCSD%</u>	<u>Units</u>	<u>RPD</u>	<u>Limit%</u>
Ammonia Nitrogen	1165504	2.17	2.19	2.00	90.0 - 110	108	110	mg/L	0.917	20.0

Mat. Spike

<u>Parameter</u>	<u>Sample</u>	<u>Spike</u>	<u>Unknown</u>	<u>Known</u>	<u>Units</u>	<u>Recovery %</u>	<u>Limits %</u>	<u>File</u>

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QUALITY CONTROL



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UWS1-R

Union Water Supply Corporation
Jorge Bazan
P.O. Box 31
Garciasville, TX 78547-

Project

1139880

Printed 03/25/2025

Duplicate

<u>Parameter</u>	<u>Sample</u>	<u>Result</u>	<u>Unknown</u>		<u>Unit</u>	<u>RPD</u>	<u>Limit%</u>
Total Suspended Solids	2389996	960	720		mg/L	28.6	*
Total Suspended Solids	2390107	70.6	71.2		mg/L	0.846	20.0
Total Suspended Solids	2390176	7520	7580		mg/L	0.795	20.0

LCS

<u>Parameter</u>	<u>PrepSet</u>	<u>Reading</u>	<u>Known</u>	<u>Units</u>	<u>Recover%</u>	<u>Limits</u>	<u>File</u>
Total Suspended Solids	1166201	47.0	50.0	mg/L	94.0	90.0 - 110	127421165

Standard

<u>Parameter</u>	<u>Sample</u>	<u>Reading</u>	<u>Known</u>	<u>Units</u>	<u>Recover%</u>	<u>Limits%</u>	<u>File</u>
Total Suspended Solids		94.0	100	mg/L	94.0	90.0 - 110	127421164

Analytical Set 1166484 SM 2540 C-2015

Blank

<u>Parameter</u>	<u>PrepSet</u>	<u>Reading</u>	<u>MDL</u>	<u>MQL</u>	<u>Units</u>	<u>File</u>
Total Dissolved Solids	1166484	ND	5.00	5.00	mg/L	127428063

ControlBlk

<u>Parameter</u>	<u>PrepSet</u>	<u>Reading</u>	<u>MDL</u>	<u>MQL</u>	<u>Units</u>	<u>File</u>
Total Dissolved Solids	1166484	0.0002			grams	127428050

Duplicate

<u>Parameter</u>	<u>Sample</u>	<u>Result</u>	<u>Unknown</u>		<u>Unit</u>	<u>RPD</u>	<u>Limit%</u>
Total Dissolved Solids	2389777	620	510		mg/L	19.5	20.0

LCS

<u>Parameter</u>	<u>PrepSet</u>	<u>Reading</u>	<u>Known</u>	<u>Units</u>	<u>Recover%</u>	<u>Limits</u>	<u>File</u>
Total Dissolved Solids	1166484	198	200	mg/L	99.0	85.0 - 115	127428064

Standard

<u>Parameter</u>	<u>Sample</u>	<u>Reading</u>	<u>Known</u>	<u>Units</u>	<u>Recover%</u>	<u>Limits%</u>	<u>File</u>
Total Dissolved Solids		96.0	100	mg/L	96.0	90.0 - 110	127428051

Analytical Set 1166742 EPA 1664B (HEM)

Blank

<u>Parameter</u>	<u>PrepSet</u>	<u>Reading</u>	<u>MDL</u>	<u>MQL</u>	<u>Units</u>	<u>File</u>
Oil and Grease (HEM)	1166742	1.10	0.804	4.00	mg/L	127433402

ControlBlk

<u>Parameter</u>	<u>PrepSet</u>	<u>Reading</u>	<u>MDL</u>	<u>MQL</u>	<u>Units</u>	<u>File</u>
Oil and Grease (HEM)	1166742	0.0005			grams	127433401
Oil and Grease (HEM)	1166742	0.0005			grams	127433426

LCS

<u>Parameter</u>	<u>PrepSet</u>	<u>Reading</u>	<u>Known</u>	<u>Units</u>	<u>Recover%</u>	<u>Limits</u>	<u>File</u>
Oil and Grease (HEM)	1166742	35.2	40.0	mg/L	88.0	78.0 - 114	127433403

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UWS1-R

Union Water Supply Corporation
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Project

1139880

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MS

Parameter	Sample	MS	MSD	UNK	Known	Limits	MS%	MSD%	Units	RPD	Limit%
Oil and Grease (HEM)	2390105	40.5	0	3.48	40.0	78.0 - 114	101		mg/L		20.0

Analytical Set 1165895 EPA 300.0 2.1

AWRL/LOQC

Parameter	Reading	Known	Units	Recover%	Limits%	File
Nitrate-Nitrogen Total	0.0219	0.0226	mg/L	96.9	70.0 - 130	127415254

Blank

Parameter	PrepSet	Reading	MDL	MQL	Units	File
Chloride	1165895	0.0561	0.0298	0.300	mg/L	127415255
Nitrate-Nitrogen Total	1165895	0.00481	0.00464	0.0226	mg/L	127415255

CCB

Parameter	PrepSet	Reading	MDL	MQL	Units	File
Chloride	1165895	0.0404	0.0298	0.300	mg/L	127415251
Chloride	1165895	0.0462	0.0298	0.300	mg/L	127415271
Chloride	1165895	0.0399	0.0298	0.300	mg/L	127415283
Nitrate-Nitrogen Total	1165895	0.00144	0.00464	0.0226	mg/L	127415251
Nitrate-Nitrogen Total	1165895	0	0.00464	0.0226	mg/L	127415271
Nitrate-Nitrogen Total	1165895	0	0.00464	0.0226	mg/L	127415283

CCV

Parameter	Reading	Known	Units	Recover%	Limits%	File
Chloride	10.7	10.0	mg/L	107	90.0 - 110	127415250
Chloride	10.6	10.0	mg/L	106	90.0 - 110	127415270
Chloride	10.5	10.0	mg/L	105	90.0 - 110	127415282
Nitrate-Nitrogen Total	2.47	2.26	mg/L	109	90.0 - 110	127415250
Nitrate-Nitrogen Total	2.41	2.26	mg/L	107	90.0 - 110	127415270
Nitrate-Nitrogen Total	2.40	2.26	mg/L	106	90.0 - 110	127415282

LCS Dup

Parameter	PrepSet	LCS	LCSD	Known	Limits%	LCS%	LCSD%	Units	RPD	Limit%
Chloride	1165895	5.09	5.07	5.00	85.0 - 115	102	101	mg/L	0.394	20.0
Nitrate-Nitrogen Total	1165895	1.24	1.24	1.13	86.3 - 117	110	110	mg/L	0	20.0

MSD

Parameter	Sample	MS	MSD	UNK	Known	Limits	MS%	MSD%	Units	RPD	Limit%
Chloride	2388612	546	546	456	100	80.0 - 120	90.0	90.0	mg/L	0	20.0
Nitrate-Nitrogen Total	2388612	50.8	50.5	26.7	22.6	80.0 - 120	107	105	mg/L	1.25	20.0
Chloride	2388729	87.3	88.3	80.3	10.0	80.0 - 120	70.0 *	80.0	mg/L	13.3	20.0
Nitrate-Nitrogen Total	2388729	2.42	2.41	ND	2.26	80.0 - 120	107	107	mg/L	0.414	20.0

Analytical Set 1167068 EPA 300.0 2.1

Blank

Parameter	PrepSet	Reading	MDL	MQL	Units	File
Sulfate	1167068	ND	0.160	0.300	mg/L	127441557

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UWS1-R

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Project

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CCB

<u>Parameter</u>	<u>PrepSet</u>	<u>Reading</u>	<u>MDL</u>	<u>MQL</u>	<u>Units</u>	<u>File</u>
Sulfate	1167068	0	0.160	0.300	mg/L	127441553
Sulfate	1167068	0	0.160	0.300	mg/L	127441573
Sulfate	1167068	0	0.160	0.300	mg/L	127441585

CCV

<u>Parameter</u>	<u>Reading</u>	<u>Known</u>	<u>Units</u>	<u>Recover%</u>	<u>Limits%</u>	<u>File</u>
Sulfate	9.93	10.0	mg/L	99.3	90.0 - 110	127441552
Sulfate	10.0	10.0	mg/L	100	90.0 - 110	127441572
Sulfate	10.0	10.0	mg/L	100	90.0 - 110	127441584

LCS Dup

<u>Parameter</u>	<u>PrepSet</u>	<u>LCS</u>	<u>LCSD</u>	<u>Known</u>	<u>Limits%</u>	<u>LCS%</u>	<u>LCSD%</u>	<u>Units</u>	<u>RPD</u>	<u>Limit%</u>
Sulfate	1167068	5.24	5.26	5.00	85.4 - 124	105	105	mg/L	0.381	20.0

MSD

<u>Parameter</u>	<u>Sample</u>	<u>MS</u>	<u>MSD</u>	<u>UNK</u>	<u>Known</u>	<u>Limits</u>	<u>MS%</u>	<u>MSD%</u>	<u>Units</u>	<u>RPD</u>	<u>Limit%</u>
Sulfate	2391948	185	183	132	50.0	80.0 - 120	106	102	mg/L	3.85	20.0
Sulfate	2391979	32.4	32.5	22.0	10.0	80.0 - 120	104	105	mg/L	0.957	20.0

Analytical Set

1165754

EPA 200.7 4.4

Blank

<u>Parameter</u>	<u>PrepSet</u>	<u>Reading</u>	<u>MDL</u>	<u>MQL</u>	<u>Units</u>	<u>File</u>
Phosphorus	1165553	ND	0.0353	0.040	mg/L	127412725

CCV

<u>Parameter</u>	<u>Reading</u>	<u>Known</u>	<u>Units</u>	<u>Recover%</u>	<u>Limits%</u>	<u>File</u>
Phosphorus	1.00	1.00	mg/L	100	90.0 - 110	127412724
Phosphorus	1.02	1.00	mg/L	102	90.0 - 110	127412734
Phosphorus	1.02	1.00	mg/L	102	90.0 - 110	127412744
Phosphorus	1.03	1.00	mg/L	103	90.0 - 110	127412750

ICL

<u>Parameter</u>	<u>Reading</u>	<u>Known</u>	<u>Units</u>	<u>Recover%</u>	<u>Limits%</u>	<u>File</u>
Phosphorus	24.9	25.0	mg/L	99.6	95.0 - 105	127412722

ICV

<u>Parameter</u>	<u>Reading</u>	<u>Known</u>	<u>Units</u>	<u>Recover%</u>	<u>Limits%</u>	<u>File</u>
Phosphorus	1.05	1.00	mg/L	105	90.0 - 110	127412723

LCS Dup

<u>Parameter</u>	<u>PrepSet</u>	<u>LCS</u>	<u>LCSD</u>	<u>Known</u>	<u>Limits%</u>	<u>LCS%</u>	<u>LCSD%</u>	<u>Units</u>	<u>RPD</u>	<u>Limit%</u>
Phosphorus	1165553	4.06	4.08	4.00	85.0 - 115	102	102	mg/L	0.491	25.0

MSD

<u>Parameter</u>	<u>Sample</u>	<u>MS</u>	<u>MSD</u>	<u>UNK</u>	<u>Known</u>	<u>Limits</u>	<u>MS%</u>	<u>MSD%</u>	<u>Units</u>	<u>RPD</u>	<u>Limit%</u>
Phosphorus	2389429	4.23	4.17	0.186	4.00	75.0 - 125	101	99.6	mg/L	1.49	25.0
Phosphorus	2389985	4.92	5.05	1.07	4.00	75.0 - 125	96.2	99.5	mg/L	3.32	25.0

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Union Water Supply Corporation
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Project

1139880

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Analytical Set	1165929						SM 2510 B-2011	
Blank								
<u>Parameter</u>	<u>PrepSet</u>	<u>Reading</u>	<u>MDL</u>	<u>MQL</u>	<u>Units</u>		<u>File</u>	
Lab Spec. Conductance at 25 C	1165929	0.476			umhos/cm		127416207	
Duplicate								
<u>Parameter</u>	<u>Sample</u>	<u>Result</u>	<u>Unknown</u>		<u>Unit</u>		<u>RPD</u>	<u>Limit%</u>
Lab Spec. Conductance at 25 C	2390029	1010	1010		umhos/cm		0	20.0
ICV								
<u>Parameter</u>	<u>Reading</u>	<u>Known</u>	<u>Units</u>	<u>Recover%</u>	<u>Limits%</u>		<u>File</u>	
Lab Spec. Conductance at 25 C	13000	12900	umhos/cm	101	90.0 - 110		127416210	
Standard								
<u>Parameter</u>	<u>Sample</u>	<u>Reading</u>	<u>Known</u>	<u>Units</u>	<u>Recover%</u>	<u>Limits%</u>	<u>File</u>	
Lab Spec. Conductance at 25 C	1165929	1420	1410	umhos/cm	101	90.0 - 110	127416208	
Lab Spec. Conductance at 25 C	1165929	102	100	umhos/cm	102	90.0 - 110	127416209	
Lab Spec. Conductance at 25 C	1165929	1420	1410	umhos/cm	101	90.0 - 110	127416221	

Analytical Set	1166192						SM 2320 B-2011	
Blank								
<u>Parameter</u>	<u>PrepSet</u>	<u>Reading</u>	<u>MDL</u>	<u>MQL</u>	<u>Units</u>		<u>File</u>	
Total Alkalinity (as CaCO3)	1166192	ND	1.00	1.00	mg/L		127421096	
CCV								
<u>Parameter</u>	<u>Reading</u>	<u>Known</u>	<u>Units</u>	<u>Recover%</u>	<u>Limits%</u>		<u>File</u>	
Total Alkalinity (as CaCO3)	27.5	25.0	mg/L	110	90.0 - 110		127421095	
Total Alkalinity (as CaCO3)	25.0	25.0	mg/L	100	90.0 - 110		127421109	
Total Alkalinity (as CaCO3)	27.5	25.0	mg/L	110	90.0 - 110		127421122	
Duplicate								
<u>Parameter</u>	<u>Sample</u>	<u>Result</u>	<u>Unknown</u>		<u>Unit</u>		<u>RPD</u>	<u>Limit%</u>
Total Alkalinity (as CaCO3)	2389862	37.5	35.0		mg/L		6.90	20.0
Total Alkalinity (as CaCO3)	2390037	275	274		mg/L		0.364	20.0
ICV								
<u>Parameter</u>	<u>Reading</u>	<u>Known</u>	<u>Units</u>	<u>Recover%</u>	<u>Limits%</u>		<u>File</u>	
Total Alkalinity (as CaCO3)	25.5	25.0	mg/L	102	90.0 - 110		127421094	
Mat. Spike								
<u>Parameter</u>	<u>Sample</u>	<u>Spike</u>	<u>Unknown</u>	<u>Known</u>	<u>Units</u>	<u>Recovery %</u>	<u>Limits %</u>	<u>File</u>
Total Alkalinity (as CaCO3)	2389862	62.5	35.0	25.0	mg/L	110	70.0 - 130	127421099
Total Alkalinity (as CaCO3)	2390037	296	274	25.0	mg/L	88.0	70.0 - 130	127421112

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

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

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QUALITY CONTROL



UWS1-R

Union Water Supply Corporation

Jorge Bazan

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Project

1139880

Printed 03/25/2025

CCV - Continuing Calibration Verification (same standard used to prepare the curve; typically a mid-range concentration; verifies the continued validity of the calibration curve); Blank - Method Blank (reagent water or other blank matrices that contains all reagents except standard(s) and is processed simultaneously with and under the same conditions as samples; carried through preparation and analytical procedures exactly like a sample; monitors); MSD - Matrix Spike Duplicate (replicate of the matrix spike; same solution and amount of target analyte added to the MS is added to a third aliquot of sample; quantifies matrix bias and precision.); ICV - Initial Calibration Verification; LCS Dup - Laboratory Control Sample Duplicate (replicate LCS; analyzed when there is insufficient sample for duplicate or MSD; quantifies accuracy and precision.); CCB - Continuing Calibration Blank; AWRL/LOQ C - Ambient Water Reporting Limit/LOQ Check Std; LCS - Laboratory Control Sample (reagent water or other blank matrices that is spiked with a known quantity of target analyte(s) and carried through preparation and analytical procedures exactly like a sample; typically a mid-range concentration; verifies that bias and precision of the analytical process are within control limits; determines usability of the data.); MS - Matrix Spike (same solution and amount of target analyte added to the LCS is added to a second aliquot of sample; quantifies matrix bias.)

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CHAIN OF CUSTODY

Union Water Supply Corporation
 Jorge Bazan
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 Garciasville, TX 78547

UWS1-R
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Lab Number *V1900H*
 PO Number _____
 Phone 956/573-8725

WWTP Permit Renewal

Hand delivered by Client to Region or LAB

Matrix: Non-Potable Water

Sample Collection Start

Date: 3/13/2025 Time: 9:00Sampler Printed Name: REY DE LEONSampler Affiliation: SPISampler Signature: [Signature] Samples Radioactive? Samples Contains Dioxin? Samples Biological Hazard?

On Site Testing

NELAC Short Hold

pH

pH (Onsite)

SM 4500-H+B-2011 (0.01 4 days)

pH (Onsite)

Collected By RDL Date 3/13/25 Time 9:08 Analyzed By RDL Date 3/13/25 Time 9:01Results 5.0 Units 5U Temp. 27.8 C Duplicate 5.0 Units 5U Temp. 27.9 C

2 H₂SO₄ to pH <2 GIQt w/Tef-lined lid

NELAC

HBM

Oil and Grease (HBM)

EPA 1664B (HBM) (28.0 days)

1 Polyethylene 1/2 gal (White)

NELAC Short Hold

BOD

BOD Carbonaceous

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

NELAC

TSS

Total Suspended Solids

SM 2540 D-2015 (7.00 days)

1 HNO₃ to pH <2 Polyethylene 500 mL for Metals

NELAC

*P

Phosphorus

EPA 200.7 4.4 CAS:7723-4-0 (180 days)

301L

Liquid Metals Digestion

EPA 200.2 2.8 (180 days)



RGV Region: 2401 Villie Dr. Suite C Brownsville TX 78521

For upcoc ISPL1 Created 12/13/2019 v1.0

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



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CHAIN OF CUSTODY

Union Water Supply Corporation
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Garciasville, TX 78547

UWS1-R
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1 H2SO4 to pH <2 250 ml Polyethylene

NELAC	NH4N	Ammonia Nitrogen	EPA 350.1.2 (28.0 days)
NELAC	TKN	Total Kjeldahl Nitrogen	EPA 351.2.2 CAS:7727-37-9 (28.0 days)

1 Polyethylene Quart

NELAC	ICIL	Chloride	EPA 300.0.2.1 (28.0 days)
NELAC Short Hold	IN3L	Nitrate-Nitrogen Total	EPA 300.0.2.1 CAS:14797-55-8 (2.00 days)
NELAC	IS4L	Sulfate	EPA 300.0.2.1 (28.0 days)
NELAC	ALKT	Total Alkalinity (as CaCO3)	SM 2320 B-2011 (14.0 days)
NELAC	CONL	Lab Spec. Conductance at 25 C	SM 2510 B-2011 (28.0 days)
NELAC	TDS	Total Dissolved Solids	SM 2540 C-2015 (7.00 days)

Ambient Conditions/Comments

Date	Time	Relinquished	Received
3/12/25	17:30	Printed Name B. DE LEON SPL Affiliation Signature	Printed Name FedEx Affiliation Signature
3/13/25	10:00	Printed Name FedEx Affiliation Signature	Printed Name Kiersten Ross am - SPL, Inc. Affiliation Signature
		Printed Name Signature	Printed Name Signature
		Printed Name Signature	Printed Name Signature

Sample Received on Ice? Yes No
Cooler/Sample Secure? Yes No

If Shipped: Tracking Number & Temp - See Attached

The accredited column designates accreditation by A - A2LA, N - NELAC, or Z - not listed under scope of accreditation. Unless otherwise specified, SPL shall provide these ordered services pursuant to our Standard Terms & Conditions Agreement. SPL personnel collect samples as specified by SPL SOF #000223.

Comments



RGV Region: 2401 Villag

Dr. Suite C Brownsville TX 78520

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CHAIN OF CUSTODY

Union Water Supply Corporation
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UWS1-R
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Lab Number	1139880
PO Number	
Phone	956/373-8725

WWTP Permit Renewal

Hand Delivered by Client to Region or LAB

Matrix: Non-Potable Water

Sample Collection Start

Date: 3/13/2025 Time: 9:00

Sampler Printed Name: Rey De Leon

Sampler Affiliation: SPL

Sampler Signature: [Signature]

Samples Radioactive?

Samples Contains Dioxin?

Samples Biologica Hazard?

0 On Site Testing

NELAC

Cl2O

Cl2 Res., Total(Onsite)Spec Mid [RL 0.05 mg/L] SM 4500-Cl G-2011

Cl2 Res., Total(Onsite)Spec Mid [RL 0.05 mg/L]

Collected By RDL Date 3/13/25 Time 9:00 Analyzed By RDL Date 3/13/25 Time 9:07

ND ND
Results 0.00 Units mg/l Temp. 22.5 C Duplicate 0.00 Units mg/l Temp. 23.0 C
R1 0.00 R2 0.00 QC R1 0.00 QC R2 0.00

NELAC Short Hold

DO

Dissolved Oxygen Onsite

SM 4500-O G-2016 (0.010- days)

Dissolved Oxygen Onsite

Collected By RDL Date 3/13/25 Time 9:00 Analyzed By RDL Date 3/13/25 Time 9:05

Results 6.01 Units mg/l Temp. 22.6 C Duplicate 5.97 Units mg/l Temp. 22.7 C

1 Na2S2O3 (0.008%) Polystyrene-100 mL Sterilized

Subcontract

ERGV

MPN, E.coli, Coli-18 - WW sub

Subcontract CAS:CCWU



RGV Region: 2401 Villa

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Form: ptocac1SPL | Created: 12/13/2019 v1.6

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 The SPL Laboratory

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CHAIN OF CUSTODY

Union Water Supply Corporation

Jorge Bazan

P.O. Box 31

Garciasville, TX 78547-

Ambient Conditions/Comments

UWS1-R

105

Date	Time	Relinquished	Received
3/13/25	17:30	Printed Name R.D.S. LEON SPL Signature (Initials)	Printed Name FedEx Signature
3/14/25	10:00	Printed Name FedEx Signature	Printed Name Kristen Rossen - SPL, Inc. SPL Signature KRMIS
		Printed Name Signature	Printed Name Signature
		Printed Name Signature	Printed Name Signature

Sample Received on Ice? Yes No
 Cooler/Sample Secure? Yes No

If Shipped: Tracking Number & Temp - See Attached

The accredited column designates accreditation by A - A2LA, N - NELAC, or Z - not listed under scope of accreditation. Unless otherwise specified, SPL shall provide these ordered services pursuant to our Standard Terms & Conditions Agreement. SPL personnel collect samples as specified by SPL SOW #000321.

Comments



RGV Region: 2401 Village Jr. Suite C Brownsville, TX 78520

Report Page 19 of 21

1139880 CoC Print Group 001 of 001

CHAIN OF CUSTODY RECORD

Client Name: SPL LABS

Address: 2600 Dudley Rd.

City: Kilgore State: TX Zip: 75662

Phone: (903) 984 - 0551 Fax: (903) 984 - 5914

Send Email report to kilgore.projectmanagement.spllabs.com
cc: joel.manjarrez@spllabs.comUSW1
R-105

Water Utility Laboratory
13101 Leopard St.
Corpus Christi, TX 78410
Ph: (361) 826-1200
Fax: (361) 242-9131



Sampler (PLEASE PRINT): REY DE LEON

Sample ID	Lab ID# <i>(Lab Name Only)</i>	Date Sampled	Time Sampled	Grab	Composite	Other	HSO4	HNO3	TlD	None	WW Influent	WW Effluent	Water Specif	Other Specif	No. of Containers/Preservative	Matrix	Residual Chlorine	Analyze For												
															Total mg/L <input checked="" type="checkbox"/>	CBOD	BOD	TSS	TDS	Ammonia-N	TKN	Chloride	Sulfate	Phosphorous	Nitrate	Nitrite	Total Alkalinity	TOC	Fecal Coliform	Total Coliform
WWTP/Permit Renewal		3/13/25	9:00	X					X		X				0.00														X	
WWTP/Permit Renewal		3/13/25	9:00	X					X		X				0.00														X	

Relinquished By: REY DE LEON	Date: 3/13/25	Time: 13:48	Special Instructions/Comments:
Received By: V. Mayes	Date: 3/13/25	Time: 13:48	Other* -
Relinquished By:	Date:	Time:	
Received By:	Date:	Time:	
Relinquished By:	Date:	Time:	**** For Laboratory Use Only ****
Received By:	Date:	Time:	Sample(s) on ice: <input checked="" type="checkbox"/> NO pH Strip Lot/ID:
Relinquished By:	Date:	Time:	Receiving Temp (°C): 2-7 pH < 2? YES NO Line(s) #:
Received By:	Date:	Time:	Corrected Temp (°C): 2-7 Data Flag(s):
			Temp. Device ID: A

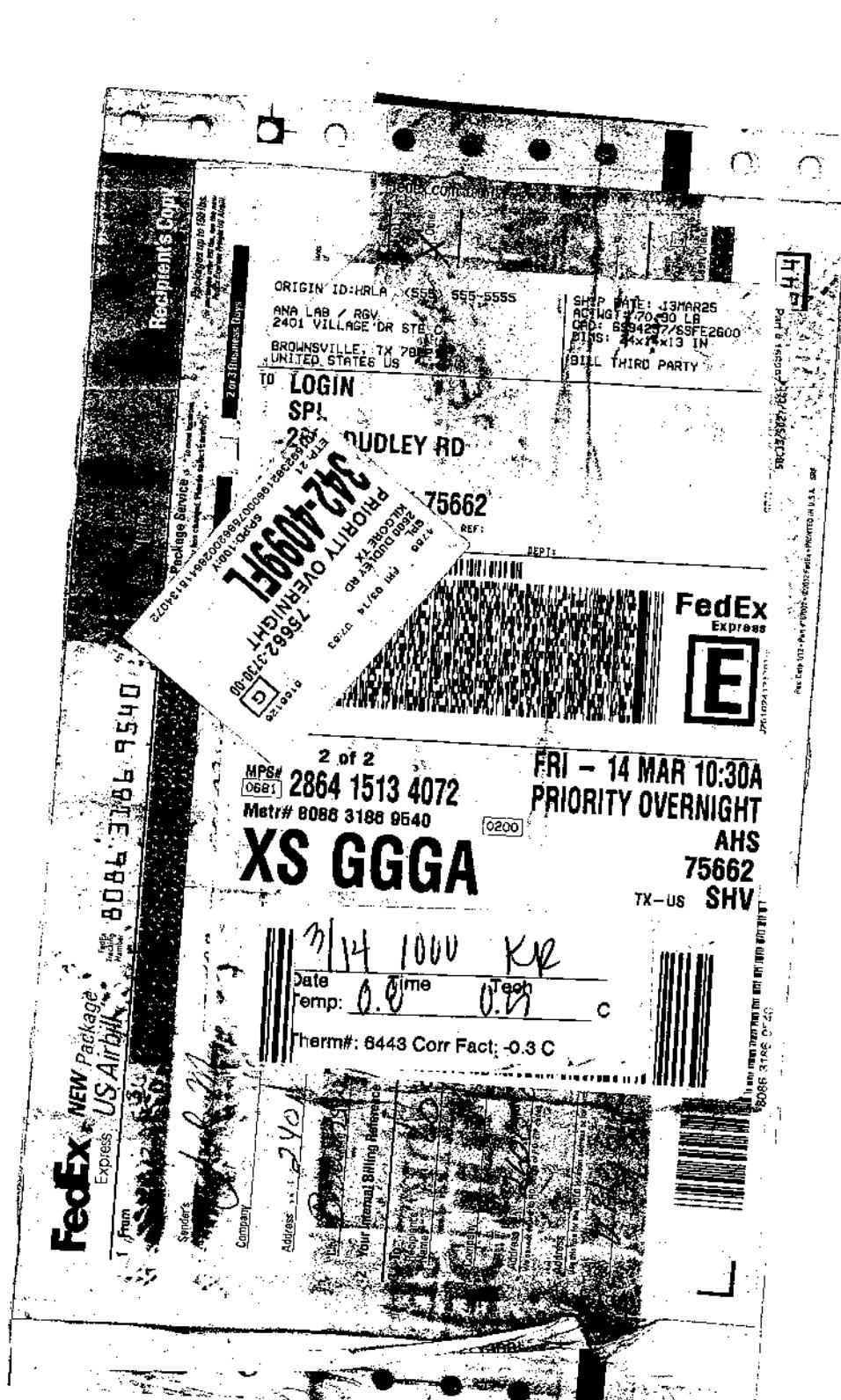
WHITE (ORIGINAL) - Lab Copy

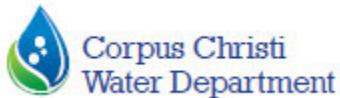
YELLOW - Submitter Copy

Rev. October 20, 2017

6 of 6

1139880 CoC Print Group 001 of 001





City of Corpus Christi
Water Utilities Laboratory
13101 Leopard Street
361-826-1200 Fax: 361-242-9131

Analytical Report



Client Info		SPL-INC 2600 Dudley Rd. Kilgore, TX 75662				Report# /Lab ID#: AC53869	Report Date:	3/14/25		
						Sample Name: WWTP/PERMIT RENEWAL				
Phone: _____					Date Received: 03/13/2025 Time: 13:48					
EMAIL: Kilgore.Projectmanagement@splla					Date Sampled: 03/13/2025 Time: 09:00					
Parameter	Result	Unit	Flag	RL s	Date/Time Analyzed	Method	Analyst	Analysis Comments		
E. coli (MPN)	3.1	MPN		1.0	3/13/25 15:30	SM 9223 B - Coli	CF			
Sample Comments:										
This analytical report is respectfully submitted by the Water Utilities Laboratory. The enclosed results reflect only the sample(s) identified above. The results have been carefully reviewed and, unless otherwise indicated, meet the NELAC requirements as described by the Water Utilities Lab's QA/QC program. No part of this report shall be reproduced or transmitted in any form or by any means without the written consent of the City of Corpus Christi-Water Utilities Lab.										
Respectfully Submitted,										
Technical Director (or designee)										
1. Quality assurance data for the sample batch which included this sample. 2. Precision (PREC) is the absolute value of the relative percent difference between duplicate results . 3. Recovery (RECOV) is the percent of analyte recovered from a spiked sample. 4. Laboratory Control Sample (LCS) results are expressed as the percent recovery of analyte. 5. Reporting Limit (RL), typically at or above the Limit of Quantitation (LOQ) of the analytical method. 6. Data Qualifiers: N=Analysis not performed as per client request. H=Sample exceeded holding time. P=Analysis is from an unpreserved sample. J=Value reported is less than the RL but greater than the MDL. X=MS/MSD recovery or duplicates analysis exceeded the acceptance limit or Standard failed. LA=Lab accident. LE=Lab error. OA=Outside the scope of the lab's NELAC accreditation. U Unsuitable; sample turned turbid after incubation T Sample below temp requirement; not on ice EQ Equipment failure I Information on sample bottle and COC does not match S=Slow to filter; sample contains floc and/or large amount of residue on filter. O=Analysis performed by an outside NELAC accredited lab; OA=Analysis flagged by outside laboratory. Z=Too many colonies present to provide a result (TNTC). A=Value reported is the mean of two or more determinations . R=Reagent water contamination suspected. B=Sample broken in transit. NI=Not analyzed due to interferences. K=BOD result estimated due to blank exceeding the allowable oxygen depletion. D=Sample dilution required for analysis/ quality control. SC=BOD/CBOD calculated using a seed correction factor not within acceptable range. QB=No QC data assigned to sample; sample result not affected. EL Oxygen usage is less than 2mg/L for all dilutions analyzed. The reported value is an estimated less than value and is calculated for the dilution containing the greatest concentration of sample EG=Less than 1mg/L DO remained for all dilutions analyzed. The reported value is an estimated greater than value and is calculated for the dilution containing the least concentration of sample. E= The data exceed the upper calibration limit; therefore the concentration is reported as an estimate.										

CHAIN OF CUSTODY RECORD

Client Name: SPL LABS
 Address: 2600 Dudley Rd.
 City: Kilgore State: TX Zip: 75662
 Phone: (903) 984 - 0551 Fax: (903) 984 - 5914

Send Email report to: kilgore.projectmanagement.spllabs.com
 cc: joel.manjarrez@spllabs.com

USW1
R-105



City of
Corpus
Christi

Water Utilities Laboratory
 13101 Leopard St.
 Corpus Christi, TX 78410
 Ph: (361) 826-1200
 Fax: (361) 242-9131

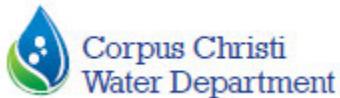


Sampler (PLEASE PRINT)

REY DE LEON

Sample ID	Lab ID# <i>(Lab Use Only)</i>	Date Sampled	Time Sampled	Grab	Composite	Other	H ₂ SO ₄	HNO ₃	Thio	None	WW Influent	WW Effluent	Water	Other-Specific	Residual Chlorine	Analyze For														
																Total mg/L	CBOD	BOD	TSS	TDS	Ammonia-N	TKN	Chloride	Sulfate	Phosphorus	Nitrate	Nitrite	Total Alkalinity	TOC	Fecal Coliform
1 WWTP/Permit Renewal	A53868	3/13/25	9:00	X							X	X			0.00													X		
2 WWTP/Permit Renewal	A53869	3/13/25	9:00	X							X	X			0.00													X		
3																														
4																														
5																														
6																														

Relinquished By:	REY DE LEON	Date: 3/13/25	Time: 13:48	Special Instructions/Comments:		
Received By:	V. Mayz	Date: 3-13-25	Time: 1348	Other * -		
Relinquished By:		Date:	Time:			
Received By:		Date:	Time:			
Relinquished By:		Date:	Time:	***** For Laboratory Use Only *****		
Received By:		Date:	Time:	Sample(s) on ice: <input checked="" type="checkbox"/>	NO	pH Strip Lot/ ID:
Relinquished By:		Date:	Time:	Receiving Temp (°C):	2-2	pH < 2? YES NO Line(s) #:
Received By:		Date:	Time:	Corrected Temp (°C):	2-2	Data Flag(s):



City of Corpus Christi
Water Utilities Laboratory
13101 Leopard Street
361-826-1200 Fax: 361-242-9131

Analytical Report



Client Info	SPL-INC 2600 Dudley Rd. Kilgore, TX 75662						Report# /Lab ID#: AC53868 Sample Name: WWTP/PERMIT RENEWAL Date Received: 03/13/2025 Time: 13:48 Date Sampled: 03/13/2025 Time: 09:00	Report Date: 3/14/25
Phone:	EMAIL: Kilgore.Projectmanagement@splla							
Parameter	Result	Unit	Flag	RL s	Date/Time Analyzed	Method	Analyst	Analysis Comments
Enterococci	>2419.6	MPN		1.0	3/13/25 15:08	Enterolert	CF	
Sample Comments:								
This analytical report is respectfully submitted by the Water Utilities Laboratory. The enclosed results reflect only the sample(s) identified above. The results have been carefully reviewed and, unless otherwise indicated, meet the NELAC requirements as described by the Water Utilities Lab's QA/QC program. No part of this report shall be reproduced or transmitted in any form or by any means without the written consent of the City of Corpus Christi-Water Utilities Lab.								
Respectfully Submitted,								
Technical Director (or designee)								
1. Quality assurance data for the sample batch which included this sample. 2. Precision (PREC) is the absolute value of the relative percent difference between duplicate results . 3. Recovery (RECOV) is the percent of analyte recovered from a spiked sample. 4. Laboratory Control Sample (LCS) results are expressed as the percent recovery of analyte. 5. Reporting Limit (RL), typically at or above the Limit of Quantitation (LOQ) of the analytical method. 6. Data Qualifiers: N=Analysis not performed as per client request. H=Sample exceeded holding time. P=Analysis is from an unpreserved sample. J=Value reported is less than the RL but greater than the MDL. X=MS/MSD recovery or duplicates analysis exceeded the acceptance limit or Standard failed. LA=Lab accident. LE=Lab error. OA=Outside the scope of the lab's NELAC accreditation. U Unsuitable; sample turned turbid after incubation T Sample below temp requirement; not on ice EQ Equipment failure I Information on sample bottle and COC does not match S=Slow to filter; sample contains floc and/or large amount of residue on filter. O=Analysis performed by an outside NELAC accredited lab; OA=Analysis flagged by outside laboratory. Z=Too many colonies present to provide a result (TNTC). A=Value reported is the mean of two or more determinations . R=Reagent water contamination suspected. B=Sample broken in transit. NI=Not analyzed due to interferences. K=BOD result estimated due to blank exceeding the allowable oxygen depletion. D=Sample dilution required for analysis/ quality control. SC=BOD/CBOD calculated using a seed correction factor not within acceptable range. QB=No QC data assigned to sample; sample result not affected. EL Oxygen usage is less than 2mg/L for all dilutions analyzed. The reported value is an estimated less than value and is calculated for the dilution containing the greatest concentration of sample EG=Less than 1mg/L DO remained for all dilutions analyzed. The reported value is an estimated greater than value and is calculated for the dilution containing the least concentration of sample. E= The data exceed the upper calibration limit; therefore the concentration is reported as an estimate.								

CHAIN OF CUSTODY RECORD

Client Name: SPL LABS
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 City: Kilgore State: TX Zip: 75662
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Send Email report to: kilgore.projectmanagement.spllabs.com
 cc: joel.manjarrez@spllabs.com

USW1
R-105



City of
Corpus
Christi

Water Utilities Laboratory
 13101 Leopard St.
 Corpus Christi, TX 78410
 Ph: (361) 826-1200
 Fax: (361) 242-9131



Sampler (PLEASE PRINT)

REY DE LEON

Sample ID	Lab ID# <i>(Lab Use Only)</i>	Date Sampled	Time Sampled	Grab	Composite	Other	H ₂ SO ₄	HNO ₃	Thio	None	WW Influent	WW Effluent	Water	Other-Specific	Residual Chlorine	Analyze For														
																Total mg/L	CBOD	BOD	TSS	TDS	Ammonia-N	TKN	Chloride	Sulfate	Phosphorus	Nitrate	Nitrite	Total Alkalinity	TOC	Fecal Coliform
1 WWTP/Permit Renewal	A53868	3/13/25	9:00	X							X	X			0.00													X		
2 WWTP/Permit Renewal	A53869	3/13/25	9:00	X							X	X			0.00													X		
3																														
4																														
5																														
6																														

Relinquished By:	REY DE LEON	Date: 3/13/25	Time: 13:48	Special Instructions/Comments:
Received By:	V. Mayz	Date: 3-13-25	Time: 1348	Other * -
Relinquished By:		Date:	Time:	
Received By:		Date:	Time:	
Relinquished By:		Date:	Time:	***** For Laboratory Use Only *****
Received By:		Date:	Time:	Sample(s) on ice: <input checked="" type="checkbox"/> NO pH Strip Lot/ ID:
Relinquished By:		Date:	Time:	Receiving Temp (°C): 2-2 pH < 2? YES NO Line(s) #:
Received By:		Date:	Time:	Corrected Temp (°C): 2-2 Data Flag(s):

DOMESTIC WASTEWATER PERMIT APPLICATION

WORKSHEET 2.0: RECEIVING WATERS

The following information is required for all TPDES permit applications.

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

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

Yes No

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

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

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

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

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

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

Does the facility discharge into tidally affected waters?

Yes No

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

A. Receiving water outfall

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

B. Oyster waters

Are there oyster waters in the vicinity of the discharge?

Yes No

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

[Click to enter text.](#)

C. Sea grasses

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

Yes No

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

[Click to enter text.](#)

Section 3. Classified Segments (Instructions Page 63)

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

- Yes No

If yes, this Worksheet is complete.

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

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

Name of the immediate receiving waters: Unnamed County Drain Ditch

A. Receiving water type

Identify the appropriate description of the receiving waters.

- Stream
- Freshwater Swamp or Marsh
- Lake or Pond

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

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

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

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

B. Flow characteristics

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

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

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

- USGS flow records
- Historical observation by adjacent landowners
- Personal observation
- Other, specify: [Click to enter text.](#)

C. Downstream perennial confluences

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

None

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.

[Click to enter text.](#)

E. Normal dry weather characteristics

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

Intermittent flow with no unusual characteristics

Date and time of observation: 2/11/2025-2:45 p.m.

Was the water body influenced by stormwater runoff during observations?

Yes No

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

A. Upstream influences

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

- | | |
|---|--|
| <input type="checkbox"/> Oil field activities | <input type="checkbox"/> Urban runoff |
| <input type="checkbox"/> Upstream discharges | <input checked="" type="checkbox"/> Agricultural runoff |
| <input type="checkbox"/> Septic tanks | <input type="checkbox"/> 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 checked="" 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 type="checkbox"/> Other(s), specify: Click to enter text. |

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 6.0: INDUSTRIAL WASTE CONTRIBUTION

The following is required for all publicly owned treatment works.

Section 1. All POTWs (Instructions Page 87)

A. Industrial users (IUs)

Provide the number of each of the following types of industrial users (IUs) that discharge to your POTW and the daily flows from each user. See the Instructions for definitions of Categorical IUs, Significant IUs - non-categorical, and Other IUs.

If there are no users, enter 0 (zero).

Categorical IUs:

Number of IUs: 0

Average Daily Flows, in MGD: [Click to enter text.](#)

Significant IUs – non-categorical:

Number of IUs: 0

Average Daily Flows, in MGD: [Click to enter text.](#)

Other IUs:

Number of IUs: 0

Average Daily Flows, in MGD: [Click to enter text.](#)

B. Treatment plant interference

In the past three years, has your POTW experienced treatment plant interference (see instructions)?

Yes No

If yes, identify the dates, duration, description of interference, and probable cause(s) and possible source(s) of each interference event. Include the names of the IUs that may have caused the interference.

[Click to enter text.](#)

C. Treatment plant pass through

In the past three years, has your POTW experienced pass through (see instructions)?

- Yes No

If yes, identify the dates, duration, a description of the pollutants passing through the treatment plant, and probable cause(s) and possible source(s) of each pass through event. Include the names of the IUs that may have caused pass through.

Click to enter text.

D. Pretreatment program

Does your POTW have an approved pretreatment program?

- Yes No

If yes, complete Section 2 only of this Worksheet.

Is your POTW required to develop an approved pretreatment program?

- Yes No

If yes, complete Section 2.c. and 2.d. only, and skip Section 3.

If no to either question above, skip Section 2 and complete Section 3 for each significant industrial user and categorical industrial user.

Section 2. POTWs with Approved Programs or Those Required to Develop a Program (Instructions Page 87)

A. Substantial modifications

Have there been any **substantial modifications** to the approved pretreatment program that have not been submitted to the TCEQ for approval according to *40 CFR §403.18*?

- Yes No

If yes, identify the modifications that have not been submitted to TCEQ, including the purpose of the modification.

Click to enter text.

B. Non-substantial modifications

Have there been any **non-substantial modifications** to the approved pretreatment program that have not been submitted to TCEQ for review and acceptance?

Yes No

If yes, identify all non-substantial modifications that have not been submitted to TCEQ, including the purpose of the modification.

Click to enter text.

C. Effluent parameters above the MAL

In Table 6.0(1), list all parameters measured above the MAL in the POTW's effluent monitoring during the last three years. Submit an attachment if necessary.

Table 6.0(1) – Parameters Above the MAL

Pollutant	Concentration	MAL	Units	Date

D. Industrial user interruptions

Has any SIU, CIU, or other IU caused or contributed to any problems (excluding interferences or pass throughs) at your POTW in the past three years?

Yes No

If yes, identify the industry, describe each episode, including dates, duration, description of the problems, and probable pollutants.

Click to enter text.

Section 3. Significant Industrial User (SIU) Information and Categorical Industrial User (CIU) (Instructions Page 88)

A. General information

Company Name: N/A

SIC Code: Click to enter text.

Contact name: Click to enter text.

Address: Click to enter text.

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

Telephone number: Click to enter text.

Email address: Click to enter text.

B. Process information

Describe the industrial processes or other activities that affect or contribute to the SIU(s) or CIU(s) discharge (i.e., process and non-process wastewater).

Click to enter text.

C. Product and service information

Provide a description of the principal product(s) or services performed.

Click to enter text.

D. Flow rate information

See the Instructions for definitions of “process” and “non-process wastewater.”

Process Wastewater:

Discharge, in gallons/day: Click to enter text.

Discharge Type: Continuous Batch Intermittent

Non-Process Wastewater:

Discharge, in gallons/day: Click to enter text.

Discharge Type: Continuous Batch Intermittent

E. Pretreatment standards

Is the SIU or CIU subject to technically based local limits as defined in the instructions?

- Yes No

Is the SIU or CIU subject to categorical pretreatment standards found in *40 CFR Parts 405-471*?

- Yes No

If **subject to categorical pretreatment standards**, indicate the applicable category and subcategory for each categorical process.

Category: Subcategories: [Click to enter text.](#)

Click or tap here to enter text. [Click to enter text.](#)

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

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

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

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

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

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

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

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

F. Industrial user interruptions

Has the SIU or CIU caused or contributed to any problems (e.g., interferences, pass through, odors, corrosion, blockages) at your POTW in the past three years?

- Yes No

If yes, identify the SIU, describe each episode, including dates, duration, description of problems, and probable pollutants.

[Click to enter text.](#)

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: Mr.

Last Name, First Name: Bazan, Jorge

Title: General Manager

Credential:

Organization Name: Union Water Supply Corporation

Mailing Address: P.O. Box 31

City, State, Zip Code: Garciasville, TX 78547

Phone No.: (956) 487-3744

E-mail Address: unionwatersupply@yahoo.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: Union Water Supply Corporation

Location within the building: Main Lobby

Physical Address of Building: 5992 FM 1430

City: Garciasville County: Starr

Contact (Last Name, First Name): Jorge Bazan

Phone No.: (956) 487-3744 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

Union Water Supply Corporation

Address: 5992 Fm 1430, Rio Grande City, TX 78582

Phone: +1 956-487-3744



B. Prefix: Mr. Last Name, First Name: Perez, Samuel
Title: Wastewater Plant Supervisor Credential: Class C Wastewater License
Organization Name: Union Water Supply Corporation
Mailing Address: P.O. Box 31 City, State, Zip Code: Garciasville, TX 78547
Phone No.: (956) 487-3744 E-mail Address: unionwatersupply@yahoo.com

Section 6. Billing Contact Information (Instructions Page 27)

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

Prefix: Ms. Last Name, First Name: Barrera, Teresa
Title: AP Specialist Credential: Acountant
Organization Name: Union Water Supply Corporation
Mailing Address: P.O. Box 31 City, State, Zip Code: Garciasville 78547
Phone No.: (956) 487-3744 E-mail Address: unionwatersupply15@yahoo.com

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

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

Prefix: Mr. Last Name, First Name: Peres, Samuel
Title: Wastewater Plant Supervisor Credential: Class C Wastewater License
Organization Name: Union Water Supply Corporation
Mailing Address: P.O. Box 31 City, State, Zip Code: Garciasville, TX 78547
Phone No.: (956) 487-3744 E-mail Address: unionwatersupply@yahoo.com

Section 8. Public Notice Information (Instructions Page 27)

A. Individual Publishing the Notices

Prefix: Mr. Last Name, First Name: Bazan, Jorge
Title: General Manager Credential:
Organization Name: Union Water Supply Corporation
Mailing Address: P.O. Box 31 City, State, Zip Code: Garciasville, TX 78547
Phone No.: (956) 487-3744 E-mail Address: unionwatersupply@yahoo.com



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

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

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

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

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

Union Water Supply Corporation (CN 600703599) operates the Union Water Supply Wastewater Treatment Plant (RN102915501), an activated sludge plant. The facility is located approximately 2.2 miles southeast of the intersection of Farm-to-Market Road 1430 and U.S. Highway 83, in the community of Garciasville, Starr County, Texas 78547.

Union Water Supply Corporation has applied to the Texas Commission on Environmental Quality (TCEQ) to renew the permit that authorizes the discharge of treated domestic wastewater effluent at a daily average flow not to exceed 0.774 million gallon per day (MGD) via Outfall 001.

Discharges from the facility are expected to contain coliform bacteria, total suspended solids, ammonia nitrogen, nitrate nitrogen, total Kjeldahl nitrogen, sulfate, chloride, total phosphorous, total dissolved solids, oil and grease. Domestic wastewater is treated by an activated sludge process plant and the treatment units include a bar screen, aeration basins, clarifiers, and a chlorine contact chamber.

Comisión de Calidad Ambiental del Estado de Texas



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

PERMISO NO. WQ00

SOLICITUD. *La Corporación de Abastecimiento de Agua Unión, Apartado Postal Número 31, Garciasville, Texas 78547*, ha solicitado a la Comisión de Calidad Ambiental del Estado de Texas (TCEQ) para renovar el Permiso No. WQ0015867001 (EPA I.D. No. TX 0140163) 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 **774,000** galones por día. La planta está ubicada *aproximadamente 2.2 millas al sureste de la intersección del Camino de Granja a Mercado 1430 y la Carretera de Los Estados Unidos 83* en el Condado de **Starr**, Texas **78547**. La ruta de descarga es del sitio de la planta a *una acequia del condado; de ahí al Banco Santo Domingo Número 55; de ahí al Río Grande abajo de la Presa Falcón en el Segmento No. 2032 de la cuenca del Rio Grande*. La TCEQ recibió esta solicitud el **31 de Marzo del 2025**. La solicitud para el permiso estará disponible para leerla y copiarla en *la Oficina de Correos de Los Estados Unidos, Camino de Granja a Mercado 1430 Número 6648, Garciasville, 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=-98.7156,26.320655&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. Si ciertos criterios se cumplen, la TCEQ puede actuar sobre una solicitud para renovar un permiso sin proveer una oportunidad de una audiencia administrativa de lo contencioso.

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 del solicitante indicado por nombre y número del permiso específico y/o (2) la lista de correo de todas las solicitudes en un condado específico. Si desea que se agrega su nombre en una de las listas designe cual lista(s) y envíe por correo su pedido a la Oficina del Secretario Principal de la TCEQ.

INFORMACIÓN DISPONIBLE EN LÍNEA. Para detalles sobre el estado de la solicitud, favor de visitar la Base de Datos Integrada de los Comisionados en www.tceq.texas.gov/goto/cid. Para buscar en la base de datos, utilizar el número de permiso para esta solicitud que aparece en la parte superior de este aviso.

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 de la Corporación de Abastecimiento de Agua Unión a la dirección indicada arriba o llamando al **Sr. Jorge Bazán, Gerente General**, al **teléfono 956-487-3744**.

Fecha de emisión: **[Date notice issued]**

APPLICATION. Union Water Supply Corporation, P.O. Box 31, Garciasville, Texas 78547, has applied to the Texas Commission on Environmental Quality (TCEQ) to renew Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0015867001 (EPA I.D. No. TX0140163) to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 774,000 gallons per day. The domestic wastewater treatment facility is located approximately 2.2 Miles southeast of the intersection of Farm-to-Market Road 1430 and U.S. Highway 83, in the community of Garciasville, in Starr County, Texas 78547. The discharge route is from the plant site to a county drainage ditch; thence to Santo Domingo Banco No. 55; thence to Rio Grande Below Falcon Reservoir in Segment No. 2032 of the Rio Grande Basin. TCEQ received this application on March 31, 2025. The permit application will be available for viewing and copying at U.S. Post Office, Main Lobby, 6648 FM 1430, Garciasville, in Starr County, Texas prior to the date this notice is published in the newspaper. The application, including any updates, and associated notices are available electronically at the following webpage: <https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdesapplications>. This link to an electronic map of the site or facility's general location is provided as a public courtesy and not part of the application or notice. For the exact location, refer to the application. <https://gisweb.tceq.texas.gov/LocationMapper/?marker=-98.7156,26.320655&level=18>

Brandon Maldonado

From: Union Water Supply <unionwatersupply@yahoo.com>
Sent: Thursday, April 10, 2025 10:18 AM
To: Brandon Maldonado
Subject: Response to TCEQ NOD Letter Date 4/8/2025
Attachments: 10053_UWSC_2025_P5_Item1..pdf; TCEQ NODLtr1_Item 2..docx; Municipal Discharge Renewal Spanish NORI_2025_Item 3..docx; 20972_PLS_UWSC_P1.pdf

Dear Mr. Maldonado,

I have attached the items requested as per your NOD letter dated April 8, 2025.

1. Attached is the Administrative Report 1.0, Section 6 with a valid mailing address.
2. Attached is the NORI with the corrections made. Garciasville is not a city, it is a community. Also, I added to the description of the discharge route as written in the permit. At the end, I added "in Segment No. 2032 of the Rio Grande Basin."
3. Attached is the completed NORI in Spanish using the template provided.

In addition, I also noted a mistake in the English Summary of Application in Plain Language on Page 1 of Form 20972. The capacity of the plant was listed incorrectly. Attached is the corrected page.

Jorge Bazan
MANAGER
Union Water Supply