



Administrative Package Cover Page

This file contains the following documents:

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



Portada de Paquete Administrativo

Este archivo contiene los siguientes documentos:

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

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

Chambers County Improvement District No. 3 (CN603736430) operates the CCID 3 wastewater treatment plant (RN111043063), an activated sludge process plant operated in the complete mix mode. The facility is located approximately 2,240 feet southeast of the intersection of Kilgore Parkway and State Highway 99, Chambers County, Texas 77523.

This application is for a renewal to discharge at a daily average flow of 800,000 gallons per day of treated domestic wastewater.

Discharges from the facility are expected to contain five-day carbonaceous biochemical oxygen demand (CBOD₅), total suspended solids (TSS), ammonia nitrogen (NH₃-N), and *Escherichia coli*. Additional potential pollutants are included in the Domestic Technical Report 1.0, Section 7. Pollutant Analysis of Treated Effluent and Domestic Worksheet 4.0 in the permit application package. Domestic wastewater is treated by an activated sludge process plant and the treatment units include a bar screen, aeration basins, final clarifiers, sludge digesters, a belt filter press, chlorine contact chambers and a dechlorination chamber.



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

El Distrito de Mejoras no. 3 del Condado de Chambers (CN603736430) opera la planta de tratamiento de aguas residuales CCID 3 (RN111043063), una planta de procesamiento de lodos activados que opera en modo de mezcla completa. La instalación se encuentra aproximadamente a 680 metros al sureste de la intersección de Kilgore Parkway y la Carretera Estatal 99, Condado de Chambers, Texas 77523.

Esta solicitud es para una renovación para descargar un flujo promedio diario de 800,000 galones por día de aguas residuales domésticas tratadas.

Se espera que las descargas de la instalación contengan la demanda bioquímica de oxígeno carbonoso de cinco días (CBOD₅), sólidos suspendidos totales (TSS), nitrógeno amoniacal (NH₃-N) y *Escherichia coli*. Se incluyen otros contaminantes potenciales en el Informe Técnico Doméstico 1.0, Sección 7, Análisis de Contaminantes del Efluente Tratado, y la Hoja de Trabajo Doméstica 4.0 de la solicitud de permiso. Las aguas residuales domésticas se tratan en una planta de lodos activados, cuyas unidades de tratamiento incluyen un tamiz de barras, tanques de aireación, clarificadores finales, digestores de lodos, un filtro prensa de banda, cámaras de contacto con cloro y una cámara de decloración.

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY



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

PERMIT NO. WQ0015887001

APPLICATION. Chambers County Improvement District No 3., 1300 Post Oak Boulevard, Suite 2400, Houston, Texas 77056, has applied to the Texas Commission on Environmental Quality (TCEQ) to renew Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0015887001 (EPA I.D. No. TX0140333) to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 800,000 gallons per day. The domestic wastewater treatment facility is located approximately 2,240 feet Southeast of the intersection of Kilgore Parkway and State Highway 99, near the city of Mont Belvieu, in Chambers County, Texas 77523. The discharge route is to a man-made pond; thence to an unnamed drainage ditch; thence to an unnamed tributary; thence to Cotton Bayou; thence to Cotton Lake; thence to an unnamed channel; thence to High Tree Bayou; thence to Red Bayou; thence to Trinity Bay. TCEQ received this application on August 7, 2025. The permit application will be available for viewing and copying at Sam and Carmena Goss Memorial Branch Library, 1 John Hall Drive, Mont Belvieu, in Chambers 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=-94.861111,29.800833&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 Chambers County Improvement District No 3 at the address stated above or by calling Mr. Jonathan Nguyen, Quiddity Engineering, at 512-685-5156.

Issuance Date: September 2, 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. WQ0015887001

SOLICITUD. Distrito de Mejoras del Condado de Chambers No. 3, 1300 Post Oak Boulevard, Suite 2400, Houston, Texas 77056 ha solicitado a la Comisión de Calidad Ambiental del Estado de Texas (TCEQ) para renovar el Permiso No. WQ0015887001 (EPA I.D. No. TX0140333) 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 800,000 galones por día. La planta está ubicada aproximadamente 2,240 pies al sureste de la intersección de Kilgore Parkway y la carretera estatal 99, cerca de la ciudad de Mont Belvieu, en el Condado de Chambers, Texas 77523. La ruta de descarga es del sitio de la planta a un estanque artificial; de allí a una zanja de drenaje sin nombre; de allí a un afluente sin nombre; de allí a Cotton Bayou; de allí a Cotton Lake; de allí a un canal sin nombre; de allí a High Tree Bayou; de allí a Red Bayou; de allí a Trinity Bay. La TCEQ recibió esta solicitud el 7 de agosto de 2025. La solicitud para el permiso estará disponible para leerla y copiarla en Biblioteca Sam y Carmena Goss Memorial, 1 John Hall Drive, Mont Belvieu, condado de Chambers, 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=-94.861111,29.800833&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 agregue su nombre en una de las listas designe cual lista(s) y envía por correo su pedido a la Oficina del Secretario Principal de la TCEQ.

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 del Distrito de Mejoras No. 3 del Condado de Chambers a la dirección indicada arriba o llamando a Sr. Jonathan Nguyen, Quiddity Engineering, al (512) 685-5156.

Fecha de emisión: 3 de septiembre de 2025

Brooke T. Paup, *Chairwoman*
Bobby Janecka, *Commissioner*
Catarina R. Gonzales, *Commissioner*
Kelly Keel, *Executive Director*



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

Protecting Texas by Reducing and Preventing Pollution

August 7, 2025

Re: Confirmation of Submission of the Renewal without changes for Public Domestic Wastewater Authorization.

Dear Applicant:

This is an acknowledgement that you have successfully completed Renewal without changes for the Public Domestic Wastewater authorization.

ER Account Number: ER094863
Application Reference Number: 800641
Authorization Number: WQ0015887001
Site Name: Ccid 3 WWTP
Regulated Entity: RN111043063 - Ccid 3 WWTP
Customer(s): CN603736430 - Chambers County Improvement District No 3

Please be aware that TCEQ staff may contact your designated contact for any additional information.

If you have any questions, you may contact the Applications Review and Processing Team by email at WQ-ARPTeam@tceq.texas.gov or by telephone at (512) 239-4671.

Sincerely,
Applications Review and Processing Team
Water Quality Division

Texas Commission on Environmental Quality

Update Domestic or Industrial Individual Permit

WQ0015887001

Site Information (Regulated Entity)

What is the name of the site to be authorized?	CCID 3 WWTP
Does the site have a physical address?	No
Because there is no physical address, describe how to locate this site:	2240 FT SE OF THE INTERSECTION OF KILGORE PKWY AND SH 99
City	MONT BELVIEU
State	TX
ZIP	77523
County	CHAMBERS
Latitude (N) (##.#####)	29.800833
Longitude (W) (-###.#####)	-94.861111
Primary SIC Code	
Secondary SIC Code	
Primary NAICS Code	
Secondary NAICS Code	
Regulated Entity Site Information	
What is the Regulated Entity's Number (RN)?	RN111043063
What is the name of the Regulated Entity (RE)?	CCID 3 WWTP
Does the RE site have a physical address?	No
Physical Address	
Because there is no physical address, describe how to locate this site:	2240 FT SE OF THE INTERSECTION OF KILGORE PKWY AND SH 99
City	MONT BELVIEU
State	TX
ZIP	77523
County	CHAMBERS
Latitude (N) (##.#####)	29.800833
Longitude (W) (-###.#####)	-94.861111
Facility NAICS Code	
What is the primary business of this entity?	TREATMENT OF WW FROM SINGLE FAMILY RESID APT ETC

Chamber-Customer (Applicant) Information (Owner Operator)

How is this applicant associated with this site?	Owner Operator
What is the applicant's Customer Number (CN)?	CN603736430
Type of Customer	Other Government
Full legal name of the applicant:	
Legal Name	Chambers County Improvement District No 3
Texas SOS Filing Number	
Federal Tax ID	
State Franchise Tax ID	
State Sales Tax ID	

Local Tax ID	
DUNS Number	
Number of Employees	
Independently Owned and Operated?	
I certify that the full legal name of the entity applying for this permit has been provided and is legally authorized to do business in Texas.	Yes
Responsible Authority Contact	
Organization Name	Chambers County Improvement District No 3
Prefix	
First	Brian
Middle	
Last	Cunningham
Suffix	
Credentials	
Title	Board President
Responsible Authority Mailing Address	
Enter new address or copy one from list:	
Address Type	Domestic
Mailing Address (include Suite or Bldg. here, if applicable)	1300 POST OAK BLVD STE 2400
Routing (such as Mail Code, Dept., or Attn:)	
City	HOUSTON
State	TX
ZIP	77056
Phone (###-###-####)	7136234531
Extension	
Alternate Phone (###-###-####)	
Fax (###-###-####)	
E-mail	byeates@sphllp.com

Billing Contact

Responsible contact for receiving billing statements:

Select the permittee that is responsible for payment of the annual fee.

CN603736430, Chambers County Improvement District No 3

Organization Name	MUNICIPAL ACCOUNTS & CONSULTING LP
Prefix	MS
First	JENNIFER
Middle	
Last	ABAD
Suffix	
Credentials	
Title	DISTRICT BOOKEEPER
Enter new address or copy one from list:	
Mailing Address	
Address Type	Domestic
Mailing Address (include Suite or Bldg. here, if applicable)	1281 BRITTMOORE RD
Routing (such as Mail Code, Dept., or Attn:)	
City	HOUSTON

State	TX
ZIP	77043
Phone (###-###-####)	7136234539
Extension	
Alternate Phone (###-###-####)	
Fax (###-###-####)	
E-mail	chambersid3@municipalaccounts.com

Application Contact

Person TCEQ should contact for questions about this application:

Same as another contact?

Organization Name	QUIDDITY ENGINEERING
Prefix	MR
First	JONATHAN
Middle	
Last	NGUYEN
Suffix	
Credentials	
Title	PERMIT SPECIALIST

Enter new address or copy one from list:

Mailing Address

Address Type	Domestic
Mailing Address (include Suite or Bldg. here, if applicable)	912 S CAPITAL OF TEXAS HWY STE 300
Routing (such as Mail Code, Dept., or Attn:)	
City	WEST LAKE HILLS
State	TX
ZIP	78746
Phone (###-###-####)	5126855156
Extension	
Alternate Phone (###-###-####)	
Fax (###-###-####)	
E-mail	JNGUYEN@QUIDDITY.COM

Technical Contact

Person TCEQ should contact for questions about this application:

Same as another contact?

Organization Name	Application Contact
Prefix	QUIDDITY ENGINEERING
First	MR
Middle	JONATHAN
Last	
Suffix	NGUYEN
Credentials	
Title	PERMIT SPECIALIST

Enter new address or copy one from list:

Mailing Address

Address Type	Domestic
Mailing Address (include Suite or Bldg. here, if applicable)	912 S CAPITAL OF TEXAS HWY STE 300
Routing (such as Mail Code, Dept., or Attn:)	
City	WEST LAKE HILLS
State	TX
ZIP	78746
Phone (###-###-####)	5126855156
Extension	
Alternate Phone (###-###-####)	
Fax (###-###-####)	
E-mail	JNGUYEN@QUIDDITY.COM

DMR Contact

Person responsible for submitting Discharge Monitoring Report Forms:

Same as another contact?

Organization Name	Municipal District Services LLC
Prefix	
First	Austin
Middle	
Last	Muse
Suffix	
Credentials	
Title	District Operator

Enter new address or copy one from list:

Mailing Address:

Address Type	Domestic
Mailing Address (include Suite or Bldg. here, if applicable)	406 W GRAND PKWY S STE 465
Routing (such as Mail Code, Dept., or Attn:)	
City	KATY
State	TX
ZIP	77494
Phone (###-###-####)	2812903192
Extension	
Alternate Phone (###-###-####)	
Fax (###-###-####)	
E-mail	amuse@mdswater.com

Section 1# Permit Contact

Permit Contact#: 1

Person TCEQ should contact throughout the permit term.

1) Same as another contact?	CN603736430, Chambers County Improvement District No 3
2) Organization Name	Chambers County Improvement District No 3
3) Prefix	
4) First	Brian

5) Middle	
6) Last	Cunningham
7) Suffix	
8) Credentials	
9) Title	Board President
Mailing Address	
10) Enter new address or copy one from list	
11) Address Type	Domestic
11.1) Mailing Address (include Suite or Bldg. here, if applicable)	1300 POST OAK BLVD STE 2400
11.2) Routing (such as Mail Code, Dept., or Attn:)	
11.3) City	HOUSTON
11.4) State	TX
11.5) ZIP	77056
12) Phone (###-###-####)	7136234531
13) Extension	
14) Alternate Phone (###-###-####)	
15) Fax (###-###-####)	
16) E-mail	byeates@sphllp.com

Owner Information

Owner of Treatment Facility

1) Prefix	
2) First and Last Name	
3) Organization Name	CCID 3
4) Mailing Address	1300 Post Oak Blvd., Suite 2400
5) City	Houston
6) State	TX
7) Zip Code	77056
8) Phone (###-###-####)	7136234531
9) Extension	
10) Email	byeates@sphllp.com
11) What is ownership of the treatment facility?	Public

Owner of Land (where treatment facility is or will be)

12) Prefix	
13) First and Last Name	
14) Organization Name	Chambers County Improvement District No 3
15) Mailing Address	1300 Post Oak Blvd., Suite 2400
16) City	Houston
17) State	TX
18) Zip Code	77056
19) Phone (###-###-####)	7136234531
20) Extension	
21) Email	byeates@sphllp.com
22) Is the landowner the same person as the facility owner or co-applicant?	Yes

General Information Renewal-Amendment

1) Current authorization expiration date:	01/12/2026
2) Current Facility operational status:	Active
3) Is the facility located on or does the treated effluent cross American Indian Land?	No
4) What is the application type that you are seeking?	Renewal without changes
5) Current Authorization type:	Public Domestic Wastewater
5.1) What is the proposed total flow in MGD discharged at the facility?	0.8
5.2) Select the applicable fee	>= .50 & < 1.0 MGD - Renewal - \$1,615
6) What is the classification for your authorization?	TPDES
6.1) What is the EPA Identification Number?	TX0140333
6.2) Is the wastewater treatment facility location in the existing permit accurate?	Yes
6.3) Are the point(s) of discharge and the discharge route(s) in the existing permit correct?	Yes
6.4) City nearest the outfall(s):	Mont Belvieu
6.5) County where the outfalls are located:	CHAMBERS
6.6) Is or will the treated wastewater discharge to a city, county, or state highway right-of-way, or a flood control district drainage ditch?	No
6.7) Is the daily average discharge at your facility of 5 MGD or more?	No
7) Did any person formerly employed by the TCEQ represent your company and get paid for service regarding this application?	Yes
7.1) List each person formerly employed by the TCEQ who represented your company and was paid for service regarding the application:	Jonathan Nguyen

Public Notice Information

Individual Publishing the Notices

1) Prefix	
2) First and Last Name	Jonathan Nguyen
3) Credential	
4) Title	Permitting Specialist
5) Organization Name	Quiddity Engineering
6) Mailing Address	912 S CAPITAL OF TEXAS HWY
7) Address Line 2	Suite 300
8) City	WEST LAKE HILLS
9) State	TX
10) Zip Code	78746
11) Phone (###-###-####)	5126855156
12) Extension	
13) Fax (###-###-####)	
14) Email	jnguyen@quiddity.com

Contact person to be listed in the Notices

15) Prefix	
16) First and Last Name	Jonathan Nguyen
17) Credential	
18) Title	
19) Organization Name	Quiddity Engineering
20) Phone (###-###-####)	5126855156
21) Fax (###-###-####)	
22) Email	jnguyen@quiddity.com

Bilingual Notice Requirements

23) 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
23.1) Are the students who attend either the elementary school or the middle school enrolled in a bilingual education program at that school?	Yes
23.2) Do the students at these schools attend a bilingual education program at another location?	No
23.3) 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)?	No
23.4) Which language is required by the bilingual program?	Spanish

Section 1# Public Viewing Information**County#: 1**

1) County	CHAMBERS
2) Public building name	Sam & Carmena Goss Memorial Branch Library
3) Location within the building	
4) Physical Address of Building	1 John Hall Dr.
5) City	Mont Belvieu
6) Contact Name	
7) Phone (###-###-####)	4092672615
8) Extension	
9) Is the location open to the public?	Yes

Plain Language

1) Plain Language	
[File Properties]	
File Name	LANG_CCID 3 PLS.pdf
Hash	85EB8818814134B59917171B3138B8968B93664A0CB98E8DC4A1B303E71A89A4
MIME-Type	application/pdf

Supplemental Permit Information Form

1) Supplemental Permit Information Form (SPIF)	
[File Properties]	
File Name	SPIF_SPIF - CCID.pdf
Hash	938330A72B7CA2EFF4DD5F6FF12697A8667E87C395510CC8F1D4BD959E727103
MIME-Type	application/pdf

Domestic Attachments

1) Attach an 8.5"x11", reproduced portion of the most current and original USGS Topographic Quadrangle Map(s) that meets the 1:24,000 scale.	
[File Properties]	
File Name	MAP_USGS Map - CCID 3.pdf

Hash	AB067021782F0779059677F6EB05FD6F852D0A9EFFFFD1CF3C47FE293C27C2EFF
MIME-Type	application/pdf
2) I confirm that all required sections of Technical Report 1.0 are complete and will be included in the Technical Attachment.	Yes
2.1) I confirm that Worksheet 2.0 (Receiving Waters) is complete and included in the Technical Attachment.	Yes
2.2) Are you planning to include Worksheet 2.1 (Stream Physical Characteristics) in the Technical Attachment?	No
2.3) Are you planning to include Worksheet 4.0 (Pollutant Analyses Requirements) in the Technical Attachment?	No
2.4) Are you planning to include Worksheet 5.0 (Toxicity Testing Requirements) in the Technical Attachment?	No
2.5) I confirm that Worksheet 6.0 (Industrial Waste Contribution) is complete and included in the Technical Attachment.	Yes
2.6) Are you planning to include Worksheet 7.0 (Class V Injection Well Inventory/Authorization Form) in the Technical Attachment?	No
2.7) Technical Attachment	
[File Properties]	
File Name	TECH_CCID 3 Technical Report.pdf
Hash	9016848A4270C3567AEA672FACDD930CA4CA33E47084E670209A3D685A026025
MIME-Type	application/pdf
3) Buffer Zone Map	
4) Flow Diagram	
[File Properties]	
File Name	FLDIA_Flow Schematics - CCID 3.pdf
Hash	3BC926D2A97274C942107A7352FCDB0961EA1AA49CF746805187094B81880098
MIME-Type	application/pdf
5) Site Drawing	
[File Properties]	
File Name	SITEDR_Service Area Map - CCID 3.pdf
Hash	2C2830299D0E412C9520927383A1BC4370261A79F581903269F8B3E0597C2B83
MIME-Type	application/pdf
6) Design Calculations	
[File Properties]	
File Name	DES_CAL_Treatment Units and Process - CCID.pdf
Hash	37AB4F610CB5AA69C32D5B545187CB1B40F869F693CC7B46706CCEDE244E7910
MIME-Type	application/pdf
7) Solids Management Plan	
8) Water Balance	
9) Other Attachments	
[File Properties]	
File Name	OTHER_Core Data Form - CCID.pdf
Hash	4693B4614775400FC0DDB7174A33C7C1256B631BC852809DE06898392C02E858
MIME-Type	application/pdf
[File Properties]	

File Name	OTHER_JUSTIFICATION FOR PLANT EXPANSION.pdf
Hash	021AA49425DFE10BF29C7A4C63CF547711E4E4A5F641281B2A6B59072000DBD4
MIME-Type	application/pdf
[File Properties]	
File Name	OTHER_Summary Transmittal Approval - CCID 3.pdf
Hash	067EBA813466C65507FBE6D9423EF6F916BB9337BC76ABA302D2124C5C7B54C8
MIME-Type	application/pdf
[File Properties]	
File Name	OTHER_Final Effluent Analysis - CCID 3.pdf
Hash	54244F228C76CB6F57222097C69E637854D52813C4A2B28B07CF7162CF48813F
MIME-Type	application/pdf

Certification

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

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.

1. I am Brian D Cunningham, the owner of the STEERS account ER115235.
2. I have the authority to sign this data on behalf of the applicant named above.
3. I have personally examined the foregoing and am familiar with its content and the content of any attachments, and based upon my personal knowledge and/or inquiry of any individual responsible for information contained herein, that this information is true, accurate, and complete.
4. I further certify that I have not violated any term in my TCEQ STEERS participation agreement and that I have no reason to believe that the confidentiality or use of my password has been compromised at any time.
5. I understand that use of my password constitutes an electronic signature legally equivalent to my written signature.
6. I also understand that the attestations of fact contained herein pertain to the implementation, oversight and enforcement of a state and/or federal environmental program and must be true and complete to the best of my knowledge.
7. I am aware that criminal penalties may be imposed for statements or omissions that I know or have reason to believe are untrue or misleading.
8. I am knowingly and intentionally signing Update Domestic or Industrial Individual Permit WQ0015887001.
9. My signature indicates that I am in agreement with the information on this form, and authorize its submittal to the TCEQ.

OWNER OPERATOR Signature: Brian D Cunningham OWNER OPERATOR

Customer Number:	CN603736430
Legal Name:	Chambers County Improvement District No 3
Account Number:	ER115235
Signature IP Address:	108.90.10.49
Signature Date:	2025-08-07
Signature Hash:	91108AE99CA9555035B11B8DE66C7388394403059929CD77E28C83F414E5C9D8
Form Hash Code at time of Signature:	379383F509C625797D271530BE51D6782E43FECE6DF74016249EB5BD4A5549D5

Fee Payment

Transaction by:	The application fee payment transaction was made by ER094863/Huan J Nguyen
Paid by:	The application fee was paid by JONATHAN NGUYEN

Fee Amount:	\$1600.00
Paid Date:	The application fee was paid on 2025-08-07
Transaction/Voucher number:	The transaction number is 582EA000679832 and the voucher number is 778348

Submission

Reference Number:	The application reference number is 800641
Submitted by:	The application was submitted by ER094863/Huan J Nguyen
Submitted Timestamp:	The application was submitted on 2025-08-07 at 08:35:55 CDT
Submitted From:	The application was submitted from IP address 98.6.100.154
Confirmation Number:	The confirmation number is 669757
Steers Version:	The STEERS version is 6.92
Permit Number:	The permit number is WQ0015887001

Additional Information

Application Creator: This account was created by Huan J Nguyen



TCEQ Use Only

TCEQ Core Data Form

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

SECTION I: General Information

1. Reason for Submission (If other is checked please describe in space provided.)		
<input type="checkbox"/> New Permit, Registration or Authorization (Core Data Form should be submitted with the program application.)		
<input checked="" type="checkbox"/> Renewal (Core Data Form should be submitted with the renewal form)		<input type="checkbox"/> Other
2. Customer Reference Number (if issued)		3. Regulated Entity Reference Number (if issued)
CN 603736430		RN 111043063

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

SECTION II: Customer Information

4. General Customer Information		5. Effective Date for Customer Information Updates (mm/dd/yyyy)	
<input type="checkbox"/> New Customer		<input checked="" type="checkbox"/> Update to Customer Information	
<input type="checkbox"/> Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)		<input type="checkbox"/> Change in Regulated Entity Ownership	
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).			
6. Customer Legal Name (If an individual, print last name first: eg: Doe, John)		If new Customer, enter previous Customer below:	
Chambers County Improvement District No. 3			
7. TX SOS/CPA Filing Number	8. TX State Tax ID (11 digits)	9. Federal Tax ID (9 digits)	10. DUNS Number (if applicable)
11. Type of Customer:		Partnership: <input type="checkbox"/> General <input type="checkbox"/> Limited	
<input type="checkbox"/> Corporation		<input type="checkbox"/> Individual	
Government: <input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Federal <input type="checkbox"/> State <input checked="" type="checkbox"/> Other		<input type="checkbox"/> Sole Proprietorship	
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 type="checkbox"/> Owner <input type="checkbox"/> Operator <input checked="" type="checkbox"/> Owner & Operator			
<input type="checkbox"/> Occupational Licensee <input type="checkbox"/> Responsible Party <input type="checkbox"/> Voluntary Cleanup Applicant <input type="checkbox"/> Other:			
15. Mailing Address:	1300 Post Oak Blvd		
	Suite 2400		
	City	Houston	State TX ZIP 77056 ZIP + 4
16. Country Mailing Information (if outside USA)		17. E-Mail Address (if applicable)	
		byeates@sphllp.com	
18. Telephone Number		19. Extension or Code	
(713) 623-4531			
		20. Fax Number (if applicable)	
		() -	

SECTION III: Regulated Entity Information

21. General Regulated Entity Information (If 'New Regulated Entity' is selected below this form should be accompanied by a permit application)	
<input type="checkbox"/> New Regulated Entity <input type="checkbox"/> Update to Regulated Entity Name <input checked="" type="checkbox"/> Update to Regulated Entity Information	
The Regulated Entity Name submitted may be updated in order to meet TCEQ Agency Data Standards (removal of organizational endings such as Inc, LP, or LLC).	
22. Regulated Entity Name (Enter name of the site where the regulated action is taking place.)	
CCID No. 3 WWTF	

23. Street Address of the Regulated Entity: (No PO Boxes)							
	City		State		ZIP		ZIP + 4
24. County	Chambers						

Enter Physical Location Description if no street address is provided.

25. Description to Physical Location:	2,240 feet southeast of the intersection of Kilgore Parkway and SH 99						
26. Nearest City	Mont Belvieu				State	TX	Nearest ZIP Code
						77523	
27. Latitude (N) In Decimal:	29.800847		28. Longitude (W) In Decimal:	-94.861094			
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds		
29	48	3.05	-94	51	39.94		
29. Primary SIC Code (4 digits)	30. Secondary SIC Code (4 digits)		31. Primary NAICS Code (5 or 6 digits)		32. Secondary NAICS Code (5 or 6 digits)		
4952			221320				
33. What is the Primary Business of this entity? (Do not repeat the SIC or NAICS description.)							
treatment of municipal wastewater							
34. Mailing Address:	406 West Grand Pkwy South						
	Suite 260						
	City	Katy	State	TX	ZIP	77494	ZIP + 4
35. E-Mail Address:		amuse@mdswater.com					
36. Telephone Number		37. Extension or Code		38. Fax Number (if applicable)			
(281) 290-3192				() -			

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"/> Waste Water	<input type="checkbox"/> Wastewater Agriculture	<input type="checkbox"/> Water Rights	<input type="checkbox"/> Other:
WQ0015887001				

SECTION IV: Preparer Information

40. Name:	Arnelle Gonzalez	41. Title:	Graduate Engineer
42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Mail Address
(713) 353-7235		() -	argonzalez@quiddity.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:	Chambers County ID No. 3	Job Title:	President
Name (In Print):	Brian Cunningham	Phone:	(713) 623- 4531
Signature:		Date:	

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

Chambers County Improvement District No. 3 (CN603736430) operates the CCID 3 wastewater treatment plant (RN111043063), an activated sludge process plant operated in the complete mix mode. The facility is located approximately 2,240 feet southeast of the intersection of Kilgore Parkway and State Highway 99, Chambers County, Texas 77523.

This application is for a renewal to discharge at a daily average flow of 800,000 gallons per day of treated domestic wastewater.

Discharges from the facility are expected to contain five-day carbonaceous biochemical oxygen demand (CBOD₅), total suspended solids (TSS), ammonia nitrogen (NH₃-N), and *Escherichia coli*. Additional potential pollutants are included in the Domestic Technical Report 1.0, Section 7. Pollutant Analysis of Treated Effluent and Domestic Worksheet 4.0 in the permit application package. Domestic wastewater is treated by an activated sludge process plant and the treatment units include a bar screen, aeration basins, final clarifiers, sludge digesters, a belt filter press, chlorine contact chambers and a dechlorination chamber.



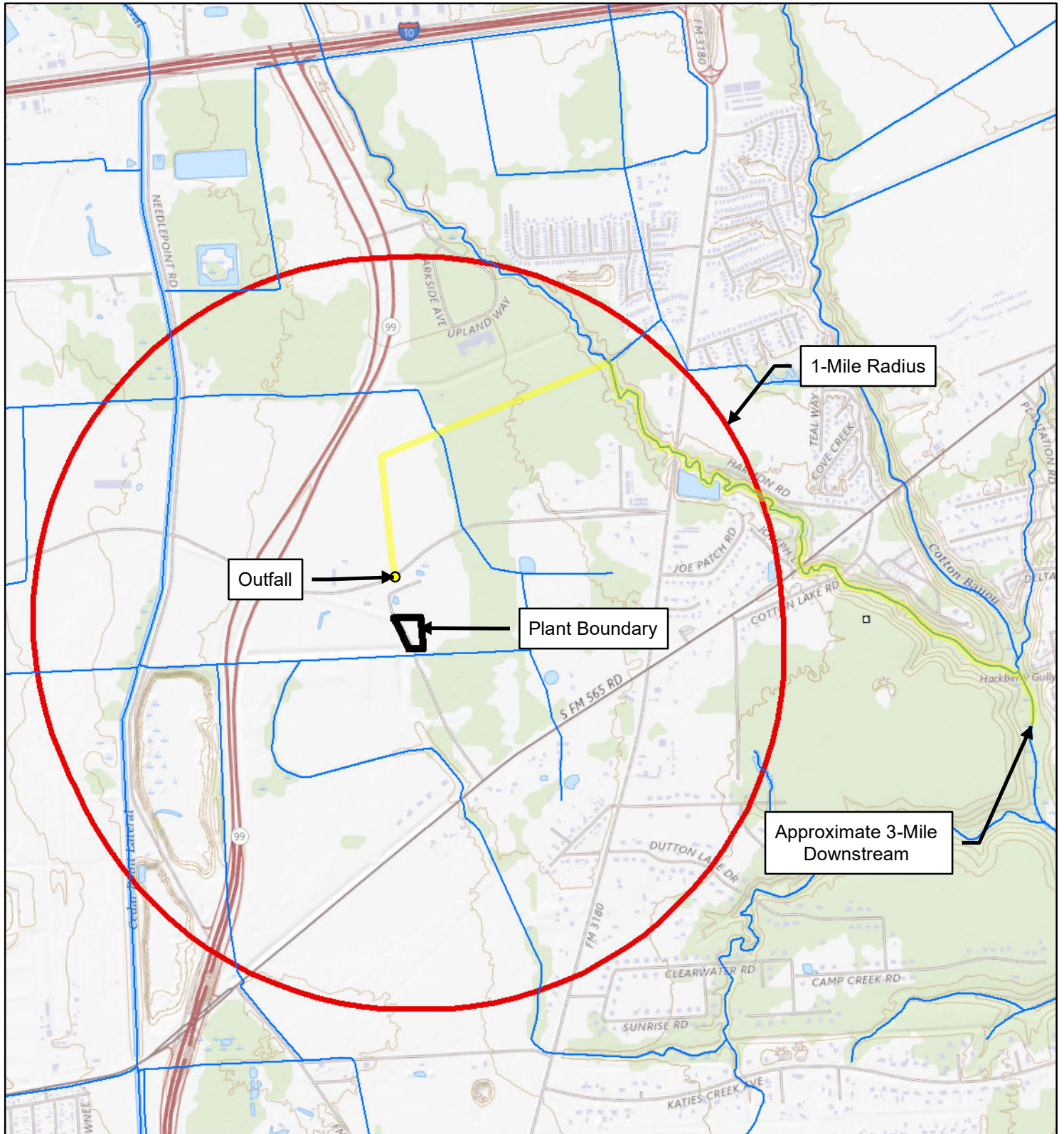
El siguiente resumen se proporciona para esta solicitud de permiso de calidad del agua pendiente que está siendo revisada por la Comisión de Calidad Ambiental de Texas según lo requerido por el Capítulo 39 del Código Administrativo de Texas 30. La información proporcionada en este resumen puede cambiar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

El Distrito de Mejoras no. 3 del Condado de Chambers (CN603736430) opera la planta de tratamiento de aguas residuales CCID 3 (RN111043063), una planta de procesamiento de lodos activados que opera en modo de mezcla completa. La instalación se encuentra aproximadamente a 680 metros al sureste de la intersección de Kilgore Parkway y la Carretera Estatal 99, Condado de Chambers, Texas 77523.

Esta solicitud es para una renovación para descargar un flujo promedio diario de 800,000 galones por día de aguas residuales domésticas tratadas.

Se espera que las descargas de la instalación contengan la demanda bioquímica de oxígeno carbonoso de cinco días (CBOD₅), sólidos suspendidos totales (TSS), nitrógeno amoniacal (NH₃-N) y *Escherichia coli*. Se incluyen otros contaminantes potenciales en el Informe Técnico Doméstico 1.0, Sección 7, Análisis de Contaminantes del Efluente Tratado, y la Hoja de Trabajo Doméstica 4.0 de la solicitud de permiso. Las aguas residuales domésticas se tratan en una planta de lodos activados, cuyas unidades de tratamiento incluyen un tamiz de barras, tanques de aireación, clarificadores finales, digestores de lodos, un filtro prensa de banda, cámaras de contacto con cloro y una cámara de decloración.

CCID No. 3 USGS TOPO MAP



Disclaimer: This product is offered for informational purposes and may not have been prepared for or be suitable for legal, engineering, or surveying purposes. It does not represent an on-the-ground survey and represents only the approximate relative location of property, governmental and/or political boundaries or related facilities to said boundary. No express warranties are made by Quiddity Engineering concerning the accuracy, completeness, reliability, or usability of the information included within this exhibit.



QUIDDITY



1 inch equals 2,000 feet
CCID No. 3
 CHAMBERS COUNTY, TEXAS

LEGEND

- Outfall
- Discharge Route
- Streams
- 1 Mile Radius
- ▭ Plant Boundary



VICINITY MAP

Scale: 1 inch equals 10 miles

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: Chambers County Improvement District No. 3

Permit No. WQ00 15887001

EPA ID No. TX 0140333

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

2,240 feet southeast of the intersection of Kilgore Parkway and State Highway 99 in Chambers County, Texas, 77523

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

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

First and Last Name: Arnelle Gonzalez

Credential (P.E, P.G., Ph.D., etc.): [Click here to enter text.](#)

Title: Graduate Engineer

Mailing Address: 6330 West Loop South, Suite 150

City, State, Zip Code: Bellaire, TX, 77401

Phone No.: 713-777-5337 Ext.: [Click here to enter text.](#) Fax No.: [Click here to enter text.](#)

E-mail Address: argonzalez@quiddity.com

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

Owner is Chambers County Improvement District No. 3

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

To a man-made pond, then to an unnamed drainage ditch, then to Hackberry Gully, then to Cotton Bayou, then to Cotton Lake, then to an unnamed channel, then to High Tree Bayou, then to Red Bayou, then to Trinity Bay in Segment No. 2422 of the Bay and Estuaries

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

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

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

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

☐ Disturbance of vegetation or wetlands

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

Approximately 5 acres is used for the wastewater treatment facility. No caves or karst features are affected

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

Existing land use is for the treatment plant

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:

N/A

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

N/A



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION TECHNICAL REPORT 1.0

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

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

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

A. Existing/Interim I Phase

Design Flow (MGD): 0.20

2-Hr Peak Flow (MGD): 0.80

Estimated construction start date: Click to enter text.

Estimated waste disposal start date: 4/2024

B. Interim II Phase

Design Flow (MGD): 0.50

2-Hr Peak Flow (MGD): 2.00

Estimated construction start date: 8/2026

Estimated waste disposal start date: 9/2027

C. Final Phase

Design Flow (MGD): 0.80

2-Hr Peak Flow (MGD): 3.20

Estimated construction start date: 8/2029

Estimated waste disposal start date: 8/2030

D. Current Operating Phase

Provide the startup date of the facility: Interim I

Section 2. Treatment Process (Instructions Page 43)

A. Current Operating Phase

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

See Attachment – Treatment Process and Units

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)
See Attachment – Treatment Process and Units		

C. Process Flow Diagram

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

Attachment: See Attachment – Flow Schematics

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

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

- Latitude: 29.803270
- Longitude: -94.861696

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

- Latitude: Click to enter text.
- Longitude: Click to enter text.

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

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

Attachment: Attachment – Service Area Map

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

The plant serves CCID No. 3 and Chambers County MUD No. 3.
--

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
CCID 3	CCID 3	Publicly Owned	~800 connections

Section 4. Unbuilt Phases (Instructions Page 45)

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

☒ Yes ☐ No

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

☒ Yes ☐ No

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

Recent minor amendment to add the 0.50 MGD phase. Design has started for the Interim II phase.

Section 5. Closure Plans (Instructions Page 45)

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

☐ Yes ☒ No

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

☐ Yes ☐ No

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

N/A

Section 6. Permit Specific Requirements (Instructions Page 45)

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

A. Summary transmittal

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

☒ Yes ☐ No

If **yes**, provide the date(s) of approval for each phase: 12/5/2024

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.**

0.50 MGD approved 12/2024.

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.

Met by restrictive easements.

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*.

Notice of completion and summary transmittal submittal prior to startup of each phase.

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.

N/A

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.

N/A

4. Grease and decanted liquid disposal

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

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

N/A

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 N/A or TXRNE N/A

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:

N/A

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.

N/A

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.

N/A

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.

N/A

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.
N/A

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

1. Acceptance of sludge from other WWTPs

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

☐ Yes ☒ No

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

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

N/A

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.

N/A

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.

N/A

Section 7. Pollutant Analysis of Treated Effluent (Instructions Page 50)

Is the facility in operation?

☒ Yes ☐ No

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

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

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

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

Pollutant	Average Conc.	Max Conc.	No. of Samples	Sample Type	Sample Date/Time
CBOD ₅ , mg/l	3.4	3.4	1	Grab	6/13/25 @ 08:00
Total Suspended Solids, mg/l	3.9	3.9	1	Grab	6/13/25 @ 08:00
Ammonia Nitrogen, mg/l	<0.1	<0.1	1	Grab	6/13/25 @ 08:00
Nitrate Nitrogen, mg/l	28	28	1	Grab	6/13/25 @ 08:00
Total Kjeldahl Nitrogen, mg/l	1.4	1.4	1	Grab	6/13/25 @ 08:00
Sulfate, mg/l	38.8	38.8	1	Grab	6/13/25 @ 08:00
Chloride, mg/l	1.2	1.2	1	Grab	6/13/25 @ 08:00
Total Phosphorus, mg/l	2.36	2.36	1	Grab	6/13/25 @ 08:00
pH, standard units	7.4	7.4	1	Grab	6/13/25 @ 08:00
Dissolved Oxygen*, mg/l	7.6	7.6	1	Grab	6/13/25 @ 08:00
Chlorine Residual, mg/l					
<i>E.coli</i> (CFU/100ml) freshwater	<10	<10	1	Grab	6/13/25 @ 08:00
Enterococci (CFU/100ml) saltwater	N/A	N/A	N/A	N/A	N/A
Total Dissolved Solids, mg/l	540	540	1	Grab	6/13/25 @ 08:00
Electrical Conductivity, μ mohs/cm, †	746	746	1	Grab	6/13/25 @ 08:00
Oil & Grease, mg/l	N/A	N/A	N/A	N/A	N/A
Alkalinity (CaCO ₃)*, mg/l	46	46	1	Grab	6/13/25 @ 08:00

*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	N/A	N/A	N/A	N/A	N/A
Total Dissolved Solids, mg/l	N/A	N/A	N/A	N/A	N/A
pH, standard units	N/A	N/A	N/A	N/A	N/A
Fluoride, mg/l	N/A	N/A	N/A	N/A	N/A
Aluminum, mg/l	N/A	N/A	N/A	N/A	N/A
Alkalinity (CaCO ₃), mg/l	N/A	N/A	N/A	N/A	N/A

Section 8. Facility Operator (Instructions Page 50)

Facility Operator Name: Municipal District Services

Facility Operator's License Classification and Level: Click to enter text.

Facility Operator's License Number: OC0000129

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

A. WWTP's Biosolids Management Facility Type

Check all that apply. See instructions for guidance

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

B. WWTP's Biosolids Treatment Process

Check all that apply. See instructions for guidance.

- ☒ Aerobic Digestion
- ☐ Air Drying (or sludge drying beds)
- ☐ Lower Temperature Composting
- ☐ Lime Stabilization
- ☐ Higher Temperature Composting
- ☐ Heat Drying
- ☐ Thermophilic Aerobic Digestion

- ☐ Beta Ray Irradiation
- ☐ Gamma Ray Irradiation
- ☐ Pasteurization
- ☐ Preliminary Operation (e.g. grinding, de-gritting, blending)
- ☐ Thickening (e.g. gravity thickening, centrifugation, filter press, vacuum filter)
- ☐ Sludge Lagoon
- ☐ Temporary Storage (< 2 years)
- ☐ Long Term Storage (>= 2 years)
- ☐ Methane or Biogas Recovery
- ☐ Other Treatment Process: [Click to enter text.](#)

C. Biosolids Management

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

Biosolids Management

Management Practice	Handler or Preparer Type	Bulk or Bag Container	Amount (dry metric tons)	Pathogen Reduction Options	Vector Attraction Reduction Option
Disposal in Landfill	Off-site Third-Party Handler or Preparer	Bulk		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: will be selected once transported

TCEQ permit or registration number: will be selected once transported

County where disposal site is located: will be selected once transported

E. Transportation method

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

Name of the hauler: Magna Flow Environmental

Hauler registration number: 21484

Sludge is transported as a:

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

Section 10. Permit Authorization for Sewage Sludge Disposal

(Instructions Page 53)

A. Beneficial use authorization

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

☐ Yes ☒ No

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

☐ Yes ☐ No

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

☐ Yes ☐ No

B. Sludge processing authorization

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

Sludge Composting ☐ Yes ☒ No

Marketing and Distribution of sludge ☐ Yes ☒ No

Sludge Surface Disposal or Sludge Monofill ☐ Yes ☒ No

Temporary storage in sludge lagoons ☐ Yes ☒ No

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

☐ Yes ☐ No

Section 11. Sewage Sludge Lagoons (Instructions Page 53)

Does this facility include sewage sludge lagoons?

☐ Yes ☒ No

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

A. Location information

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

- Original General Highway (County) Map:

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

- USDA Natural Resources Conservation Service Soil Map:

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

- Federal Emergency Management Map:

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

- Site map:

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

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

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

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

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

[Click to enter text.](#)

B. Temporary storage information

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Provide the following information:

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

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

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

C. Liner information

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

☐ Yes ☐ No

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

[Click to enter text.](#)

D. Site development plan

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

[Click to enter text.](#)

Attach the following documents to the application.

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

E. Groundwater monitoring

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

☐ Yes ☐ No

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

Section 12. Authorizations/Compliance/Enforcement (Instructions Page 55)

A. Additional authorizations

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

☐ Yes ☒ No

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

N/A

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:

N/A

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: N/A

DOMESTIC WASTEWATER PERMIT APPLICATION

WORKSHEET 2.0: RECEIVING WATERS

The following information is required for all TPDES permit applications.

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

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

☐ Yes ☒ No

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

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

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

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

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

Section 2. Discharge into Tidally Affected Waters (Instructions Page 64)

Does the facility discharge into tidally affected waters?

☐ Yes ☒ No

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

A. Receiving water outfall

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

B. Oyster waters

Are there oyster waters in the vicinity of the discharge?

☐ Yes ☐ No

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

[Click to enter text.](#)

C. Sea grasses

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

☐ Yes ☐ No

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

[Click to enter text.](#)

Section 3. Classified Segments (Instructions Page 64)

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

☐ Yes ☒ No

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

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

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

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

A. Receiving water type

Identify the appropriate description of the receiving waters.

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

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

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

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

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

B. Flow characteristics

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

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

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

- ☐ USGS flow records
- ☐ Historical observation by adjacent landowners
- ☐ Personal observation
- ☐ Other, specify: [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.

Hackberry Gulley, Cotton Bayou

D. Downstream characteristics

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

☐ Yes ☒ No

If yes, discuss how.

N/A

E. Normal dry weather characteristics

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

Small amount of water present.

Date and time of observation: 7/3/2025

Was the water body influenced by stormwater runoff during observations?

☐ Yes ☒ No

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

A. Upstream influences

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

☐ Oil field activities

☐ Urban runoff

☐ Upstream discharges

☒ Agricultural runoff

☐ Septic tanks

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

B. Waterbody uses

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

- | | |
|--|--|
| <input type="checkbox"/> Livestock watering | <input type="checkbox"/> Contact recreation |
| <input type="checkbox"/> Irrigation withdrawal | <input checked="" 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 89)

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: 0

Significant IUs - non-categorical:

Number of IUs: 0

Average Daily Flows, in MGD: 0

Other IUs:

Number of IUs: 0

Average Daily Flows, in MGD: 0

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.

N/A

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.

N/A

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.

E. Service Area Map

Attach a map indicating the service area of the POTW. The map should include the applicant's service area boundaries and the location of any known industrial users discharging to the POTW. Please see the instructions for guidance.

Attachment: See Service Area Map

Section 2. POTWs with Approved Programs or Those Required to Develop a Program (Instructions Page 90)

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 90)

A. General information

Company Name: No SIUs or CIUs

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).

N/A

C. Product and service information

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

N/A

D. Flow rate information

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

Process Wastewater:

Discharge, in gallons/day: N/A

Discharge Type: ☐ Continuous ☐ Batch ☐ Intermittent

Non-Process Wastewater:

Discharge, in gallons/day: N/A

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: N/A

Subcategories: N/A

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.

N/A

Attachment H – Treatment Units and Process

Chambers County Improvement District No. 3

TPDES Renewal

Treatment Process:

The Chambers County Improvement District No. 3 Wastewater Treatment Facility (WWTF) is an activated sludge single-stage nitrification process. Raw influent is pumped through the lift stations into the elevated concrete headworks. Following the screening, the wastewater flow is split by train via weirs which is then conveyed to the aeration basins at each train. The wastewater is mixed with return activated sludge from the secondary clarifier to create mixed liquor and treated within the aeration basin to consume organics and break down ammonia. From the aeration basin, the mixed liquor flows to the secondary clarifier. After clarification, the treated effluent flows to the tertiary filters for filtration and then the chlorine contact basin for disinfection. After disinfection the treated effluent flows to the dechlorination chamber for dechlorination, and then to the polishing pond and the outfall. The waste activated sludge is processed by multi-stage aerobic digesters for solids reduction and stabilization prior to hauling for disposal.

0.2 MGD Phase Treatment Units

Treatment Unit Type	Number of Units	Dimensions (L x W x D)
Aeration basin	2	2(6,539.5 ft ³)
Secondary clarifier	1	34 ft diameter
Chlorine contact basin	1	3,538 ft ³
Multi-Stage Aerobic Digester	2	2(6,658.1 ft ³)

0.5 MGD Phase Treatment Units

Treatment Unit Type	Number of Units	Dimensions (L x W x D)
Aeration basin	3	3(7,157 ft ³)
Secondary clarifier	1	42 ft diameter
Multi-Stage Aerobic Digester	3	3(7,282.1 ft ³)
Chlorine contact basin	1	3,168 ft ³
Dechlorination chamber	1	96 ft ³



0.8 MGD Phase Treatment Units

Treatment Unit Type	Number of Units	Dimensions (L x W x D)
Aeration basin	2	2(32,400 ft ³)
Secondary clarifier	2	2(42 ft diameter)
Multi-Stage Aerobic Digester	2	2(32,400 ft ³)
Tertiary filter	2	2(180 ft ²)
Chlorine contact basin	2	2(3,200 ft ³)
Dechlorination chamber	1	240 ft ³

Jon Niermann, *Chairman*
Bobby Janecka, *Commissioner*
Catarina R. Gonzales, *Commissioner*
Kelly Keel, *Executive Director*



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

Protecting Texas by Reducing and Preventing Pollution

December 5, 2024

Nick C. Heilenman, P.E.
QUIDDITY ENGINEERING, LLC
6330 West Loop South, Suite 150
Bellaire, TX 77401

Re: Chambers County Improvement District 3
WWTP Expansion to 0.5 MGD
Permit No. WQ0015887-001
WWPR Log No. 1124/034
CN603736430, RN111043063
Chambers County

Dear Mr. Heilenman:

We received the project summary transmittal letter dated 11/5/2024.

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

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

Under the authority of 30 TAC §217.6(e), a technical review of complete plans and specifications for this project is not required, and **the project proposed in the summary transmittal letter is approved for construction. Please note that this conditional approval does not relieve the applicant of any responsibilities to obtain all other necessary permits or authorizations, such as a wastewater treatment permit or any other authorization as required by Chapter 26 of the Texas Water Code.** Below are provisional requirements in 30 TAC Chapter 217, which must be met as a condition of approval. These items are provided as a reminder. If you have already met these requirements, please disregard this additional notice.

- You must keep records of certain materials for the life of the project and be prepared to provide them to TCEQ upon request. These materials include an engineering report, test results, a summary transmittal letter, and the final version of the project plans and specifications. These materials shall be prepared and sealed by a Professional Engineer licensed in the State of Texas and must show substantial compliance with 30 TAC Chapter 217. All plans and specifications must conform to any wastewater discharge requirements authorized in a permit issued by TCEQ. Specific items that must be addressed in the engineering report are discussed in 30 TAC §217.6(d). Additionally, the engineering report must include all constants, graphs, equations, and calculations needed to show substantial compliance with 30 TAC Chapter 217. The items which shall be included in the summary transmittal letter are addressed in 30 TAC §217.6(d)(1)-(9).

Nick C. Heilenman, P.E.

Page 2

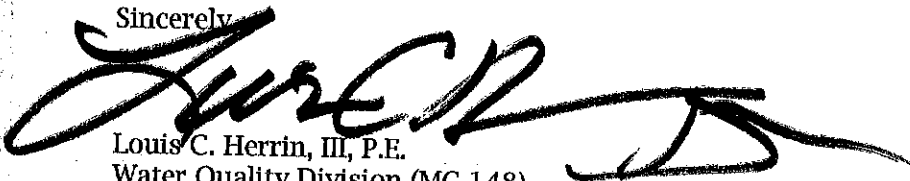
December 5, 2024

- Any deviations from 30 TAC Chapter 217 shall be disclosed in the summary transmittal letter, and the technical justifications for those deviations shall be provided in the engineering report. Any deviations from 30 TAC Chapter 217 shall be based on the best professional judgement of the licensed professional engineer sealing the materials and the engineer's judgement that the design would not result in a threat to public health or the environment.
- Any variance from a 30 TAC Chapter 217 requirement disclosed in your summary transmittal letter is approved. If in the future, additional variances from the requirements in 30 TAC Chapter 217 are desired for the project, each variance must be requested in writing by the design engineer. TCEQ will then consider granting a written approval to the additional variance requests for the specific project and the specific circumstances.
- Within 60 days of construction completion, an appointed engineer shall notify both the Wastewater Permitting Section of the TCEQ Water Quality Division and the appropriate TCEQ Regional Office of the completion date. The engineer shall also provide written certification that all construction, materials, and equipment were substantially in accordance with the approved project, and the rules of TCEQ, as well as provide any change orders filed with TCEQ throughout the duration of project construction. All notifications, certifications, and change orders must include the signed and dated seal of a Professional Engineer licensed in the State of Texas.

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

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

Sincerely,



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

LCHIII/ec/tc

cc: TCEQ, Region 12 Office

Jon Niermann, *Chairman*
Emily Lindley, *Commissioner*
Bobby Janecka, *Commissioner*
Toby Baker, *Executive Director*



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

Protecting Texas by Reducing and Preventing Pollution

May 5, 2021

Nick C. Heilenman, P.E.
JONES | CARTER
6330 West Loop South, Suite 150
Bellaire, Texas 77401

Re: Chambers County Improvement District 3
0.2 MGD Wastewater Treatment Plant
Permit No. WQ0015887-001
WWPR Log No. 0421/099
CN603736430, RN111043063
Chambers County

Dear Mr. Heilenman:

On April 14, 2021, TCEQ received the project summary transmittal letter dated April 8, 2021 for construction of a new 0.20 MGD average daily flow wastewater treatment plant for Chambers County Improvement District No. 3 in Chambers County, Texas. The plant will be regulated by Water Quality Permit WQ0015887001. The 0.20 MGD flow represents the current permitted interim II phase which has an associated peak daily flow of 0.80 MGD (4Q), with permitted effluent limits of 7 mg/l of CBOD₅, 12 mg/l of TSS, 2.0 mg/l of NH₃-N, and 126 cfu/100 ml of E. coli while maintaining a dissolved oxygen concentration of 6.0 mg/l. The units comprising the expanded treatment plant are listed below.

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

The design of the proposed wastewater treatment plant consists of the following treatment units:

- Onsite lift station, 12' diameter, 30.25' deep
- Screen box with manual bar screen, 4.5' x 3' x 3.5 ft (H)
- 2 Aeration basins 52' x 12' x 10.48 SWD; 13,079 ft³ total volume
- 1 secondary clarifier, 34' diameter, 10' SWD; 9,079 ft³ total volume
- 1 chlorine contact basin
 - 36' x 12' x 8.8' peak SWD
 - 238 ft³ for influent mixing and final effluent chambers
 - Detention volume 3,564 ft³ to provide approximately 47 mins of contact time

The submitted summary transmittal letter contained requests for 4 variances to 30 TAC Chapter 217 requirements.

- The first requested variance was to 30 TAC 217.33(c)(2)(A) which requires an approach channel to a weir be a straight distance equal to 20 times the head on weir distance. The current configuration for the weir approach channel is 11.3 times the head on weir distance providing 8.5 ft. of approach channel distance. The engineer is requesting to use the 11.3 times the head on weir distance for the approach channel distance. TCEQ is conditionally granting the requested variance on the condition that uniform flow be maintained over the weir to enable accurate flow measurement.
- The second variance was to 30 TAC 217.155(b)(5)(A)(i) which requires diffusers to be at a minimum submergence depth of 10 ft. in an aeration basin for treatment plants rated at greater than 100,000 gpd. The treatment units are fabricated off site and transportation requirements limit the overall height of the unit to 12' 2". At this height the best diffuser submergence depth is 9.39 ft. Manufacturers data submitted with the design assures that adequate oxygen transfer and treatment will be attained at this 9 ft submergence depth. Given the assurance of the manufacturer TCEQ is conditionally granting the requested variance based on the condition that the aeration basins continue to meet all dissolved oxygen requirements of 30 TAC Chapter 217.
- The final requested variance is to 30 TAC 217.281(b)(3) which requires round corners in the chlorine contact tank to ensure uniform flow through the basin. The system will be fabricated by the manufacturer which creates basins for treatment system throughout the United States and not all states have the rounded corner requirement. The engineer is employing a mixing zone ahead of the standard flow basin which will enable complete mixing of the treated water and the chlorine mixture. There should not be issues with the flow through the basin therefore TCEQ is conditionally granting this variance based on the condition that the plant continuously meet its required disinfection. If issues arise with the ability to meet the required disinfection the granting of this variance may be revisited.

The TCEQ review of the submitted project summary transmittal letter and supporting documentation seem to indicate that the project as designed, with the inclusion, of the granted variances meets at least the minimum requirements of 30 TAC Chapter 217: Design Criteria for Wastewater Systems. Given the result of the TCEQ review the project is conditionally approved for completion.

You must keep certain materials on file for the life of the project and provide them to TCEQ upon request. These materials include an engineering report, test results, a summary transmittal letter, and the final version of the project plans and specifications. These materials shall be prepared and sealed by a Professional Engineer licensed in the State of Texas and must show substantial compliance with Chapter 217. All plans and specifications must conform to any waste discharge requirements authorized in a permit by the TCEQ. Certain specific items which shall be addressed in the engineering report are discussed in §217.10. Additionally, the engineering report must include all constants, graphs, equations, and calculations needed to show substantial compliance with Chapter 217.

Nick C. Heilenman, P.E.
Page 2
May 5, 2021

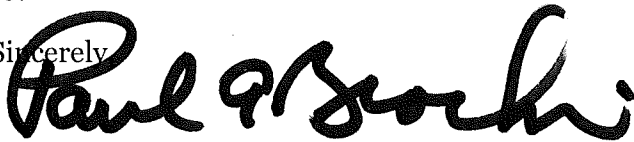
If in the future, additional variances from the Chapter 217 requirements are desired for the project, each variance must be requested in writing by the design engineer. Then, the TCEQ will consider granting a written approval to the variance from the rules for the specific project and the specific circumstances.

Within 60 days of the completion of construction, an appointed engineer shall notify both the Wastewater Permits Section of the TCEQ and the appropriate Region Office of the date of completion. The engineer shall also provide written certification that all construction, materials, and equipment were substantially in accordance with the approved project, the rules of the TCEQ, and any change orders filed with the TCEQ. All notifications, certifications, and change orders must include the signed and dated seal of a Professional Engineer licensed in the State of Texas.

Please be reminded of 30 TAC §217.7(a) of the rules which states, "Approval given by the executive director or other authorized review authority does not relieve an owner of any liability or responsibility with respect to designing, constructing, or operating a collection system or treatment facility in accordance with applicable commission rules and the associated wastewater permit".

If you have any questions, or if we can be of any further assistance, please call me at (512) 239-1372.

Sincerely,

A handwritten signature in black ink, reading "Paul A. Brochi". The signature is written in a cursive, flowing style.

Paul A. Brochi, P.E.
Wastewater Permits Section (MC 148)
Water Quality Division
Texas Commission on Environmental Quality

PAB/tc

JUSTIFICATION
CHAMBERS COUNTY IMPROVEMENT DISTRICT NO. 3

The Chambers County Improvement District No. 3 (CCID 3) Wastewater Treatment Plant serves CCID No. 3 and Chambers County MUD No. 3. The current permit (WQ0015887001) is in the phase of 0.20 MGD and has future phases of 0.5 MGD and 0.80 MGD.

At build out, there will be 616 single-family residential connections, 300 apartment units, 30 commercial connections, and 43 other connections. For design purposes, the wastewater flow for residential, apartment, commercial and other connections is 300 gallons per day per connection (gpd/conn), 200 gpd/conn, 10,000 gpd/conn, and 5,000 gpd/conn respectively.

The next page shows the connection and flow projection for CCID 3 to complete build out. The following table is the construction schedule for the current through the final plant phases based on the connection and flow projection:

<u>Proposed flow</u>	<u>Interim I</u>	<u>Interim II</u>	<u>Final</u>
Design Flow (MGD)	0.20	0.50	0.80
2-Hr Peak Flow (MGD)	0.80	2.00	3.20
Date construction to commence	---	8/2026	8/2029
Date construction completed and discharge begins	4/2024	9/2027	8/2030

**CONNECTION AND FLOW PROJECTION
 CHAMBERS COUNTY IMPROVEMENT DISTRICT NO. 3
 WASTEWATER TREATMENT PLANT TPDES RENEWAL**

Month / yr	Single family residential		Apartment		Commercial		Other		Total	
	connections	flow (gpd)	units	flow (gpd)	connections	flow (gpd)	connections	flow (gpd)	connections	flow (gpd)
Feb-24	5	1,500	-	-	1	10,000	1	5,000	7	16,500
Jan-25	31	9,300	-	-	3	30,000	3	15,000	37	54,300
Jan-26	55	16,500	-	-	5	50,000	5	25,000	65	91,500
Jan-27	94	28,200	-	-	8	80,000	8	40,000	110	148,200
Jan-28	149	44,700	125	25,000	9	90,000	11	55,000	294	214,700
Jan-29	209	62,700	500	100,000	11	110,000	14	70,000	734	342,700
Jan-30	274	82,200	500	100,000	13	130,000	18	90,000	805	402,200
Jan-31	394	118,200	500	100,000	15	150,000	22	110,000	931	478,200
Jan-32	504	151,200	500	100,000	17	170,000	25	125,000	1,046	546,200
Jan-33	616	184,800	500	100,000	20	200,000	30	150,000	1,166	634,800
Jan-34	616	184,800	500	100,000	27	270,000	40	200,000	1,183	754,800
Jun-34	616	184,800	500	100,000	30	300,000	43	215,000	1,189	800,000



P.O. Box 1089 Coldspring Tx 77331
Website: eastexlabs.com
Email: eastexlab@eastex.net
Tel: 936 653 3249



Chambers Co Improvement District 3
Municipal District Services, LLC.
406 W Grand Pkwy S, Ste 260
Katy, TX 77494

LABORATORY ANALYTICAL REPORT

Project: CC ID 3 Short Permit Renewal

Sample Site:	Effluent	Sample Number:				Collector:	CAG		
Sample Type:	Grab	5242271-01				Sampled:	06/13/2025	8:00	
Sample Matrix:	Water					Received:	06/13/2025	14:50	
Client Matrix:	Water								
Analyte	Result	Reporting Limit	Units	Nelac Status	Batch	Analyzed	Analyst	Method	Notes
DO	7.6		mg/L	N	B5F5514	06/13/2025 08:00	CAG	SM 4500 O G	
pH	7.4		std unit	N	B5F5514	06/13/2025 08:00	CAG	SM 4500 H + B	
Alkalinity	46.0	20.0	mg CaCO3/L	A	B5F5994	06/19/2025 10:26	OCR	SM 2320 B	
Ammonia as N	<0.1	0.1	mg/L	A	B5F5844	06/19/2025 09:29	HRL	SM 4500 NH3 G	22
CBOD 5	3.4	2.0	mg/L	A	B5F5769	06/15/2025 07:02	RNR	SM 5210 B	1, 13, 53
Conductivity	746	10.0	µmhos/cm @25C	A	B5F5957	06/20/2025 07:52	ARB	SM 2510 B	
Nitrate as N	28.0	0.05	mg/L	A	B5F5742	06/16/2025 16:08	OCR	EPA 300.0	23, 3
Sulfate	38.8	4.0	mg/L	A	B5F5742	06/14/2025 14:08	OCR	EPA 300.0	
TDS	540	10.0	mg/L	A	B5F5933	06/18/2025 17:00	TDS	SM 2540 C	
TKN	1.4	1.0	mg/L	A	B5F5847	06/17/2025 10:30	SJC	EPA 351.2	20
Total Phosphorus	2.36	0.0600	mg/L	A	B5F6229	06/19/2025 14:27	ALC	EPA 200.7	
TSS	3.9	1.0	mg/L	A	B5F5789	06/16/2025 12:15	JAA	SM 2540 D	



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Chambers Co Improvement District 3
Municipal District Services, LLC.
406 W Grand Pkwy S, Ste 260
Katy, TX 77494

EPA 300.0 - Quality Control
Eastex Environmental Laboratory - Coldspring

Analyte	Result	Reporting Limit	Units	Spike Level	Source Result	%REC	%REC Limits	RPD	RPD Limit	Notes
Batch B5F5742 - No Prep										
Blank (B5F5742-BLK1)				Prepared & Analyzed: 06/14/25						
Nitrate as N	ND	0.05	mg/L							
Sulfate	ND	4.0	mg/L							
LCS (B5F5742-BS1)				Prepared & Analyzed: 06/14/25						
Nitrate as N	1.4066		mg/L	1.50		93.8	90-110			
Sulfate	19.1		mg/L	20.0		95.6	90-110			
Matrix Spike (B5F5742-MS1)				Source: 5242271-01		Prepared & Analyzed: 06/14/25				
Nitrate as N	31.4585	0.05	mg/L	7.50	28.0113	46.0	80-120			23
Sulfate	120	4.0	mg/L	100	38.8	80.7	80-120			
Matrix Spike Dup (B5F5742-MSD1)				Source: 5242271-01		Prepared & Analyzed: 06/14/25				
Nitrate as N	31.7106	0.05	mg/L	7.50	28.0113	49.3	80-120	0.798	20	
Sulfate	119	4.0	mg/L	100	38.8	79.7	80-120	0.862	20	
Batch B5F5769 - No Prep										
Blank (B5F5769-BLK1)				Prepared & Analyzed: 06/15/25						
CBOD 5	0.850	2.0	mg/L							1
LCS (B5F5769-BS1)				Prepared & Analyzed: 06/15/25						
CBOD 5	145		mg/L	198		73.3	84.59-115.402			1, 13
Duplicate (B5F5769-DUP1)				Source: 5242043-01		Prepared & Analyzed: 06/15/25				
CBOD 5	2.62	2.0	mg/L		0.400			147	30	1, 13, 53



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Chambers Co Improvement District 3
Municipal District Services, LLC.
406 W Grand Pkwy S, Ste 260
Katy, TX 77494

SM 2540 D - Quality Control
Eastex Environmental Laboratory - Coldspring

Analyte	Result	Reporting Limit	Units	Spike Level	Source Result	%REC	%REC Limits	RPD	RPD Limit	Notes
Batch B5F5789 - No Prep										
Blank (B5F5789-BLK1)				Prepared & Analyzed: 06/16/25						
TSS	ND	1.0	mg/L							
Duplicate (B5F5789-DUP1)				Source: 5250014-01 Prepared & Analyzed: 06/16/25						
TSS	162	1.0	mg/L		162			0.00	10	
Batch B5F5844 - No Prep										
Blank (B5F5844-BLK1)				Prepared & Analyzed: 06/19/25						
Ammonia as N	ND	0.1	mg/L							
LCS (B5F5844-BS1)				Prepared & Analyzed: 06/19/25						
Ammonia as N	1.93		mg/L	2.00		96.4	90-110			
Matrix Spike (B5F5844-MS1)				Source: 5242271-01 Prepared & Analyzed: 06/19/25						
Ammonia as N	2.7	0.1	mg/L	2.50	ND	109	80-120			
Matrix Spike Dup (B5F5844-MSD1)				Source: 5242271-01 Prepared & Analyzed: 06/19/25						
Ammonia as N	2.7	0.1	mg/L	2.50	ND	109	80-120	0.515	20	
Batch B5F5847 - SM 4500 Norg C										
Blank (B5F5847-BLK1)				Prepared: 06/16/25 Analyzed: 06/17/25						
TKN	ND	1.0	mg/L							
LCS (B5F5847-BS1)				Prepared: 06/16/25 Analyzed: 06/17/25						
TKN	10.0		mg/L	10.0		100	90-110			
Matrix Spike (B5F5847-MS1)				Source: 5241488-01 Prepared: 06/16/25 Analyzed: 06/17/25						
TKN	10.9	1.0	mg/L	10.0	1.43	94.6	80-120			
Matrix Spike Dup (B5F5847-MSD1)				Source: 5241488-01 Prepared: 06/16/25 Analyzed: 06/17/25						
TKN	10.7	1.0	mg/L	10.0	1.43	92.3	80-120	2.13	20	



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Chambers Co Improvement District 3
Municipal District Services, LLC.
406 W Grand Pkwy S, Ste 260
Katy, TX 77494

SM 2540 C - Quality Control
Eastex Environmental Laboratory - Coldspring

Analyte	Result	Reporting Limit	Units	Spike Level	Source Result	%REC	%REC Limits	RPD	RPD Limit	Notes
Batch B5F5933 - No Prep										
Blank (B5F5933-BLK1)				Prepared & Analyzed: 06/18/25						
TDS	ND	10.0	mg/L							
LCS (B5F5933-BS1)				Prepared & Analyzed: 06/18/25						
TDS	310		mg/L	300		103	80-120			
Duplicate (B5F5933-DUP1)				Source: 5242190-01 Prepared & Analyzed: 06/18/25						
TDS	680	10.0	mg/L		660			2.99	10	
Batch B5F5957 - No Prep										
Blank (B5F5957-BLK1)				Prepared & Analyzed: 06/20/25						
Conductivity	ND	10.0	µmhos/cm @25C							
LCS (B5F5957-BS1)				Prepared & Analyzed: 06/20/25						
Conductivity	1000		µmhos/cm @25C	1000		100	80-120			
Duplicate (B5F5957-DUP1)				Source: 5230892-02 Prepared & Analyzed: 06/20/25						
Conductivity	856	10.0	µmhos/cm @25C		852			0.468	20	
Batch B5F5994 - No Prep										
Blank (B5F5994-BLK1)				Prepared & Analyzed: 06/19/25						
Alkalinity	ND	20.0	mg CaCO3/L							
LCS (B5F5994-BS1)				Prepared & Analyzed: 06/19/25						
Alkalinity	46.0		mg CaCO3/L	50.0		92.0	80-120			
Duplicate (B5F5994-DUP1)				Source: 5232904-01 Prepared & Analyzed: 06/19/25						
Alkalinity	284	20.0	mg CaCO3/L		292			2.78	20	



P.O. Box 1089 Coldspring Tx 77331
Website: eastexlabs.com
Email: eastexlab@eastex.net
Tel: 936 653 3249



Chambers Co Improvement District 3
Municipal District Services, LLC.
406 W Grand Pkwy S, Ste 260
Katy, TX 77494

EPA 200.7 - Quality Control
Eastex Environmental Laboratory - Coldspring

Analyte	Result	Reporting Limit	Units	Spike Level	Source Result	%REC	%REC Limits	RPD	RPD Limit	Notes
Batch B5F6229 - EPA 200.7										
Blank (B5F6229-BLK1)				Prepared: 06/18/25 Analyzed: 06/19/25						
Total Phosphorus	ND	0.0600	mg/L							
LCS (B5F6229-BS1)				Prepared: 06/18/25 Analyzed: 06/19/25						
Total Phosphorus	2.68	0.0600	mg/L	2.52		106	85-115			
Matrix Spike (B5F6229-MS1)				Prepared: 06/18/25 Analyzed: 06/19/25						
Total Phosphorus	6.11	0.0600	mg/L	2.52	3.65	97.9	70-130			
Matrix Spike Dup (B5F6229-MSD1)				Prepared: 06/18/25 Analyzed: 06/19/25						
Total Phosphorus	6.17	0.0600	mg/L	2.52	3.65	100	70-130	0.925	20	

Daniel Bowen

Daniel Bowen, Chief Operations Officer

Qualifiers

53	RPD Recovery outside acceptance limits due to matrix interference.
3	Sample analysis performed out of holding time.
23	Spike recovery outside of acceptance limits due to matrix interference.
22	Sample pH not <2 and not dechlorinated.
20	Sample pH not <2.
13	LCS associated with sample batch outside of acceptance limits.
1	Dilution water blank > 0.20 mg/L DO uptake.



P.O. Box 1089 Coldspring Tx 77331
Website: eastexlabs.com
Email: eastexlab@eastex.net
Tel: 936 653 3249



Chambers Co Improvement District 3
Municipal District Services, LLC.
406 W Grand Pkwy S, Ste 260
Katy, TX 77494

LABORATORY ANALYTICAL REPORT

Project: CC ID 3 Short Permit Renewal

Sample Site:	Effluent	Sample Number:	Collector:	JMO					
Sample Type:	Grab	5260168-01	Sampled:	06/21/2025 18:04					
Sample Matrix:	Water		Received:	06/21/2025 19:50					
Client Matrix:	Water								
Analyte	Result	Reporting Limit	Units	Nelac Status	Batch	Analyzed	Analyst	Method	Notes
Chlorine	1.2	0.1	mg/L	N	B5F7062	06/21/2025 18:04	JMO	SM 4500 Cl F	
E coli IDEXX	<10	10	mpn/100ml	A	B5F6995	06/21/2025 19:52	HIS	Colilert 18	

Colilert 18 - Quality Control

Eastex Environmental Laboratory - Coldspring

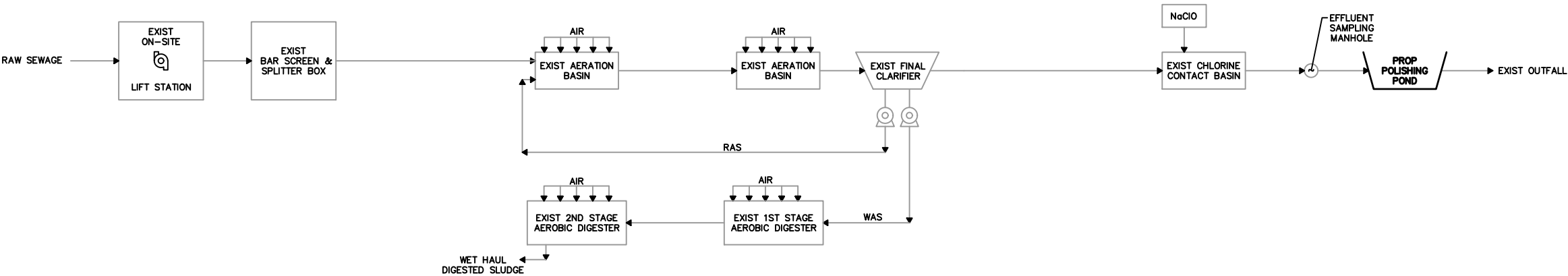
Analyte	Result	Reporting Limit	Units	Spike Level	Source Result	%REC	%REC Limits	RPD	RPD Limit	Notes
Batch B5F6995 - No Prep Micro										
Blank (B5F6995-BLK1)					Prepared & Analyzed: 06/21/25					
E coli IDEXX	ND	1	mpn/100ml							
Duplicate (B5F6995-DUP1)					Source: 5260168-01 Prepared & Analyzed: 06/21/25					
E coli IDEXX	ND	10	mpn/100ml		ND				200	

Daniel Bowen


Daniel Bowen, Chief Operations Officer

Qualifiers

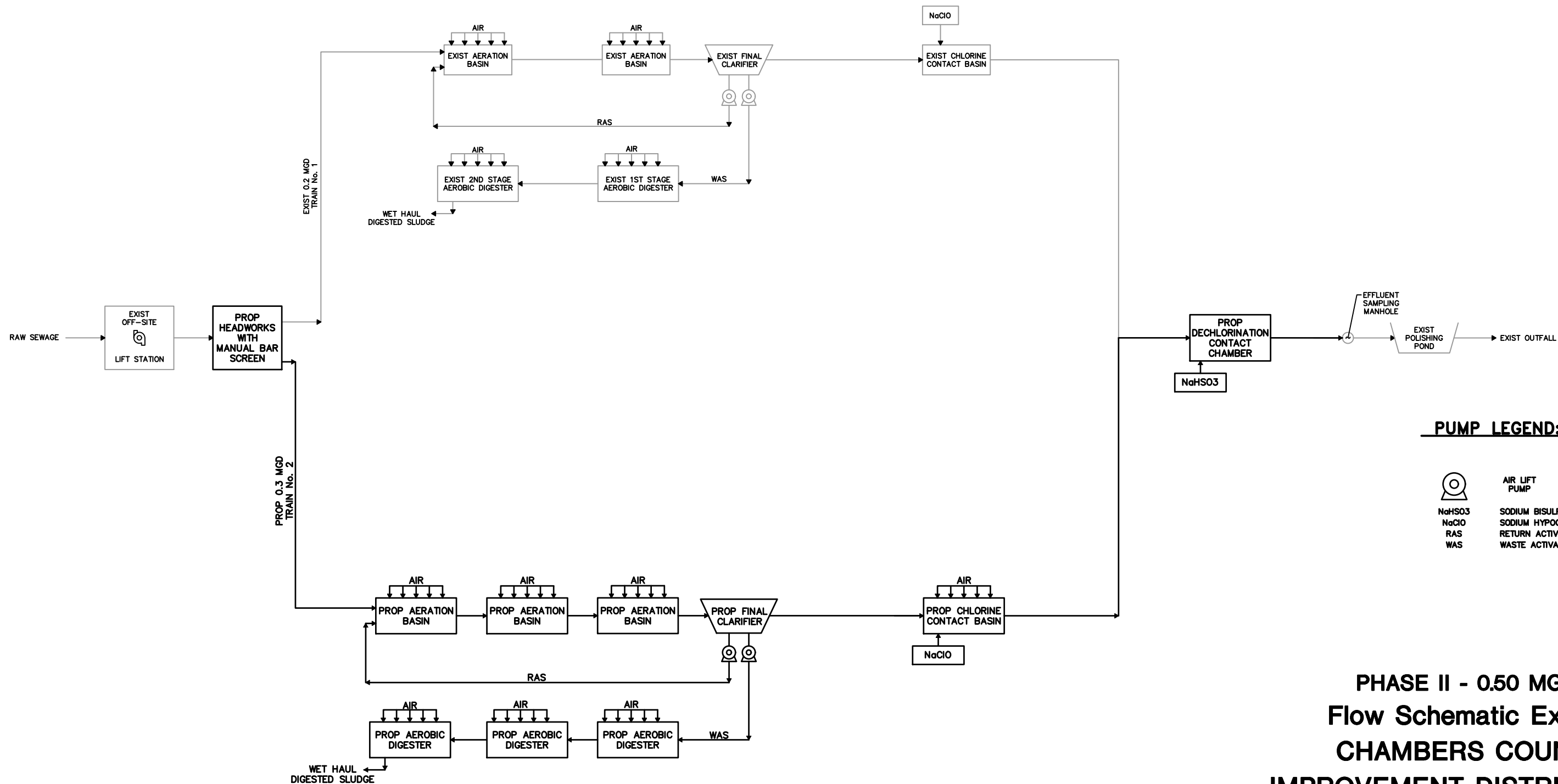
k:\05479\05479-0097-01 TPDES Permit Minor Amendment 2024\2 Design Phase\001 - TPDES Permit\01 - Submit Application\Attachment H - Supplemental Technical Report - Treatment Process and Units\PERMIT EXHIBITS.dwg Feb 21,2024 - 5:01pm jfb



PUMP LEGEND:

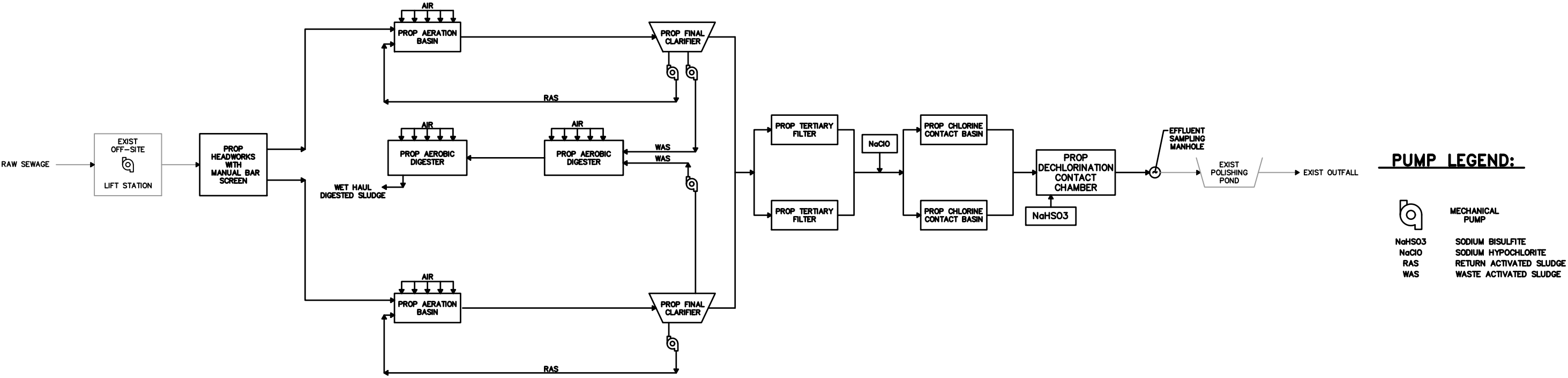
	AIR LIFT PUMP
NaClO	SODIUM HYPOCHLORITE
RAS	RETURN ACTIVATED SLUDGE
WAS	WASTE ACTIVATED SLUDGE

**PHASE I - 0.20 MGD
Flow Schematic Exhibit
CHAMBERS COUNTY
IMPROVEMENT DISTRICT No. 3
Wastewater Treatment Plant
Chambers County, Texas**

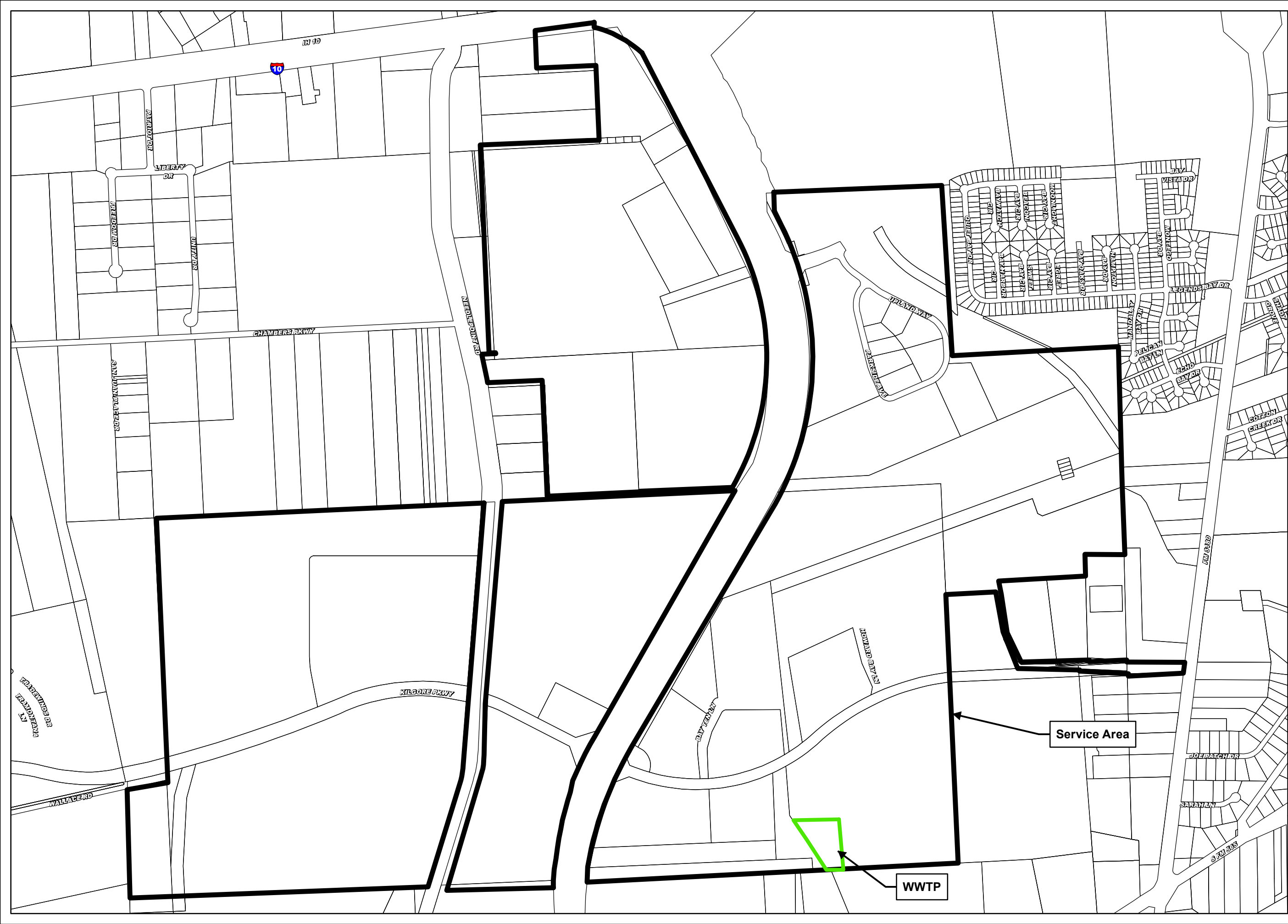


PHASE II - 0.50 MGD
Flow Schematic Exhibit
CHAMBERS COUNTY
IMPROVEMENT DISTRICT No. 3
Wastewater Treatment Plant
Chambers County, Texas

k:\05479\05479-0097-01 TPDES Permit Minor Amendment 2024\2 Design Phase\001 - TPDES Permit\01 - Submit Application\Attachment H - Supplemental Technical Report - Treatment Process and Units\PERMIT EXHIBITS.dwg Feb 21,2024 - 5:01pm jh



PHASE III - 0.80 MGD
Flow Schematic Exhibit
CHAMBERS COUNTY
IMPROVEMENT DISTRICT No. 3
Wastewater Treatment Plant
Chambers County, Texas



VICINITY MAP
1 INCH = 10 MILES

LEGEND

- WWTP Boundary
- Service Area
- CCAD Parcels

SERVICE AREA
MAP

CCID No. 3
CHAMBERS COUNTY, TEXAS



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Francesca Findlay

From: Jonathan Nguyen <jnguyen@quiddity.com>
Sent: Thursday, August 14, 2025 2:29 PM
To: Francesca Findlay
Subject: Re: WQ0015887001 Chambers County Improvement District No 3
Attachments: CCID 3 Spanish NORI.docx

Good afternoon,

The NORI statement in the NOD is good to go. Attached is the Spanish NORI. Please let me know if you have any additional questions.

Thank you,

Jonathan Nguyen
Permitting Specialist



✉ jnguyen@quiddity.com

☎ [\(512\) 685-5156](tel:(512)685-5156)

📍 912 S. Capital of Texas Hwy, Suite 300, Austin, Texas, 78746

www.quiddity.com



From: Francesca Findlay <Francesca.Findlay@tceq.texas.gov>
Sent: Tuesday, August 12, 2025 9:48 AM
To: Jonathan Nguyen <jnguyen@quiddity.com>
Subject: FW: WQ0015887001 Chambers County Improvement District No 3

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Dear Mr. Nguyen:

The attached Notice of Deficiency letter sent on August 12, 2025, requesting additional information needed to declare the application administratively complete. Please send the complete response to my attention August 26, 2025.

Thank you,

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



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Wednesday:	8:00 AM - 5:00 PM
Thursday:	8:00 AM - 7:00 PM



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