



# 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



## TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

# PLAIN LANGUAGE SUMMARY FOR TPDES OR TLAP PERMIT APPLICATIONS

### Plain Language Summary Template and Instructions for Texas Pollutant Discharge Elimination System (TPDES) and Texas Land Application (TLAP) Permit Applications

Applicants should use this template to develop a plain language summary as required by [Title 30, Texas Administrative Code \(30 TAC\), Chapter 39, Subchapter H](#). Applicants may modify the template as necessary to accurately describe their facility as long as the summary includes the following information: (1) the function of the proposed plant or facility; (2) the expected output of the proposed plant or facility; (3) the expected pollutants that may be emitted or discharged by the proposed plant or facility; and (4) how the applicant will control those pollutants, so that the proposed plant will not have an adverse impact on human health or the environment.

Fill in the highlighted areas below to describe your facility and application in plain language. Instructions and examples are provided below. Make any other edits necessary to improve readability or grammar and to comply with the rule requirements.

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

#### ENGLISH TEMPLATE FOR TPDES or TLAP NEW/RENEWAL/AMENDMENT APPLICATIONS DOMESTIC WASTEWATER/STORMWATER

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

Four Seasons Ranch MUD 1 (CN603401316) proposes to operate Four Seasons Ranch WWTP (RN TBD), an activated sludge process operating in the complete mix mode. The facility will be located at 0.6 miles southeast of the intersection of County Line Rd and Gorrell Rd, in , Denton County, Texas 76258. This is a new application to discharge at a daily flow up to 2,000,000 gallons per day of treated domestic wastewater.

Discharges from the facility are expected to contain five-day carbonaceous biochemical oxygen demand (CBOD<sub>5</sub>), total suspended solids (TSS), ammonia nitrogen (NH<sub>4</sub>-N) and *E. coli*. Domestic wastewater will be treated by an activated sludge process plant.



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

**AGUAS RESIDUALES DOMÉSTICAS /AGUAS PLUVIALES**

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

Four Seasons Ranch MUD 1 (CN603401316) propone operar Four Seasons Ranch WWTP (RN TBD), un proceso de lodos activados que opera en el modo de mezcla completa. La instalación estará ubicada a 1.8 millas al noreste de la intersección de County Line Rd y Gorrell Rd, en Condado de Denton, Texas 76258. Esta es una nueva aplicación para descargar a un flujo diario de hasta 2,000,000 de galones por día de aguas residuales domésticas tratadas.

Se espera que las descargas de la instalación contengan una demanda bioquímica carbonosa de oxígeno (CBOD5) de cinco días, sólidos suspendidos totales (SST), nitrógeno amoniacal (NH4-N) y E. coli. Las aguas residuales domésticas serán tratadas por una planta de tratamiento de lodos activados.

# TEXAS COMMISSION ON ENVIRONMENTAL QUALITY



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

### PROPOSED PERMIT NO. WQ0016620001

**APPLICATION.** Four Seasons Ranch Municipal Utility District 1 of Denton County, 16000 Dallas Parkway, Suite 350, Dallas, Texas 75248, has applied to the Texas Commission on Environmental Quality (TCEQ) for proposed Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0016620001 (EPA I.D. No. TX0146587) to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 2,000,000 gallons per day. The domestic wastewater treatment facility will be located approximately 0.6 miles southeast of the intersection of Berend Road and Gorrell Road, near the city of Gunter, in Denton County, Texas 76258. The discharge route will be from the plant site to Mustang Creek; thence to Little Elm Creek; thence to Lake Lewisville. TCEQ received this application on September 12, 2024. The permit application will be available for viewing and copying at Pilot Point Community Library, 324 South Washington Street, Pilot Point, in Denton County, Texas and at Gunter Library and Museum, 110 South Highway 289, Suite 4, Gunter, in Grayson 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=-96.846747,33.406575&level=18>

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

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

**PUBLIC COMMENT / PUBLIC MEETING.** You may submit public comments or request a public meeting on this application. The purpose of a public meeting is to provide the

opportunity to submit comments or to ask questions about the application. TCEQ will hold a public meeting if the Executive Director determines that there is a significant degree of public interest in the application or if requested by a local legislator. A public meeting is not a contested case hearing.

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

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

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

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

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

**INFORMATION AVAILABLE ONLINE.** For details about the status of the application, visit the Commissioners' Integrated Database at [www.tceq.texas.gov/goto/cid](http://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](http://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 Four Seasons Ranch Municipal Utility District 1 of Denton County at the address stated above or by calling Ms. Laura Preston, P.E., Assistant Project Manager, at 214-442-6579.

Issuance Date: October 18, 2024

# Comisión de Calidad Ambiental del Estado de Texas



## **MODIFICADO AVISO DE RECIBO DE LA SOLICITUD Y EL INTENTO DE OBTENER PERMISO PARA LA CALIDAD DEL AGUA**

### **PERMISO PROPUESTO NO. WQ0016620001**

**SOLICITUD.** Four Seasons Ranch Municipal Utility District 1 of Denton County, 16000 Dallas Parkway, Suite 350, Dallas, Texas 75248, ha solicitado a la Comisión de Calidad Ambiental del Estado de Texas (TCEQ) para el propuesto Permiso No. WQ0016620001 (EPA I.D. No. TX0146587) 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 2,000,000 galones por día. La planta está ubicada 0.6 millas al sudeste de la intersección de Berend Road y Gorrell Road en el Condado de Denton, Texas. La ruta de descarga es del sitio de la planta a hasta Mustang Creek, de allí a Little Elm Creek, de allí a Lewisville lago. La TCEQ recibió esta solicitud el 12 de septiembre de 2024. La solicitud para el permiso está disponible para leerla y copiarla en Pilot Point Community Library, 324 South Washington Street, Pilot Point in Denton County, Texas and at Van Alstyne Public Library, 151 West Cooper Street, Van Alstyne, in Grayson County, Texas. 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=-96.846747,33.406575&level=18>

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

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

**OPORTUNIDAD DE UNA AUDIENCIA ADMINISTRATIVA DE LO CONTENCIOSO.**

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

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

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

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

**CONTACTOS E INFORMACIÓN DE LA TCEQ.** Todos los comentarios escritos del

**público y los para pedidos una reunión deben ser presentados a la Oficina del Secretario Principal, MC 105, TCEQ, P.O. Box 13087, Austin, TX 78711-3087 o por el internet at [www.tceq.texas.gov/about/comments.html](http://www.tceq.texas.gov/about/comments.html).** 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. Si necesita más información en Español sobre esta solicitud para un permiso o el proceso del permiso, por favor llame a El Programa de Educación Pública de la TCEQ, sin cobro, al 1-800-687-4040. La información general sobre la TCEQ puede ser encontrada en nuestro sitio de la red: [www.tceq.texas.gov](http://www.tceq.texas.gov).

También se puede obtener información adicional del Four Seasons Ranch Municipal Utility District 1 of Denton County a la dirección indicada arriba o llamando a Ms. Laura Preston, P.E. al 214-442-6579.

Fecha de emission: 8 de noviembre de 2024



469.621.0710  
TBPELS F-1386  
TBPELS 10110501  
www.LJA.com

6060 North Central Expressway, Suite 400, Dallas, Texas 75206

September 9, 2024

Texas Commission on Environmental Quality  
Applications Review and Processing Team  
Building F, Room 2101  
12100 Park 35 Circle  
Austin, Texas 78753

RE: Four Seasons Ranch WWTP Domestic Wastewater Discharge Permit Application

Project Name: Four Seasons Ranch WWTP Domestic Wastewater Discharge Permit Application  
County: Denton  
LJA Job No: NT860B-0314

Dear Applications Review and Processing Team:

The purpose of this letter is to provide the Texas Commission on Environmental Quality (TCEQ) with the information necessary to comply with the submittal requirements of Domestic Wastewater Discharge Permit Applications. Attached to this letter is one copy of the Domestic Wastewater Discharge Permit Application with original documents, including full size exhibits and original signatures. Also attached are two additional copies of the permit application. We look forward to your review. An original application and signatures along with 2 copies have have also been sent USPS in accordance with the requirements.

1. The Engineering Firm (Preparer) is:

LJA Engineering, Inc.  
6060 N. Central Expressway, Suite 400  
Dallas, Texas 75206  
Firm # 1386

2. The county is:

Denton

3. The project name is:

Four Seasons Ranch WWTP Domestic Wastewater Discharge Permit Application

For any questions or comments, please contact Laura Preston using the information below.

Sincerely,

A handwritten signature in blue ink, appearing to read "L. Preston", is written over a light blue horizontal line.

Laura Preston, PE  
Project Engineer  
214.442.6579  
[lpreston@lja.com](mailto:lpreston@lja.com)  
Firm #1386





### LETTER OF TRANSMITTAL

To: Texas Commission on  
Environmental Quality  
Applications Review and  
Processing Team  
Building F, Room 2101  
12100 Park 35 Circle  
Austin, Texas 78753

Date: 09/09/2024

LJA Job No. NT860B-0314

From: Laura Preston, P.E.

LJA Engineering

RE: Four Seasons Ranch WWTP Domestic  
Wastewater Permit

WE ARE SENDING YOU the following items:

- ☐ Shop Drawings   ☐ Prints   ☐ Plans   ☐ Samples   ☐ Specifications  
☐ Copy of Letter   ☐ Change Order   ☐ Contract   ☒ Other: Domestic Wastewater Permit Application

Copies	Date	Description
1	September 2024	Original Copy with Original Signatures and full-size documents
2	September 2024	Additional Copies of the domestic wastewater permit application

THESE ARE TRANSMITTED as checked below:

- |  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> For approval         | <input type="checkbox"/> Approved as submitted    | <input type="checkbox"/> Resubmit _ copies for approval   |
| <input type="checkbox"/> For your use                    | <input type="checkbox"/> Approved as noted        | <input type="checkbox"/> Submit _ copies for distribution |
| <input type="checkbox"/> As requested                    | <input type="checkbox"/> Returned for corrections | <input type="checkbox"/> Return _ executed agreement      |
| <input checked="" type="checkbox"/> For review & comment | <input type="checkbox"/> For signatures           | <input type="checkbox"/> _____                            |

REMARKS: Please find the enclosed Four Seasons Ranch WWTP Domestic Wastewater Discharge Permit Application. An original application and two copies have also been sent USPS in accordance with the requirements.

c: \_\_\_\_\_

SIGNED: Laura Preston, P.E.



# TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

## DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the application.

APPLICANT NAME: Four Seasons Ranch MUD 1

PERMIT NUMBER (If new, leave blank): WQ00 TBD – This is an application for a new permit

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

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

For TCEQ Use Only

Segment Number \_\_\_\_\_ County \_\_\_\_\_  
Expiration Date \_\_\_\_\_ Region \_\_\_\_\_  
Permit Number \_\_\_\_\_



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

**DOMESTIC WASTEWATER PERMIT APPLICATION  
ADMINISTRATIVE REPORT 1.0**

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

**Section 1. Application Fees (Instructions Page 26)**

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

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

Minor Amendment (for any flow) \$150.00 ☐

**Payment Information:**

Mailed      Check/Money Order Number: N/A

Check/Money Order Amount: N/A

Name Printed on Check: N/A

EPAY      Voucher Number: 720521 & 720522

Copy of Payment Voucher enclosed?      Yes ☒

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

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

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

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

- ☐ Active      ☒ Inactive

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

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

d. Check the box next to the appropriate application type

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

e. For amendments or modifications, describe the proposed changes: N/A

f. For existing permits:

Permit Number: WQ00 N/A

EPA I.D. (TPDES only): TX N/A

Expiration Date: N/A

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

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

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

Four Seasons Ranch MUD 1

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

If the applicant is currently a customer with the TCEQ, what is the Customer Number (CN)?

You may search for your CN on the TCEQ website at <http://www15.tceq.texas.gov/crpub/>

CN: 603401316

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

Prefix: Mr.

Last Name, First Name: Teeling, Michael

Title: Board President

Credential: N/A

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

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

N/A

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

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

CN: N/A

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

Prefix: N/A

Last Name, First Name: N/A

Title: N/A

Credential: N/A

Provide a brief description of the need for a co-permittee: N/A

### C. Core Data Form

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

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

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

- A. Prefix: Ms. Last Name, First Name: Preston, Laura  
Title: Assistant Project Manager Credential: P.E.  
Organization Name: LJA Engineering, Inc.  
Mailing Address: 6060 N Central Expy, Ste 400 City, State, Zip Code: Dallas, Texas 75206  
Phone No.: 214-442-6579 E-mail Address: lpreston@lja.com  
Check one or both: ☒ Administrative Contact ☒ Technical Contact
- B. Prefix: Mr. Last Name, First Name: Wendling, Dallas  
Title: Project Manager Credential: P.E.  
Organization Name: LJA Engineering, Inc.  
Mailing Address: 2150 S Central Expy, Ste 300 City, State, Zip Code: McKinney, Texas 75070  
Phone No.: 214-620-2772 E-mail Address: dwendling@lja.com  
Check one or both: ☒ Administrative Contact ☒ Technical Contact

## Section 5. Permit Contact Information (Instructions Page 27)

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

- A. Prefix: Ms. Last Name, First Name: Preston, Laura  
Title: Assistant Project Manager Credential: P.E.  
Organization Name: LJA Engineering, Inc.  
Mailing Address: 6060 N Central Expy, Ste 400 City, State, Zip Code: Dallas, Texas 75206  
Phone No.: 214-442-6579 E-mail Address: lpreston@lja.com

B. Prefix: Mr. Last Name, First Name: Wendling, Dallas  
Title: Project Manager Credential: P.E.  
Organization Name: LJA Engineering, Inc.  
Mailing Address: 2150 S Central Expy, Ste 300 City, State, Zip Code: McKinney, Texas 75070  
Phone No.: 214-620-2772 E-mail Address: dwendling@lja.com

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

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

Prefix: N/A Last Name, First Name: Bethke, Joshua  
Title: N/A Credential: N/A  
Organization Name: Four Seasons Ranch MUD 1  
Mailing Address: 16000 Dallas Pkwy Ste 350 City, State, Zip Code: Dallas, TX 75248  
Phone No.: 972-788-1600 E-mail Address: jbethke@coatsrose.com

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

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

Prefix: Mr. Last Name, First Name: Bethke, Joshua  
Title: N/A Credential: N/A  
Organization Name: Four Seasons Ranch MUD 1  
Mailing Address: 16000 Dallas Pkwy, Ste 350 City, State, Zip Code: Dallas, TX 75248-6637  
Phone No.: 972-788-1600 E-mail Address: jbethke@coatsrose.com

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

### A. Individual Publishing the Notices

Prefix: Ms. Last Name, First Name: Preston, Laura  
Title: Assistant Project Manager Credential: P.E.  
Organization Name: LJA Engineering, Inc.  
Mailing Address: 6060 N Central Expy, Ste 400 City, State, Zip Code: Dallas, Texas 75206  
Phone No.: 214-442-6579 E-mail Address: lpreston@lja.com

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

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

☒ E-mail Address: lpreston@lja.com

☐ Fax

☐ Regular Mail

**C. Contact permit to be listed in the Notices**

Prefix: Ms. Last Name, First Name: Preston, Laura

Title: Assistant Assistant Project Manager Credential: P.E.

Organization Name: LJA Engineering, Inc.

Mailing Address: 6060 N Central Expy, Ste 400 City, State, Zip Code: Dallas, Texas 75206

Phone No.: 214-442-6579 E-mail Address: lpreston@lja.com

**D. Public Viewing Information**

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

Public building name: Pilot Point Community Library

Location within the building: Service Desk

Physical Address of Building: 324 S Washington St

City: Pilot Point County: Denton

Contact (Last Name, First Name): Library Staff

Phone No.: 940-686-5004 Ext.: N/A

Public building name: Gunter Library & Museum

Location within the building: Service Desk

Physical Address of Building: 110 S Hwy 289, Ste 4

City: Gunter County: Grayson

Contact (Last Name, First Name): Library Staff

Phone No.: 903-771-3066 Ext.: N/A

**E. Bilingual Notice Requirements**

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

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

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

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

☒ Yes ☐ No

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

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

☐ Yes ☒ No

3. Do the students at these schools attend a bilingual education program at another location?

☐ Yes ☒ No

4. Would the school be required to provide a bilingual education program but the school has waived out of this requirement under 19 TAC §89.1205(g)?

☐ Yes ☒ No

5. If the answer is **yes** to **question 1, 2, 3, or 4**, public notices in an alternative language are required. Which language is required by the bilingual program? Spanish

#### F. Plain Language Summary Template

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

**Attachment:** 2

#### G. Public Involvement Plan Form

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

**Attachment:** 3

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

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

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

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

Four Seasons Ranch WWTP

- C. Owner of treatment facility: Four Seasons Ranch MUD 1

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

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

Prefix: N/A

Last Name, First Name: N/A

Title: N/A

Credential: N/A



Organization Name: Four Seasons Ranch MUD 1

Mailing Address: 16000 Dallas Pkwy, Ste 350 City, State, Zip Code: Dallas, Tx 75248

Phone No.: 972-788-1600

E-mail Address: jbethke@coatsrose.com

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

**Attachment:** N/A

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

Prefix: N/A

Last Name, First Name: N/A

Title: N/A

Credential: N/A

Organization Name: N/A

Mailing Address: N/A

City, State, Zip Code: N/A

Phone No.: N/A

E-mail Address: N/A

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

**Attachment:** N/A

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

Prefix: N/A

Last Name, First Name: N/A

Title: N/A

Credential: N/A

Organization Name: N/A

Mailing Address: N/A

City, State, Zip Code: N/A

Phone No.: N/A

E-mail Address: N/A

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

**Attachment:** N/A

## Section 10. TPDES Discharge Information (Instructions Page 31)

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

☐

Yes

☒

No

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

Approximately 0.6 miles southeast of the intersection of County Line Rd and Gorrell Rd in Denton County

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

☐

Yes

☒

No

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

To unnamed tributary, thence to Little Elm Creek, thence to Lake Lewisville in segment 0823 of the Trinity River Basin.

City nearest the outfall(s): Gunter

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

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

☐ Yes ☒ No

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

☐ Authorization granted ☐ Authorization pending

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

**Attachment:** N/A

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

## Section 11. TLAP Disposal Information (Instructions Page 32)

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

☐ Yes ☐ No

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

N/A – This is not an application for a TLAP

- B. City nearest the disposal site: N/A

- C. County in which the disposal site is located: N/A

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

N/A

- E. For TLAPs, please identify the nearest watercourse to the disposal site to which rainfall runoff might flow if not contained: N/A

## Section 12. Miscellaneous Information (Instructions Page 32)

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

☐ Yes ☒ No

- B. If the existing permit contains an onsite sludge disposal authorization, is the location of the

sewage sludge disposal site in the existing permit accurate?

☐ Yes      ☐ No      ☒ Not Applicable

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

N/A – no sludge disposal authorization is requested in this permit

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

☐ Yes      ☒ No

If yes, list each person formerly employed by the TCEQ who represented your company and was paid for service regarding the application: N/A

D. Do you owe any fees to the TCEQ?

☐ Yes      ☒ No

If **yes**, provide the following information:

Account number: N/A

Amount past due: N/A

E. Do you owe any penalties to the TCEQ?

☐ Yes      ☒ No

If **yes**, please provide the following information:

Enforcement order number: N/A

Amount past due: N/A

## Section 13. Attachments (Instructions Page 33)

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

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

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

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

☐ Attachment 1 for Individuals as co-applicants

☒ Other Attachments. Please specify: Core Data Form

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

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

Permit Number: N/A

Applicant: Four Seasons Ranch MUD 1

Certification:

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

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

Signatory name (typed or printed): Michael Teeling

Signatory title: Board President

Signature: \_\_\_\_\_

(Use blue ink)

Date: \_\_\_\_\_

Subscribed and Sworn to before me by the said Michael Teeling

on this 15<sup>th</sup>

day of August

, 20 24

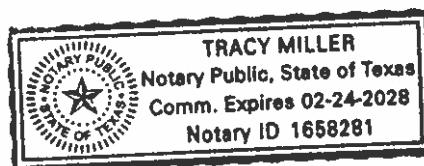
My commission expires on the 24<sup>th</sup>

day of February

, 20 28

Notary Public

Dallas  
County, Texas



[SEAL]

# DOMESTIC WASTEWATER PERMIT APPLICATION ADMINISTRATIVE REPORT 1.0

The following information is required for new and amendment applications.

## Section 1. Affected Landowner Information (Instructions Page 36)

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

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

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

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

- ☒ USB Drive      ☐ Four sets of labels

D. Provide the source of the landowners' names and mailing addresses: Collin County CAD, Denton County CAD, Grayson County CAD

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

- ☐ Yes      ☒ No

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

N/A

## Section 2. Original Photographs (Instructions Page 38)

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

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

## Section 3. Buffer Zone Map (Instructions Page 38)

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

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

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

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

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

- ☒ Yes      ☐ No

# **DOMESTIC WASTEWATER PERMIT APPLICATION**

## **SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)**

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

**Attachment:** 7

# DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST OF COMMON DEFICIENCIES

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

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

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

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

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

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

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

## **Things to Know:**

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

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

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

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

Plain Language Summary ☒ Yes



Print this voucher for your records. If you are sending the TCEQ hardcopy documents related to this payment, include a copy of this voucher.

Transaction Information

Voucher Number:

720521

Trace Number:

582EA000624690

Date:

09/09/2024 03:38 PM

Payment Method:

CC - Authorization 000005454D

Voucher Amount:

\$2,000.00

Fee Type:

WW PERMIT - FACILITY WITH FLOW >= 1.0 MGD - NEW AND MAJOR AMENDMENTS

ePay Actor:

LAURA PRESTON

Actor Email:

lpreston@lja.com

IP:

170.55.94.226

Payment Contact Information

Name:

LAURA PRESTON

Company:

LJA ENGINEERING

Address:

6060 N CENTRAL EXPY SUITE 400, DALLAS, TX 75206

Phone:

325-668-2952

Site Information

Site Name:

FOUR SEASONS RANCH WWTP

Site Location:

APPROX 0.6 MI SE OF THE INTERSECTION OF COUNTY LINE RD AND GORRELL ROAD

Customer Information

Customer Name:

FOUR SEASONS RANCH MUD 1

Customer Address:

16000 DALLAS PKWY STE 350, DALLAS, TX 75248

Close

Print this voucher for your records. If you are sending the TCEQ hardcopy documents related to this payment, include a copy of this voucher.

Transaction Information

Voucher Number:

720522

Trace Number:

582EA000624690

Date:

09/09/2024 03:38 PM

Payment Method:

CC - Authorization 000005454D

Voucher Amount:

\$50.00

Fee Type:

30 TAC 305.53B WQ NOTIFICATION FEE

ePay Actor:

LAURA PRESTON

Actor Email:

lpreston@lja.com

IP:

170.55.94.226

Payment Contact Information

Name:

LAURA PRESTON

Company:

LJA ENGINEERING

Address:

6060 N CENTRAL EXPY SUITE 400, DALLAS, TX 75206

Phone:

325-668-2952

Close



# TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

## DOMESTIC WASTEWATER PERMIT APPLICATION TECHNICAL REPORT 1.0

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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): 0.15

2-Hr Peak Flow (MGD): 0.6

Estimated construction start date: 06/2025

Estimated waste disposal start date: 08/2025

#### B. Interim II Phase

Design Flow (MGD): 0.3

2-Hr Peak Flow (MGD): 1.2

Estimated construction start date: 12/2025

Estimated waste disposal start date: 02/2026

#### C. Final Phase

Design Flow (MGD): 2.0

2-Hr Peak Flow (MGD): 8.0

Estimated construction start date: 02/2029

Estimated waste disposal start date: 04/2029

#### D. Current Operating Phase

Provide the startup date of the facility: N/A

### 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 11

## 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 12		

## C. Process Flow Diagram

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

**Attachment:** See Attachments 13.1, 13.2, 13.3, & 13.4

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

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

- Latitude: 33.411875
- Longitude: -96.835289

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

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

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

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

**Attachment:** 14

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

Four Seasons Ranch WWTP will support single family residential development on an adjacent/nearby property.

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
N/A	N/A	Choose an item.	N/A
		Choose an item.	
		Choose an item.	
		Choose an item.	

### Section 4. Unbuilt Phases (Instructions Page 45)

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

☐ Yes ☒ No

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

☐ Yes ☐ No

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

N/A

### 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: N/A

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.**

N/A

### B. Buffer zones

Have the buffer zone requirements been met?

☒ Yes ☐ No

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

Buffer zone requirements will be met by ownership and restrictive easement.

### 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*.

N/A - This is an application for a new permit.

#### 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 BOD<sub>5</sub> concentration of the sludge, and the design BOD<sub>5</sub> concentration of the influent from the collection system. Also note if this information has or has not changed since the last permit action.

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 BOD<sub>5</sub> concentration of the septic waste, and the design BOD<sub>5</sub> concentration of the influent from the collection system. Also note if this information has or has not changed since the last permit action.

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 <sub>5</sub> , mg/l	N/A				
Total Suspended Solids, mg/l	N/A				
Ammonia Nitrogen, mg/l	N/A				
Nitrate Nitrogen, mg/l	N/A				
Total Kjeldahl Nitrogen, mg/l	N/A				

Sulfate, mg/l	N/A				
Chloride, mg/l	N/A				
Total Phosphorus, mg/l	N/A				
pH, standard units	N/A				
Dissolved Oxygen*, mg/l	N/A				
Chlorine Residual, mg/l	N/A				
<i>E.coli</i> (CFU/100ml) freshwater	N/A				
Enterococci (CFU/100ml) saltwater	N/A				
Total Dissolved Solids, mg/l	N/A				
Electrical Conductivity, $\mu$ mohs/cm, †	N/A				
Oil & Grease, mg/l	N/A				
Alkalinity (CaCO <sub>3</sub> )*, mg/l	N/A				

\*TPDES permits only

†TLAP permits only

**Table 1.0(3) – Pollutant Analysis for Water Treatment Facilities**

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

## Section 8. Facility Operator (Instructions Page 50)

Facility Operator Name: TBD

Facility Operator's License Classification and Level: TBD

Facility Operator's License Number: TBD

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

### A. WWTP's Biosolids Management Facility Type

Check all that apply. See instructions for guidance

- ☒ Design flow  $\geq$  1 MGD
- ☐ Serves  $\geq$  10,000 people
- ☐ Class I Sludge Management Facility (per 40 CFR § 503.9)

- ☒ Biosolids generator
- ☐ Biosolids end user – land application (onsite)
- ☐ Biosolids end user – surface disposal (onsite)
- ☐ Biosolids end user – incinerator (onsite)

## B. WWTP's Biosolids Treatment Process

Check all that apply. See instructions for guidance.

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

## 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		Class B: PSRP Aerobic Digestion	Option 3: Lab demonstration of volatile solids

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

If “Other” is selected for Management Practice, please explain (e.g. monofill or transport to another WWTP): Facility is not in operation. Biosolids management method may vary based on final design.

#### D. Disposal site

Disposal site name: TBD

TCEQ permit or registration number: TBD

County where disposal site is located: TBD

#### E. Transportation method

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

Name of the hauler: TBD

Hauler registration number: TBD

Sludge is transported as a:

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

## Section 10. Permit Authorization for Sewage Sludge Disposal (Instructions Page 53)

#### A. Beneficial use authorization

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

☐ Yes ☒ No

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

☐ Yes ☐ No

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

☐ Yes ☐ No

#### B. Sludge processing authorization

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

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

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

☐ Yes ☐ No

## Section 11. Sewage Sludge Lagoons (Instructions Page 53)

Does this facility include sewage sludge lagoons?

☐ Yes ☒ No

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

### A. Location information

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

- Original General Highway (County) Map:  
**Attachment:** N/A
- USDA Natural Resources Conservation Service Soil Map:  
**Attachment:** N/A
- Federal Emergency Management Map:  
**Attachment:** N/A
- Site map:  
**Attachment:** N/A

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:** N/A

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:

N/A

## 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: N/A

Total Kjeldahl Nitrogen, mg/kg: N/A

Total Nitrogen (=nitrate nitrogen + TKN), mg/kg: N/A

Phosphorus, mg/kg: N/A

Potassium, mg/kg: N/A

pH, standard units: N/A

Ammonia Nitrogen mg/kg: N/A

Arsenic: N/A

Cadmium: N/A

Chromium: N/A

Copper: N/A

Lead: N/A

Mercury: N/A

Molybdenum: N/A

Nickel: N/A

Selenium: N/A

Zinc: N/A

Total PCBs: N/A

Provide the following information:

Volume and frequency of sludge to the lagoon(s): N/A

Total dry tons stored in the lagoons(s) per 365-day period: N/A

Total dry tons stored in the lagoons(s) over the life of the unit: N/A

## C. Liner information

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

☐ Yes ☐ No

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



N/A

#### D. Site development plan

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

N/A

Attach the following documents to the application.

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

#### E. Groundwater monitoring

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

☐ Yes ☐ No

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

**Attachment:** N/A

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

**A. Additional authorizations**

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

☐ Yes ☒ No

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

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

## Section 14. Laboratory Accreditation (Instructions Page 56)

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

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

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

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

### CERTIFICATION:

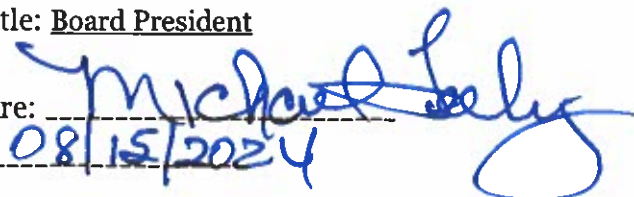
I certify that all laboratory tests submitted with this application meet the requirements of *30 TAC Chapter 25, Environmental Testing Laboratory Accreditation and Certification*.

Printed Name: Michael Teeling

Title: Board President

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Handwritten signature of Michael Teeling in blue ink, written over a dashed line. Below the signature, the date "08/15/2024" is handwritten in blue ink over another dashed line.

# DOMESTIC WASTEWATER PERMIT APPLICATION

## TECHNICAL REPORT 1.1

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

### Section 1. Justification for Permit (Instructions Page 57)

#### A. Justification of permit need

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

This permit is needed to support single family residential development on an adjacent/nearby property.

#### B. Regionalization of facilities

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

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

##### 1. Municipally incorporated areas

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

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

☐ Yes ☒ No ☐ Not Applicable

If yes, within the city limits of: N/A

If yes, attach correspondence from the city.

Attachment: N/A

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

Attachment: N/A

##### 2. Utility CCN areas

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

☒ Yes ☐ No

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

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

**Attachment:** 21

**3. Nearby WWTPs or collection systems**

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

☒ Yes ☐ No

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

**Attachment:** 15

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

**Attachment:** 16

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

**Attachment:** N/A

## Section 2. Proposed Organic Loading (Instructions Page 59)

Is this facility in operation?

☐ Yes ☒ No

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

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

**A. Current organic loading**

Facility Design Flow (flow being requested in application): N/A

Average Influent Organic Strength or BOD<sub>5</sub> Concentration in mg/l: N/A

Average Influent Loading (lbs/day = total average flow X average BOD<sub>5</sub> conc. X 8.34): N/A

Provide the source of the average organic strength or BOD<sub>5</sub> concentration.

N/A

## B. Proposed organic loading

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

**Table 1.1(1) – Design Organic Loading**

Source	Total Average Flow (MGD)	Influent BOD <sub>5</sub> Concentration (mg/l)
Municipality		
Subdivision	2.0	325 mg/L
Trailer park – transient		
Mobile home park		
School with cafeteria and showers		
School with cafeteria, no showers		
Recreational park, overnight use		
Recreational park, day use		
Office building or factory		
Motel		
Restaurant		
Hospital		
Nursing home		
Other		
TOTAL FLOW from all sources		
AVERAGE BOD <sub>5</sub> from all sources		

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

### A. Existing/Interim I Phase Design Effluent Quality

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

Total Suspended Solids, mg/l: 15

Ammonia Nitrogen, mg/l: 3

Total Phosphorus, mg/l: N/A

Dissolved Oxygen, mg/l: 4

Other: N/A

### B. Interim II Phase Design Effluent Quality

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

Total Suspended Solids, mg/l: 15

Ammonia Nitrogen, mg/l: 3

Total Phosphorus, mg/l: N/A

Dissolved Oxygen, mg/l: 4

Other: N/A

### C. Final Phase Design Effluent Quality

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

Total Suspended Solids, mg/l: 15

Ammonia Nitrogen, mg/l: 3

Total Phosphorus, mg/l: N/A

Dissolved Oxygen, mg/l: 4

Other: N/A

### D. Disinfection Method

Identify the proposed method of disinfection.

☒ Chlorine: 4 mg/l after 20 minutes detention time at peak flow

Dechlorination process: N/A

☐ Ultraviolet Light: N/A seconds contact time at peak flow

☐ Other: N/A

## Section 4. Design Calculations (Instructions Page 59)

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

Attachment: 17

## Section 5. Facility Site (Instructions Page 60)

### A. 100-year floodplain

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

☒ Yes ☐ No

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

N/A

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

FEMA FIRM 48121Co140G, see attachment 18



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

☐ Yes ☒ No

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

☐ Yes ☐ No

If **yes**, provide the permit number: N/A

If **no**, provide the approximate date you anticipate submitting your application to the Corps: N/A

#### B. Wind rose

Attach a wind rose: 19

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

#### A. Beneficial use authorization

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

☐ Yes ☒ No

If **yes**, attach the completed **Application for Permit for Beneficial Land Use of Sewage Sludge (TCEQ Form No. 10451)**: N/A

#### B. Sludge processing authorization

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

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

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

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

Attach a solids management plan to the application.

**Attachment:** 20

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

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

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

# DOMESTIC WASTEWATER PERMIT APPLICATION

## WORKSHEET 2.0: RECEIVING WATERS

The following information is required for all TPDES permit applications.

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

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

☐ Yes ☒ No

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

Owner of the drinking water supply: N/A

Distance and direction to the intake: N/A

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

Attachment: N/A

### 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: N/A

#### 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).

N/A

#### 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).

N/A

### 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: Unnamed Tributary to Little Elm Creek

#### A. Receiving water type

Identify the appropriate description of the receiving waters.

☒ Stream

☐ Freshwater Swamp or Marsh

☐ Lake or Pond

Surface area, in acres: N/A

Average depth of the entire water body, in feet: N/A

Average depth of water body within a 500-foot radius of discharge point, in feet: N/A

☐ Man-made Channel or Ditch

☐ Open Bay

☐ Tidal Stream, Bayou, or Marsh

☐ Other, specify: N/A

#### 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.

Little Elm Creek

### 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.

The receiving water body is generally an intermittent stream with low flow, which is dry much of the year.

Date and time of observation: 07/11/2024, Afternoon

Was the water body influenced by stormwater runoff during observations?

☒ Yes ☐ No

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

### A. Upstream influences

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

☐ Oil field activities

☐ Urban runoff

☐ Upstream discharges

☐ Agricultural runoff

☐ Septic tanks

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

## B. Waterbody uses

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

- |  |  |
|--|--|
| <input type="checkbox"/> Livestock watering    | <input type="checkbox"/> Contact recreation                                      |
| <input type="checkbox"/> Irrigation withdrawal | <input type="checkbox"/> Non-contact recreation                                  |
| <input type="checkbox"/> Fishing               | <input type="checkbox"/> Navigation  |
| <input type="checkbox"/> Domestic water supply | <input type="checkbox"/> Industrial water supply                                 |
| <input type="checkbox"/> Park activities       | <input type="checkbox"/> Other(s), specify: <a href="#">Click to enter text.</a> |

## 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 – Facility has not yet been constructed.

#### 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 – Facility has not yet been constructed.

#### 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:** 22

## 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.



N/A

**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.

N/A

**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.

N/A

### Section 3. Significant Industrial User (SIU) Information and Categorical Industrial User (CIU) (Instructions Page 90)

#### A. General information

Company Name: N/A

SIC Code: N/A

Contact name: N/A

Address: N/A

City, State, and Zip Code: N/A

Telephone number: N/A

Email address: N/A

#### 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: Subcategories: N/A

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

Category: N/A

Subcategories: N/A

Category: N/A

Subcategories: N/A

Category: N/A

Subcategories: N/A

Category: N/A

Subcategories: N/A

#### 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

## **List of Included Attachments**

- 1 – Core Data Form
- 2 – Plain Language Summary
- 3 – Public Involvement Plan
- 4 – USGS Topo 3-mile
- 5 – Affected Landowner Map
- 6 – Affected Landowner List
- 7 – Supplemental Permit Information Form
- 8 – Photo Location Map
- 8 – Photos Document
- 9 – Buffer Zone Map
- 10 – USGS Topo 1-mile
- 11 – Plant Treatment Process Description
- 12 – Proposed Plant Units
- 13 – Process Flow Diagrams
- 14 – Site Plan Map
- 15 – Adjacent Utilities/Outfall Map
- 16 – Capacity Request Letters
- 17 – Design Calculations
- 18 – FEMA FIRMette
- 19 – Wind Rose
- 20 – Solids Management
- 21 – Justification of Facility
- 22 – Service Area Map



# TCEQ Core Data Form

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

## SECTION I: General Information

<b>1. Reason for Submission</b> (If other is checked please describe in space provided.)		
<input checked="" type="checkbox"/> New Permit, Registration or Authorization (Core Data Form should be submitted with the program application.)		
<input type="checkbox"/> Renewal (Core Data Form should be submitted with the renewal form)		<input type="checkbox"/> Other
<b>2. Customer Reference Number</b> (if issued)	<a href="#">Follow this link to search for CN or RN numbers in Central Registry**</a>	<b>3. Regulated Entity Reference Number</b> (if issued)
CN 603401316		RN N/A

## SECTION II: Customer Information

<b>4. General Customer Information</b>		<b>5. Effective Date for Customer Information Updates</b> (mm/dd/yyyy)		7/1/2024	
<input type="checkbox"/> New Customer <input checked="" type="checkbox"/> Update to Customer Information <input type="checkbox"/> Change in Regulated Entity Ownership					
<input type="checkbox"/> Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)					
<i>The Customer Name submitted here may be updated automatically based on what is current and active with the Texas Secretary of State (SOS) or Texas Comptroller of Public Accounts (CPA).</i>					
<b>6. Customer Legal Name</b> (If an individual, print last name first: eg: Doe, John)				<i>If new Customer, enter previous Customer below:</i>	
Four Seasons Ranch MUD 1					
<b>7. TX SOS/CPA Filing Number</b>		<b>8. TX State Tax ID</b> (11 digits)		<b>9. Federal Tax ID</b> (9 digits)	<b>10. DUNS Number</b> (if applicable)
N/A		N/A		N/A	N/A
<b>11. Type of Customer:</b>		<input type="checkbox"/> Corporation		<input type="checkbox"/> Individual	Partnership: <input type="checkbox"/> General <input type="checkbox"/> Limited
Government: <input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Federal <input type="checkbox"/> Local <input type="checkbox"/> State <input checked="" type="checkbox"/> Other		<input type="checkbox"/> Sole Proprietorship		<input type="checkbox"/> Other:	
<b>12. Number of Employees</b>				<b>13. Independently Owned and Operated?</b>	
<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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>14. Customer Role</b> (Proposed or Actual) – as it relates to the Regulated Entity listed on this form. Please check one of the following					
<input type="checkbox"/> Owner <input type="checkbox"/> Operator <input checked="" type="checkbox"/> Owner & Operator <input type="checkbox"/> Other:					
<input type="checkbox"/> Occupational Licensee <input type="checkbox"/> Responsible Party <input type="checkbox"/> VCP/BSA Applicant					
<b>15. Mailing Address:</b>		16000 Dallas Pkwy Ste 350			
City		Dallas		State	TX
ZIP		75248		ZIP + 4	6637
<b>16. Country Mailing Information</b> (if outside USA)				<b>17. E-Mail Address</b> (if applicable)	
				jbethke@coatsrose.com	
<b>18. Telephone Number</b>			<b>19. Extension or Code</b>		<b>20. Fax Number</b> (if applicable)

## SECTION III: Regulated Entity Information

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

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

<b>25. Description to Physical Location:</b>	Located 0.6 miles southeast of the intersection of County Line Rd and Gorrell Rd in Denton County						
<b>26. Nearest City</b>					<b>State</b>	<b>Nearest ZIP Code</b>	
Gunter					TX	76258	
<i>Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).</i>							
<b>27. Latitude (N) In Decimal:</b>		33.406575			<b>28. Longitude (W) In Decimal:</b>		96.846747
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds		
33	24	23.67	96	50	48.29		
<b>29. Primary SIC Code</b> (4 digits)		<b>30. Secondary SIC Code</b> (4 digits)		<b>31. Primary NAICS Code</b> (5 or 6 digits)		<b>32. Secondary NAICS Code</b> (5 or 6 digits)	
4952				221320			
<b>33. What is the Primary Business of this entity?</b> (Do not repeat the SIC or NAICS description.)							
Municipal Domestic Wastewater Treatment							
<b>34. Mailing Address:</b>	Four Seasons Ranch MUD 1						
	16000 Dallas Pkwy Ste 350						
	City	Dallas	State	TX	ZIP	75248	ZIP + 4 6637
<b>35. E-Mail Address:</b>		jbethke@coatsrose.com					
<b>36. Telephone Number</b>			<b>37. Extension or Code</b>			<b>38. Fax Number</b> (if applicable)	
( 972 ) 788-1600						( ) -	

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


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

#### **SECTION IV: Preparer Information**

<b>40. Name:</b>	Laura Preston	<b>41. Title:</b>	Assistant Project Manager
<b>42. Telephone Number</b>	<b>43. Ext./Code</b>	<b>44. Fax Number</b>	<b>45. E-Mail Address</b>
( 214 ) 442-6579		( ) -	lpreston@lja.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.

<b>Company:</b>	Four Seasons Ranch MUD 1	<b>Job Title:</b>	Board President
<b>Name (In Print):</b>	Michael Teeling	<b>Phone:</b>	( 972 ) 755- 1000
<b>Signature:</b>		<b>Date:</b>	08/15/2024



## TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

# PLAIN LANGUAGE SUMMARY FOR TPDES OR TLAP PERMIT APPLICATIONS

## Plain Language Summary Template and Instructions for Texas Pollutant Discharge Elimination System (TPDES) and Texas Land Application (TLAP) Permit Applications

Applicants should use this template to develop a plain language summary as required by [Title 30, Texas Administrative Code \(30 TAC\), Chapter 39, Subchapter H](#). Applicants may modify the template as necessary to accurately describe their facility as long as the summary includes the following information: (1) the function of the proposed plant or facility; (2) the expected output of the proposed plant or facility; (3) the expected pollutants that may be emitted or discharged by the proposed plant or facility; and (4) how the applicant will control those pollutants, so that the proposed plant will not have an adverse impact on human health or the environment.

Fill in the highlighted areas below to describe your facility and application in plain language. Instructions and examples are provided below. Make any other edits necessary to improve readability or grammar and to comply with the rule requirements.

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

### ENGLISH TEMPLATE FOR TPDES or TLAP NEW/RENEWAL/AMENDMENT APPLICATIONS DOMESTIC WASTEWATER/STORMWATER

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

Four Seasons Ranch MUD 1 (CN603401316) proposes to operate Four Seasons Ranch WWTP (RN TBD), an activated sludge process operating in the complete mix mode. The facility will be located at 0.6 miles southeast of the intersection of County Line Rd and Gorrell Rd, in , Denton County, Texas 76258. This is a new application to discharge at a daily flow up to 2,000,000 gallons per day of treated domestic wastewater.

Discharges from the facility are expected to contain five-day carbonaceous biochemical oxygen demand (CBOD<sub>5</sub>), total suspended solids (TSS), ammonia nitrogen (NH<sub>4</sub>-N) and *E. coli*. Domestic wastewater will be treated by an activated sludge process plant.



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

**AGUAS RESIDUALES DOMÉSTICAS /AGUAS PLUVIALES**

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

Four Seasons Ranch MUD 1 (CN603401316) propone operar Four Seasons Ranch WWTP (RN TBD), un proceso de lodos activados que opera en el modo de mezcla completa. La instalación estará ubicada a 1.8 millas al noreste de la intersección de County Line Rd y Gorrell Rd, en Condado de Denton, Texas 76258. Esta es una nueva aplicación para descargar a un flujo diario de hasta 2,000,000 de galones por día de aguas residuales domésticas tratadas.

Se espera que las descargas de la instalación contengan una demanda bioquímica carbonosa de oxígeno (CBOD5) de cinco días, sólidos suspendidos totales (SST), nitrógeno amoniacal (NH4-N) y E. coli. Las aguas residuales domésticas serán tratadas por una planta de tratamiento de lodos activados.



Texas Commission on Environmental Quality

## Public Involvement Plan Form for Permit and Registration Applications

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

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

### Section 1. Preliminary Screening

New Permit or Registration Application

New Activity - modification, registration, amendment, facility, etc. (see instructions)

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

### Section 2. Secondary Screening

Requires public notice,

Considered to have significant public interest, and

Located within any of the following geographical locations:

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

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

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

### Section 3. Application Information

#### Type of Application (check all that apply):

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

#### Water Quality

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

#### Water Rights New Permit

    New Appropriation of Water  
    New or existing reservoir

#### Amendment to an Existing Water Right

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

### Section 4. Plain Language Summary

Provide a brief description of planned activities.

## Section 5. Community and Demographic Information

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

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

(City)

(County)

(Census Tract)

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

City

County

Census Tract

- (a) Percent of people over 25 years of age who at least graduated from high school
- (b) Per capita income for population near the specified location
- (c) Percent of minority population and percent of population by race within the specified location
- (d) Percent of Linguistically Isolated Households by language within the specified location
- (e) Languages commonly spoken in area by percentage
- (f) Community and/or Stakeholder Groups
- (g) Historic public interest or involvement

## Section 6. Planned Public Outreach Activities

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

Yes      No

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

Yes      No

If Yes, please describe.

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

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

Yes      No

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

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

Publish in alternative language newspaper

Posted on Commissioner's Integrated Database Website

Mailed by TCEQ's Office of the Chief Clerk

Other (specify)

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

Yes      No

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

Yes      No

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

TCEQ Regional Office

TCEQ Central Office

Public Place (specify)

## Section 7. Voluntary Submittal

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

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

Yes      No

What types of notice will be provided?

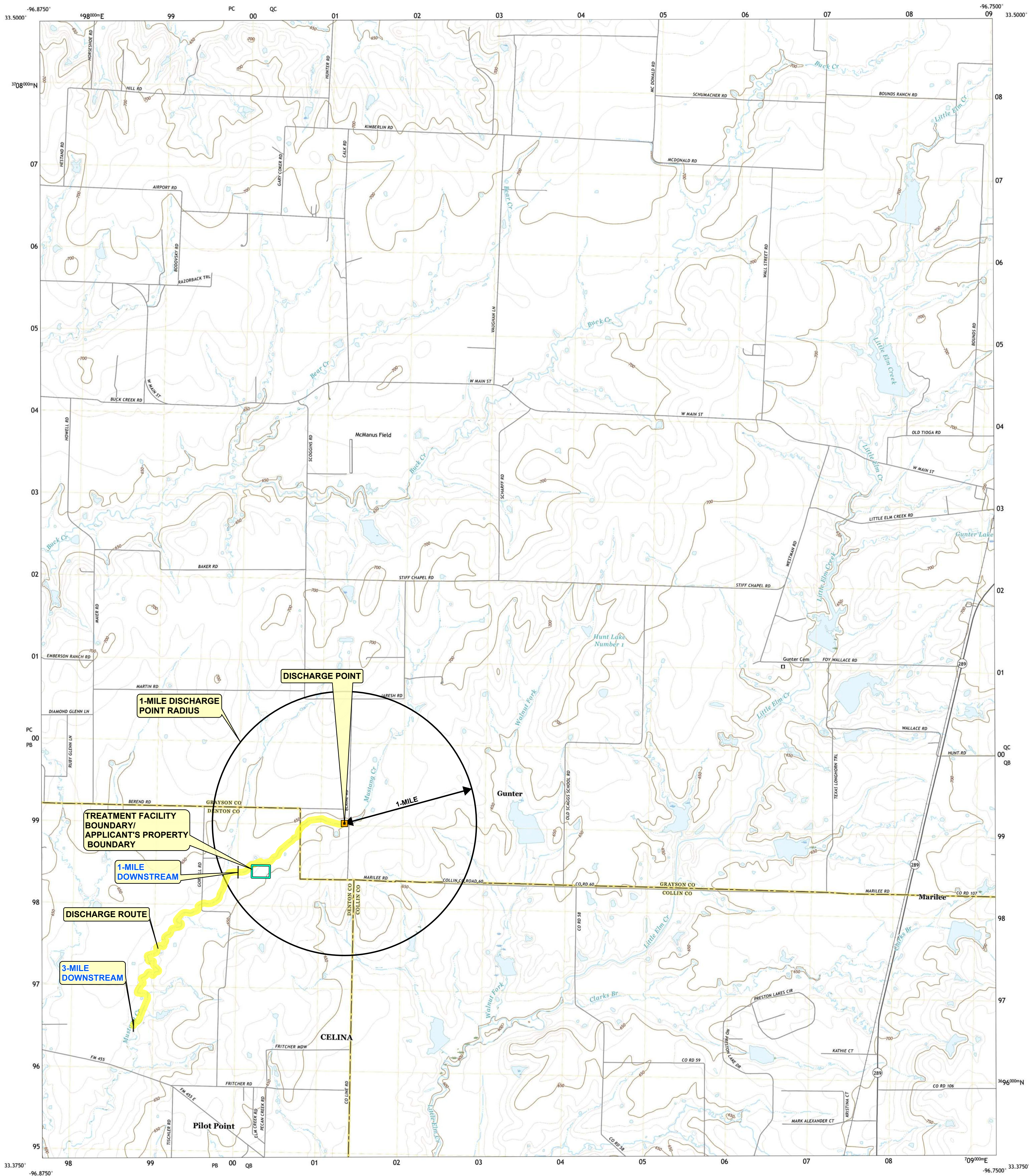
Publish in alternative language newspaper

Posted on Commissioner's Integrated Database Website

Mailed by TCEQ's Office of the Chief Clerk

Other (specify)

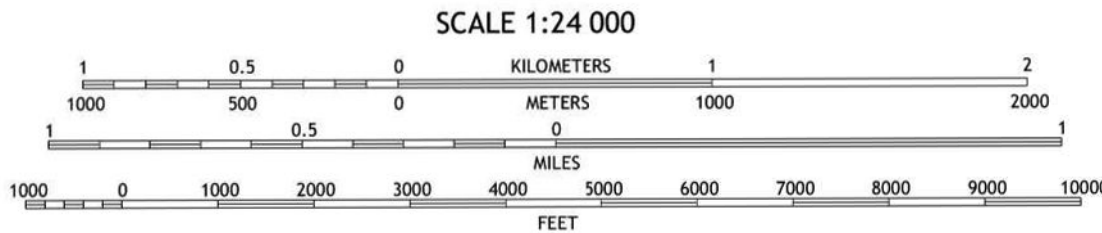
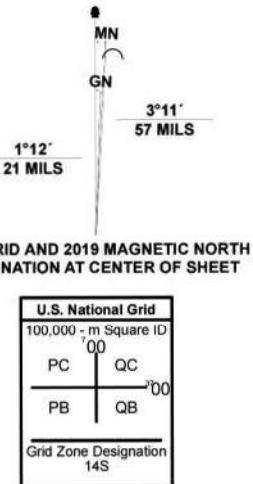




Produced by the United States Geological Survey

North American Datum of 1983 (NAD83)  
World Geodetic System of 1984 (WGS84)  
1 000-meter grid: Universal Transverse Mercator, Zone 14S  
This map is not a legal document. Boundaries may be generalized for this map scale. Private lands within government reservations may not be shown. Obtain permission before entering private lands.

Imagery.....NAIP, September 2016 - November 2016  
Names.....U.S. Census Bureau, 2015 - 2018  
Hydrography.....National Hydrography Dataset, 2002 - 2018  
Contours.....National Elevation Dataset, 2005  
Boundaries.....Multiple sources; see metadata file 2019 - 2021  
Wetlands.....FWS National Wetlands Inventory Not Available



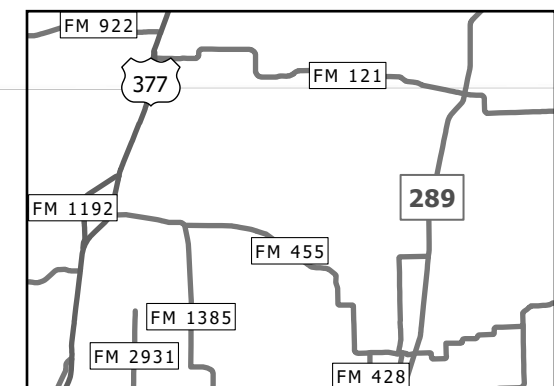
1	2	3
4	5	6
7	8	9

ADJOINING QUADRANGLES

1 Collinsville  
2 Ethel  
3 Dorchester  
4 Pilot Point  
5 Gunter  
6 Aubrey  
7 Celina  
8 Weston



MARILEE, TX  
2022



ATTACHMENT 4

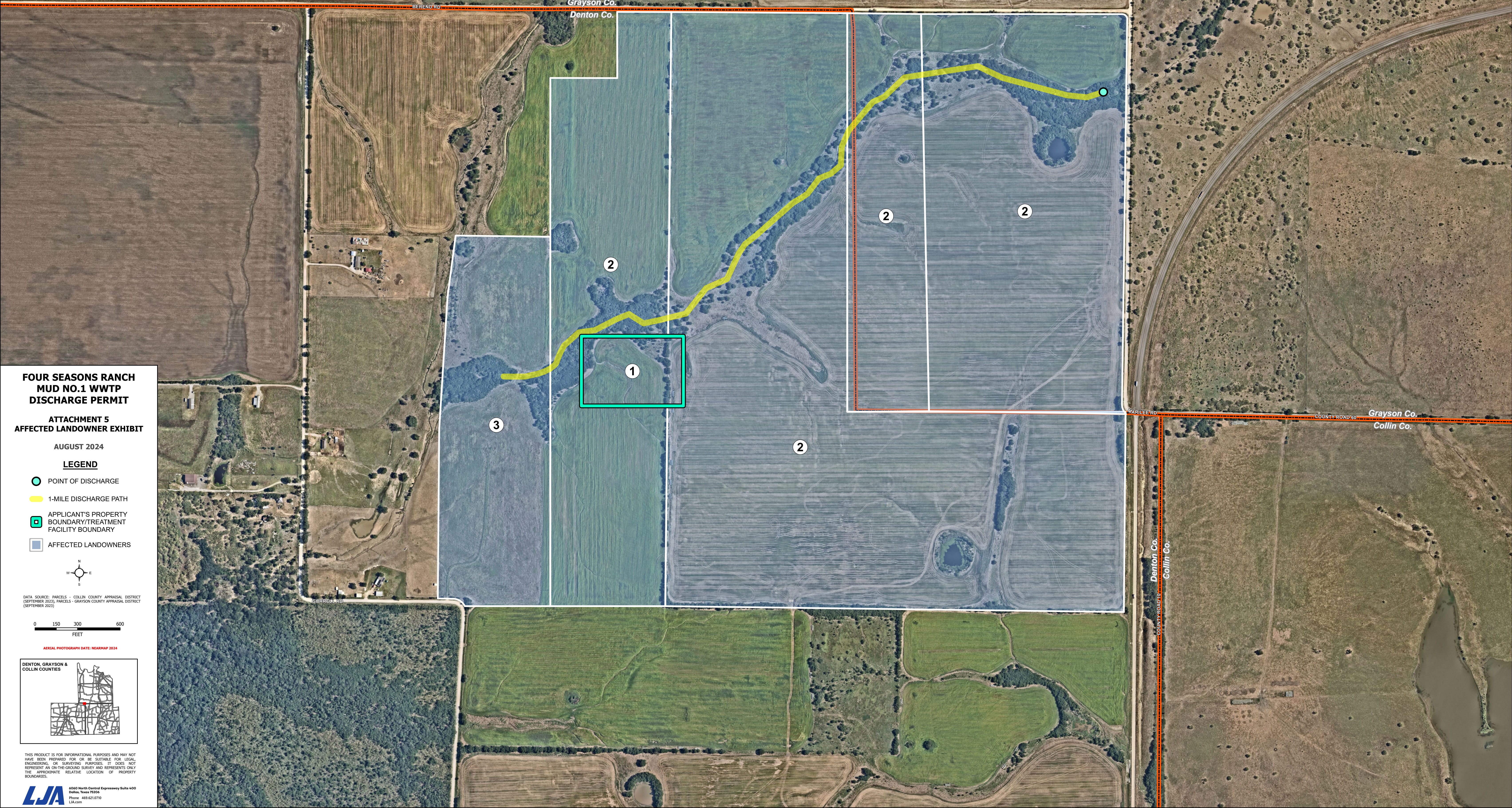
**FOUR SEASONS RANCH  
MUD NO.1 WWTP DISCHARGE PERMIT (3-MILE)  
USGS TOPOGRAPHIC MAP**

**LJA** 6060 North Central Expressway Suite 400  
Dallas, Texas 75206  
Phone 469.621.0710  
LJA.com

JULY 2024 JOB NO: NT860B-0314A.00.859



KEY	OWNER NAME
1	FOUR SEASONS RANCH MUD NO. 1
2	FOUR SEASONS RANCH LTD
3	GORRELL 42 LLC



**FOUR SEASONS RANCH  
MUD NO.1 WWTP  
DISCHARGE PERMIT**

**ATTACHMENT 5  
AFFECTED LANDOWNER EXHIBIT**

AUGUST 2024

**LEGEND**

- POINT OF DISCHARGE
- 1-MILE DISCHARGE PATH
- APPLICANT'S PROPERTY  
BOUNDARY/TREATMENT  
FACILITY BOUNDARY
- AFFECTED LANDOWNERS

DATA SOURCE: PARCELS - COLLIN COUNTY APPRAISAL DISTRICT  
(SEPTEMBER 2023); PARCELS - GRAYSON COUNTY APPRAISAL DISTRICT  
(SEPTEMBER 2023)

0 150 300 600  
FEET

AERIAL PHOTOGRAPH DATE: NEARMAP 2024

DENTON, GRAYSON &  
COLLIN COUNTIES

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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  
BOUNDARIES.

**LJA** 6040 North Central Expressway Suite 400  
Dallas, Texas 75206  
Phone: 469.621.0710  
LJA.com



1. FOUR SEASONS RANCH MUD NO. 1  
16000 DALLAS PKWY  
STE 350  
DALLAS, TX 75206
2. FOUR SEASONS RANCH LTD  
16950 DALLAS PKWY  
STE 120  
DALLAS, TX 75248
3. GORRELL 42 LLC  
8105 RASOR BLVD  
STE 298  
PLANO, TX 75024



# 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](mailto:WQ-ARPTeam@tceq.texas.gov) or by phone at (512) 239-4671.

The following applies to all applications:

1. Permittee: Four Seasons Ranch MUD 1

Permit No. WQ00 N/A

EPA ID No. TX N/A

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

Located 0.6 miles northeast of the intersection of County Line Rd and Gorrell Rd in Denton County

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: Laura Preston

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

Title: Assistant Project Manager

Mailing Address: 6060 N Central Expy, Ste 400

City, State, Zip Code: Dallas, Texas 75206

Phone No.: 214-442-6579 Ext.: N/A Fax No.: N/A

E-mail Address: lpreston@lja.com

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

N/A

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 unnamed tributary, thence to Little Elm Creek, thence to Lake Lewisville in segment 0823 of the Trinity River Basin.

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

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

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

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

☐ Sealing caves, fractures, sinkholes, other karst features

☐ Disturbance of vegetation or wetlands

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

N/A

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

Undeveloped Land

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

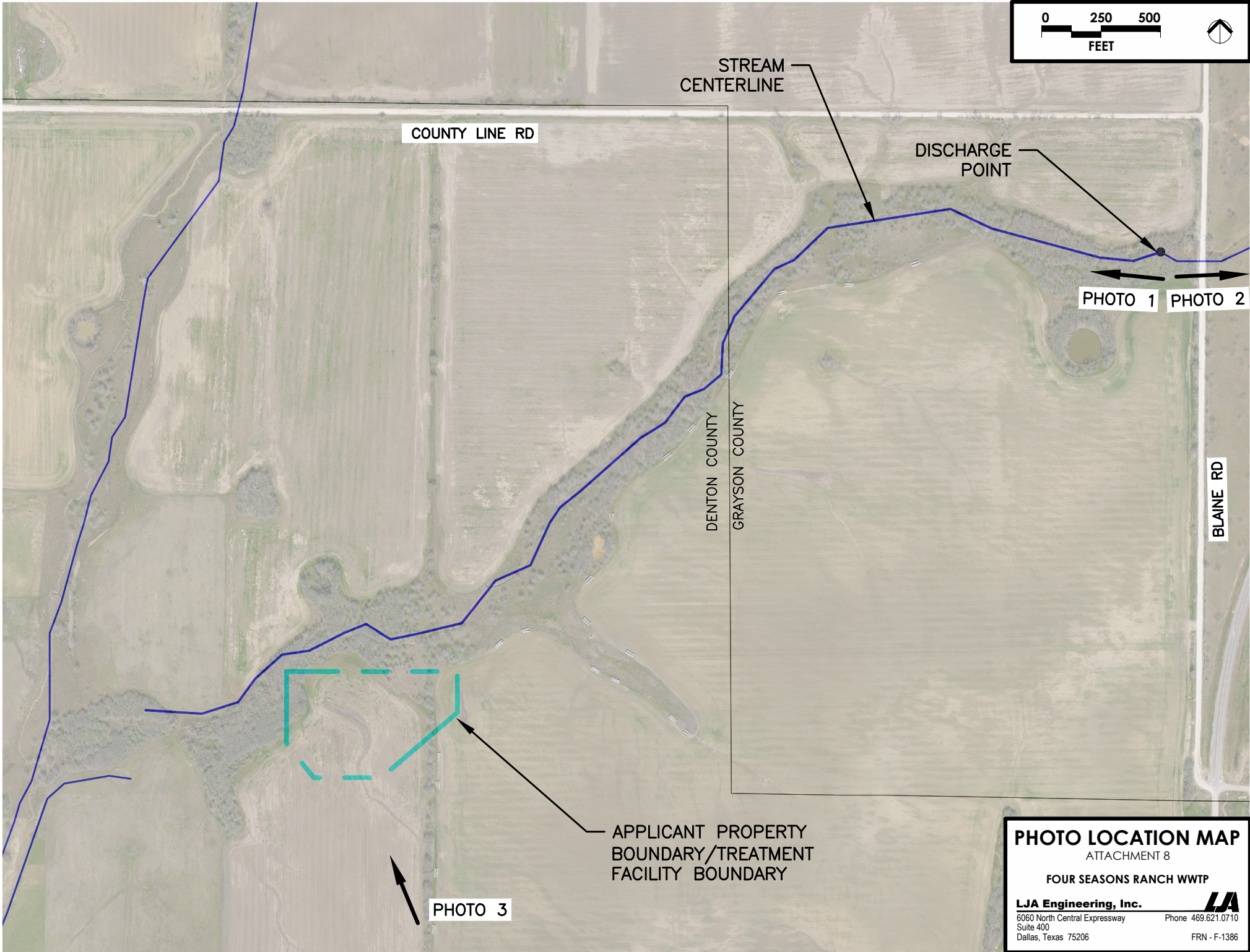
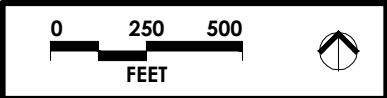
3. List construction dates of all buildings and structures on the property:

No existing buildings or structures are located on the property where the wastewater treatment plant is proposed.

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

The property where the wastewater treatment plant is proposed has never been developed and has generally been used for agricultural purposes.





**PHOTO LOCATION MAP**  
ATTACHMENT 8  
FOUR SEASONS RANCH WWTP

**LJA Engineering, Inc.**  
6060 North Central Expressway  
Suite 400  
Dallas, Texas 75206

Phone 469.621.0710  
FRN - F-1386







Photo 1: Discharge location and downstream  
of the discharge location

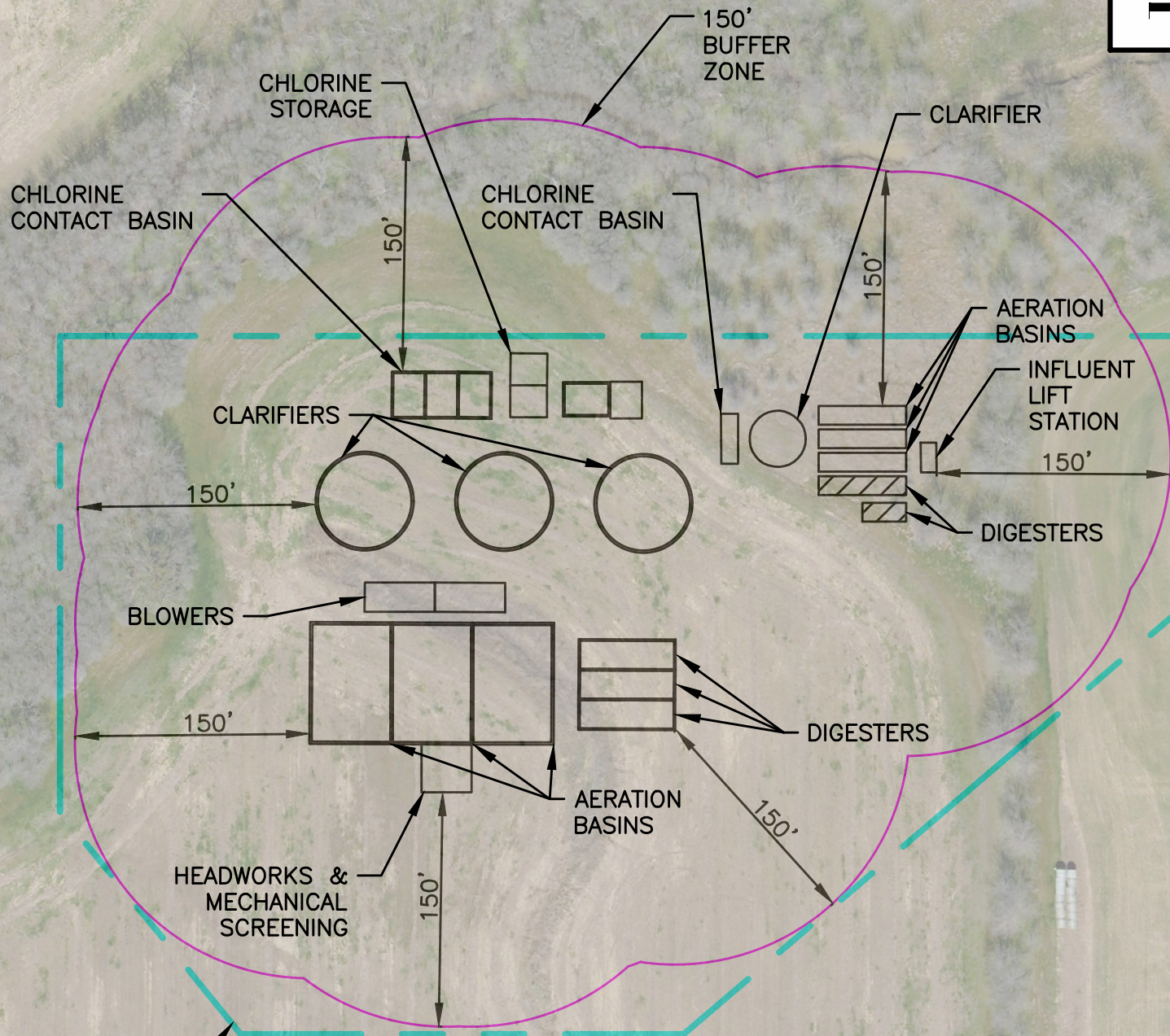
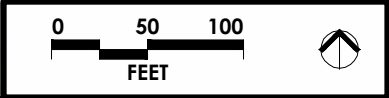


Photo 2: Upstream of the discharge location



Photo 3: WWTP Site





APPLICANT'S PROPERTY  
BOUNDARY/  
TREATMENT  
FACILITY BOUNDARY

**BUFFER ZONE MAP**

ATTACHMENT 9

FOUR SEASONS RANCH WWTP

**LJA Engineering, Inc.**

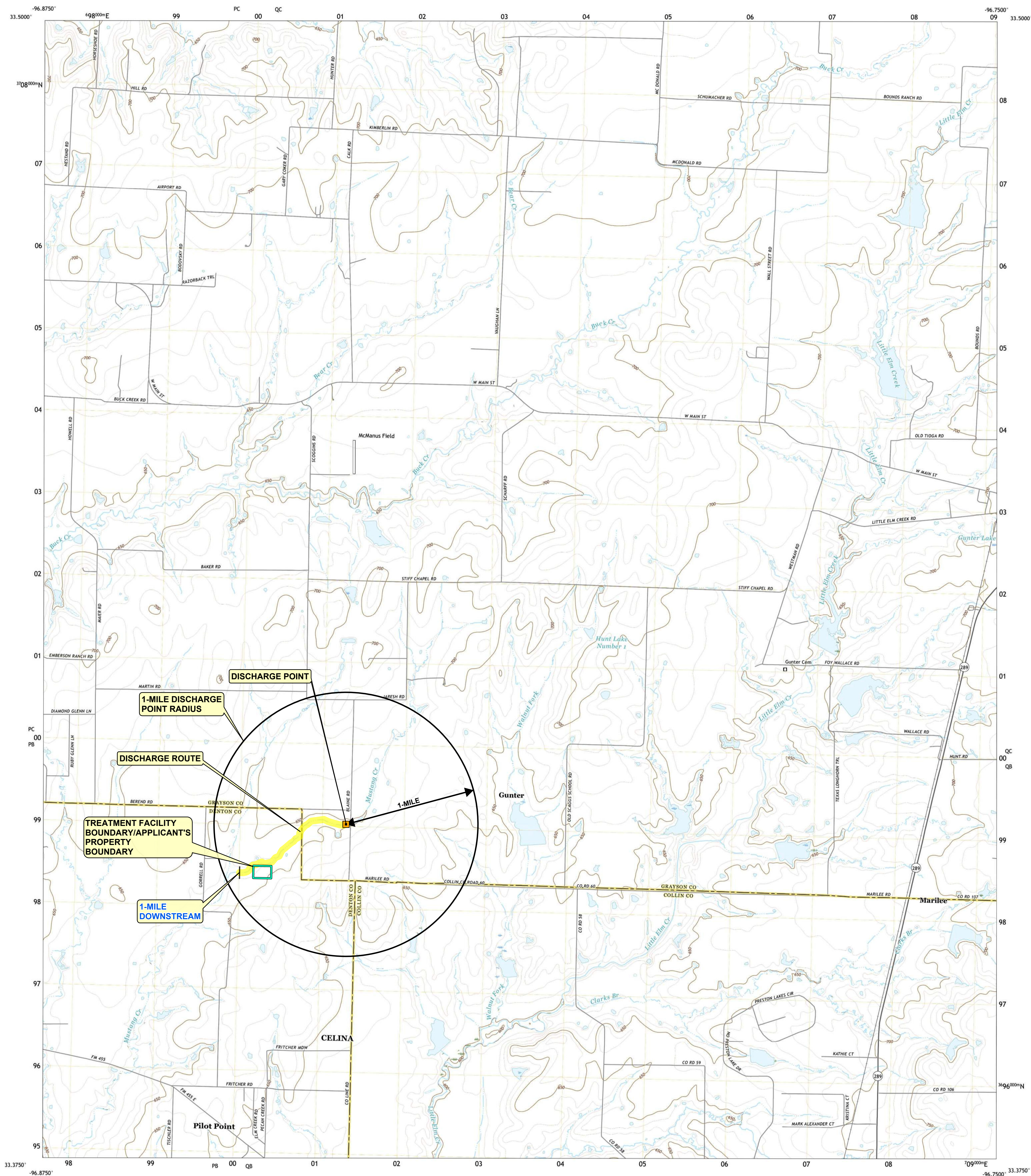
6060 North Central Expressway  
Suite 400  
Dallas, Texas 75206

Phone 469.621.0710

FRN - F-1386







## Produced by the United States Geological Survey

North American Datum of 1983 (NAD83)  
World Geodetic System of 1984 (WGS84) Projection and  
1 000-meter grid: Universal Transverse Mercator, Zone 14SThis map is not a legal document. Boundaries may be  
generalized for this map scale. Private lands within government  
reservations may not be shown. Obtain permission before  
entering private lands.

Imagery.....NAP, September 2016 - November 2016  
Roads.....U.S. Census Bureau, 2015 - 2018  
Names.....GNIS, 1979 - 2021  
Hydrography.....National Hydrography Dataset, 2002 - 2018  
Contours.....National Elevation Dataset, 2005  
Boundaries.....Multiple sources; see metadata file 2019 - 2021  
Wetlands.....FWS National Wetlands Inventory Not Available

UTM GRID AND 2018 MAGNETIC NORTH  
DECLINATION AT CENTER OF SHEET

PC	QC
PB	QB

Grid Zone Designation  
14S

SCALE 1:24 000

1 000 0 500 0 500 1 000 2 000  
KILOMETERS  
1 000 0 500 0 500 1 000 2 000  
METERS  
1 000 0 1000 2000 3000 4000 5000 6000 7000 8000 9000 10000  
MILES  
1000 0 1000 2000 3000 4000 5000 6000 7000 8000 9000 10000  
FEET

CONTOUR INTERVAL 10 FEET  
NORTH AMERICAN VERTICAL DATUM OF 1988  
This map was produced to conform with the  
National Geospatial Program US Topo Product Standard.



QUADRANGLE LOCATION

1	2	3
4	5	6
7	8	9

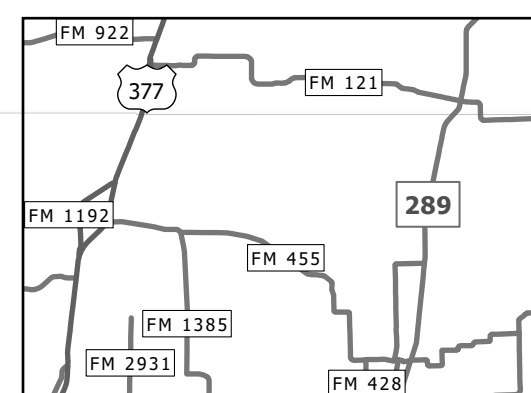
ADJOINING QUADRANGLES

1 Collinsville  
2 Ethel  
3 Dorchester  
4 Pilot Point  
5 Gunter  
6 Aubrey  
7 Celina  
8 Weston

ROAD CLASSIFICATION

Expressway  
Secondary Hwy  
Ramp  
Interstate Route  
Local Connector  
Local Road  
4WD  
US Route  
State Route

MARILEE, TX  
2022



NSN 7 6 4 3 0 1 6 3 9 7 1 8 3  
NGA REF NO. USGS X 4 2 6 9 9

## ATTACHMENT 10

**FOUR SEASONS RANCH  
MUD NO.1 WWTP DISCHARGE PERMIT (1-MILE)  
USGS TOPOGRAPHIC MAP**

6060 North Central Expressway Suite 400  
Dallas, Texas 75206  
Phone 469.621.0710  
LJA.com

JULY 2024

JOB NO: NT860B-0314A.00.659



**ATTACHMENT 11**  
**DESCRIPTION OF THE TREATMENT PROCESS**

(In reference to Domestic Technical Report 1.0, Section 2, Item A)

The treatment system includes a package plant employing the activated sludge process operating in the complete mix mode. The plant will be developed in three phases and will include three treatment trains when complete. Phase 1, Phase 2, and the final phase 3 will have a capacity of 0.15 MGD, 0.30 MGD, and 2.0 MGD respectively. In the Final Phase, the plant will have a common header between the aeration basins and clarifiers to allow for flexibility in plant repairs and operations. All phases will have common outfall.

The first 2 phases of treatment trains will consist of steel "box car" units used for aeration and digestion. Two aeration basins, two sludge digestion basins, one 36' diameter clarifier and one chlorine contact basin will be fabricated for Phase 1. Phase 2 will include one additional aeration basin, one additional sludge digestion basin, and will use the same chlorine contact basin and secondary clarifier. The final phase 3 will consist of permanent concrete basins. It will have three 75' by 60' aeration basins, three 60' diameter clarifiers, three 20' by 14' chlorine contact basins, and three 24' by 18' aerobic digesters.

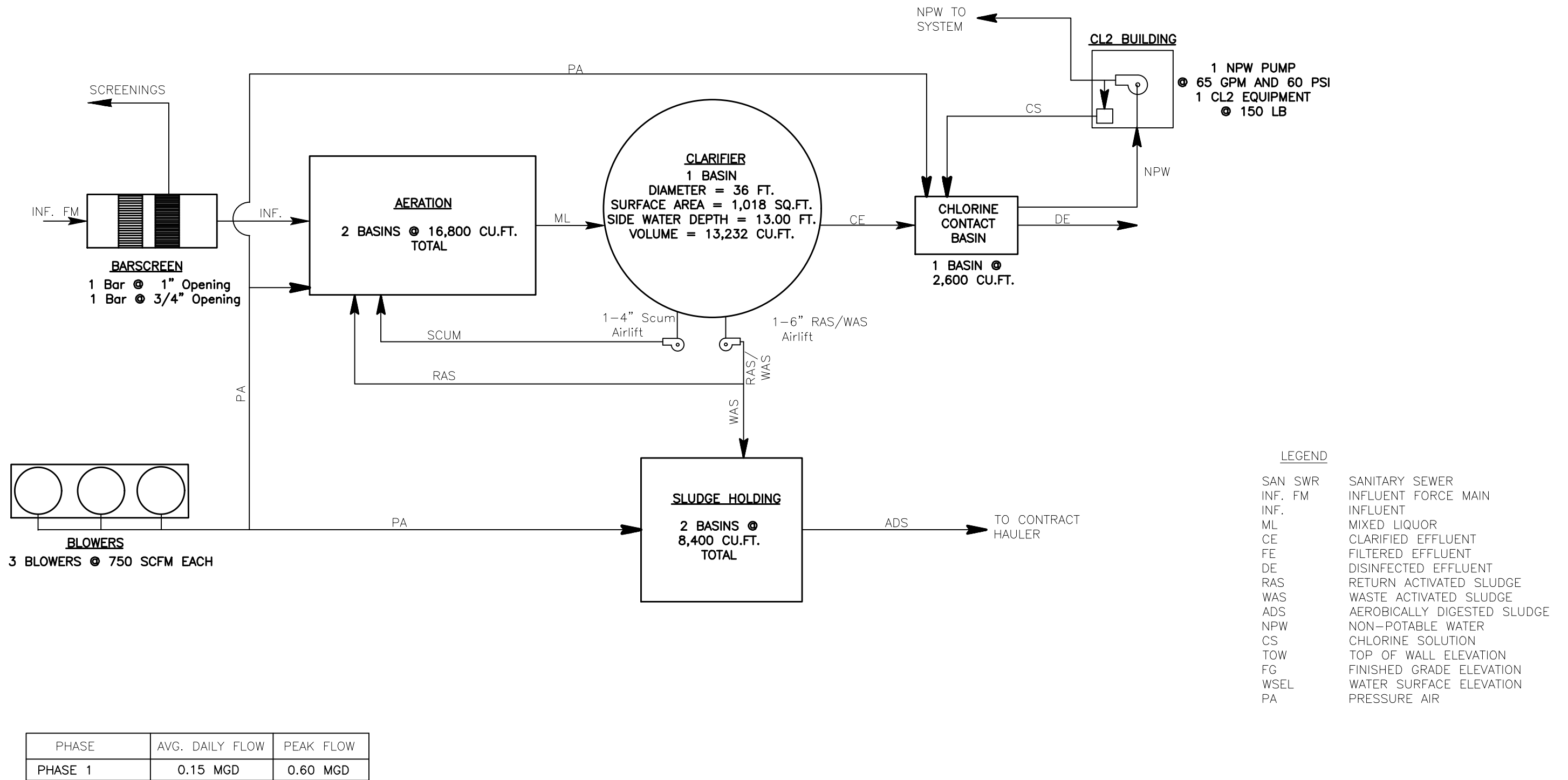
Influent to this facility will be pumped from an on-site lift station to a bar screen. In the Final Phase 3, the bar screen will include a flow splitter thus splitting the influent to each bank of aeration basins. The mixed liquor from the aeration basins will flow to the clarifier. The clarified effluent from the clarifier will then flow to the chlorine contact basin and the disinfected plant effluent will outfall via a 36" pipe. Sludge will be returned to the aeration basins then wasted to the digester basins via air lifts. Sludge from the digesters will be truck hauled for disposal at a registered disposal site.



Attachment No. 12			
Treatment Units	# of Units	Dimensions (L*W*D) (ft.)	
<b>Aeration Basin</b>	<b>2</b>	<b>56*12*14</b>	INTERIM PHASE 1 0.15 MGD
<b>Clarifier</b>	<b>1</b>	<b>36*Dia*14</b>	
<b>Cl2 Contact Basin</b>	<b>1</b>	<b>20*10*14</b>	
<b>Aerobic Digester</b>	<b>2</b>	<b>28*12*14</b>	
Aeration Basin	2	56*12*14	INTERIM PHASE 2 0.30 MGD
<b>Aeration Basin</b>	<b>1</b>	<b>56*12*14</b>	
Clarifier	1	36*Dia*14	
Cl2 Contact Basin	1	20*10*14	
Aerobic Digester	2	28*12*14	
<b>Aerobic Digester</b>	<b>1</b>	<b>28*12*14</b>	
<b>Aeration Basin</b>	<b>3</b>	<b>75*50*16</b>	INTERIM PHASE 3 2.00 MGD
<b>Clarifier</b>	<b>3</b>	<b>60*Dia*16</b>	
<b>Cl2 Contact Basin</b>	<b>3</b>	<b>28*20*14</b>	
<b>Aerobic Digester</b>	<b>3</b>	<b>60*24*18</b>	

<b>Bolded</b>	New processes
Shaded	Existing processes

Date\Time : Tue, 02 Jul 2024 - 1:54pm User Name : cgotlin  
Path\Name : S:\NTX-LAND\0314\300SUPPORT\370 Wastewater\WWTP Discharge Permit Application\Design\Process Flow Diagrams.dwg



**ATTACHMENT 13.1**  
**PROCESS FLOW DIAGRAM**  
**INTERIM PHASE 1 - 0.15 MGD**

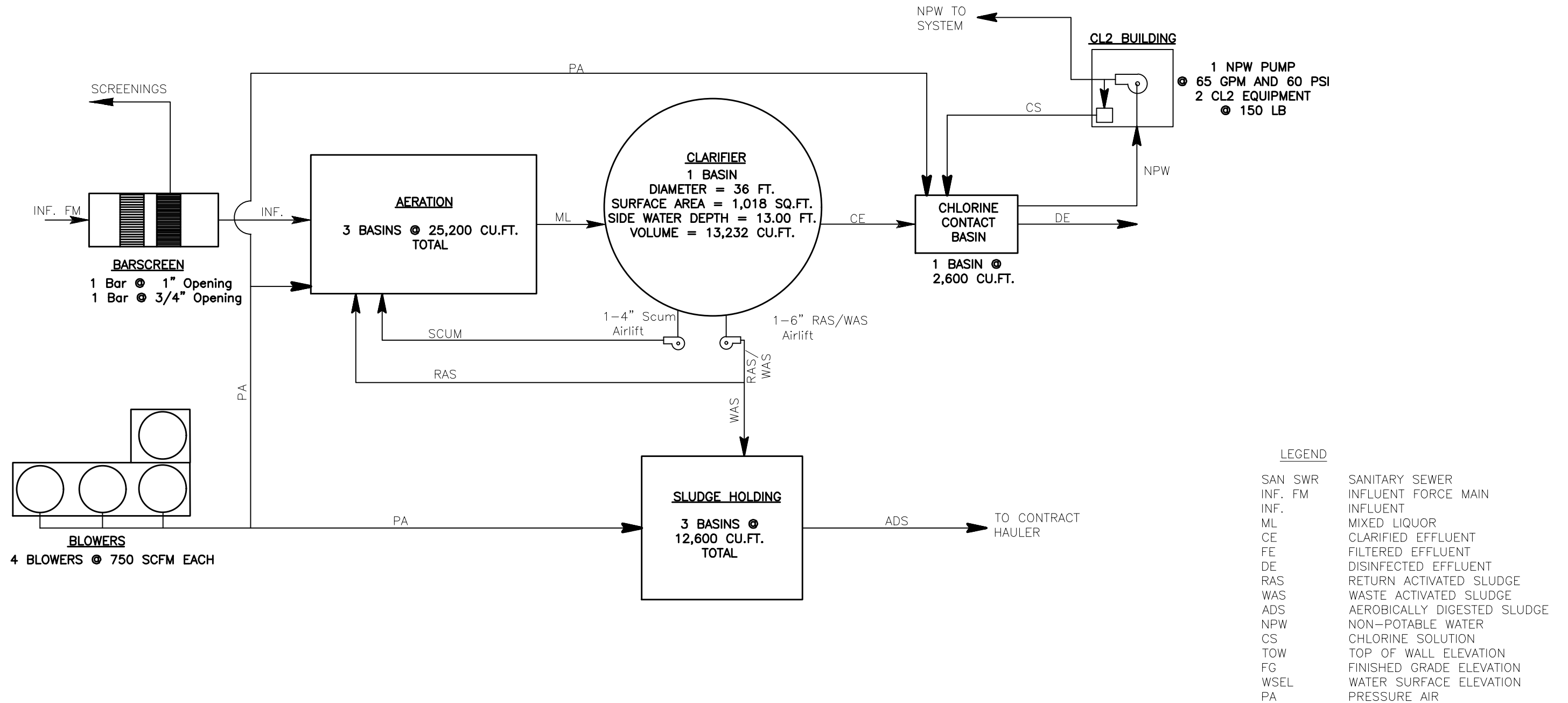
**LJA Engineering, Inc.**

3600 W Sam Houston Parkway S.  
Suite 600  
Houston, Texas 77042

Phone 713.953.5200  
Fax 713.953.5026  
FRN - F-1386



Date\\Time : Mon, 01 Jul 2024 - 2:50pm User Name : cgotlin  
Path\\Name : S:\\NTX-LAND\\0314\\300SUPPORT\\370 Wastewater\\WWTP Discharge Permit Application\\Design\\Process Flow Diagrams.dwg



PHASE	AVG. DAILY FLOW	PEAK FLOW
PHASE 1	0.15 MGD	0.60 MGD
PHASE 2	0.30 MGD	1.20 MGD

## ATTACHMENT 13.2

PROCESS FLOW DIAGRAM  
PHASE 2 - 0.30 MGD

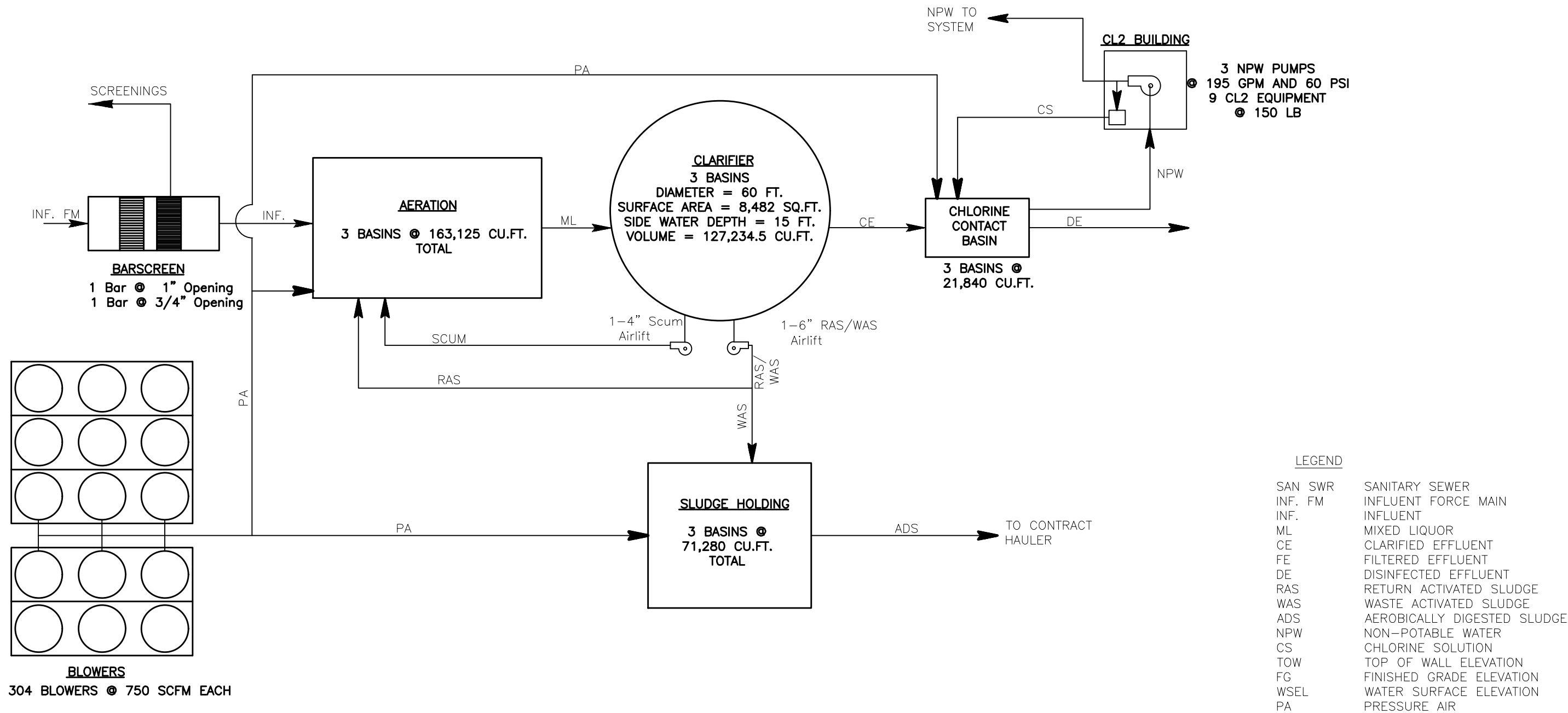
**LJA Engineering, Inc.**

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Houston, Texas 77042

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FRN - F-1386



Date\\Time : Tue, 02 Jul 2024 - 1:55pm User Name : cgotlin  
Path\\Name : S:\\NTX-LAND\\0314\\300SUPPORT\\370 Wastewater\\WWTP Discharge Permit Application\\Design\\Process Flow Diagrams\\dwg



PHASE	AVG. DAILY FLOW	PEAK FLOW
PHASE 1	0.15 MGD	0.60 MGD
PHASE 2	0.30 MGD	1.20 MGD
PHASE 3	2.00 MGD	8.00 MGD

## ATTACHMENT 13.3

PROCESS FLOW DIAGRAM  
PHASE 3 - 2.00 MGD

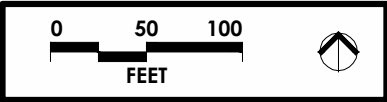
**LJA Engineering, Inc.**

3600 W Sam Houston Parkway S.  
Suite 600  
Houston, Texas 77042

Phone 713.953.5200  
Fax 713.953.5026  
FRN - F-1386







APPLICANT'S PROPERTY  
BOUNDARY/  
TREATMENT  
FACILITY BOUNDARY

150'  
BUFFER  
ZONE

**SITE DRAWING**  
ATTACHMENT 14  
**FOUR SEASONS RANCH WWTP**

**LJA Engineering, Inc.**  
6060 North Central Expressway  
Suite 400  
Dallas, Texas 75206

  
Phone 469.621.0710  
FRN - F-1386








FOUR SEASONS RANCH  
MUD NO.1 WWTP  
DISCHARGE PERMIT

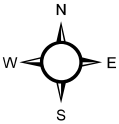
ATTACHMENT 15  
NEARBY DOMESTIC PERMITTED WWTFs  
NEARBY SEWER-CCN  
(WITHIN 3-MILE RADIUS)

AUGUST 2024

LEGEND

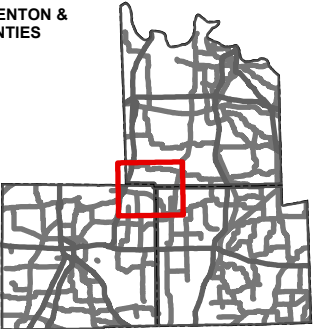
-  POINT OF DISCHARGE
-  WASTEWATER OUTFALLS
-  APPLICANT'S PROPERTY  
BOUNDARY/TREATMENT  
FACILITY BOUNDARY
-  3-MILE RADIUS
-  COUNTY LINE

DATA SOURCE: TCEQ OUTFALLS - UPDATED JULY 2023, CCNS -  
PUC, COUNTY LINES - ESRI



0 2,750 5,500 11,000  
FEET

GRAYSON, DENTON &  
COLLIN COUNTIES

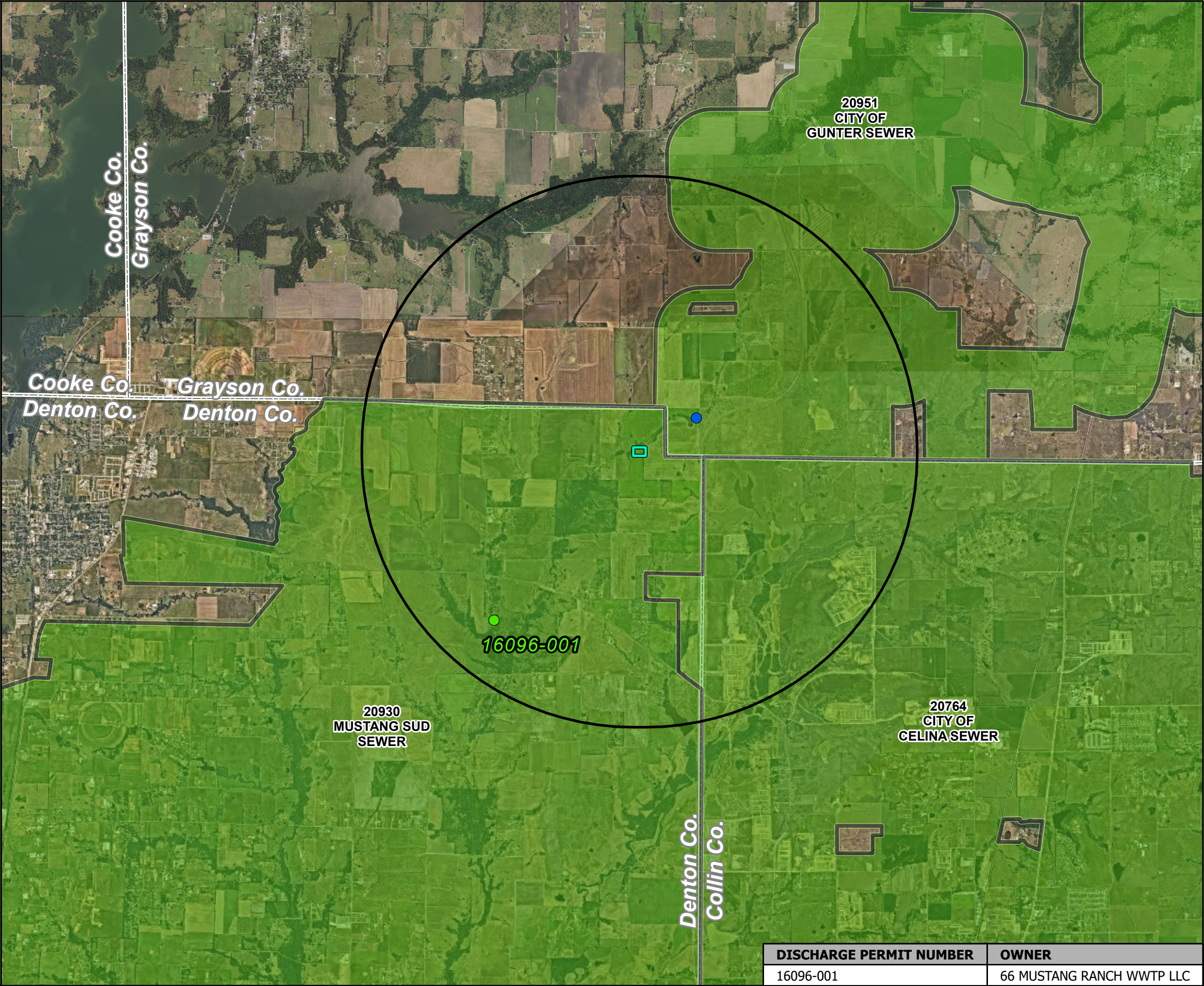


AERIAL PHOTOGRAPH DATE: NAIP 2022, NEARMAP 2023 AND 2024

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APPROXIMATE RELATIVE LOCATION OF PROPERTY BOUNDARIES.



6060 North Central Expressway Suite 400  
Dallas, Texas 75206  
Phone 469.621.0710  
LJA.com



DISCHARGE PERMIT NUMBER	OWNER
16096-001	66 MUSTANG RANCH WWTP LLC

Path: S:\NTX\LAND\051\A300\SUB\06\1370\_MustangRanchWWTP\Discharge Permit Application\Support\GIS\A300\A300.DBX arcx





August 10, 2024

**VIA CERTIFIED MAIL**

Mustang SUD  
7985 FM 2931  
Aubrey, Texas 76227

Re: Wastewater Service Request for Four Seasons Ranch WWTP  
LJA Job No. NT860B-0314

To Whom It May Concern:

We are currently preparing an application for a discharge permit for the Four Seasons Ranch Wastewater Treatment Plant in Denton County. The proposed development will require 2.0 MGD of ultimate wastewater service capacity. TCEQ regulations require us to contact all entities with a permitted wastewater treatment plant or collection system within three (3) miles of our plant and identify any available capacity at those facilities. Your system is within a three (3) mile radius of our facility. Please let us know if you have the extra capacity in your facility to accommodate the required flow or are willing to expand your facility to accommodate this flow.

Please respond by indicating below on this letter if Mustang SUD has available capacity. After you have made the required indication, please email (lpreston@lja.com) or mail the response back. We would appreciate a response within thirty (30) days. Thank you in advance for your prompt attention regarding this matter.

Sincerely,

Laura Preston, PE  
Assistant Project Manager

- ☐ Yes, our wastewater treatment facility has sufficient capacity to serve the proposed development. Contact Phone Number: \_\_\_\_\_
- ☐ No, our wastewater treatment facility does not have sufficient capacity to serve the proposed development.

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Project Name: Four Seasons Ranch

Wastewater Treatment Plant

Process Design Calculations

Project #: 0314

Phase I	Phase II	Phase III
---------	----------	-----------

## WWTP Influent Flow

Average Daily Flow	gpd	150,000	300,000	2,000,000
Peaking Factor		4	4	4
Peak Flow	gpd	600,000	1,200,000	8,000,000
Equivalent Single Family Connections	ESFC	428	857	5,714
Water Usage per Connection	gal/ESFC	350	350	350

## WWTP Organic Parameters

BOD <sub>5</sub>	325 mg/L			
NH <sub>3</sub>	70 mg/L			
BOD Loading	lbs/d	407	813	5,421

## Aeration Basin Design

Process Description	Temperatures Exceed 15C			
Organic Loading Rate	35	lbs BOD5/day/1,000ft <sup>3</sup>		
Minimum Free Board	1.5	ft		
Minimum Aeration Volume	ft <sup>3</sup>	11,616	23,233	154,886
Number of Tanks		2	3	3
Length	ft	56	56	75
Width	ft	12	12	50
Height of Basin	ft	14.0	14.0	16.0
Calculated Side Water Depth at Peak Flow	ft	12.50	12.50	14.50
Proposed Free Board at Peak Flow	ft	1.50	1.50	1.50
Proposed Volume	ft <sup>3</sup>	16,800	25,200	163,125

## Secondary Clarifier Design

Process Description	Activated Sludge - Secondary, Enhanced Secondary, or Secondary With			
Maximum Surface Loading @ 2-hr Peak Flow	1,200	gpd/ft <sup>2</sup>		
Minimum Detention Time	1.8	hrs		
Minimum Side Water Depth	10	ft		
Minimum Free Board	1	ft		
Maximum Weir Loading		20,000	20,000	30,000
Maximum Vertical Velocity in Stilling Well	0.15	ft/s		
Minimum Surface Area Required	ft <sup>2</sup>	500	1,000	6,667
Number of Clarifiers		1	1	3
Diameter	ft	36	36	60
Proposed Weir Loading	gpd/lf	5,617	11,234	14,635
Height of Clarifier	ft	14.0	14.0	16.0
Calculated Side Water Depth at Peak Flow	ft	13.00	13.00	15.00
Proposed Free Board at Peak Flow	ft	1.00	1.00	1.00
Proposed Surface Area	ft <sup>2</sup>	1,018	1,018	8,482
Proposed Volume	ft <sup>3</sup>	13,232	13,232	127,235
Proposed Detention Time at Peak Flow	hrs	3.96	1.98	2.86
Stilling Well Diameter	ft	6.0	6.0	8.0
Proposed Stilling Well Velocity	ft/s	0.03	0.07	0.08



## Chlorine Contact Basin

Minimum Contact Time	20	min			
Minimum Free Board	1	ft			
Number of Basins			1	1	3
Width of Tank	10	ft	10	10	20
Height of Tank	14	ft	14	14	14
Calculated Side Water Depth at Peak Flow		ft	13.00	13.00	13.00
Calculated Free Board at Peak Flow		ft	1.00	1.00	1.00
Proposed Length of Tank	32	ft	20	20	28
Proposed Volume		ft <sup>3</sup>	2,600	2,600	21,840
Proposed Detention Time		min	46.68	23.34	29.41

## Aerobic Digester Design

Volatile Solids Wasted (From Solids Balance)		lbs/d	266	531	4000
TCEQ Loading Rate	200	lbs/d/1,000ft <sup>3</sup>			
$V = \frac{P_{x,tss}}{\text{Loading Rate}}$					
Minimum Required Volume (per TCEQ Regulations)		ft <sup>3</sup>	1,328	2,656	20,000
Minimum Required Volume (3.5 days)			4,648	9,297	70,000
Number of Digesters			2	3	3
Width		ft	12	12	24
Height		ft	14	14	18
Freeboard		ft	1.5	1.5	1.5
Depth		ft	12.50	12.50	16.50
Length (Assumes digesters are half as long as Aeration Basins)		ft	28.00	28.00	60.00
Proposed Volume		ft <sup>3</sup>	8,400	12,600	71,280

## Chlorine Dosage Requirements

Type of Effluent	Activated Sludge				
Chlorine Concentration	8	mg/L			
Storage of Chlorine Tanks	Temperature-Controlled Enclosure				
Low Ambient Temperature	65	°F			
Required Chlorine Dosage		lbs/d	40	80	534
Withdrawal Rate per 150-lb Chlorine Cylinder	65	lbs/d			
Withdrawal Rate per 1-ton Chlorine Cylinder	520	lbs/d			
Number of 150-lb Chlorine Cylinders per Bank			1	2	9
Number of 1-ton Chlorine Cylinders per Bank			0	0	0
Proposed Maximum Chlorine Withdrawal Rate			65	130	585

# Air Requirements

## Aeration Basins

Type of Diffuser	Coarse Bubble Diffuser			
Transfer Efficiency Factor	0.65			
Depth of Diffuser		11.00	11.50	13.50
Submergence Correction Factor		1.28	1.14	0.96
Clean Water Transfer Efficiency	8.40%			
Wastewater Transfer Efficiency	5.46%			
Aeration Oxygen Requirement	2.13 lb O <sub>2</sub> /lb BOD <sub>5</sub>			
Aeration Airflowrate	scfm	816	1,453	8,116
Mixing Oxygen Requirement	20 scfm/1,000 ft <sup>3</sup>			
Mixing Airflowrate	scfm	336	504	225,000
Required Airflowrate	scfm	816	1,453	225,000

## Aerobic Digester

Type of Diffuser	Coarse Bubble Diffuser			
Required Mixing Air Rate	20 scfm/1,000 ft <sup>3</sup>			
Required Airflowrate	scfm	168	252	1425.6

## Chlorine Contact Basin

Effluent DO Concentration	4 mg/L			
Initial DO Concentration*	0 mg/L			
Diffuser Capacity	150%			
Required Oxygen at Peak Flow	lb O <sub>2</sub> /d	20.03	40.05	267.02
Required Airflowrate	scfm	14.77	29.53	196.88
Airflowrate Required by Diffusers		22.15	44.30	295.32
Minimum Airdrops (10 scfm)		3	5	30

\* Minimum DO Concentration in the Aeration Basin is 2 mg/L however, to be conservative an estimated DO of 0 mg/L has been assumed entering the chlorine contact basin

## Airlifts

Amount Required	120 scfm
-----------------	----------

## Total Air Requirement

Total Plant Required Air	scfm	1,119	1,855	226,742
--------------------------	------	-------	-------	---------

## Blower Sizing

Blower Capacity	750 scfm			
Blower Required		2	3	303
Blowers Proposed		3	4	304

Attachment 17  
Capacity Calculations

	1					2						
Year 1	8/1/2024	9/1/2024	10/1/2024	11/1/2024	12/1/2024	1/1/2025	2/1/2025	3/1/2025	4/1/2025	5/1/2025	6/1/2025	7/1/2025
Res. Connections	0	95	190	285	380	475	570	665	760	855	950	1045
Flow at 350 GPD per conn.	0	33,250	66,500	99,750	133,000	166,250	199,500	232,750	266,000	299,250	332,500	365,750
Year 2	8/1/2025	9/1/2025	10/1/2025	11/1/2025	12/1/2025	1/1/2026	2/1/2026	3/1/2026	4/1/2026	5/1/2026	6/1/2026	7/1/2026
Res. Connections	1140	1235	1330	1425	1520	1615	1710	1805	1900	1995	2090	2185
Flow at 350 GPD per conn.	399,000	432,250	465,500	498,750	532,000	565,250	598,500	631,750	665,000	698,250	731,500	764,750
Year 3	8/1/2026	9/1/2026	10/1/2026	11/1/2026	12/1/2026	1/1/2027	2/1/2027	3/1/2027	4/1/2027	5/1/2027	6/1/2027	7/1/2027
Res. Connections	2280	2375	2470	2565	2660	2755	2850	2945	3040	3135	3230	3325
Flow at 350 GPD per conn.	798,000	831,250	864,500	897,750	931,000	964,250	997,500	1,030,750	1,064,000	1,097,250	1,130,500	1,163,750
Year 4	8/1/2027	9/1/2027	10/1/2027	11/1/2027	12/1/2027	1/1/2028	2/1/2028	3/1/2028	4/1/2028	5/1/2028	6/1/2028	7/1/2028
Res. Connections	3420	3515	3610	3705	3800	3895	3990	4085	4180	4275	4370	4465
Flow at 350 GPD per conn.	1,197,000	1,230,250	1,263,500	1,296,750	1,330,000	1,363,250	1,396,500	1,429,750	1,463,000	1,496,250	1,529,500	1,562,750
Year 5	8/1/2028	9/1/2028	10/1/2028	11/1/2028	12/1/2028	1/1/2029	2/1/2029	3/1/2029	4/1/2029	5/1/2029	6/1/2029	7/1/2029
Res. Connections	4560	4655	4750	4845	4940	5035	5130	5225	5320	5415	5510	5605
Flow at 350 GPD per conn.	1,596,000	1,629,250	1,662,500	1,695,750	1,729,000	1,762,250	1,795,500	1,828,750	1,862,000	1,895,250	1,928,500	1,961,750

- |      |   |
|------|---|
| 1.)  | 90% of phase 1 flow, Proposed Phase 2 construction begins |
| 2.)  | 90% of phase 2 flow, proposed Phase 3 construction begins |
| 3. ) | Full development is reached, development stops            |

95	ESFC per month
350	gallons per escf
8/1/2024	Date

	Flow	75%	90%
Phase 1:	150000	112500	135000
Phase 2:	300000	225000	270000
Phase 3:	2000000	1500000	1800000

# National Flood Hazard Layer FIRMMette



96°51'17"W 33°24'35"N



0 250 500 1,000 1,500 2,000 Feet

1:6,000

96°50'39"W 33°24'5"N

Basemap Imagery Source: USGS National Map 2023

## Legend

SEE FIS REPORT FOR DETAILED LEGEND AND INDEX MAP FOR FIRM PANEL LAYOUT

SPECIAL FLOOD HAZARD AREAS		Without Base Flood Elevation (BFE) Zone A, V, A99
		With BFE or Depth Zone AE, AO, AH, VE, AR
		Regulatory Floodway
OTHER AREAS OF FLOOD HAZARD		0.2% Annual Chance Flood Hazard, Areas of 1% annual chance flood with average depth less than one foot or with drainage areas of less than one square mile Zone X
		Future Conditions 1% Annual Chance Flood Hazard Zone X
		Area with Reduced Flood Risk due to Levee. See Notes. Zone X
		Area with Flood Risk due to Levee Zone D
OTHER AREAS		NO SCREEN Area of Minimal Flood Hazard Zone X
		Effective LOMRs
		Area of Undetermined Flood Hazard Zone D
GENERAL STRUCTURES		Channel, Culvert, or Storm Sewer
		Levee, Dike, or Floodwall
OTHER FEATURES		20.2 Cross Sections with 1% Annual Chance Water Surface Elevation
		17.5 Cross Sections with 1% Annual Chance Water Surface Elevation
		Coastal Transect
		Base Flood Elevation Line (BFE)
		Limit of Study
		Jurisdiction Boundary
		Coastal Transect Baseline
MAP PANELS		Digital Data Available
		No Digital Data Available
		Unmapped



The pin displayed on the map is an approximate point selected by the user and does not represent an authoritative property location.

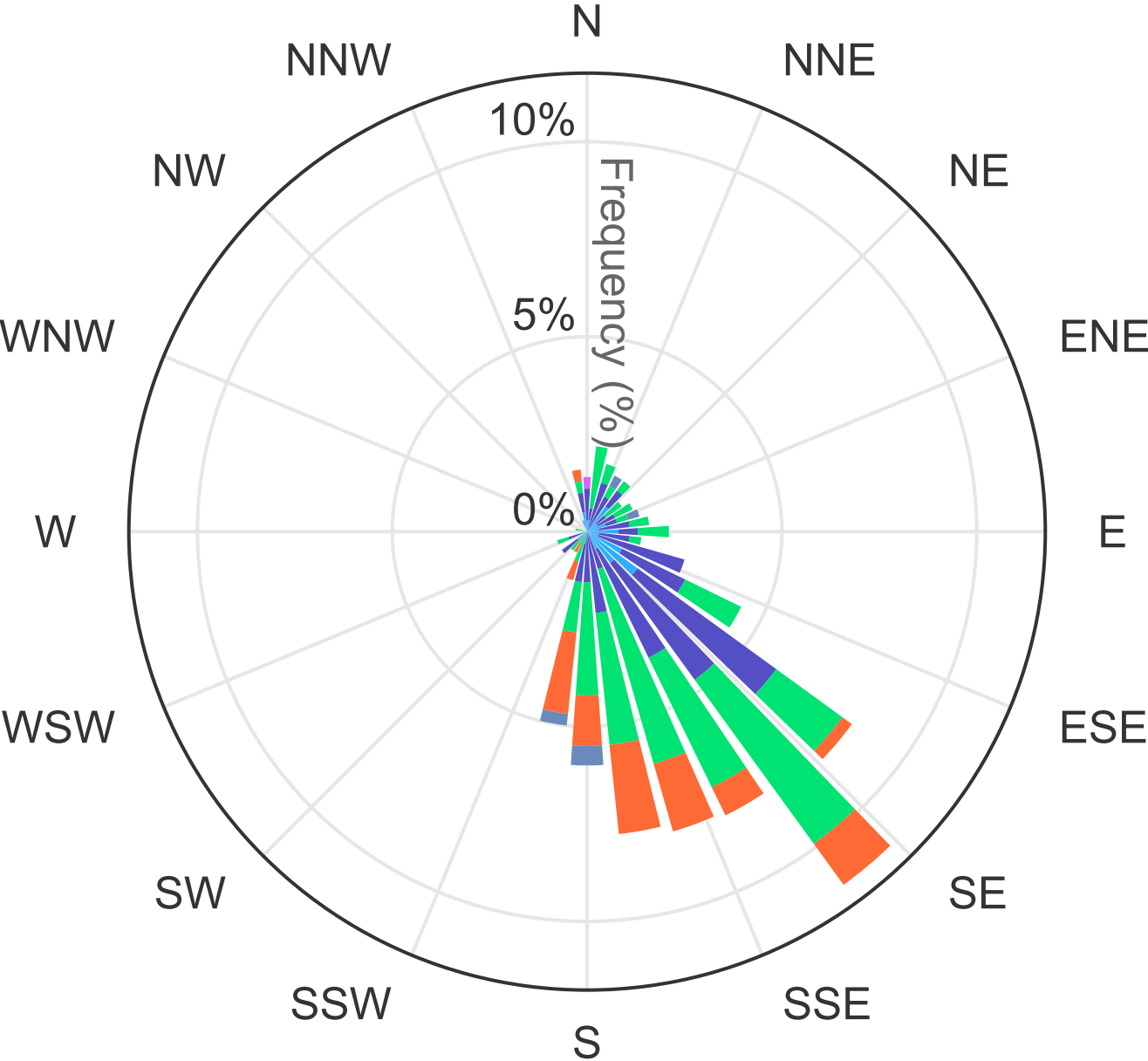
This map complies with FEMA's standards for the use of digital flood maps if it is not void as described below. The basemap shown complies with FEMA's basemap accuracy standards.

The flood hazard information is derived directly from the authoritative NFHL web services provided by FEMA. This map was exported on 6/18/2024 at 2:00 PM and does not reflect changes or amendments subsequent to this date and time. The NFHL and effective information may change or become superseded by new data over time.

This map image is void if the one or more of the following map elements do not appear: basemap imagery, flood zone labels, legend, scale bar, map creation date, community identifiers, FIRM panel number, and FIRM effective date. Map images for unmapped and unmodernized areas cannot be used for regulatory purposes.

# MCKINNEY MUNI AP (TX) Wind Rose

June 1, 2024 - June 17, 2024  
Sub-Interval: Jan. 1 - Dec. 31, 0 - 23



## Wind Speed (mph)

- 1.3 - 4
- 4 - 8
- 8 - 13
- 13 - 19
- 19 - 25
- 25 - 32
- 32 - 39
- 39 - 47
- 47 -

Click and drag to zoom

**ATTACHMENT - 20****Sludge Management Plan****Phase 1 - 0.15 MGD**

Influent Design Flow	0.15	MGD
Influent BOD <sub>5</sub> Concentration	325	mg/L
Aerobic Digester Volume	62,836	Gal
Aeration Basin MLSS	2000	mg/L

<b>SOLIDS GENERATED</b>	<b>100% Flow</b>	<b>75% Flow</b>	<b>50% Flow</b>	<b>25% Flow</b>
Pounds (lbs) Influent BOD <sub>5</sub>	407	305	203	102
Pounds (lbs) of digested dry sludge produced*	142	107	71	36
Pounds (lbs) of wet sludge produced	7115	5336	3558	1779
Gallons (Gal) of wet sludge produced	853	640	427	213

\*Assuming 0.35 pounds of digested dry sludge produced per pound of influent BOD<sub>5</sub> at average temperature and 2.0% solids concentration in the digester

Sludge will be wasted from the RAS flow stream to the aerobic digester.

Sludge solids will be stabilized in the digester

Supernatant will be decanted from the digester and returned to the plant headworks for treatment.

<b>REMOVAL SCHEDULE (DAYS)</b>	<b>100% Flow</b>	<b>75% Flow</b>	<b>50% Flow</b>	<b>25% Flow</b>
Days between sludge removal	9	12	18	35

Liquid digested sludge will be removed from the digester for disposal on a regular basis as required.

The calculated mean cell residence time (MCRT) for the digester storage volume of 62836.368 gal will be approximately 73 days at 100% capacity and annual average digested sludge produced of 142 ppd.

## ATTACHMENT - 20

### Sludge Management Plan

#### Phase 2 - 0.30 MGD

Influent Design Flow	0.3 MGD
Influent BOD <sub>5</sub> Concentration	325 mg/L
Aerobic Digester Volume	94,255 Gal
Aeration Basin MLSS	2000 mg/L

<b>SOLIDS GENERATED</b>	<b>100% Flow</b>	<b>75% Flow</b>	<b>50% Flow</b>	<b>25% Flow</b>
Pounds (lbs) Influent BOD <sub>5</sub>	813	610	407	203
Pounds (lbs) of digested dry sludge produced*	285	213	142	71
Pounds (lbs) of wet sludge produced	14230	10673	7115	3558
Gallons (Gal) of wet sludge produced	1706	1280	853	427

\*Assuming 0.35 pounds of digested dry sludge produced per pound of influent BOD<sub>5</sub> at average temperature and 2.0% solids concentration in the digester

Sludge will be wasted from the RAS flow stream to the aerobic digester.

Sludge solids will be stabilized in the digester

Supernatant will be decanted from the digester and returned to the plant headworks for treatment.

<b>REMOVAL SCHEDULE (DAYS)</b>	<b>100% Flow</b>	<b>75% Flow</b>	<b>50% Flow</b>	<b>25% Flow</b>
Days between sludge removal	7	9	13	27

Liquid digested sludge will be removed from the digester for disposal on a regular basis as required.

The calculated mean cell residence time (MCRT) for the digester storage volume of 94254.552 gal will be approximately 55 days at 100% capacity and annual average digested sludge produced of 285 ppd.

**ATTACHMENT - 20****Sludge Management Plan****Phase 3 - 2.00 MGD**

Influent Design Flow	2000000 MGD
Influent BOD <sub>5</sub> Concentration	325 mg/L
Aerobic Digester Volume	533,211 Gal
Aeration Basin MLSS	2000 mg/L

<b>SOLIDS GENERATED</b>	<b>100% Flow</b>	<b>75% Flow</b>	<b>50% Flow</b>	<b>25% Flow</b>
Pounds (lbs) Influent BOD <sub>5</sub>	5421000000	4065750000	2710500000	1355250000
Pounds (lbs) of digested dry sludge produced*	1897350000	1423012500	948675000	474337500
Pounds (lbs) of wet sludge produced	94867500000	71150625000	47433750000	23716875000
Gallons (Gal) of wet sludge produced	11375000000	8531250000	5687500000	2843750000

\*Assuming 0.35 pounds of digested dry sludge produced per pound of influent BOD<sub>5</sub> at average temperature and 2.0% solids concentration in the digester

Sludge will be wasted from the RAS flow stream to the aerobic digester.

Sludge solids will be stabilized in the digester

Supernatant will be decanted from the digester and returned to the plant headworks for treatment.

<b>REMOVAL SCHEDULE (DAYS)</b>	<b>100% Flow</b>	<b>75% Flow</b>	<b>50% Flow</b>	<b>25% Flow</b>
Days between sludge removal	0	0	0	0

Liquid digested sludge will be removed from the digester for disposal on a regular basis as required.

The calculated mean cell residence time (MCRT) for the digester storage volume of 533211.4656 gal will be approximately 0 days at 100% capacity and annual average digested sludge produced of 1897350000 ppd.



**ATTACHMENT – 21**  
Justification for Proposed Facility

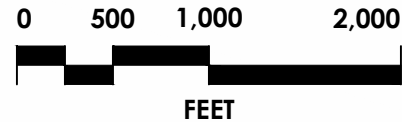
The proposed facility will allow Four Seasons Ranch MUD 1 to treat the wastewater from its proposed development service area.

There is no existing sanitary sewer collection infrastructure in the proposed area of development or in the near vicinity of the service area.

COUNTY LINE RD

BLAINE RD

DENTON COUNTY  
GRAYSON COUNTY



CR 60

COLLIN COUNTY

APPLICANTS PROPERTY  
BOUNDARY/ TREATMENT  
FACILITY BOUNDARY

SERVICE AREA  
BOUNDARY

DALLAS PKWY

# SERVICE AREA MAP

ATTACHMENT 22

FOUR SEASONS RANCH WWTP

**LJA Engineering, Inc.**

6060 North Central Expressway  
Suite 400  
Dallas, Texas 75206

Phone 469.621.0710

FRN - F-1386



## Erwin Madrid

---

**From:** Sally Easley <seasley@lja.com>  
**Sent:** Wednesday, October 16, 2024 8:05 AM  
**To:** Erwin Madrid  
**Cc:** Laura Preston; Dallas Wendling; 0314 - SNR Celina Tract  
**Subject:** NOD Response for Permit No. WQ0016620001  
**Attachments:** WQ0016620001 Municipal Discharge New Spanish NORI.docx; WQ0016620001 Four Seasons WWTP Response Letter.pdf

Mr. Madrid,

Please find both the response letter with NORI corrections in red and updated new Spanish NORI as a word document attached for submittal.

Thank you,

**Sally Easley**

Graduate Engineer

**LJA Engineering** | We seek solutions.

● [2150 S Central Expressway, Suite 300, McKinney, Texas 75070](#)

P: 214.620.2778 |

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## Erwin Madrid

---

**From:** Sally Easley <seasley@lja.com>  
**Sent:** Tuesday, October 15, 2024 11:10 AM  
**To:** Erwin Madrid  
**Subject:** RE: Individual Wastewater Permit Application - Electronic copy request  
**Attachments:** 1 - Core Data Form.pdf

Erwin,

I appreciate your patience.

I am re-sending the updated core data form, attachment 1 that includes the signature page attached to this email.

I forgot to update that earlier.

Thank you,

**Sally Easley**

Graduate Engineer

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P: 214.620.2778 |

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---

**From:** Erwin Madrid <Erwin.Madrid@tceq.texas.gov>  
**Sent:** Thursday, October 10, 2024 3:16 PM  
**To:** Sally Easley <seasley@lja.com>  
**Cc:** Laura Preston <lpreston@lja.com>; Dallas Wendling <dwendling@lja.com>; Abesha Michael <Abesha.Michael@tceq.texas.gov>  
**Subject:** RE: Individual Wastewater Permit Application - Electronic copy request

[EXTERNAL EMAIL]

Hi Sally,

Thank you for clarifying. Yes please, if you would send me an updated CDF form with the updated description and the updated description on section 10.A of the administrative report.

Regards,

Erwin Madrid  
Team Lead

ARP Team | Water Quality Division  
512-239-2191  
Texas Commission on Environmental Quality



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

---

**From:** Sally Easley <[seasley@lja.com](mailto:seasley@lja.com)>  
**Sent:** Wednesday, October 9, 2024 3:32 PM  
**To:** Erwin Madrid <[Erwin.Madrid@tceq.texas.gov](mailto:Erwin.Madrid@tceq.texas.gov)>  
**Cc:** Laura Preston <[lpreston@lja.com](mailto:lpreston@lja.com)>; Dallas Wendling <[dwendling@lja.com](mailto:dwendling@lja.com)>; Abesha Michael <[Abesha.Michael@tceq.texas.gov](mailto:Abesha.Michael@tceq.texas.gov)>  
**Subject:** RE: Individual Wastewater Permit Application - Electronic copy request

Hi Edwin,

Thank you for your help reviewing this permit.  
County Line Road and Berend Road are the same road with two different names running from Blaine Road eastward to Highway 377 where it ends in Pilot Point, Texas.  
Please let me know if I need to amend the pages and attachment including the location description and forward to you.

Thank you,

**Sally Easley**  
Graduate Engineer

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---

**From:** Erwin Madrid <[Erwin.Madrid@tceq.texas.gov](mailto:Erwin.Madrid@tceq.texas.gov)>  
**Sent:** Wednesday, October 9, 2024 3:23 PM  
**To:** Sally Easley <[seasley@lja.com](mailto:seasley@lja.com)>  
**Cc:** Laura Preston <[lpreston@lja.com](mailto:lpreston@lja.com)>; Dallas Wendling <[dwendling@lja.com](mailto:dwendling@lja.com)>; Abesha Michael <[Abesha.Michael@tceq.texas.gov](mailto:Abesha.Michael@tceq.texas.gov)>  
**Subject:** RE: Individual Wastewater Permit Application - Electronic copy request

[EXTERNAL EMAIL]

Hi Sally,

Disregard the item about the hard copy of the application, I was able to locate it here in the office. If you would please just confirm the proposed facility location description.

Regards,

Erwin Madrid  
Team Lead  
ARP Team | Water Quality Division  
512-239-2191  
Texas Commission on Environmental Quality



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

---

**From:** Erwin Madrid  
**Sent:** Wednesday, October 9, 2024 2:56 PM  
**To:** Sally Easley <[seasley@lja.com](mailto:seasley@lja.com)>  
**Cc:** Laura Preston <[lpreston@lja.com](mailto:lpreston@lja.com)>; Dallas Wendling <[dwendling@lja.com](mailto:dwendling@lja.com)>; Abesha Michael <[Abesha.Michael@tceq.texas.gov](mailto:Abesha.Michael@tceq.texas.gov)>  
**Subject:** RE: Individual Wastewater Permit Application - Electronic copy request

Hi Sally,

I am working on reviewing the permit application for Four Seasons Ranch WWTP; however, I am waiting to hear back from our standards team to complete my review. In the meantime, can you please address the following items below:

Can you please confirm that a hard copy of the permit application was mailed to our office? If not, can you please mail in the original hard copy (paper).

Additionally, the facility location description on the application indicates that the proposed facility will be located 0.6 miles southeast of the intersection of County Line Rd and Gorrell Rd. However, upon review, it doesn't appear that County Line Rd and Gorrell Rd intersect. It appears that Gorrell Rd intersects with Berend Rd. Can you please confirm the facility location description?

Regards,

Erwin Madrid  
Team Lead  
ARP Team | Water Quality Division  
512-239-2191  
Texas Commission on Environmental Quality



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

---

**From:** Sally Easley <[seasley@lja.com](mailto:seasley@lja.com)>  
**Sent:** Friday, October 4, 2024 1:36 PM

**To:** WQ-ARPTeam <[WQ-ARPTeam@tceq.texas.gov](mailto:WQ-ARPTeam@tceq.texas.gov)>

**Subject:** RE: Individual Wastewater Permit Application - Electronic copy request

Thank you very much.  
I appreciate the update.

**Sally Easley**

Graduate Engineer

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P: 214.620.2778 |

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**From:** WQ-ARPTeam <[WQ-ARPTeam@tceq.texas.gov](mailto:WQ-ARPTeam@tceq.texas.gov)>

**Sent:** Friday, October 4, 2024 11:08 AM

**To:** Sally Easley <[seasley@lja.com](mailto:seasley@lja.com)>

**Cc:** 0314 - SNR Celina Tract <[NTX0314@lja.com](mailto:NTX0314@lja.com)>; Laura Preston <[lpreston@lja.com](mailto:lpreston@lja.com)>; Dallas Wendling <[dwendling@lja.com](mailto:dwendling@lja.com)>

**Subject:** RE: Individual Wastewater Permit Application - Electronic copy request

**[EXTERNAL EMAIL]**

Hi Sally,

I can confirm that we have received the application copy you sent; Abesha has not completed the administrative review, she is currently out of the office. However, we will attempt to get you a response as soon as possible.

Thank you in advance for your understanding!

Regards,

Erwin Madrid

Team Lead

ARP Team | Water Quality Division

512-239-2191

Texas Commission on Environmental Quality



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

---

**From:** Sally Easley <[seasley@lja.com](mailto:seasley@lja.com)>

**Sent:** Friday, October 4, 2024 8:11 AM

**To:** WQ-ARPTeam <[WQ-ARPTeam@tceq.texas.gov](mailto:WQ-ARPTeam@tceq.texas.gov)>

**Cc:** 0314 - SNR Celina Tract <[NTX0314@lja.com](mailto:NTX0314@lja.com)>; Laura Preston <[lpreston@lja.com](mailto:lpreston@lja.com)>; Dallas Wendling <[dwendling@lja.com](mailto:dwendling@lja.com)>

**Subject:** Individual Wastewater Permit Application - Electronic copy request

Good Morning,

I am checking in on this Four Seasons Ranch WWTP permit application that was re-submitted at Abesha Michael's on 09/12/2024

I have not received a NOD with no information online yet, and wanted to be sure that this was received for review the second time.

Thank you,

**Sally Easley**

Graduate Engineer

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P: 214.620.2778 |

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## Erwin Madrid

---

**From:** Sally Easley <seasley@lja.com>  
**Sent:** Tuesday, October 15, 2024 9:24 AM  
**To:** Erwin Madrid  
**Cc:** Laura Preston; Dallas Wendling; Abesha Michael  
**Subject:** RE: Individual Wastewater Permit Application - Electronic copy request  
**Attachments:** 7 - SPIF.pdf; 1 - Core Data Form.pdf; 10053 10A P8.pdf

Erwin,

Please find attached the updated page 8, section 10A of form 10053, attachment 1, form 10040 Core Data Form, and attachment 7, SPIF all with updated location description to reflect the change from County Line RD to Berend RD.

Thank you,

**Sally Easley**

Graduate Engineer

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P: 214.620.2778 |

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Erwin Madrid

Team Lead  
ARP Team | Water Quality Division  
512-239-2191  
Texas Commission on Environmental Quality



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---

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**Sent:** Wednesday, October 9, 2024 3:32 PM  
**To:** Erwin Madrid <[Erwin.Madrid@tceq.texas.gov](mailto:Erwin.Madrid@tceq.texas.gov)>  
**Cc:** Laura Preston <[lpreston@lja.com](mailto:lpreston@lja.com)>; Dallas Wendling <[dwendling@lja.com](mailto:dwendling@lja.com)>; Abesha Michael <[Abesha.Michael@tceq.texas.gov](mailto:Abesha.Michael@tceq.texas.gov)>  
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**Sent:** Wednesday, October 9, 2024 3:23 PM  
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**Cc:** Laura Preston <[lpreston@lja.com](mailto:lpreston@lja.com)>; Dallas Wendling <[dwendling@lja.com](mailto:dwendling@lja.com)>; Abesha Michael <[Abesha.Michael@tceq.texas.gov](mailto:Abesha.Michael@tceq.texas.gov)>  
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Erwin Madrid  
Team Lead  
ARP Team | Water Quality Division  
512-239-2191  
Texas Commission on Environmental Quality



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**To:** Sally Easley <[seasley@lja.com](mailto:seasley@lja.com)>  
**Cc:** Laura Preston <[lpreston@lja.com](mailto:lpreston@lja.com)>; Dallas Wendling <[dwendling@lja.com](mailto:dwendling@lja.com)>; Abesha Michael <[Abesha.Michael@tceq.texas.gov](mailto:Abesha.Michael@tceq.texas.gov)>  
**Subject:** RE: Individual Wastewater Permit Application - Electronic copy request

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I am working on reviewing the permit application for Four Seasons Ranch WWTP; however, I am waiting to hear back from our standards team to complete my review. In the meantime, can you please address the following items below:

Can you please confirm that a hard copy of the permit application was mailed to our office? If not, can you please mail in the original hard copy (paper).

Additionally, the facility location description on the application indicates that the proposed facility will be located 0.6 miles southeast of the intersection of County Line Rd and Gorrell Rd. However, upon review, it doesn't appear that County Line Rd and Gorrell Rd intersect. It appears that Gorrell Rd intersects with Berend Rd. Can you please confirm the facility location description?

Regards,

Erwin Madrid  
Team Lead  
ARP Team | Water Quality Division  
512-239-2191  
Texas Commission on Environmental Quality



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

---

**From:** Sally Easley <[seasley@lja.com](mailto:seasley@lja.com)>  
**Sent:** Friday, October 4, 2024 1:36 PM

**To:** WQ-ARPTeam <[WQ-ARPTeam@tceq.texas.gov](mailto:WQ-ARPTeam@tceq.texas.gov)>

**Subject:** RE: Individual Wastewater Permit Application - Electronic copy request

Thank you very much.  
I appreciate the update.

**Sally Easley**

Graduate Engineer

**LJA Engineering** | We seek solutions.

● [2150 S Central Expressway, Suite 300, McKinney, Texas 75070](#)

P: 214.620.2778 |

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**From:** WQ-ARPTeam <[WQ-ARPTeam@tceq.texas.gov](mailto:WQ-ARPTeam@tceq.texas.gov)>

**Sent:** Friday, October 4, 2024 11:08 AM

**To:** Sally Easley <[seasley@lja.com](mailto:seasley@lja.com)>

**Cc:** 0314 - SNR Celina Tract <[NTX0314@lja.com](mailto:NTX0314@lja.com)>; Laura Preston <[lpreston@lja.com](mailto:lpreston@lja.com)>; Dallas Wendling <[dwendling@lja.com](mailto:dwendling@lja.com)>

**Subject:** RE: Individual Wastewater Permit Application - Electronic copy request

**[EXTERNAL EMAIL]**

Hi Sally,

I can confirm that we have received the application copy you sent; Abesha has not completed the administrative review, she is currently out of the office. However, we will attempt to get you a response as soon as possible.

Thank you in advance for your understanding!

Regards,

Erwin Madrid

Team Lead

ARP Team | Water Quality Division

512-239-2191

Texas Commission on Environmental Quality



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

---

**From:** Sally Easley <[seasley@lja.com](mailto:seasley@lja.com)>  
**Sent:** Friday, October 4, 2024 8:11 AM  
**To:** WQ-ARPTeam <[WQ-ARPTeam@tceq.texas.gov](mailto:WQ-ARPTeam@tceq.texas.gov)>  
**Cc:** 0314 - SNR Celina Tract <[NTX0314@lja.com](mailto:NTX0314@lja.com)>; Laura Preston <[lpreston@lja.com](mailto:lpreston@lja.com)>; Dallas Wendling <[dwendling@lja.com](mailto:dwendling@lja.com)>  
**Subject:** Individual Wastewater Permit Application - Electronic copy request

Good Morning,

I am checking in on this Four Seasons Ranch WWTP permit application that was re-submitted at Abesha Michael's on 09/12/2024

I have not received a NOD with no information online yet, and wanted to be sure that this was received for review the second time.

Thank you,

**Sally Easley**

Graduate Engineer

**LJA Engineering** | We seek solutions.

● [2150 S Central Expressway, Suite 300, McKinney, Texas 75070](#)

P: 214.620.2778 |

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**#4 Top Workplaces USA 2022**



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**[EXTERNAL EMAIL]** Exercise caution. Do not open attachments or click links from unknown senders or unexpected email

**[EXTERNAL EMAIL]** Exercise caution. Do not open attachments or click links from unknown senders or unexpected email

October 16, 2024

Via Email to:  
Erwin.Madrid@tceq.texas.gov

Re: Response Letter for Case No.: WQ0016620001  
Applicant Name: Four Seasons Ranch Municipal Utility District 1  
Site Name: Four Seasons Ranch WWTP  
LJA Job No. NT860B-0314A

Dear Mr. Madrid:

In response to the TCEQ comments dated October 14, 2024, we have addressed your comments as follows.

1. The following is a portion of the NORI which contains information relevant to your application. Please read it carefully and indicate if it contains any errors or omissions. The complete notice will be sent to you once the application is declared administratively complete.

APPLICATION. Four Season Ranch Municipal Utility District 1 of Denton County, 16000 Dallas Parkway, Suite 350, Dallas, Texas 75248, has applied to the Texas Commission on Environmental Quality (TCEQ) for proposed Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0016620001 (EPA I.D. No. TX0146587) to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 2,000,000 gallons per day. The domestic wastewater treatment facility will be located approximately 0.6 miles southeast of the intersection of Berend Road and Gorrell Road, near the city of Gunter, in Denton County, Texas 76258. The discharge route will be from the plant site to Mustang Creek; thence to Little Elm Creek; thence to Lake Lewisville. TCEQ received this application on September 12, 2024. The permit application will be available for viewing and copying at Pilot Point Community Library, 324 South Washington Street, Pilot Point, in Denton County, Texas and at Gunter Library and Museum, 110 South Highway 289, Suite 4, Gunter, in Grayson 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=-96.846747,33.406575&level=18>

Further information may also be obtained from Four Season Ranch Municipal Utility District 1 of Denton County at the address stated above or by calling Ms. Laura Preston, P.E., Assistant Project Manager, at 214-442-6579.

*Response: The version of the NORI included below is a copy of the above with changes noted in red.*

APPLICATION. Four **Seasons** Ranch Municipal Utility District 1 of Denton County, 16000 Dallas Parkway, Suite 350, Dallas, Texas 75248, has applied to the Texas Commission on Environmental Quality (TCEQ) for proposed Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0016620001 (EPA I.D. No. TX0146587) to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 2,000,000 gallons per day. The domestic wastewater treatment facility will be located approximately 0.6 miles southeast of the intersection of Berend Road and Gorrell Road, near the city of Gunter, in Denton County, Texas 76258. The discharge route will be from the plant site to Mustang Creek; thence to Little Elm Creek; thence to Lake Lewisville. TCEQ received this application on September 12, 2024. The permit application will be available for viewing and copying at Pilot Point Community Library, 324 South Washington Street, Pilot Point, in Denton County, Texas and at Gunter Library and Museum, 110 South Highway 289, Suite 4, Gunter, in Grayson 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=-96.846747,33.406575&level=18>

Further information may also be obtained from Four **Seasons** Ranch Municipal Utility District 1 of Denton County at the address stated above or by calling Ms. Laura Preston, P.E., Assistant Project Manager, at 214-442-6579.

2. The application indicates that public notices in Spanish are required. After confirming the portion of the NORI above does not contain any errors or omissions, please use the attached template to translate the NORI into Spanish. Only the first and last paragraphs are unique to this application and require translation. Please provide the translated Spanish NORI in a Microsoft Word document.

*Response: The completed Spanish NORI in Microsoft Word is included as an attachment to the email to which this response letter is attached.*

If you have any questions or require additional information, please contact me at 214-442-6579. We trust this additional information will allow further review and processing for approval.

Sincerely,



Laura Preston, PE  
Assistant Project Manager

LP/se

Enclosures:  
Spanish NORI (Word document)

Organization Name: Four Seasons Ranch MUD 1

Mailing Address: 16000 Dallas Pkwy, Ste 350 City, State, Zip Code: Dallas, Tx 75248

Phone No.: 972-788-1600

E-mail Address: jbethke@coatsrose.com

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

**Attachment:** N/A

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

Prefix: N/A

Last Name, First Name: N/A

Title: N/A

Credential: N/A

Organization Name: N/A

Mailing Address: N/A

City, State, Zip Code: N/A

Phone No.: N/A

E-mail Address: N/A

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

**Attachment:** N/A

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

Prefix: N/A

Last Name, First Name: N/A

Title: N/A

Credential: N/A

Organization Name: N/A

Mailing Address: N/A

City, State, Zip Code: N/A

Phone No.: N/A

E-mail Address: N/A

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

**Attachment:** N/A

## Section 10. TPDES Discharge Information (Instructions Page 31)

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

☐ Yes ☒ No

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

Approximately 0.6 miles southeast of the intersection of Berend Rd and Gorrell Rd in Denton County

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

☐ Yes ☒ No

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





# TCEQ Core Data Form

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

## SECTION I: General Information

<b>1. Reason for Submission</b> (If other is checked please describe in space provided.)		
<input checked="" type="checkbox"/> New Permit, Registration or Authorization (Core Data Form should be submitted with the program application.)		
<input type="checkbox"/> Renewal (Core Data Form should be submitted with the renewal form)		<input type="checkbox"/> Other
<b>2. Customer Reference Number</b> (if issued)	<a href="#">Follow this link to search for CN or RN numbers in Central Registry**</a>	<b>3. Regulated Entity Reference Number</b> (if issued)
CN 603401316		RN N/A

## SECTION II: Customer Information

<b>4. General Customer Information</b>		<b>5. Effective Date for Customer Information Updates</b> (mm/dd/yyyy)		7/1/2024	
<input type="checkbox"/> New Customer <input checked="" type="checkbox"/> Update to Customer Information <input type="checkbox"/> Change in Regulated Entity Ownership					
<input type="checkbox"/> Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)					
<i>The Customer Name submitted here may be updated automatically based on what is current and active with the Texas Secretary of State (SOS) or Texas Comptroller of Public Accounts (CPA).</i>					
<b>6. Customer Legal Name</b> (If an individual, print last name first: eg: Doe, John)				<i>If new Customer, enter previous Customer below:</i>	
Four Seasons Ranch MUD 1					
<b>7. TX SOS/CPA Filing Number</b>		<b>8. TX State Tax ID</b> (11 digits)		<b>9. Federal Tax ID</b> (9 digits)	<b>10. DUNS Number</b> (if applicable)
N/A		N/A		N/A	N/A
<b>11. Type of Customer:</b>		<input type="checkbox"/> Corporation		<input type="checkbox"/> Individual	Partnership: <input type="checkbox"/> General <input type="checkbox"/> Limited
Government: <input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Federal <input type="checkbox"/> Local <input type="checkbox"/> State <input checked="" type="checkbox"/> Other		<input type="checkbox"/> Sole Proprietorship		<input type="checkbox"/> Other:	
<b>12. Number of Employees</b>				<b>13. Independently Owned and Operated?</b>	
<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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>14. Customer Role</b> (Proposed or Actual) – as it relates to the Regulated Entity listed on this form. Please check one of the following					
<input type="checkbox"/> Owner <input type="checkbox"/> Operator <input checked="" type="checkbox"/> Owner & Operator <input type="checkbox"/> Other:					
<input type="checkbox"/> Occupational Licensee <input type="checkbox"/> Responsible Party <input type="checkbox"/> VCP/BSA Applicant					
<b>15. Mailing Address:</b>		16000 Dallas Pkwy Ste 350			
City		Dallas		State	TX
ZIP		75248		ZIP + 4	6637
<b>16. Country Mailing Information</b> (if outside USA)				<b>17. E-Mail Address</b> (if applicable)	
				jbethke@coatsrose.com	
<b>18. Telephone Number</b>			<b>19. Extension or Code</b>		<b>20. Fax Number</b> (if applicable)

## SECTION III: Regulated Entity Information

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

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

<b>25. Description to Physical Location:</b>		Located 0.6 miles southeast of the intersection of Berend Rd and Gorrell Rd in Denton County									
<b>26. Nearest City</b>						<b>State</b>		<b>Nearest ZIP Code</b>			
Gunter						TX		76258			
<i>Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).</i>											
<b>27. Latitude (N) In Decimal:</b>			33.406575			<b>28. Longitude (W) In Decimal:</b>			96.846747		
Degrees		Minutes		Seconds		Degrees		Minutes		Seconds	
33		24		23.67		96		50		48.29	
<b>29. Primary SIC Code</b> (4 digits)			<b>30. Secondary SIC Code</b> (4 digits)			<b>31. Primary NAICS Code</b> (5 or 6 digits)			<b>32. Secondary NAICS Code</b> (5 or 6 digits)		
4952						221320					
<b>33. What is the Primary Business of this entity?</b> (Do not repeat the SIC or NAICS description.)											
Municipal Domestic Wastewater Treatment											
<b>34. Mailing Address:</b>		Four Seasons Ranch MUD 1									
		16000 Dallas Pkwy Ste 350									
		City	Dallas	State	TX	ZIP	75248	ZIP + 4	6637		
<b>35. E-Mail Address:</b>		jbethke@coatsrose.com									
<b>36. Telephone Number</b>				<b>37. Extension or Code</b>				<b>38. Fax Number</b> (if applicable)			
( 972 ) 788-1600								( ) -			

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


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

#### **SECTION IV: Preparer Information**

<b>40. Name:</b>	Laura Preston	<b>41. Title:</b>	Assistant Project Manager
<b>42. Telephone Number</b>	<b>43. Ext./Code</b>	<b>44. Fax Number</b>	<b>45. E-Mail Address</b>
( 214 ) 442-6579		( ) -	lpreston@lja.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.

<b>Company:</b>	Four Seasons Ranch MUD 1	<b>Job Title:</b>	Board President
<b>Name (In Print):</b>	Michael Teeling	<b>Phone:</b>	( 972 ) 755- 1000
<b>Signature:</b>		<b>Date:</b>	08/15/2024

# 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](mailto:WQ-ARPTeam@tceq.texas.gov) or by phone at (512) 239-4671.

The following applies to all applications:

1. Permittee: Four Seasons Ranch MUD 1

Permit No. WQ00 N/A

EPA ID No. TX N/A

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

Located 0.6 miles southeast of the intersection of Berend Rd and Gorrell Rd in Denton County

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: Laura Preston

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

Title: Assistant Project Manager

Mailing Address: 6060 N Central Expy, Ste 400

City, State, Zip Code: Dallas, Texas 75206

Phone No.: 214-442-6579 Ext.: N/A Fax No.: N/A

E-mail Address: lpreston@lja.com

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

N/A

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 unnamed tributary, thence to Little Elm Creek, thence to Lake Lewisville in segment 0823 of the Trinity River Basin.

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

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

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

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

☐ Sealing caves, fractures, sinkholes, other karst features

☐ Disturbance of vegetation or wetlands

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

N/A

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

Undeveloped Land

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:

No existing buildings or structures are located on the property where the wastewater treatment plant is proposed.

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

The property where the wastewater treatment plant is proposed has never been developed and has generally been used for agricultural purposes.