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, el Aviso de Recepción de Solicitud e Intención de Obtener un Permiso)
   - Inglés
   - Idioma alternativo (español)
3. Solicitud original

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

ENGLISH TEMPLATE FOR TPDES or TLAP NEW/RENEWAL/AMENDMENT APPLICATIONS

DOMESTIC WASTEWATER

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

East Waller County Management District (CN606207410) proposes to operate Acorn Ranch Wastewater Treatment Plant (RN N/A). an activated sludge process plant operated in the complete mix mode. The facility will be located approximately 700 ft northwest of the intersection of Lakeside Drive and Robin Hood Lane, in Hockley, Wallis County, Texas 77447.

This application is for the proposal of a permit allowing for the discharge of treated domestic wastewater at a daily average of 75,000 gallons per day.

Discharges from the facility are expected to contain five-day carbonaceous biochemical oxygen demand ($CBOD_5$), total suspended solids (TSS), ammonia nitrogen (NH_3-N), and *Escherichia coli*. Additional potential pollutants are included in the Domestic Technical Report 1.0, Section 7. Domestic wastewater will be treated by an activated sludge process plant and the treatment units include a manual bar screen, aeration basins, final clarifiers, aerobic digesters, and chlorine contact chambers. The sludge will be hauled off by a licensed sludge hauler for disposal.

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

AGUAS RESIDUALES DOMÉSTICAS

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

East Waller County Management District (CN 606207410) propone operar la planta de tratamiento de aguas residuals del Acorn Ranch Wastewater Treatment Plant (RN N/A), una planta de proceso de lodos activados operada en el modo de mezcla completa. La instalación estará ubicada aproximadamente 700 pies al noroeste de la intersección de Lakeside Drive y Robin Hood Lane, en Hockley, Condado de Waller, Texas 77447.

Esta solicitud es para la renovación del permiso existente que permite la descarga de aguas residuales domésticas tratadas a un flujo promedio diario de 75,000 galones por día.

Se espera que las descargas de la instalación contengan demanda bioquímica de oxígeno carbónico (CBOD5) de cinco días, sólidos suspendidos totales (TSS), nitrógeno amoniacal (NH3-N) y Escherichia coli. Los contaminantes potenciales adicionales se incluyen en el Informe técnico doméstico 1.0, Sección 7. Las aguas residuales domésticas serán. tratadas por una planta de proceso de lodos activados y las unidades de tratamiento incluyen una pantalla de barra manual, balsas de aireación, clarificadores finales, digestores aeróbicos y cámaras de contacto de cloro. El lodo serán acarreado por un transportador de lodos con licencia para su eliminación.

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

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

PROPOSED PERMIT NO. WQ0016630001

APPLICATION. East Waller County Management District, 600 West 5th Street, Unit 900, Austin, Texas 78701, has applied to the Texas Commission on Environmental Quality (TCEQ) for proposed Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0016630001 (EPA I.D. No. TX0146641) to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 70,000 gallons per day. The domestic wastewater treatment facility will be located approximately 700 Feet northwest of the intersection of Lakeside Drive and Robin Hood Lane, near the city of Hockley, in Waller County, Texas 77447. The discharge route will be from the plant site to an unnamed tributary, thence to Brushy Creek, thence to Spring Creek. TCEQ received this application on September 19, 2024. The permit application will be available for viewing and copying at Melanee Smith Memorial Library, 2103 Main Street, Waller, Texas prior to the date this notice is published in the newspaper. The application, including any updates, and associated notices are available electronically at the following webpage: https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications. This link to an electronic map of the site or facility's general location is provided as a public courtesy and not part of the application or notice. For the exact location, refer to the application. https://gisweb.tceq.texas.gov/LocationMapper/?marker=-95.81027,30.135833&level=18

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

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

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

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

instructions for requesting reconsideration of the Executive Director's decision and for requesting a contested case hearing. A contested case hearing is a legal proceeding similar to a civil trial in state district court.

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

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

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

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

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

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

Further information may also be obtained from East Waller County Management District at the address stated above or by calling Mr. Ali Safari, Senior Design Engineer, R.G. Miller | DCCM, at 281-921-8765.

Issuance Date: November 8, 2024

Comisión de Calidad Ambiental del Estado de Texas

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

PERMISO PROPUESTO NO. WQ0016630001

SOLICITUD. East Waller County Management District, 600 West 5th Street, Unit 900, Austin, Texas 78701, ha solicitado a la Comisión de Calidad Ambiental del Estado de Texas (TCEQ) para el propuesto Permiso No. WQ0016630001 (EPA I.D. No. TX0146641) 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 70,000 galones por día. La planta está ubicada aproximadamente a 700 pies al noroeste de la intersección de Lakeside Drive y Robin Hood Lane, cerca de la ciudad de Hockley, en el condado de Waller, Texas 77447. La ruta de descarga es del sitio de la planta a hasta un afluente sin nombre, de allí a Brushy Creek y de allí a Spring Creek. La TCEQ recibió esta solicitud el 19 de septiembre de 2024. La solicitud para el permiso está disponible para leerla y copiarla en Melanee Smith Memorial Library, 2103 Main Street, Waller, Texas, antes de la fecha de publicación de este aviso en el periódico. La solicitud (cualquier actualización y aviso inclusive) está disponible electrónicamente en la siguiente página web: https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications. Este enlace a un mapa electrónico de la ubicación general del sitio o de la instalación es proporcionado como una cortesía y no es parte de la solicitud o del aviso. Para la ubicación exacta, consulte la solicitud. https://gisweb.tceq.texas.gov/LocationMapper/?marker=-95.81027,30.135833&level=18

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

COMENTARIO PUBLICO / REUNION PUBLICA. Usted puede presentar comentarios públicos o pedir una reunión pública sobre esta solicitud. El propósito de una reunión pública es dar la oportunidad de presentar comentarios o

hacer preguntas acerca de la solicitud. La TCEQ realiza una reunión pública si el Director Ejecutivo determina que hay un grado de interés público suficiente en la solicitud o si un legislador local lo pide. Una reunión pública no es una audiencia administrativa de lo contencioso.

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

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

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

limitado a cuestiones de hecho en disputa o cuestiones mixtas de hecho y de derecho relacionadas a intereses pertinentes y materiales de calidad del agua que se hayan presentado durante el período de comentarios.

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

CONTACTOS E INFORMACIÓN 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. 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.

También se puede obtener información adicional del East Waller County Management District la dirección indicada arriba o llamando al Sr. Ali Safari, Ingeniero de Diseño Senior, R.G. Miller| DCCM al 281-921-8765.

Fecha de emisión 8 de noviembre de 2024

RG Miller | DCCM

September 19, 2024 Via: Mail

Executive Director
Application Review and Processing Team (MC 148)
Texas Commission on Environmental Quality
12100 Park 35 Circle
Austin, Texas 78753

Re: New Discharge Permit Application
Acorn Ranch Wastewater Treatment Plant
East Waller County Management District
Project No. 5135.600

To Whom It May Concern:

Please find enclosed one (1) original and two (2) copies of the New Permit Application for East Waller County Management District.

The permit application fee of $550.00 was paid online.

Should you have any questions or require additional information, please contact me at 713-461-9600.

Regards,

R.G. Miller Engineers

Ali Safari
Senior Project Engineer
asafari@dccm.com

Administrative Report 1.0

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the application.

APPLICANT NAME: East Waller County Management District

PERMIT NUMBER (If new, leave blank): WQ00 Click to enter text.

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

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

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 ☐	$315.00 ☐
≥0.05 but <0.10 MGD	$550.00 ☒	$515.00 ☐
≥0.10 but <0.25 MGD	$850.00 ☐	$815.00 ☐
≥0.25 but <0.50 MGD	$1,250.00 ☐	$1,215.00 ☐
≥0.50 but <1.0 MGD	$1,650.00 ☐	$1,615.00 ☐
≥1.0 MGD	$2,050.00 ☐	$2,015.00 ☐

Minor Amendment (for any flow) $150.00 ☐

Payment Information:

Mailed Check/Money Order Number:

Check/Money Order Amount: Click to enter text.

Name Printed on Check: Click to enter text.

EPAY Voucher Number: 582EA000620493

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: Click to enter text.

f. For existing permits:

Permit Number: WQ00 Click to enter text.

EPA I.D. (TPDES only): TX Click to enter text.

Expiration Date: Click to enter text.

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?

East Waller County Management District

(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: CN606207140

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: Ms. Last Name, First Name: Filfil, Sophia

Title: President Credential: Click to enter text.

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

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

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: Click to enter text.

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

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

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

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

C. Core Data Form

Complete the Core Data Form for each customer and include as an attachment. If the customer type selected on the Core Data Form is **Individual**, complete **Attachment 1** of Administrative Report 1.0. Exhibit 2

Section 4. Application Contact Information (Instructions Page 27)

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

A. Prefix: Mr. Last Name, First Name: Safari, Ali

Title: Senior Design Engineer Credential: Click to enter text.

Organization Name: R.G. Miller | DCCM

Mailing Address: 1080 Eldridge Parkway, Suite 600 City, State, Zip Code: Houston, Texas, 77077

Phone No.: (281)921-8765 E-mail Address: asafari@dccm.com

Check one or both: ☐ Administrative Contact ☒ Technical Contact

B. Prefix: Ms. Last Name, First Name: Tran, Janessa

Title: Project Engineer Credential: Click to enter text.

Organization Name: R.G. Miller | DCCM

Mailing Address: 1080 Eldridge Parkway, Suite 600 City, State, Zip Code: Houston, Texas, 77077

Phone No.: (713) 869-3433 E-mail Address: jtran@dccm.com

Check one or both: ☒ Administrative Contact ☐ Technical Contact

Section 5. Permit Contact Information (Instructions Page 27)

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

A. Prefix: Mr. Last Name, First Name: Safari, Ali

Title: Senior Design Engineer Credential: Click to enter text.

Organization Name: R.G. Miller | DCCM

Mailing Address: 1080 Eldridge Parkway, Suite 600 City, State, Zip Code: Houston, Texas, 77077

Phone No.: (281)921-8765 E-mail Address: asafari@dccm.com

B. Prefix: Mr. Last Name, First Name: Martin, Ross

Title: Attorney Credential: Click to enter text.

Organization Name: Winstead PC

Mailing Address: 600 W. 5th Street, Suite 900 City, State, Zip Code: Austin, Texas, 78701

Phone No.: (512)370-2931 E-mail Address: rmartin@winstead.com

Section 6. Billing Contact Information (Instructions Page 27)

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

Prefix: Ms. Last Name, First Name: Filfil, Sophia

Title: President Credential: Click to enter text.

Organization Name: RYYAN WATER LP, LLC

Mailing Address: 16225 Park Ten Place, Ste 700 City, State, Zip Code: Houston, Texas 77084

Phone No.: (713) 398-7927 E-mail Address: sophiafilfil@gmail.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: Ms. Last Name, First Name: Dana Sharbonno

Title: Client Manager Credential: Click to enter text.

Organization Name: Municipal District Services

Mailing Address: 406 W. Grand Parkway S. Suite 260 City, State, Zip Code: Katy, TX 77494

Phone No.: (281) 290-3176 E-mail Address: dsharbonno@mdswater.com

Section 8. Public Notice Information (Instructions Page 27)

A. Individual Publishing the Notices

Prefix: Ms. Last Name, First Name: Tran, Janessa

Title: Project Engineer Credential: Click to enter text.

Organization Name: R.G. Miller | DCCM

Mailing Address: 1080 Eldridge Parkway, Suite 600 City, State, Zip Code: Houston, TX 77077

Phone No.: (713) 461-9600 E-mail Address: jtran@dccm.com

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

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

☒ E-mail Address

☐ Fax

☐ Regular Mail

C. Contact permit to be listed in the Notices

Prefix: Mr. Last Name, First Name: Safari, Ali

Title: Senior Design Engineer Credential: Click to enter text.

Organization Name: R.G. Miller | DCCM

Mailing Address: 1080 Eldridge Parkway, Suite 600 City, State, Zip Code: Houston, TX 77077

Phone No.: (281)921-8765 E-mail Address: asafari@dccm.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: Melanee Smith Memorial Library

Location within the building: Click to enter text.

Physical Address of Building: 1018 Saunders St

City: Waller County: Waller

Contact (Last Name, First Name): Click to enter text.

Phone No.: (936) 372-3961 Ext.: Click to enter text.

E. Bilingual Notice Requirements

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

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

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

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

   ☒ Yes ☐ No

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

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

   ☒ Yes ☐ No

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

   ☐ Yes ☒ No

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

   ☐ Yes ☒ No

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

F. Plain Language Summary Template

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

Attachment: Exhibit 17

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: Exhibit 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** Click to enter text.

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):

Acorn Ranch WWTP

C. Owner of treatment facility: East Waller County Management District

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

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

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

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

Organization Name: RYYAN Water LP, LLC

Mailing Address: 16225 Park Ten Place, Ste 700 City, State, Zip Code: Houston, Texas 77084

Phone No.: (713) 398-7927 E-mail Address: sophiafilfil@gmail.com

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

Attachment: Click to enter text.

E. Owner of effluent disposal site:

Prefix: N/A Last Name, First Name: Click to enter text.

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

Organization Name: Click to enter text.

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

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

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

Attachment: Click to enter text.

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

Prefix: N/A Last Name, First Name: Click to enter text.

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

Organization Name: Click to enter text.

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

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

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

Attachment: Click to enter text.

Section 10. TPDES Discharge Information (Instructions Page 31)

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

☐ Yes ☒ No

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

The Acorn Ranch WWTP is located 300 ft West and 600 ft North of the intersection of Lakeside Drive and Robin Hood Dr.

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:

The District will discharge wastewater into an unnamed creek; thence to Brushy Creek; thence to Spring Creek in Segment No. 1008_02 of the San Jacinto River Basin.

City nearest the outfall(s): Hockley

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

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

☐ Yes ☒ No

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

☐ Authorization granted ☐ Authorization pending

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

Attachment: Click to enter text.

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

Section 11. TLAP Disposal Information (Instructions Page 32)

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

☐ Yes ☐ No

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

N/A

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

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

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

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.

Click to enter text.

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

☐ Yes ☒ No

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

D. Do you owe any fees to the TCEQ?

☐ Yes ☒ No

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

Account number: Click to enter text.

Amount past due: Click to enter text.

E. Do you owe any penalties to the TCEQ?

☐ Yes ☒ No

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

Enforcement order number: Click to enter text.

Amount past due: Click to enter text.

Section 13. Attachments (Instructions Page 33)

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

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

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

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

☐ Attachment 1 for Individuals as co-applicants

☐ Other Attachments. Please specify: Click to enter text.

Section 14. Signature Page (Instructions Page 34)

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

Permit Number: New

Applicant: East Waller County Management District

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): Sophia Filfil

Signatory title: President

Signature: _____ Date: 8-6-2024

(Use blue ink)

Subscribed and Sworn to before me by the said President

on this 6th day of August, 20 24.

My commission expires on the 21st day of July, 20 27.

Notary Public

(SEAL)

KATIE LEE ZONGHETTI
NOTARY PUBLIC
STATE OF TEXAS
ID 13446767-3
EXP. 07-21-2027

Harris

County, Texas

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: Regrid - Waller

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

☐ Yes ☒ No

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

Click to enter text.

Section 2. Original Photographs (Instructions Page 38)

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

☒ At least one original photograph of the new or expanded treatment unit location

☒ At least two photographs of the existing/proposed point of discharge and as much area downstream (photo 1) and upstream (photo 2) as can be captured. If the discharge is to an open water body (e.g., lake, bay), the point of discharge should be in the right or left edge of each photograph showing the open water and with as much area on each respective side of the discharge as can be captured.

☐ At least one photograph of the existing/proposed effluent disposal site

☒ A plot plan or map showing the location and direction of each photograph

Section 3. Buffer Zone Map (Instructions Page 38)

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

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

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

☐ Ownership

☐ Restrictive easement

☐ Nuisance odor control

☒ Variance

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

☒ Yes ☐ No

DOMESTIC WASTEWATER PERMIT APPLICATION

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: Exhibit 8

ATTACHMENT 1

INDIVIDUAL INFORMATION

Section 1. Individual Information (Instructions Page 41)

Complete this attachment if the facility applicant or co-applicant is an individual. Make additional copies of this attachment if both are individuals.

Prefix (Mr., Ms., Miss): N/A

Full legal name (Last Name, First Name, Middle Initial): Click to enter text.

Driver's License or State Identification Number: Click to enter text.

Date of Birth: Click to enter text.

Mailing Address: Click to enter text.

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

Phone Number: Click to enter text. Fax Number: Click to enter text.

E-mail Address: Click to enter text.

CN: Click to enter text.

For Commission Use Only:
Customer Number:
Regulated Entity Number:
Permit Number:

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

Technical Report 1.0

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION TECHNICAL REPORT 1.0

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

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

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

A. Existing/Interim I Phase

Design Flow (MGD): 0.07

2-Hr Peak Flow (MGD): 0.28

Estimated construction start date: February 2025

Estimated waste disposal start date: July 2026

B. Interim II Phase

Design Flow (MGD): N/A

2-Hr Peak Flow (MGD): N/A

Estimated construction start date: N/A

Estimated waste disposal start date: N/A

C. Final Phase

Design Flow (MGD): N/A

2-Hr Peak Flow (MGD): N/A

Estimated construction start date: N/A

Estimated waste disposal start date: N/A

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**.

East Waller County Management District proposes to operate Acorn Ranch WWTP, a complete-mix activated sludge process. The flow process includes pumping the raw wastewater from the influent lift station through a manual bar screen. From the screens, the wastewater flows through the aeration basins and into the final clarifier for settling. The clarified effluent flows into the clarifier launder and then into the chlorine contact basin for disinfection via chlorine. After disinfection, the clarified effluent flows over the outfall weir for flow measurement before discharge into an unnamed creek. The settled solids from the clarifier are pumped back to the aeration basin (as needed) and to the sludge digester. The sludge from the digester is then periodically hauled offsite by a licensed hauler for further processing and disposal.

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 Exhibit 9		

C. Process Flow Diagram

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

Attachment: Exhibit 10

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

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

- Latitude: 30° 08' 09.3" N
- Longitude: 95° 48' 37.5"W

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

- Latitude: N/A
- Longitude: Click to enter text.

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

- The boundaries of the treatment facility;
- The boundaries of the area served by the treatment facility;
- If land disposal of effluent, the boundaries of the disposal site and all storage/holding ponds; and

- If sludge disposal is authorized in the permit, the boundaries of the land application or disposal site.

Attachment: Exhibit 11

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

Acorn Ranch Subdivision within East Waller County Management District with 189 Equivalent Single Family Connections.

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
A**corn Ranch** Collection System	Waller County	**Privately Owned**	**662**
		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**.

Click to enter text.

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.

Click to enter text.

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: Click to enter text.

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

Click to enter text.

B. Buffer zones

Have the buffer zone requirements been met?

☐ Yes ☒ No

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

See Exhibit 7

C. Other actions required by the current permit

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

☐ Yes ☒ No

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

Click to enter text.

D. Grit and grease treatment

1. Acceptance of grit and grease waste

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

☐ Yes ☒ No

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

2. Grit and grease processing

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

Click to enter text.

3. Grit disposal

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

☐ Yes ☐ No

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

Describe the method of grit disposal.

Click to enter text.

4. Grease and decanted liquid disposal

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

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

Click to enter text.

E. Stormwater management

1. Applicability

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

☐ Yes ☒ No

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

☐ Yes ☒ No

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

2. MSGP coverage

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

☐ Yes ☐ No

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

TXR05 Click to enter text. or TXRNE Click to enter text.

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

☐ Yes ☐ No

3. *Conditional exclusion*

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

☐ Yes ☐ No

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

Click to enter text.

4. *Existing coverage in individual permit*

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

☐ Yes ☐ No

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

Click to enter text.

5. *Zero stormwater discharge*

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

☐ Yes ☐ No

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

Click to enter text.

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

6. *Request for coverage in individual permit*

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

☐ Yes ☐ No

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

Click to enter text.

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

F. Discharges to the Lake Houston Watershed

Does the facility discharge in the Lake Houston watershed?

☐ Yes ☒ No

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

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

1. Acceptance of sludge from other WWTPs

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

☐ Yes ☒ No

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

In addition, provide the date the plant started or is anticipated to start accepting sludge, an estimate of monthly sludge acceptance (gallons or millions of gallons), an estimate of the BOD_5 concentration of the sludge, and the design BOD_5 concentration of the influent from the collection system. Also note if this information has or has not changed since the last permit action.

Click to enter text.

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

2. Acceptance of septic waste

Is the facility accepting or will it accept septic waste?

☐ Yes ☒ No

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

☐ Yes ☐ No

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

☐ Yes ☐ No

If yes to any of the above, provide the date the plant started or is anticipated to start accepting septic waste, an estimate of monthly septic waste acceptance (gallons or millions of gallons), an estimate of the BOD_5 concentration of the septic waste, and the design BOD_5 concentration of the influent from the collection system. Also note if this information has or has not changed since the last permit action.

Click to enter text.

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

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

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

☐ Yes ☒ No

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

Click to enter text.

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

Is the facility in operation?

☐ Yes ☒ No

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

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

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

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

Pollutant	Average Conc.	Max Conc.	No. of Samples	Sample Type	Sample Date/Time
$CBOD_5$, mg/l					
Total Suspended Solids, mg/l					
Ammonia Nitrogen, mg/l					
Nitrate Nitrogen, mg/l					
Total Kjeldahl Nitrogen, mg/l					
Sulfate, mg/l					
Chloride, mg/l					
Total Phosphorus, mg/l					
pH, standard units					
Dissolved Oxygen*, mg/l					
Chlorine Residual, mg/l					
E.coli (CFU/100ml) freshwater					
Entercocci (CFU/100ml) saltwater					
Total Dissolved Solids, mg/l					
Electrical Conductivity, µmohs/cm, †					
Oil & Grease, mg/l					
Alkalinity ($CaCO_3$)*, mg/l					

*TPDES permits only
†TLAP permits only

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

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

Section 8. Facility Operator (Instructions Page 50)

Facility Operator Name: N/A

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

Facility Operator's License Number: Click to enter text.

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

A. WWTP's Biosolids Management Facility Type

Check all that apply. See instructions for guidance

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

B. WWTP's Biosolids Treatment Process

Check all that apply. See instructions for guidance.

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

☒ Other Treatment Process: Pump & Hauler

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	Sludge Management Plan	Choose an item.	Choose an item.
Choose an item.	Choose an item.	Choose an item.		Choose an item.	Choose an item.
Choose an item.	Choose an item.	Choose an item.		Choose an item.	Choose an item.

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

D. Disposal site

Disposal site name: N/A

TCEQ permit or registration number: Click to enter text.

County where disposal site is located: Click to enter text.

E. Transportation method

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

Name of the hauler: N/A

Hauler registration number: Click to enter text.

Sludge is transported as a:

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

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

A. Beneficial use authorization

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

☐ Yes ☒ No

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

☐ Yes ☐ No

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

☐ Yes ☐ No

B. Sludge processing authorization

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

Sludge Composting	☐ Yes	☒ No
Marketing and Distribution of sludge	☐ Yes	☒ No
Sludge Surface Disposal or Sludge Monofill	☐ Yes	☒ No
Temporary storage in sludge lagoons	☐ Yes	☒ No

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

☐ Yes ☐ No

Section 11. Sewage Sludge Lagoons (Instructions Page 53)

Does this facility include sewage sludge lagoons?

☐ Yes ☒ No

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

A. Location information

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

- Original General Highway (County) Map:

  Attachment: Click to enter text.
- USDA Natural Resources Conservation Service Soil Map:

  Attachment: Click to enter text.
- Federal Emergency Management Map:

  Attachment: Click to enter text.
- Site map:

  Attachment: Click to enter text.

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

☐ Overlap a designated 100-year frequency flood plain

☐ Soils with flooding classification

☐ Overlap an unstable area

☐ Wetlands

☐ Located less than 60 meters from a fault

☐ None of the above

Attachment: Click to enter text.

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

Click to enter text.

B. Temporary storage information

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

Nitrate Nitrogen, mg/kg: Click to enter text.

Total Kjeldahl Nitrogen, mg/kg: Click to enter text.

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

Phosphorus, mg/kg: Click to enter text.

Potassium, mg/kg: Click to enter text.

pH, standard units: Click to enter text.

Ammonia Nitrogen mg/kg: Click to enter text.

Arsenic: Click to enter text.

Cadmium: Click to enter text.

Chromium: Click to enter text.

Copper: Click to enter text.

Lead: Click to enter text.

Mercury: Click to enter text.

Molybdenum: Click to enter text.

Nickel: Click to enter text.

Selenium: Click to enter text.

Zinc: Click to enter text.

Total PCBs: Click to enter text.

Provide the following information:

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

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

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

C. Liner information

Does the active/proposed sludge lagoon(s) have a liner with a maximum hydraulic conductivity of $1x10^{-7}$ cm/sec?

☐ Yes ☐ No

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

Click to enter text.

D. Site development plan

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

Click to enter text.

Attach the following documents to the application.

- Plan view and cross-section of the sludge lagoon(s)

  Attachment: Click to enter text.
- Copy of the closure plan

  Attachment: Click to enter text.
- Copy of deed recordation for the site

  Attachment: Click to enter text.
- Size of the sludge lagoon(s) in surface acres and capacity in cubic feet and gallons

  Attachment: Click to enter text.
- Description of the method of controlling infiltration of groundwater and surface water from entering the site

  Attachment: Click to enter text.
- Procedures to prevent the occurrence of nuisance conditions

  Attachment: Click to enter text.

E. Groundwater monitoring

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

☐ Yes ☐ No

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

Attachment: Click to enter text.

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

A. Additional authorizations

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

☐ Yes ☒ No

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

Click to enter text.

B. Permittee enforcement status

Is the permittee currently under enforcement for this facility?

☐ Yes ☒ No

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

☐ Yes ☒ No

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

Click to enter text.

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

A. RCRA hazardous wastes

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

☐ Yes ☒ No

B. Remediation activity wastewater

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

☐ Yes ☒ No

C. Details about wastes received

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

Attachment: Click to enter text.

Section 14. Laboratory Accreditation (Instructions Page 56)

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

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

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

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

CERTIFICATION:

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

Printed Name: N/A

Title: Click to enter text.

Signature: _____

Date: _____

Technical Report 1.1

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.

The Acorn Ranch Wastewater Treatment Plant is being designed to serve the development of Acorn Ranch subdivision in the East Waller County Management District.

B. Regionalization of facilities

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

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

1. *Municipally incorporated areas*

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

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

☐ Yes ☐ No ☒ Not Applicable

If yes, within the city limits of: Click to enter text.

If yes, attach correspondence from the city.

Attachment: Click to enter text.

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

Attachment: Click to enter text.

2. *Utility CCN areas*

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

☐ Yes ☒ No

[1] https://www.tceq.texas.gov/permitting/wastewater/tceq-regionalization-for-wastewater

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

Attachment: Click to enter text.

3. Nearby WWTPs or collection systems

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

☒ Yes ☐ No

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

Attachment: Exhibit 12

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: Exhibit 12

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

Attachment: Click to enter text.

Section 2. Proposed Organic Loading (Instructions Page 59)

Is this facility in operation?

☐ Yes ☒ No

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

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

A. Current organic loading

Facility Design Flow (flow being requested in application): Click to enter text.

Average Influent Organic Strength or BOD_5 Concentration in mg/l: Click to enter text.

Average Influent Loading (lbs/day = total average flow X average BOD_5 conc. X 8.34): Click to enter text.

Provide the source of the average organic strength or BOD_5 concentration.

Click to enter text.

B. Proposed organic loading

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

Table 1.1(1) – Design Organic Loading

Source	Total Average Flow (MGD)	Influent BOD5 Concentration (mg/l)
Municipality		
Subdivision	0.06	300
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	0.06	
AVERAGE BOD_5 from all sources		300

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: 3.0

Total Phosphorus, mg/l: N/A

Dissolved Oxygen, mg/l: 6.0

Other: Click to enter text.

B. Interim II Phase Design Effluent Quality

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

Total Suspended Solids, mg/l: N/A

Ammonia Nitrogen, mg/l: N/A

Total Phosphorus, mg/l: N/A

Dissolved Oxygen, mg/l: N/A

Other: N/A

C. Final Phase Design Effluent Quality

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

Total Suspended Solids, mg/l: N/A

Ammonia Nitrogen, mg/l: N/A

Total Phosphorus, mg/l: N/A

Dissolved Oxygen, mg/l: N/A

Other: N/A

D. Disinfection Method

Identify the proposed method of disinfection.

☒ Chlorine: 1.0 to 4.0 mg/l after 20 minutes detention time at peak flow

Dechlorination process: Click to enter text.

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

☐ Other: Click to enter text.

Section 4. Design Calculations (Instructions Page 59)

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

Attachment: Exhibit 13

Section 5. Facility Site (Instructions Page 60)

A. 100-year floodplain

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

☒ Yes ☐ No

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

Click to enter text.

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

FEMA Flood Rate Insurance Map, Exhibit 14

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

☐ Yes ☒ No

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

☐ Yes ☐ No

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

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

B. Wind rose

Attach a wind rose: Exhibit 15

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

A. Beneficial use authorization

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

☐ Yes ☒ No

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

B. Sludge processing authorization

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

☐ Sludge Composting

☐ Marketing and Distribution of sludge

☐ Sludge Surface Disposal or Sludge Monofill

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

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

Attach a solids management plan to the application.

Attachment: Exhibit 16

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.

WORKSHEET 2.0

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 it Section 2. **If yes**, provide the following:

Owner of the drinking water supply: Click to enter text.

Distance and direction to the intake: Click to enter text.

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

Attachment: Click to enter text.

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

Does the facility discharge into tidally affected waters?

☐ Yes ☒ No

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

A. Receiving water outfall

Width of the receiving water at the outfall, in feet: Click to enter text.

B. Oyster waters

Are there oyster waters in the vicinity of the discharge?

☐ Yes ☐ No

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

Click to enter text.

C. Sea grasses

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

☐ Yes ☐ No

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

Click to enter text.

Section 3. Classified Segments (Instructions Page 64)

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

☐ Yes ☒ No

If yes, this Worksheet is complete.

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

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

Name of the immediate receiving waters: An unnamed 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: Click to enter text.

Average depth of the entire water body, in feet: Click to enter text.

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

☐ Man-made Channel or Ditch

☐ Open Bay

☐ Tidal Stream, Bayou, or Marsh

☒ Other, specify: An unnamed creek

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.

An unnamed creek; thence to Brushy Creek; thence to Spring Creek in Segment No. 1008_02 of the San Jacinto River Basin.

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.

An unnamed creek ,thence to Brushy Creek; thence to Spring Creek in Segment No. 1008_02 of the San Jacinto River Basin.

E. Normal dry weather characteristics

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

N/A

Date and time of observation: 7/31/2024 @ 2:40 p.m.

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
☐ Upstream discharges
☐ Septic tanks
☒ Urban runoff
☐ Agricultural runoff
☐ Other(s), specify: Click to enter text.

B. Waterbody uses

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

- ☐ Livestock watering
- ☐ Irrigation withdrawal
- ☐ Fishing
- ☐ Domestic water supply
- ☐ Park activities
- ☐ Contact recreation
- ☐ Non-contact recreation
- ☐ Navigation
- ☐ Industrial water supply
- ☐ Other(s), specify: N/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

WORKSHEET 2.1

(NOT APPLICABLE)

WORKSHEET 3.0

DOMESTIC WASTEWATER PERMIT APPLICATION WORKSHEET 3.0: LAND DISPOSAL OF EFFLUENT

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

Section 1. Type of Disposal System (Instructions Page 68)

Identify the method of land disposal:

- ☐ Surface application
- ☐ Irrigation
- ☐ Drip irrigation system
- ☐ Evaporation
- ☐ Other (describe in detail): N/A
- ☐ Subsurface application
- ☐ Subsurface soils absorption
- ☐ Subsurface area drip dispersal system
- ☐ Evapotranspiration beds

NOTE: All applicants without authorization or proposing new/amended subsurface disposal MUST complete and submit Worksheet 7.0.

For existing authorizations, provide Registration Number: N/A

Section 2. Land Application Site(s) (Instructions Page 68)

In table 3.0(1), provide the requested information for the land application sites. Include the agricultural or cover crop type (wheat, cotton, alfalfa, bermuda grass, native grasses, etc.), land use (golf course, hayland, pastureland, park, row crop, etc.), irrigation area, amount of effluent applied, and whether or not the public has access to the area. Specify the amount of land area and the amount of effluent that will be allotted to each agricultural or cover crop, if more than one crop will be used.

Table 3.0(1) – Land Application Site Crops

Crop Type & Land Use	Irrigation Area (acres)	Effluent Application (GPD)	Public Access? Y/N
N/A			

Section 3. Storage and Evaporation Lagoons/Ponds (Instructions Page 68)

Table 3.0(2) – Storage and Evaporation Ponds

Pond Number	Surface Area (acres)	Storage Volume (acre-feet)	Dimensions	Liner Type
N/A				

Attach a copy of a liner certification that was prepared, signed, and sealed by a Texas licensed professional engineer for each pond.

Attachment: Click to enter text.

Section 4. Flood and Runoff Protection (Instructions Page 68)

Is the land application site within the 100-year frequency flood level?

☐ Yes ☒ No

If yes, describe how the site will be protected from inundation.

Click to enter text.

Provide the source used to determine the 100-year frequency flood level:

Click to enter text.

Provide a description of tailwater controls and rainfall run-on controls used for the land application site.

Click to enter text.

Section 5. Annual Cropping Plan (Instructions Page 68)

Attach an Annual Cropping Plan which includes a discussion of each of the following items. If not applicable, provide a detailed explanation indicating why. **Attachment**: N/A

- Soils map with crops
- Cool and warm season plant species
- Crop yield goals
- Crop growing season
- Crop nutrient requirements
- Additional fertilizer requirements
- Minimum/maximum harvest height (for grass crops)
- Supplemental watering requirements
- Crop salt tolerances
- Harvesting method/number of harvests
- Justification for not removing existing vegetation to be irrigated

Section 6. Well and Map Information (Instructions Page 69)

Attach a USGS map with the following information shown and labeled. If not applicable, provide a detailed explanation indicating why. **Attachment**: N/A

- The boundaries of the land application site(s)
- Waste disposal or treatment facility site(s)
- On-site buildings
- Buffer zones
- Effluent storage and tailwater control facilities
- All water wells within 1-mile radius of the disposal site or property boundaries
- All springs and seeps onsite and within 500 feet of the property boundaries
- All surface waters in the state onsite and within 500 feet of the property boundaries
- All faults and sinkholes onsite and within 500 feet of the property

List and cross reference all water wells located within a half-mile radius of the disposal site or property boundaries shown on the USGS map in the following table. Attach additional pages as necessary to include all of the wells.

Table 3.0(3) – Water Well Data

Well ID	Well Use	Producing? Y/N	Open, cased, capped, or plugged?	Proposed Best Management Practice
N/A			Choose an item.	
			Choose an item.	
			Choose an item.	
			Choose an item.	
			Choose an item.	

If water quality data or well log information is available please include the information in an attachment listed by Well ID.

Attachment: N/A

Section 7. Groundwater Quality (Instructions Page 69)

Attach a Groundwater Quality Technical Report which assesses the impact of the wastewater disposal system on groundwater. This report shall include an evaluation of the water wells (including the information in the well table provided in Item 6. above), the wastewater application rate, and pond liners. Indicate by a check mark that this report is provided.

Attachment: N/A

Are groundwater monitoring wells available onsite? ☐ Yes ☐ No

Do you plan to install ground water monitoring wells or lysimeters around the land application site? ☐ Yes ☐ No

If yes, provide the proposed location of the monitoring wells or lysimeters on a site map.

Attachment: Click to enter text.

Section 8. Soil Map and Soil Analyses (Instructions Page 70)

A. Soil map

Attach a USDA Soil Survey map that shows the area to be used for effluent disposal.

Attachment: N/A

B. Soil analyses

Attach the laboratory results sheets from the soil analyses. **Note**: for renewal applications, the current annual soil analyses required by the permit are acceptable as long as the test date is less than one year prior to the submission of the application.

Attachment: N/A

List all USDA designated soil series on the proposed land application site. Attach additional pages as necessary.

Table 3.0(4) – Soil Data

Soil Series	Depth from Surface	Permeability	Available Water Capacity	Curve Number

Section 9. Effluent Monitoring Data (Instructions Page 71)

Is the facility in operation?

☐ Yes ☒ No

If no, this section is not applicable and the worksheet is complete.

If yes, provide the effluent monitoring data for the parameters regulated in the existing permit. If a parameter is not regulated in the existing permit, enter N/A.

Table 3.0(5) – Effluent Monitoring Data

Date	30 Day Avg Flow MGD	BOD5 mg/l	TSS mg/l	pH	Chlorine Residual mg/l	Acres irrigated

Provide a discussion of all persistent excursions above the permitted limits and any corrective actions taken.

Click to enter text.

WORKSHEET 3.1

DOMESTIC WASTEWATER PERMIT APPLICATION WORKSHEET 3.1: SURFACE LAND DISPOSAL OF EFFLUENT

The following is required for new and major amendment permit applications. Renewal and minor amendment permit applications may be asked for this worksheet on a case by case basis.

Section 1. Surface Disposal (Instructions Page 72)

Complete the item that applies for the method of disposal being used.

A. Irrigation

Area under irrigation, in acres: N/A

Design application frequency:

hours/day Click to enter text. **And** days/week Click to enter text.

Land grade (slope):

average percent (%): Click to enter text.

maximum percent (%): Click to enter text.

Design application rate in acre-feet/acre/year: Click to enter text.

Design total nitrogen loading rate, in lbs N/acre/year: Click to enter text.

Soil conductivity (mmhos/cm): Click to enter text.

Method of application: Click to enter text.

Attach a separate engineering report with the water balance and storage volume calculations, method of application, irrigation efficiency, and nitrogen balance.

Attachment: Click to enter text.

B. Evaporation ponds

Daily average effluent flow into ponds, in gallons per day: N/A

Attach a separate engineering report with the water balance and storage volume calculations.

Attachment: Click to enter text.

C. Evapotranspiration beds

Number of beds: N/A

Area of bed(s), in acres: Click to enter text.

Depth of bed(s), in feet: Click to enter text.

Void ratio of soil in the beds: Click to enter text.

Storage volume within the beds, in acre-feet: Click to enter text.

Attach a separate engineering report with the water balance and storage volume calculations, and a description of the lining.

Attachment: Click to enter text.

D. Overland flow

Area used for application, in acres: N/A

Slopes for application area, percent (%): Click to enter text.

Design application rate, in gpm/foot of slope width: Click to enter text.

Slope length, in feet: Click to enter text.

Design BOD_5 loading rate, in lbs BOD_5/acre/day: Click to enter text.

Design application frequency:

hours/day: Click to enter text. **And** days/week: Click to enter text.

Attach a separate engineering report with the method of application and design requirements according to *30 TAC Chapter 217*.

Attachment: Click to enter text.

Section 2. Edwards Aquifer (Instructions Page 73)

Is the facility subject to *30 TAC Chapter 213*, Edwards Aquifer Rules?

☐ Yes ☒ No

If **yes**, is the facility located on the Edwards Aquifer Recharge Zone?

☐ Yes ☐ No

If yes, attach a geological report addressing potential recharge features.

Attachment: Click to enter text.

WORKSHEET 3.2

DOMESTIC WASTEWATER PERMIT APPLICATION WORKSHEET 3.2: SURFACE LAND DISPOSAL OF EFFLUENT

The following **is required** for **new and major amendment** permit applications. Renewal and minor amendments applicants may be asked for the worksheet on a case by case basis.

NOTE: All applicants proposing new/amended subsurface disposal MUST complete and submit Worksheet 7.0. This worksheet applies to any subsurface disposal system that **does not meet** the definition of a subsurface area drip dispersal system as defined in *30 TAC Chapter 222, Subsurface Area Drip Dispersal System.*

Section 1. Subsurface Application (Instructions Page 74)

Identify the type of system:

- ☐ Conventional Gravity Drainfield, Beds, or Trenches (new systems must be less than 5,000 GPD)
- ☐ Low Pressure Dosing
- ☐ Other, specify: N/A

Application area, in acres: N/A

Area of drainfield, in square feet: Click to enter text.

Application rate, in gal/square foot/day: Click to enter text.

Depth to groundwater, in feet: Click to enter text.

Area of trench, in square feet: Click to enter text.

Dosing duration per area, in hours: Click to enter text.

Number of beds: Click to enter text.

Dosing amount per area, in inches/day: Click to enter text.

Infiltration rate, in inches/hour: Click to enter text.

Storage volume, in gallons: Click to enter text.

Area of bed(s), in square feet: Click to enter text.

Soil Classification: Click to enter text.

Attach a separate engineering report with the information required in *30 TAC § 309.20,* excluding the requirements of *§* 309.20 b(3)(A) and (B) design analysis which may be asked for on a case by case basis. Include a description of the schedule of dosing basin rotation.

Attachment: Click to enter text.

Section 2. Edwards Aquifer (Instructions Page 74)

Is the subsurface system over the Edwards Aquifer Recharge Zone as mapped by TCEQ?

☐ Yes ☒ No

Is the subsurface system over the Edwards Aquifer Transition Zone as mapped by TCEQ?

☐ Yes ☒ No

If yes to either question, the subsurface system may be prohibited by *30 TAC §213.8*. Please call the Municipal Permits Team, at 512-239-4671, to schedule a pre-application meeting.

WORKSHEET 3.3

DOMESTIC WASTEWATER PERMIT APPLICATION WORKSHEET 3.3: SUBSURFACE AREA DRIP DISPERSAL (SADDS) LAND DISPOSAL OF EFFLUENT

The following **is required** for **new and major amendment** subsurface area drip dispersal system permit applications. Renewal and minor amendments applicants may be asked for the worksheet on a case by case basis.

NOTE: All applicants proposing new/amended subsurface disposal MUST complete and submit Worksheet 7.0. This worksheet applies to any subsurface disposal system that **meets** the definition of a subsurface area drip dispersal system as defined in *30 TAC Chapter 222, Subsurface Area Drip Dispersal System.*

Section 1. Administrative Information (Instructions Page 75)

A. Provide the legal name of all corporations or other business entities managed, owned, or otherwise closely related to the owner of the treatment facility:

B. N/A Is the owner of the land where the treatment facility is located the same as the owner of the treatment facility?

☐ Yes ☐ No

If **no**, provide the legal name of all corporations or other business entities managed, owned, or otherwise closely related to the owner of the land where the treatment facility is located.

Click to enter text.

C. Owner of the subsurface area drip dispersal system: N/A

D. Is the owner of the subsurface area drip dispersal system the same as the owner of the wastewater treatment facility or the site where the wastewater treatment facility is located?

☐ Yes ☐ No

If **no**, identify the names of all corporations or other business entities managed, owned, or otherwise closely related to the entity identified in Item 1.C.

N/A

E. Owner of the land where the subsurface area drip dispersal system is located: N/A

F. Is the owner of the land where the subsurface area drip dispersal system is located the same as owner of the wastewater treatment facility, the site where the wastewater treatment facility is located, or the owner of the subsurface area drip dispersal system?

☐ Yes ☐ No

If **no**, identify the name of all corporations or other business entities managed, owned, or otherwise closely related to the entity identified in item 1.E.

N/A

Section 2. Subsurface Area Drip Dispersal System (Instructions Page

75)

A. Type of system

☐ Subsurface Drip Irrigation

☐ Surface Drip Irrigation

☐ Other, specify: N/A

B. Irrigation operations

Application area, in acres: N/A

Infiltration Rate, in inches/hour: Click to enter text.

Average slope of the application area, percent (%): Click to enter text.

Maximum slope of the application area, percent (%): Click to enter text.

Storage volume, in gallons: Click to enter text.

Major soil series: Click to enter text.

Depth to groundwater, in feet: Click to enter text.

C. Application rate

Is the facility located **west** of the boundary shown in *30 TAC § 222.83* **and** also using a vegetative cover of non-native grasses over seeded with cool season grasses during the winter months (October-March)?

☐ Yes ☐ No

If yes, then the facility may propose a hydraulic application rate not to exceed 0.1 gal/square foot/day.

Is the facility located **east** of the boundary shown in *30 TAC § 222.83* **or** in any part of the state when the vegetative cover is any crop other than non-native grasses?

☐ Yes ☐ No

If **yes**, the facility must use the formula in *30 TAC §222.83* to calculate the maximum hydraulic application rate.

Do you plan to submit an alternative method to calculate the hydraulic application rate for approval by the executive director?

☐ Yes ☐ No

Hydraulic application rate, in gal/square foot/day: Click to enter text.

Nitrogen application rate, in lbs/gal/day: Click to enter text.

D. Dosing information

Number of doses per day: N/A

Dosing duration per area, in hours: Click to enter text.

Rest period between doses, in hours: Click to enter text.

Dosing amount per area, in inches/day: Click to enter text.

Number of zones: Click to enter text.

Does the proposed subsurface drip irrigation system use tree vegetative cover as a crop?

☐ Yes ☐ No

If **yes**, provide a vegetation survey by a certified arborist. Please call the Water Quality Assessment Team at (512) 239-4671 to schedule a pre-application meeting.

Attachment: N/A

Section 3. Required Plans (Instructions Page 75)

A. Recharge feature plan

Attach a Recharge Feature Plan with all information required in *30 TAC §222.79*.

Attachment: N/A

B. Soil evaluation

Attach a Soil Evaluation with all information required in *30 TAC §222.73*.

Attachment: N/A

C. Site preparation plan

Attach a Site Preparation Plan with all information required in *30 TAC §222.75*.

Attachment: N/A

D. Soil sampling/testing

Attach soil sampling and testing that includes all information required in *30 TAC §222.157*.

Attachment: N/A

Section 4. Floodway Designation (Instructions Page 76)

A. Site location

Is the existing/proposed land application site within a designated floodway?

☐ Yes ☒ No

B. Flood map

Attach either the FEMA flood map or alternate information used to determine the floodway.

Attachment: Exhibit 14

Section 5. Surface Waters in the State (Instructions Page 76)

A. Buffer Map

Attach a map showing appropriate buffers on surface waters in the state, water wells, and springs/seeps.

Attachment: N/A

B. Buffer variance request

Do you plan to request a buffer variance from water wells or waters in the state?

☐ Yes ☒ No

If yes, then attach the additional information required in *30 TAC § 222.81(c).*

Attachment: Click to enter text.

Section 6. Edwards Aquifer (Instructions Page 76)

A. Is the SADDS located over the Edwards Aquifer Recharge Zone as mapped by TCEQ?

☐ Yes ☒ No

B. Is the SADDS located over the Edwards Aquifer Transition Zone as mapped by TCEQ?

☐ Yes ☒ No

If yes to either question, then the SADDS may be prohibited by *30 TAC §213.8*. Please call the Municipal Permits Team at 512-239-4671 to schedule a pre-application meeting.

WORKSHEET 4.0

(NOT APPLICABLE)

WORKSHEET 5.0

(NOT APPLICABLE)

WORKSHEET 6.0

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: Click to enter text.

Significant IUs – non-categorical:

Number of IUs: 0

Average Daily Flows, in MGD: Click to enter text.

Other IUs:

Number of IUs: 0

Average Daily Flows, in MGD: Click to enter text.

B. Treatment plant interference

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

☐ Yes ☒ No

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

Click to enter text.

C. Treatment plant pass through

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

☐ Yes ☒ No

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

Click to enter text.

D. Pretreatment program

Does your POTW have an approved pretreatment program?

☐ Yes ☒ No

If yes, complete Section 2 only of this Worksheet.

Is your POTW required to develop an approved pretreatment program?

☐ Yes ☒ No

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

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

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

A. Substantial modifications

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

☐ Yes ☐ No

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

Click to enter text.

B. Non-substantial modifications

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

☐ Yes ☐ No

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

Click to enter text.

C. Effluent parameters above the MAL

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

Table 6.0(1) – Parameters Above the MAL

Pollutant	Concentration	MAL	Units	Date
N/A				

D. Industrial user interruptions

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

☐ Yes ☐ No

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

Click to enter text.

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

A. General information

Company Name: N/A

SIC Code: Click to enter text.

Contact name: Click to enter text.

Address: Click to enter text.

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

Telephone number: Click to enter text.

Email address: Click to enter text.

B. Process information

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

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: Click to enter text.

Discharge Type: ☐ Continuous ☐ Batch ☐ Intermittent

E. Pretreatment standards

Is the SIU or CIU subject to technically based local limits as defined in the *i*nstructions?

☐ Yes ☐ No

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

☐ Yes ☐ No

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

Category: Subcategories: Click to enter text.

Click or tap here to enter text. Click to enter text.

Category: Click to enter text.

Subcategories: Click to enter text.

Category: Click to enter text.

Subcategories: Click to enter text.

Category: Click to enter text.

Subcategories: Click to enter text.

Category: Click to enter text.

Subcategories: Click to enter text.

F. Industrial user interruptions

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

☐ Yes ☒ No

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

Click to enter text.

WORKSHEET 7.0

(NOT APPLICABLE)

EXHIBIT 1

APPLICATION FEE

Your transaction is complete. Thank you for using TCEQ ePay.

Note: It may take up to 3 working days for this electronic payment to be processed and be reflected in the TCEQ ePay system. Print this receipt and the vouchers for your records. An email receipt has also been sent.

Transaction Information

Trace Number:	582EA000620493
Date:	08/06/2024 04:30 PM
Payment Method:	CC - Authorization 0000036494
ePay Actor:	JANESSA TRAN
Actor Email:	jtran@rgmiller.com
IP:	50.225.199.31
TCEQ Amount:	$550.00
Texas.gov Price:	$562.63*

* This service is provided by Texas.gov, the official website of Texas. The price of this service includes funds that support the ongoing operations and enhancements of Texas.gov, which is provided by a third party in partnership with the State.

Payment Contact Information

Name:	CHRISTY DUDZIAK
Company:	RGME GEN ADMIN
Address:	16340 PARK TEN PL 350, HOUSTON, TX 77084
Phone:	713-461-9600

Cart Items

Click on the voucher number to see the voucher details.

Voucher	Fee Description	AR Number	Amount
716113	WW PERMIT - FACILITY WITH FLOW >= .05 & < .10 MGD - NEW AND MAJOR AMENDMENTS		$500.00
716114	30 TAC 305.53B WQ NOTIFICATION FEE		$50.00
		TCEQ Amount:	$550.00

ePay Again | Exit ePay

Note: It may take up to 3 working days for this electronic payment to be processed and be reflected in the TCEQ ePay system. Print this receipt for your records.

EXHIBIT 2

CORE DATA FORM

TCEQ Use Only

TCEQ Core Data Form

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

SECTION I: General Information

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

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

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

2. Customer Reference Number *(if issued)*	Follow this link to search for CN or RN numbers in Central Registry**	**3. Regulated Entity Reference Number** *(if issued)*
CN 60607140		**RN**

SECTION II: Customer Information

4. General Customer Information | **5. Effective Date for Customer Information Updates** (mm/dd/yyyy)

☐ New Customer ☒ Update to Customer Information ☐ Change in Regulated Entity Ownership
☐ Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)

The Customer Name submitted here may be updated automatically based on what is current and active with the Texas Secretary of State (SOS) or Texas Comptroller of Public Accounts (CPA).

6. Customer Legal Name *(If an individual, print last name first: eg: Doe, John)* — *If new Customer, enter previous Customer below:*

East Waller County Management District

7. TX SOS/CPA Filing Number	**8. TX State Tax ID** (11 digits)	**9. Federal Tax ID** (9 digits)	**10. DUNS Number** *(if applicable)*

11. Type of Customer: ☐ Corporation ☐ Individual Partnership: ☐ General ☐ Limited

Government: ☐ City ☐ County ☐ Federal ☐ Local ☐ State ☒ Other ☐ Sole Proprietorship ☐ Other:

12. Number of Employees

☒ 0-20 ☐ 21-100 ☐ 101-250 ☐ 251-500 ☐ 501 and higher

13. Independently Owned and Operated?

☐ **Yes** ☐ **No**

14. Customer Role (Proposed or Actual) – *as it relates to the Regulated Entity listed on this form. Please check one of the following*

☐ Owner ☐ Operator ☒ Owner & Operator
☐ Occupational Licensee ☐ Responsible Party ☐ VCP/BSA Applicant ☐ Other:

15. Mailing Address:	C/O Winstead PC						
	600 W. 5th Street, Suite 900						
	City	Austin	**State**	TX	**ZIP**	78701	**ZIP + 4**

16. Country Mailing Information *(if outside USA)*	**17. E-Mail Address** *(if applicable)*
	rmartin@winstead.com

18. Telephone Number	19. Extension or Code	20. Fax Number *(if applicable)*
(713) 398-7927		( ) -

SECTION III: Regulated Entity Information

21. General Regulated Entity Information *(If 'New Regulated Entity" is selected, a new permit application is also required.)*

☒ New Regulated Entity ☐ Update to Regulated Entity Name ☐ Update to Regulated Entity Information

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

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

Acorn Ranch Wastewater Treatment Plant

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

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

25. Description to Physical Location:	The wastewater treatment facility is located 300 ft West and and 6000 ft North of the intersection of Lakeside Drive and Robin Hood Drive.

26. Nearest City	State	Nearest ZIP Code
Hockley	TX	77447

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

27. Latitude (N) In Decimal:			28. Longitude (W) In Decimal:		
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
30	8	9.3	95	48	37.5

29. Primary SIC Code (4 digits)	30. Secondary SIC Code (4 digits)	31. Primary NAICS Code (5 or 6 digits)	32. Secondary NAICS Code (5 or 6 digits)
4951			

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

To serve the Acorn Ranch subdivision

34. Mailing Address:	**C/O Winstead PC**							
	600 W. 5th Street, Suite 900							
	City	**Austin**	**State**	**TX**	**ZIP**	**78701**	**ZIP + 4**	
35. E-Mail Address:	**rmartin@winstead.com**							

36. Telephone Number	37. Extension or Code	38. Fax Number *(if applicable)*
(713) 398-7927		( ) -

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.

☐ Dam Safety	☐ Districts	☐ Edwards Aquifer	☐ Emissions Inventory Air	☐ Industrial Hazardous Waste
☐ Municipal Solid Waste	☐ New Source Review Air	☐ OSSF	☐ Petroleum Storage Tank	☐ PWS
☐ Sludge	☐ Storm Water	☐ Title V Air	☐ Tires	☐ Used Oil
☐ Voluntary Cleanup	☒ Wastewater	☐ Wastewater Agriculture	☐ Water Rights	☐ Other:

SECTION IV: Preparer Information

40. Name:	Janessa Tran	**41. Title:**	Project Engineer

42. Telephone Number	**43. Ext./Code**	**44. Fax Number**	**45. E-Mail Address**
(713 **)** 461-9600		**( )** -	jtran@dccm.com

SECTION V: Authorized Signature

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

Company:	R.G. Miller | DCCM	**Job Title:**	Project Engineer
Name *(In Print):*	Janessa Tran	**Phone:**	**(** 713 **)** 461- **9600**
Signature:	Janessa Tran	**Date:**	

EXHIBIT 3

PUBLIC INVOLVEMENT

PLAN FORM

Texas Commission on Environmental Quality

Public Involvement Plan Form for Permit and Registration Applications

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

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

Section 1. Preliminary Screening

☒ New Permit or Registration Application

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

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

Section 2. Secondary Screening

☐ Requires public notice,

☐ Considered to have significant public interest, **and**

☐ Located within any of the following geographical locations:

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

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

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

Application for new WWTP that will serve future Acorn Ranch residential subdivision in Waller County

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)

EXHIBIT 4

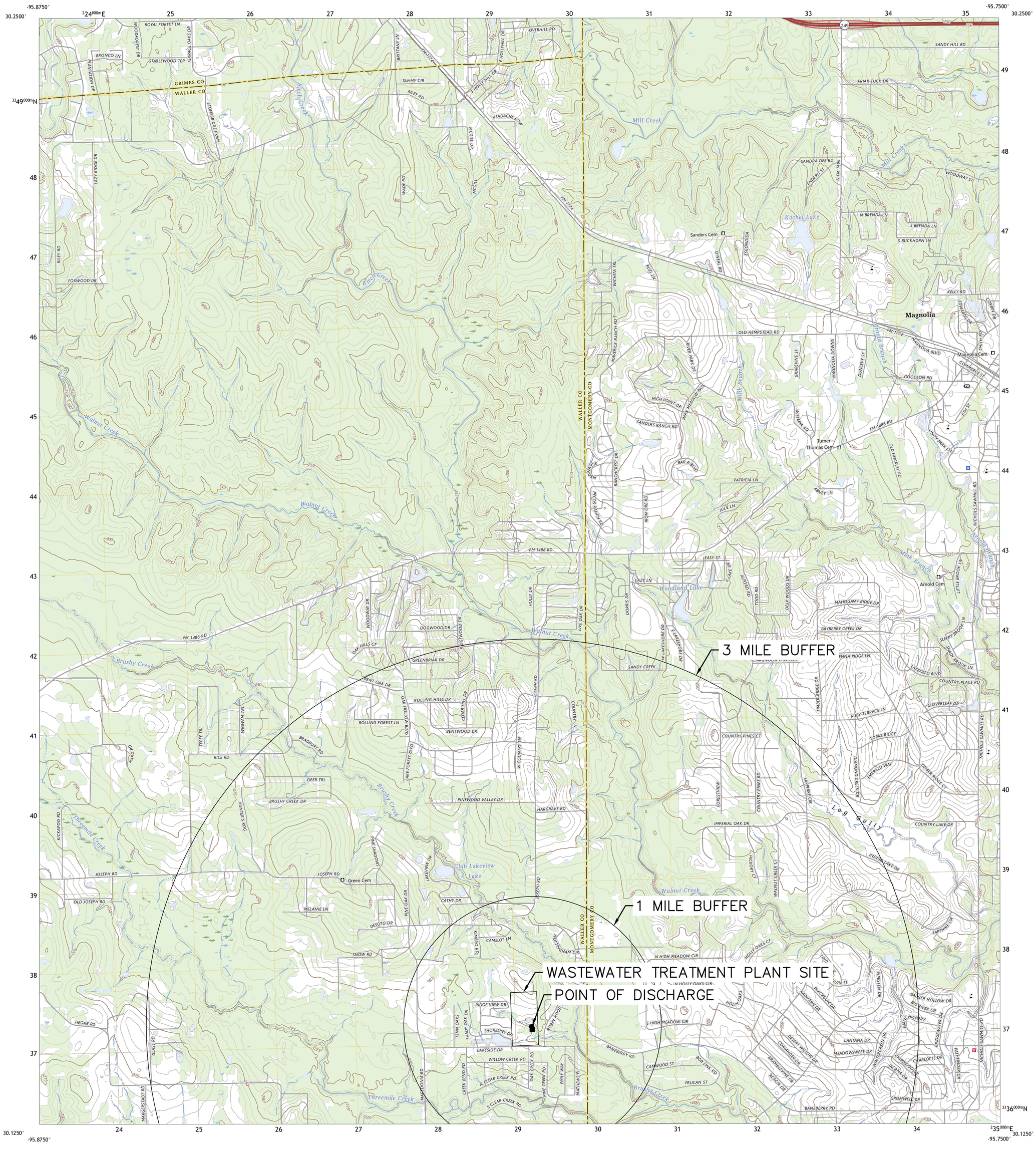
USGS TOPOGRAPHIC MAP

USGS science for a changing world

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

The National Map US Topo

MAGNOLIA WEST QUADRANGLE
TEXAS
7.5-MINUTE SERIES



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 15R

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
Roads.....U.S. Census Bureau, 2015
Names.....GNIS, 1979 - 2023
Hydrography.....National Hydrography Dataset, 2003 - 2022
Contours.....National Elevation Dataset, 2010
Boundaries.....Multiple sources; see metadata file 2021 - 2022

Wetlands.....FWS National Wetlands Inventory Not Available

MN
GN
2°13'
39 MILS
1°25'
25 MILS
UTM GRID AND 2023 MAGNETIC NORTH DECLINATION AT CENTER OF SHEET

U.S. National Grid
100,000 - m Square ID
TP
Grid Zone Designation
15R

SCALE 1:24 000

1 0.5 0 KILOMETERS 1 2
1000 500 0 METERS 1000 2000
1 0.5 0 1
MILES
1000 0 1000 2000 3000 4000 5000 6000 7000 8000 9000 10000
FEET

CONTOUR INTERVAL 5 FEET
NORTH AMERICAN VERTICAL DATUM OF 1988

This map was produced to conform with the National Geospatial Program US Topo Product Standard.

TEXAS
QUADRANGLE LOCATION

1	2	3
4		5
6	7	8

1 Stoneham
2 Plantersville
3 Keenan
4 Waller NW
5 Magnolia East
6 Waller
7 Hockley
8 Rose Hill
ADJOINING QUADRANGLES

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

NSN 7643016397146
NGA REF NO. USGSX24K27250

MAGNOLIA WEST, TX
2023

ACORN RANCH
WASTEWATER TREATMENT PLANT
DISCHARGE PERMIT APPLICATION
USGS MAP EXHIBIT A

Binkley & Barfield
DCCM

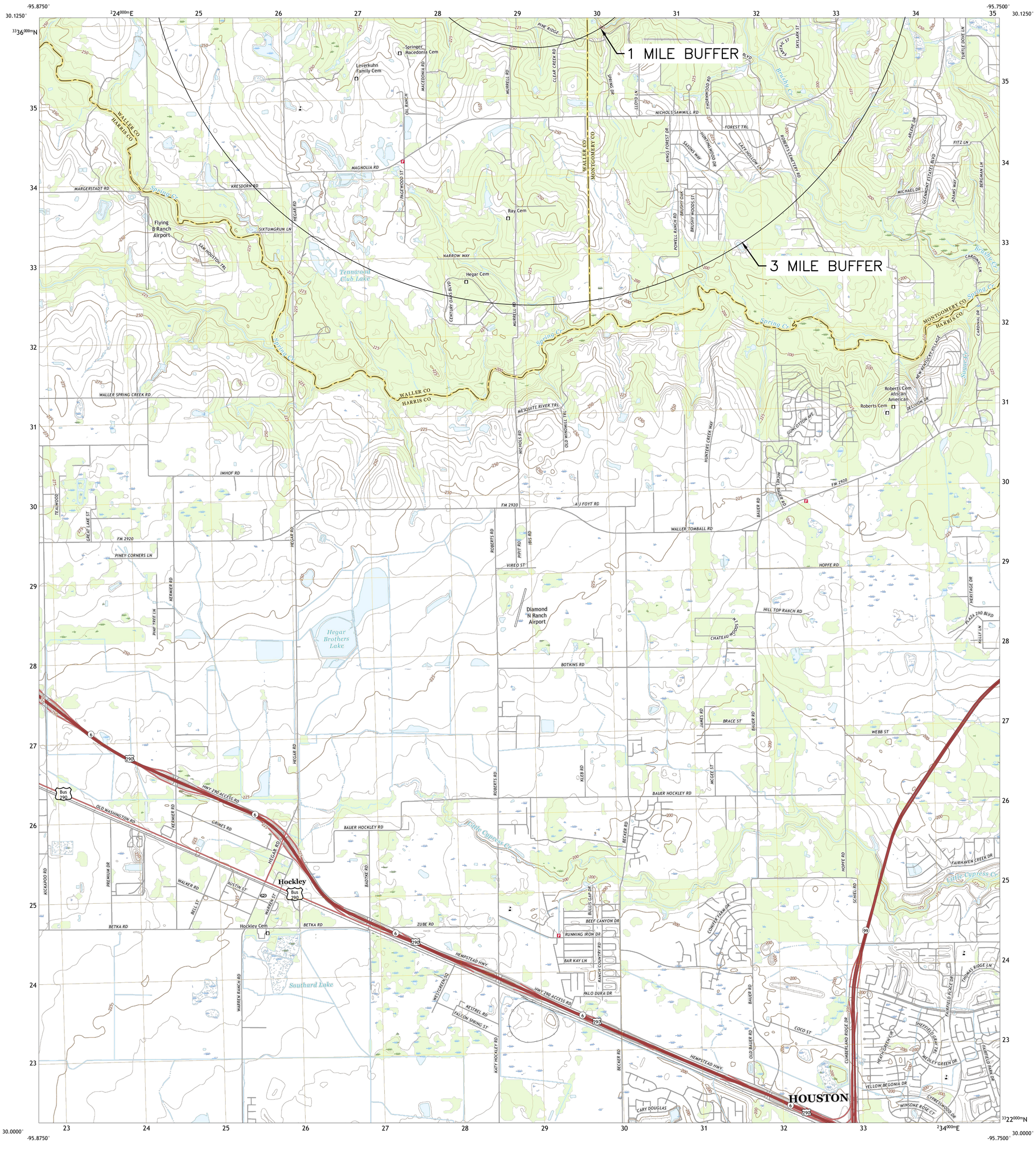
Binkley & Barfield, Inc. | TxEng F-257
1710 Seamist Dr, Houston, TX 77008
713.869.3433 | BinkleyBarfield.com

DATE: June 24
SCALE: AS NOTED

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

The National Map US Topo

HOCKLEY QUADRANGLE
TEXAS
7.5-MINUTE SERIES



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 15R

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
Roads..... U.S. Census Bureau, 2015 - 2019
Names.....GNIS, 1979 - 2022
Hydrography.....National Hydrography Dataset, 2003 - 2018
Contours.....National Elevation Dataset, 2010
Boundaries.....Multiple sources; see metadata file 2019 - 2021

Wetlands.....FWS National Wetlands Inventory Not Available

MN
GN
2°37´
47 MILS
1°25´
25 MILS
UTM GRID AND 2019 MAGNETIC NORTH
DECLINATION AT CENTER OF SHEET

U.S. National Grid
100,000 - m Square ID
TP
Grid Zone Designation
15R

SCALE 1:24 000

1 0.5 0 KILOMETERS 1 2
1000 500 0 METERS 1000 2000
1 0.5 0 1
MILES
1000 0 1000 2000 3000 4000 5000 6000 7000 8000 9000 10000
FEET

CONTOUR INTERVAL 5 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

1 Waller NW
2 Magnolia West
3 Magnolia East
4 Waller
5 Rose Hill
6 Hockley Mound
7 Warren Lake
8 Cypress
ADJOINING QUADRANGLES

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

NSN. 7643016395532
NGA REF NO. USGS X24K20612

HOCKLEY, TX
2022

ACORN RANCH
WASTEWATER TREATMENT PLANT
DISCHARGE PERMIT APPLICATION
USGS MAP EXHIBIT B

Binkley & Barfield

DCCM

Binkley & Barfield, Inc. | TxEng F-257
1710 Seamist Dr, Houston, TX 77008
713.869.3433 | BinkleyBarfield.com

DATE: June 24

SCALE: AS NOTED

EXHIBIT 5

LANDOWNER MAP & LIST

ACORN RANCH
WASTEWATER TREATMENT PLANT
DISCHARGE PERMIT APPLICATION
LANDOWNER MAP

Binkley & Barfield, Inc. | TxEng F-257
1710 Seamist Dr, Houston, TX 77008
713.869.3433 | BinkleyBarfield.com

DATE: July 24

SCALE: N.T.S.

SERIES NO.	PROPERTY ID	PROPERTY OWNER	MAILING ADDRESS	LOCATION ADDRESS
1	170681	54 Acorn Ranch LTD	340 N Sam Houston PKWY E #140	25072 Lakeside Dr, Hockley 77447-5035
2	12120	Gutierrez, Adolfo R & Angela E	25450 Macedonia Rd, Hockley, TX 77447	25451 Macedonia Rd, Hockley, TX 77447
3	12139	Dinkins Century Farm LLC	25472 Kimbro Rd Hockley, TX 77447	25472 Kimbro Rd Hockley, TX 77447
4	12135	Dinkins Century Farm LLC	25472 Kimbro Rd Hockley, TX 77447	25472 Kimbro Rd Hockley, TX 77447
5	12140	Dinkins O. Theodore Jr	PO Box 452 Brenham, TX 77834	Castle (Rear) Rear, TX 77447
6	22867	Ranger Development Co	24890 Forest Cir, Hockley, TX 77447	24890 Forest Cir, Hockley, TX 77447
7	R36230	Mary Lou Hebert Green LP	101 West Phillips Suite C Conroe TX, 77301-2670	-
8	R250370	Ole Spec LTD	14403 Stuebner Airline Rd, Houston, TX 77069-3001	24102 Baneberry Rd, Magnolia, TX 77355
9	122887	Bussel, Troy A	24594 Mathews Place Rd, Hockley, TX 77447	24594 Mathews Place Rd, Hockley, TX 77447
10				

ACORN RANCH
WASTEWATER TREATMENT PLANT
DISCHARGE PERMIT APPLICATION
LANDOWNER TABLE

Binkley & Barfield
DCCM

Binkley & Barfield, Inc. | TxEng F-257
1710 Seamist Dr, Houston, TX 77008
713.869.3433 | BinkleyBarfield.com

DATE: July 24 SCALE: N/A

EXHIBIT 6

ORIGINAL PHOTOS

DET.
3.7 AC.

DET.
6.7 AC.

W.W.T.P.
.9 AC.

POINT OF DISCHARGE

ORIGINAL PHOTO TAKEN HERE

LAKESIDE DRIVE

LAND USE SUMMARY

- SFR – 40' X 120' (55) 30%
- SFR – 45' X 120' (72) 39%
- SFR – 50' X 120' (57) 31%
- DETENTION/AMENITY (+/– 10.4 AC.)
- PARK (+/– 1.1 AC.)
- TRAIL (+/– 3,700 L.F.)

THIS EXHIBIT IS A GRAPHICAL REPRESENTATION FOR PRESENTATION PURPOSES ONLY AND SHOULD NOT BE USED FOR COMPUTATION OR CONSTRUCTION PURPOSES. FURTHER, ALL PROPERTY BOUNDARIES, EASEMENTS, DRAINAGE, FLOODPLAIN AND ENVIRONMENTAL ISSUES AND OTHER INFORMATION SHOWN IS APPROXIMATE AND SHOULD NOT BE RELIED UPON FOR ANY PURPOSE. NO WARRANTIES, EXPRESS OR IMPLIED, CONCERNING THE ACTUAL DESIGN, LOCATION, AND CHARACTER OF THE FACILITIES SHOWN ON THIS DRAWING ARE INTENDED. ALL PLANS FOR FACILITIES OR LAND USES ARE SUBJECT TO CHANGE WITHOUT NOTICE.

ACORN RANCH
SCHEMATIC PLAN

DATE: AUGUST, 2024 SCALE: 1" = 100'
TOTAL LOTS – 184

ENGINEER

r.g. miller

DCCM

R.G. Miller Engineers, Inc. | TxEng F - 487
16340 Park Ten Place, Ste 350
Houston, TX 77084
713.461.9600 | rgmiller.com

L:\4928_EAST WALLER COUNTY MANAGEMENT DISTRICT\05135.600 ACORN RANCH WWTP\CAD\DWG\ACORN RANCH_LANDPLAN_A_082024.DWG Sep. 3, 2024-9:36 AM ALI SAFARI


WWTP Location


Point of Discharge
(Upstream)


Point of Discharge
(Downsteam)

EXHIBIT 7

ODOR ABATEMENT REPORT

ENGINEERING REPORT

FOR

ACORN RANCH WASTEWATER TREATMENT PLANT

TO SERVE

EAST WALLER COUNTY MANAGEMENT DISTRICT

WITHIN

WALLER COUNTY, TEXAS

September 2024

PREPARED BY:

r.g. miller | DCCM

16340 Park Ten Place • Suite 350 • Houston, Texas • 77084 • 713.461.9600 • Fax 713.461.8455

ACORN RANCH WASTEWATER TREATMENT PLANT
TO SERVE
EAST WALLER COUNTY MANAGEMENT DISTRICT
WITHIN
WALLER COUNTY, TEXAS

TABLE OF CONTENTS

EXHIBITS

APPENDICES

I. Purpose

This report describes the proposed odor abatement system to the Acorn Ranch wastewater treatment plant (WWTP) in accordance with Chapter 309, subchapter 309.13.e of Texas Administrative Code (TAC).

II. Site Location and Description

A. Background Information

The Acorn Ranch Property consists of a 55-acre area, located north of Lakeside Drive, west of Robin Hood drive and 3600 feet east of Macedonia Road within Waller County, Texas. See Exhibit No. 1.

The existing property is currently a ranch. The proposed development plan consists of single-family residential development (+/- 184 lots), parks (+/- 1.2 acres), trails (+/- 4000 LF), detention & amenities (+/- 12 acres) and wastewater treatment plant (+/- .9 acres). A general plan for the overall development is attached, see Exhibit No. 2.

Wastewater treatment will be provided by an on-site wastewater treatment plant that will be owned and operated by the East Waller County Management District. The district is currently working on the design of the WWTP. An effluent discharge permit is also being prepared for submittal to the Texas Commission on Environmental Quality, therefore no permit number information is currently available. Water distribution will be provided by G & W Water Services.

B. Surrounding Land Use

The existing property is currently a ranch. The land to the east of the site is residential property. The land to the south of the site is the exiting unnamed creek which will be discharge point for the WWTP. The land to the north and west of the WWTP site is currently undeveloped. The future surrounding land near the WWTP site predominantly will be residential, see Exhibit No. 2.

C. FLOOD Hazard Analysis

The WWTP site is located within Unshaded Zone X defined as “area determined to be outside the 0.2% annual chance floodplain” as depicted in FEMA Flood Insurance Rate Map Number 48473C0100E, dated February 18, 2009. All proposed structures and equipment will be protected from or located outside of the FEMA 1% Annual Chance Flood Plain. The FIRM drawing is included as Exhibit No. 4. All foundations are above the 100-yr floodplain elevation.

D. Climatological Conditions

The prevailing wind direction in Houston is south-southeasterly, with an average speed of 7.4 miles per hour, see wind rose in Exhibit No. 5. Therefore, WWTP should be oriented such that sources of potential odor release such as headwork do not adversely affect adjacent areas.

III. By-Passing

The proposed facilities will be equipped with design features to prevent overflow or bypassing of untreated wastewater. All proposed facilities will utilize a proposed backup generator with an automatic transfer switch to provide power to essential equipment in the event of main power failure to prevent overflows. The facility will also utilize an automatic telephone dialer that notifies the operator of pump failures, chlorine leaks and main power failures.

IV. Design Parameters and Conditions

The proposed facility will include an on-site lift station with submersible pumps, one (1) manual bar screen, one (1) aeration basins with coarse bubble diffusers, one (1) secondary clarifier, one (1) chlorine contact basin, one (1) aerobic digester, two (2) blowers and one (1) Carbitrol Odor Control System. The project also includes local control panels, all piping, valves, fittings, conduit, wire and other miscellaneous items necessary for a fully functioning plant.

Raw sewage will be pumped from the on-site lift station to the proposed covered manual bar screen for screening. The wastewater will flow to the aeration basins where it will mix with return activated sludge (RAS) to create a mixed liquor. From aeration basins, the

mixed liquor will flow to the secondary clarifier for settling. After clarification, the treated effluent will flow to the chlorine contact basin for disinfection and the activated sludge will be returned to the proposed aeration basins as RAS or pumped to the proposed digesters as waste activated sludge (WAS) for further treatment before being hauled off. From the chlorine contact basin, the effluent will flow over a flow measurement weir then on to the outfall.

Digested sludge, grit, and screenings will be hauled to an off-site permitted sanitary landfill for final disposal.

A. Influent Characteristics and Quantity

The design flow for the WWTP upon completion of the proposed development will be 60000 gpd with a 2-hour peak flow of 240000 gpd. This capacity would be enough to serve up to 200 equivalent single-family connections (ESFC) at 300 gpd/ESFC. The influent characteristics are listed in the table below.

Parameter	Influent Concentration (mg/L)
$CBOD_5$	300
TSS	300
NH_3-N	45

B. Wastewater Treatment Plant Service Aera

See below table for proposed average daily and 2-hr peak daily flow. See Exhibit No. 2 for the service area.

Total ESFC	Average daily Flow (GPD)	2-hr. Peak Flow (GPD)
+/- 200	60,000	240,000
Flow based on 300 GPD/ESFC		

C. Design Criteria

The plant will operate in a complete mix activated sludge mode. The proposed facilities are designed in accordance with TCEQ Chapter 217 of the TAC, which are summarized in the

Table below. See preliminary WWTP sizing in Appendix No. 1.

TCEQ Criteria	
Aeration Basin	
Maximum Organic Loading rate	35 lb/BOD_5/day/1000 ft^3
Air Requirement	2.12 lb. O_2/lb.BOD_5
Clarifier	
Weir Loading Rate	≤ 20,000 gpd/ft.weir length at peak flow
Surface Loading Rate at Peak Flow	≤1,200 gal/ft2/day
Surface Loading Rate at Average Daily flow	≤600 gal/ft2/day
Detention Time 2hr. at Peak flow	≥1.8 hours
Aerobic Digester	
Minimum volume for Organic Loading	20 ft_3/lb. BOD_5/day
Air Requirement	30 CFM air per 1000 ft^3
Chlorine Contact Chamber	
Minimum hydraulic Detention Time	20 Minutes at Peak Flow
Air Requirement	20 CFM air per 1000 ft^3

D. Plant Outfall

The treated effluent from the wastewater treatment will be discharged to an unnamed creek thence to Brushy Creek.

E. NON-Potable Water System

The proposed non potable water system will consist of 2 pumps, a pressure tank and piping to a hose bibb near the lift station.

V. Proposed Odor Abatement System

According to TAC, chapter 309, subchapter 309.13.e one of the following alternatives must be met as a compliance requirement to abate and control a nuisance of odor prior to construction of a new wastewater treatment plant unit, or substantial change in the function or use of an existing wastewater treatment unit.

1- Wastewater treatment plant units may not be located closer than 150 feet to the nearest property line.
2- Submit a nuisance odor prevention request for approval in the form of an engineering report, sealed by a licensed Texas professional engineer in support of

the request. At a minimum, the engineering report shall address existing climatological conditions such as wind velocity and atmospheric stability, surrounding land use which exists or which is anticipated in the future, wastewater characteristics in affected units pertaining to the area of the buffer zone, potential odor generating units, and proposed solutions to prevent nuisance conditions at the edge of the buffer zone and beyond.

3- submit sufficient evidence of legal restrictions prohibiting residential structures within the part of the buffer zone not owned by the applicant.

Due to limited space in the land plan, the required 150-foot buffer zone cannot be met. Therefore, R. G. Miller as design consultant suggests to install an odor control system on the covered bar screen which is main source to produce odor. If TCEQ received no odor complaints, no further modifications would be required.

In order to reduce any odors that may be produced by the unit, we propose installing a Carbon Odor Control system. The carbon odor control system is designed to treat hydrogen sulfide (H_2S) and other odorous compounds found in municipal wastewater collection systems and treatment processes. The carbon adsorber odor control system consists of an exhaust fan, damper, interconnecting ductwork, vessel with activated carbon and a control panel. The exhaust fan operates continuously and pulls foul air from the process area through the foul air collection ductwork into the carbon adsorber odor control system for treatment prior to release to the atmosphere. A volume control damper is placed at the system inlet to allow regulation of airflow through the carbon adsorber.

After entering the vessel, the foul air flows through a densely packed bed of activated carbon. The bed consists of 3 ft. of high H_2S capacity activated carbon media. The odorous compounds are removed from the airstream through an adsorption process where they adhere to the activated carbon media pores. A subsequent chemisorption process transforms H_2S into sulfur. The adsorption process continues until the activated carbon pores are depleted. The cleaned air continues through the vessel and is discharged through the vessel outlet stack. A control panel ensures proper control and operation of the system.

The carbon adsorber odor control system is equipped with a grounding rod that is used to remove any static charge that might build up in the carbon media. A differential pressure gauge is used to provide an indication of changes in pressure through the carbon media. Carbon sample valves allow the removal of representative carbon samples from the carbon bed. An outlet air sample valve allows extraction of air samples. See Appendix No. 2 for more information.

VI. Maximum permissible sound levels.

Maximum permissible sound levels for residential property are 65 dB(A) during daytime hours (daytime hours mean the hours between 8 a.m. to 10 p.m.) and 58 dB(A) during nighttime hours (nighttime hours means the hours between 10:01 p.m. to 7:59 a.m.) per the city of Houston ordinance, chapter 30. Therefore, all blowers and backup generator must have noise attenuation enclosures. The noise attenuation must remain attached to the equipment at all times to reduce noise, unless the noise attenuation is removed for maintenance. If complaints were received in the future a sound reduction structure would be required. In order to meet maximum permissible sound level, sound attenuation enclosure needs to have at least below specification.

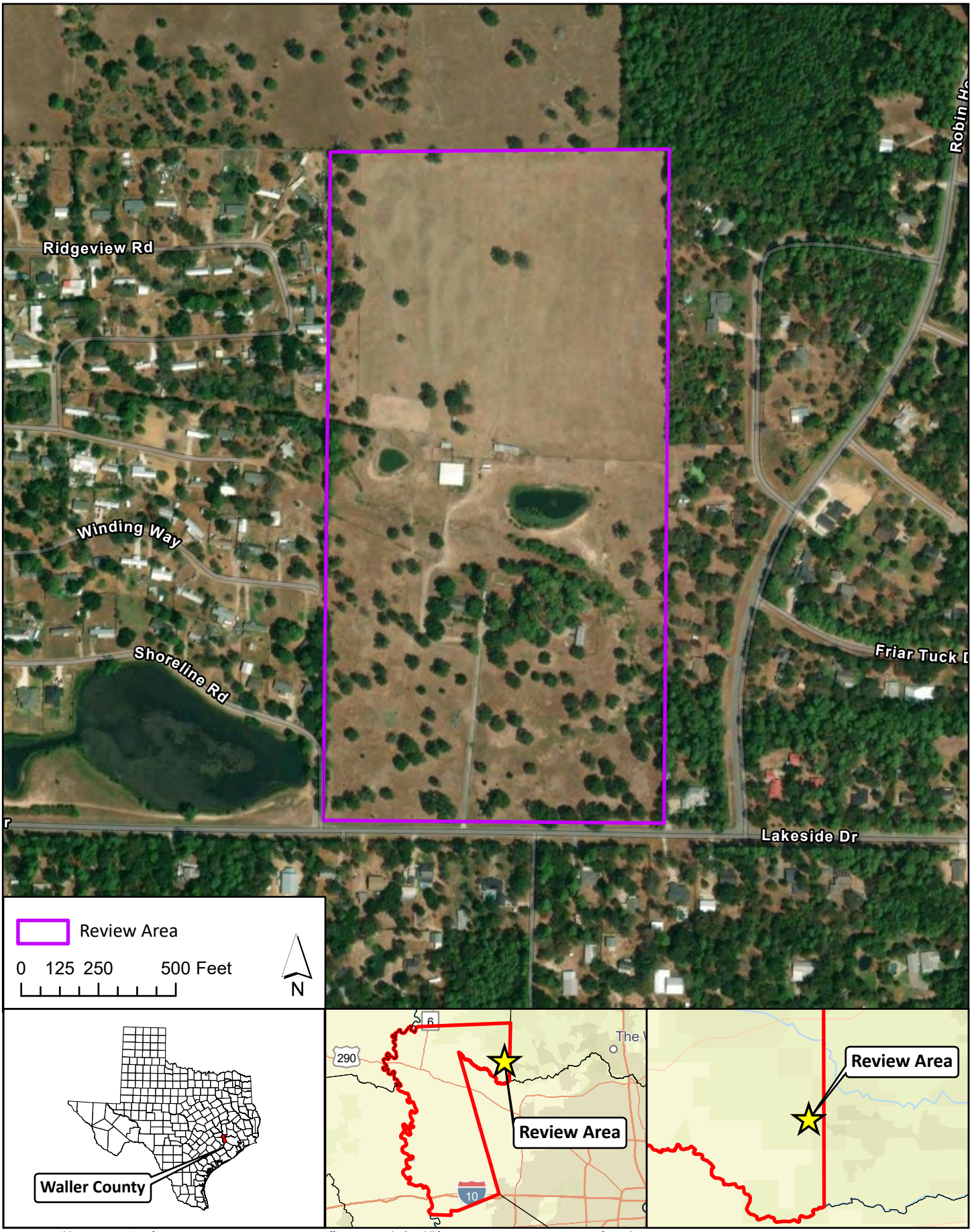
A. Blowers Enclosure – sound attenuating 58 dB(A) @ 50’

B. Backup generator enclosure - 65 dB(A) @ 90’

Backup generator should be exercised during daytime. There is no sound limitation during the emergency event per the city of Houston ordinance. At this time, no further modifications will be required other than the proposed improvements in this report.

EXHIBIT NO. 1

Vicinity Map



SOURCE: World Street Map: City of Houston, Montgomery County, TX GIS Office, Texas Parks & Wildlife, CONANP, Esri, TomTom, Garmin, SafeGraph, FAO, METI/NASA, USGS, EPA, NPS, USFWS
World Imagery: Maxar

RABA KISTNER

PROJECT LOCATION MAP

Acorn Ranch
Hockley, Waller County, Texas
RKI Project No. ASF23-088-00

FIGURE 1

EXHIBIT NO. 2

Service Area Map

DET.
3.7 AC.

W.W.T.P.
.9 AC.

DET.
6.7 AC.

LAKESIDE DRIVE

LAND USE SUMMARY

- SFR – 40' X 120' (55) 30%
- SFR – 45' X 120' (72) 39%
- SFR – 50' X 120' (57) 31%
- DETENTION/AMENITY (+/– 10.4 AC.)
- PARK (+/– 1.1 AC.)
- TRAIL (+/– 3,700 L.F.)

ACORN RANCH
SCHEMATIC PLAN

DATE: AUGUST, 2024 SCALE: 1" = 100'
TOTAL LOTS – 184

ENGINEER

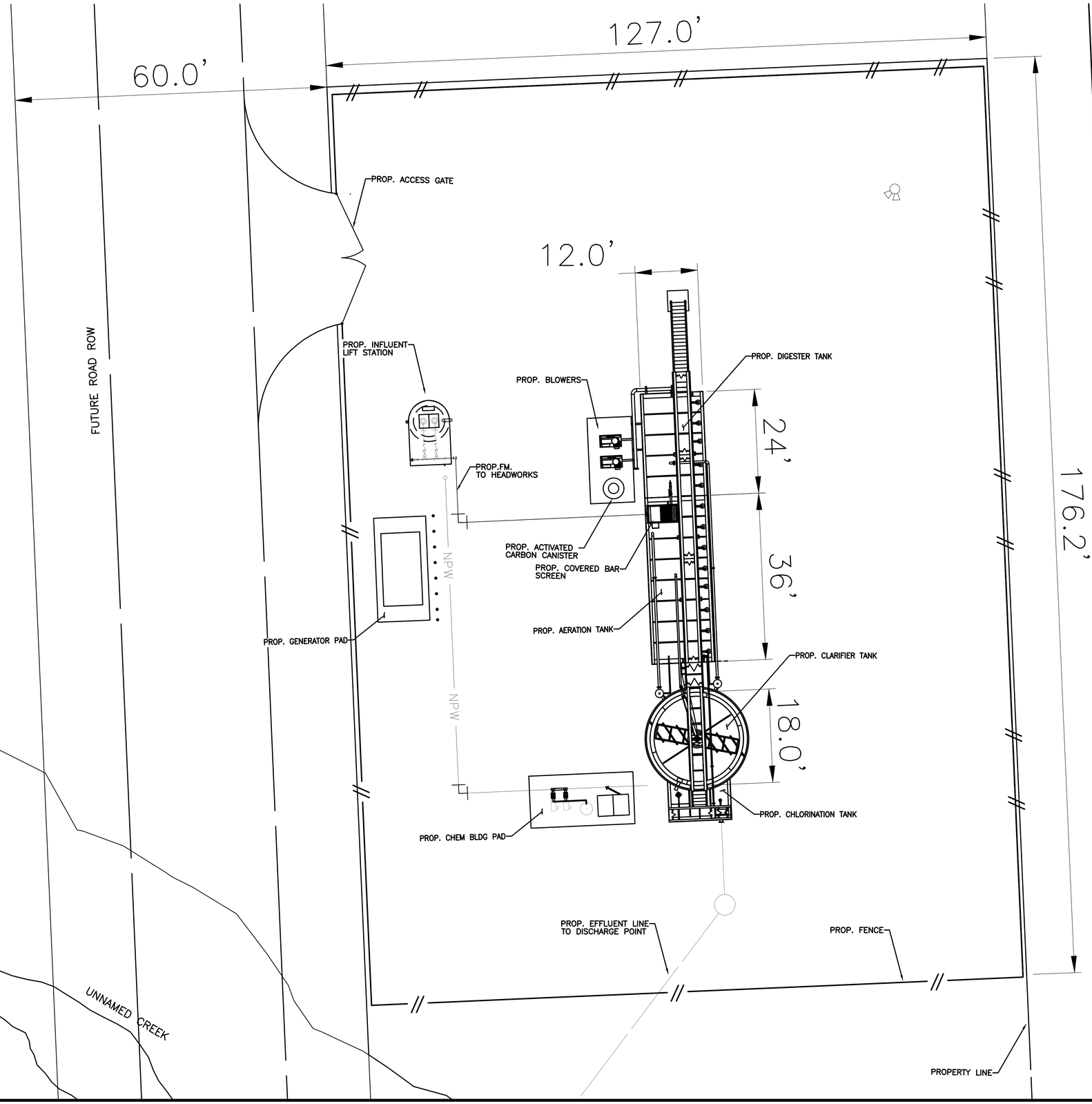
r.g. miller

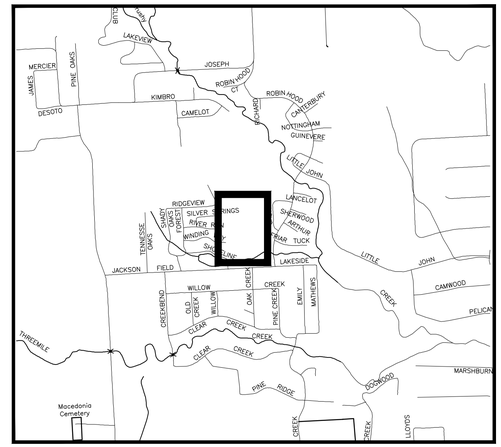
DCCM

R.G. Miller Engineers, Inc. | TxEng F - 487
16340 Park Ten Place, Ste 350
Houston, TX 77084
713.461.9600 | rgmiller.com

EXHIBIT NO. 3

Wastewater Treatment Plant Site Plan





FLOOD PLAIN

THIS PROJECT IS LOCATED IN UNSHADED ZONE "X" AS PER FIRM PANEL 48473C0100E, DATED FEBRUARY 18, 2009.

NOTES:

1. THIS IS PRELIMINARY SITE LAYOUT.
2. DUE TO LIMITED SPACE, THE REQUIRED 150-FEET BUFFER ZONE CANNOT BE MET. THEREFORE, WE PROPOSED A CARBITROL ODOR CONTROL CANISTER (OR EQUAL) TO BE INSTALLED ON THE COVERED BAR SCREEN.
3. MAXIMUM PERMISSIBLE SOUND LEVELS FOR BLOWERS MUST BE 58 dB(A)@50 FEET. MAXIMUM PERMISSIBLE SOUND LEVELS FOR GENERATOR MUST BE 65 dB(A)@90 FEET.

ACORN RANCH WWTP
EXHIBIT

r.g. miller
DCCM
R.G. Miller Engineers, Inc. | TxEng F - 487
1080 Eldridge Parkway, Suite 600
Houston, TX 77077
713.461.9600 | rgmiller.com

DATE:9/3/2024 SCALE:1"=10'

EXHIBIT NO. 4

FEMA FIRM Map

NOTES TO USERS

This map is for use in administering the National Flood Insurance Program. It does not necessarily identify all areas subject to flooding, particularly from local drainage sources of small size. The **community map repository** should be consulted for possible updated or additional flood hazard information.

To obtain more detailed information in areas where **Base Flood Elevations** (BFEs) and/or **floodways** have been determined, users are encouraged to consult the Flood Profiles and Floodway Data and/or Summary of Stillwater Elevations tables contained within the Flood Insurance Study (FIS) report that accompanies this FIRM. Users should be aware that BFEs shown on the FIRM represent rounded whole-foot elevations. These BFEs are intended for flood insurance rating purposes only and should not be used as the sole source of flood elevation information. Accordingly, flood elevation data presented in the FIS report should be utilized in conjunction with the FIRM for purposes of construction and/or floodplain management.

Coastal Base Flood Elevations shown on this map apply only landward of 0.0' North American Vertical Datum of 1988 (NAVD 88). Users of this FIRM should be aware that coastal flood elevations are also provided in the Summary of Stillwater Elevations table in the Flood Insurance Study report for this jurisdiction. Elevations shown in the Summary of Stillwater Elevations table should be used for construction and/or floodplain management purposes when they are higher than the elevations shown on this FIRM.

Boundaries of the **floodways** were computed at cross sections and interpolated between cross sections. The floodways were based on hydraulic considerations with regard to requirements of the National Flood Insurance Program. Floodway widths and other pertinent floodway data are provided in the Flood Insurance Study report for this jurisdiction.

Certain areas not in Special Flood Hazard Areas may be protected by **flood control structures.** Refer to Section 2.4 "Flood Protection Measures" of the Flood Insurance Study report for information on flood control structures for this jurisdiction.

The **projection** used in the preparation of this map was Texas State Plane south central zone (FIPSZONE 4204). The **horizontal datum** was NAD83, GRS1980 spheroid. Differences in datum, spheroid, projection or State Plane zones used in the production of FIRMs for adjacent jurisdictions may result in slight positional differences in map features across jurisdiction boundaries. These differences do not affect the accuracy of the FIRM.

Flood elevations on this map are referenced to the North American Vertical Datum of 1988. These flood elevations must be compared to structure and ground elevations referenced to the same **vertical datum.** For information regarding conversion between the National Geodetic Vertical Datum of 1929 and the North American Vertical Datum of 1988, visit the National Geodetic Survey website at http://www.ngs.noaa.gov/ or contact the National Geodetic Survey at the following address:

NGS Information Services
NOAA, N/NGS12
National Geodetic Survey
SSMC- 3, #9202
1315 East- West Highway
Silver Spring, MD 20910- 3282

To obtain current elevation, description, and/or location information for **bench marks** shown on this map, please contact the Information Services Branch of the National Geodetic Survey at **(301) 713- 3242,** or visit its website at http://www.ngs.noaa.gov/.

Base map information shown on this FIRM was provided in digital format by Waller County and Houston-Galveston Area Council (H-GAC). This dataset was digitized at a scale of at least 1:24,000 from H-GAC aerial photography dated 2002 and 2004.

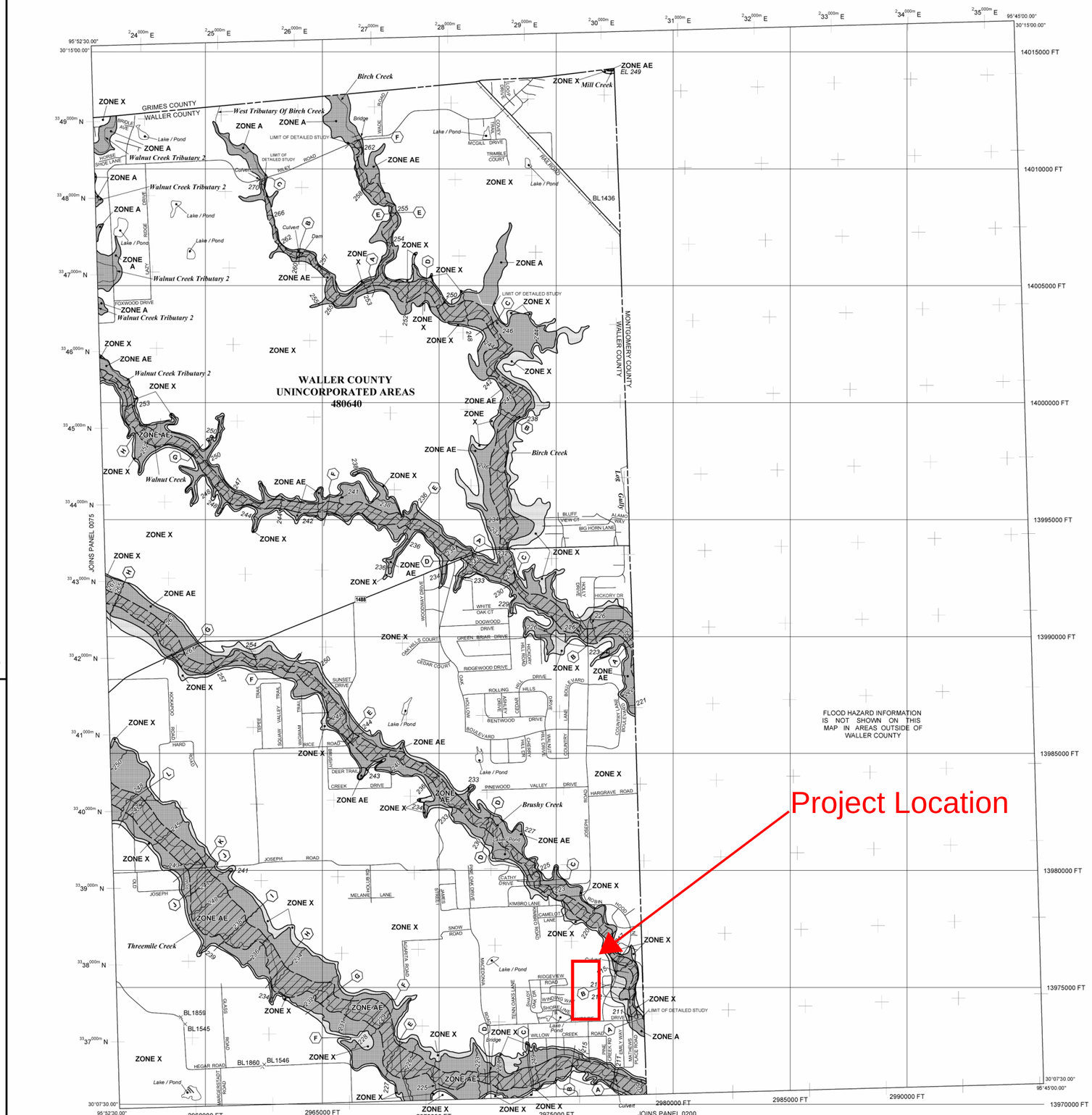
This map reflects more detailed and up- to- date **stream channel configurations** than those shown on the previous FIRM for this jurisdiction. The floodplains and floodways that were transferred from the previous FIRM may have been adjusted to conform to these new stream channel configurations. As a result, the Flood Profiles and Floodway Data tables *in the Flood Insurance Study report (which contains authoritative hydraulic data)* may reflect stream channel distances that differ from what is shown on this map.

Corporate limits shown on this map are based on the best data available at the time of publication. Because changes due to annexations or de- annexations may have occurred after this map was published, map users should contact appropriate community officials to verify current corporate limit locations.

Please refer to the separately printed **Map Index** for an overview map of the county showing the layout of map panels; community map repository addresses; and a listing of Communities table containing National Flood Insurance Program dates for each community as well as a listing of the panels on which each community is located.

Contact the **FEMA Map Service Center** at 1- 800- 358- 9616 for information on available products associated with this FIRM. Available products may include previously issued Letters of Map Change, *a Flood Insurance Study report,* and/or digital versions of this map. The FEMA Map Service Center may also be reached by Fax at 1- 800- 358- 9620 and its website at http://www.msc.fema.gov/.

If you have **questions about this map** or questions concerning the National Flood Insurance Program in general, please call**1- 877- FEMA MAP** (1- 877- 336- 2627) or visit the FEMA website at http://www.fema.gov/.



LEGEND

SPECIAL FLOOD HAZARD AREAS (SFHAs) SUBJECT TO INUNDATION BY THE 1% ANNUAL CHANCE FLOOD

The 1% annual chance flood (100-year flood), also known as the base flood, is the flood that has a 1% chance of being equaled or exceeded in any given year. The Special Flood Hazard Area is the area subject to flooding by the 1% annual chance flood. Areas of Special Flood Hazard include Zones A, AE, AH, AO, AR, A99, V and VE. The Base Flood Elevation is the water-surface elevation of the 1% annual chance flood.

ZONE A	No Base Flood Elevations determined.
ZONE AE	Base Flood Elevations determined.
ZONE AH	Flood depths of 1 to 3 feet (usually areas of ponding); Base Flood Elevations determined.
ZONE AO	Flood depths of 1 to 3 feet (usually sheet flow on sloping terrain); average depths determined. For areas of alluvial fan flooding, velocities also determined.
ZONE AR	Special Flood Hazard Area formerly protected from the 1% annual chance flood by a flood control system that was subsequently decertified. Zone AR indicates that the former flood control system is being restored to provide protection from the 1% annual chance or greater flood.
ZONE A99	Area to be protected from 1% annual chance flood by a Federal flood protection system under construction; no Base Flood Elevations determined.
ZONE V	Coastal flood zone with velocity hazard (wave action); no Base Flood Elevations determined.
ZONE VE	Coastal flood zone with velocity hazard (wave action); Base Flood Elevations determined.

FLOODWAY AREAS IN ZONE AE

The floodway is the channel of a stream plus any adjacent floodplain areas that must be kept free of encroachment so that the 1% annual chance flood can be carried without substantial increases in flood heights.

OTHER FLOOD AREAS

ZONE X	Areas of 0.2% annual chance flood; areas of 1% annual chance flood with average depths of less than 1 foot or with drainage areas less than 1 square mile; and areas protected by levees from 1% annual chance flood.

OTHER AREAS

ZONE X	Areas determined to be outside the 0.2% annual chance floodplain.
ZONE D	Areas in which flood hazards are undetermined, but possible.

COASTAL BARRIER RESOURCES SYSTEM (CBRS) AREAS

OTHERWISE PROTECTED AREAS (OPAs)

CBRS areas and OPAs are normally located within or adjacent to Special Flood Hazard Areas.

	Floodplain boundary
	Floodway boundary
	Zone D boundary
	CBRS and OPA boundary
	Boundary dividing Special Flood Hazard Areas of different Base Flood Elevations, flood depths or flood velocities.
513	Base Flood Elevation line and value; elevation in feet*
(EL 987)	Base Flood Elevation value where uniform within zone; elevation in feet*

* Referenced to the North American Vertical Datum of 1988 (NAVD 88)

A — A	Cross section line
23 — 23	Transect line
97°07'30", 32°22'30"	Geographic coordinates referenced to the North American Datum of 1983 (NAD 83)
4275000mN	1000-meter Universal Transverse Mercator grid , zone 15
6000000 FT	5000-foot grid : Texas State Plane coordinate system, south central zone (FIPSZONE 4204), Lambert Conformal Conic
DX5510	Bench mark (see explanation in Notes to Users section of this FIRM panel)
M1.5	River Mile

MAP REPOSITORIES
Refer to Map Repositories list on Map Index

EFFECTIVE DATE OF COUNTYWIDE
FLOOD INSURANCE RATE MAP
February 18, 2009
EFFECTIVE DATE(S) OF REVISION(S) TO THIS PANEL

For community map revision history prior to countywide mapping, refer to the Community Map History table located in the Flood Insurance Study report for this jurisdiction.

To determine if flood insurance is available in this community, contact your insurance agent or call the National Flood Insurance Program at 1- 800- 638- 6620.

MAP SCALE 1" = 2000'
1000 0 2000 4000 FEET
600 0 600 1200 METERS

NATIONAL FLOOD INSURANCE PROGRAM

PANEL 0100E

FIRM
FLOOD INSURANCE RATE MAP
WALLER COUNTY, TEXAS AND INCORPORATED AREAS

PANEL 100 OF 425
(SEE MAP INDEX FOR FIRM PANEL LAYOUT)
CONTAINS:

COMMUNITY	NUMBER	PANEL	SUFFIX
WALLER COUNTY	480640	0100	E

Notice to User: The **Map Number** shown below should be used when placing map orders; the **Community Number** shown above should be used on insurance applications for the subject community.

MAP NUMBER 48473C0100E
EFFECTIVE DATE FEBRUARY 18, 2009

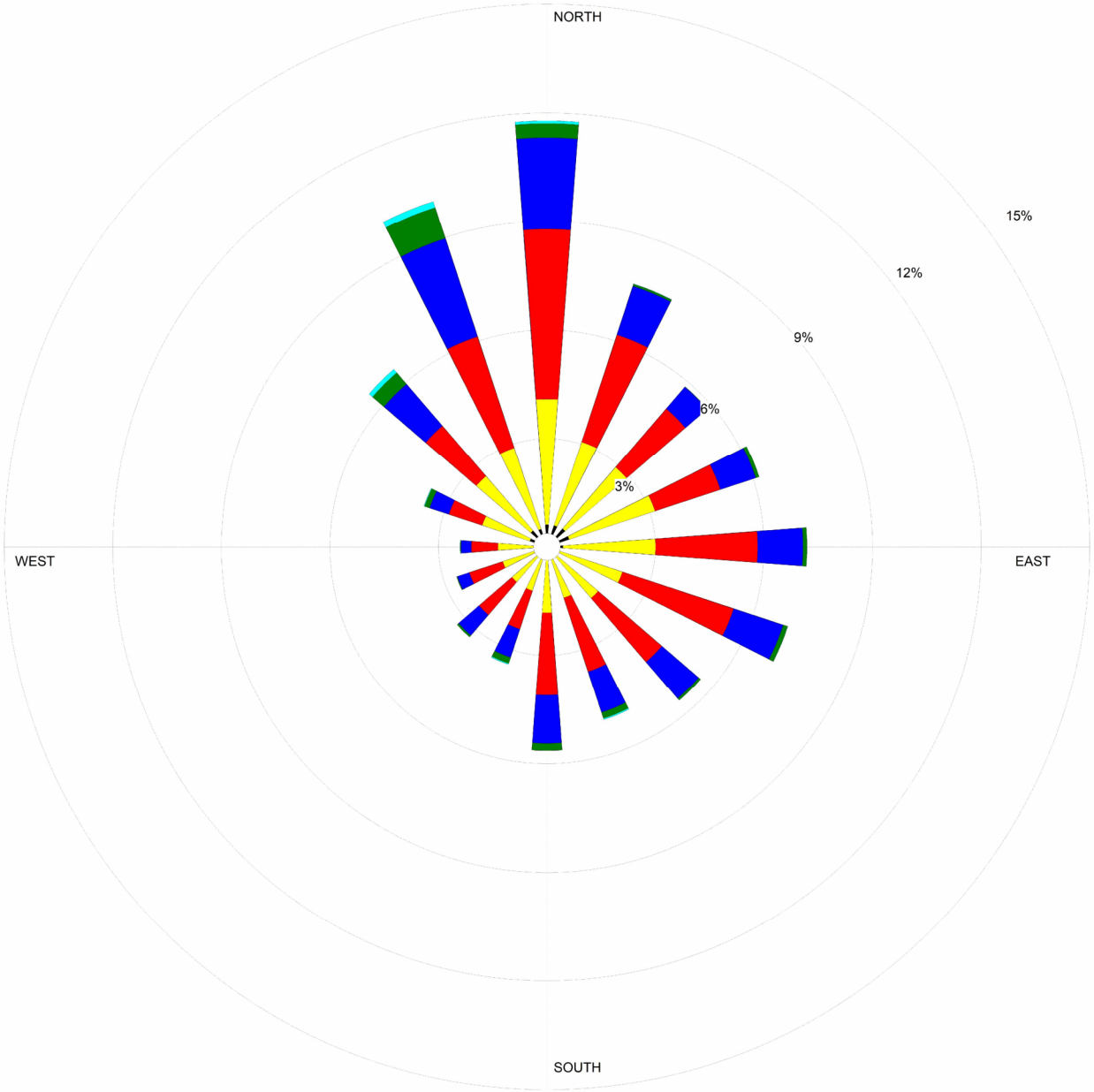
Federal Emergency Management Agency

EXHIBIT NO. 5

Houston Wind Rose

WIND ROSE PLOT

Station #12960 - HOUSTON/INTERCONTINENTAL ARPT, TX



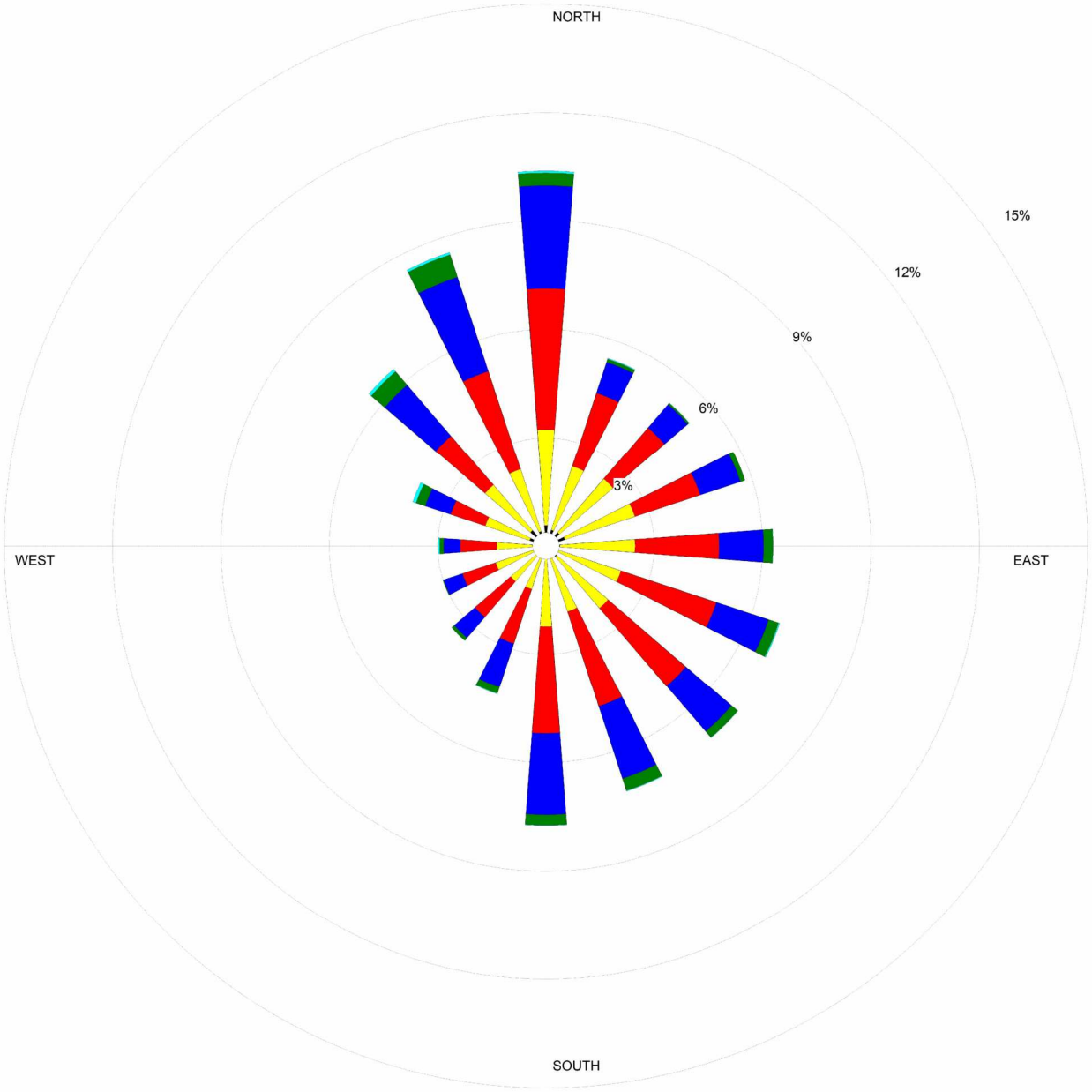
Wind Speed (m/s)

- > 11.06
- 8.49 - 11.06
- 5.40 - 8.49
- 3.34 - 5.40
- 1.80 - 3.34
- 0.51 - 1.80

MODELER **Sara West**	DATE **8/29/2002**	COMPANY NAME **USDA-ARS**
DISPLAY **Wind Speed**	UNIT **m/s**	COMMENTS
AVG. WIND SPEED **4.26 m/s**	CALM WINDS **6.17%**	
ORIENTATION **Direction (blowing from)**	PLOT YEAR-DATE-TIME **1961 Jan 1 - Jan 31 Midnight - 11 PM**	

WIND ROSE PLOT

Station #12960 - HOUSTON/INTERCONTINENTAL ARPT, TX



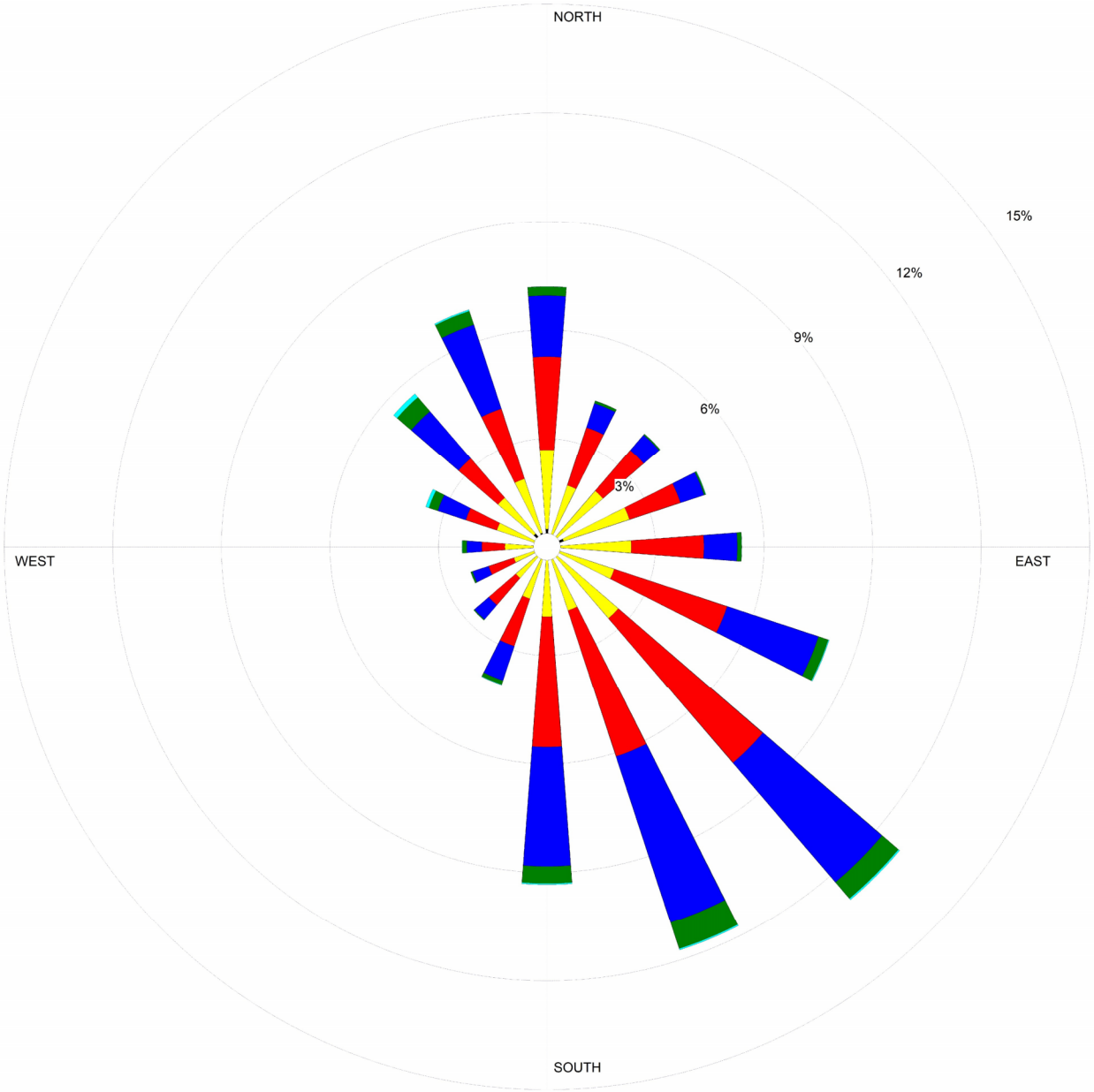
Wind Speed (m/s)

- > 11.06
- 8.49 - 11.06
- 5.40 - 8.49
- 3.34 - 5.40
- 1.80 - 3.34
- 0.51 - 1.80

MODELER	DATE	COMPANY NAME
Sara West	**8/29/2002**	**USDA-ARS**
DISPLAY	UNIT	COMMENTS
Wind Speed	**m/s**	
AVG. WIND SPEED	CALM WINDS	
4.47 m/s	**5.38%**	
ORIENTATION	PLOT YEAR-DATE-TIME	
Direction (blowing from)	**1961 Feb 1 - Feb 29 Midnight - 11 PM**	

WIND ROSE PLOT

Station #12960 - HOUSTON/INTERCONTINENTAL ARPT, TX



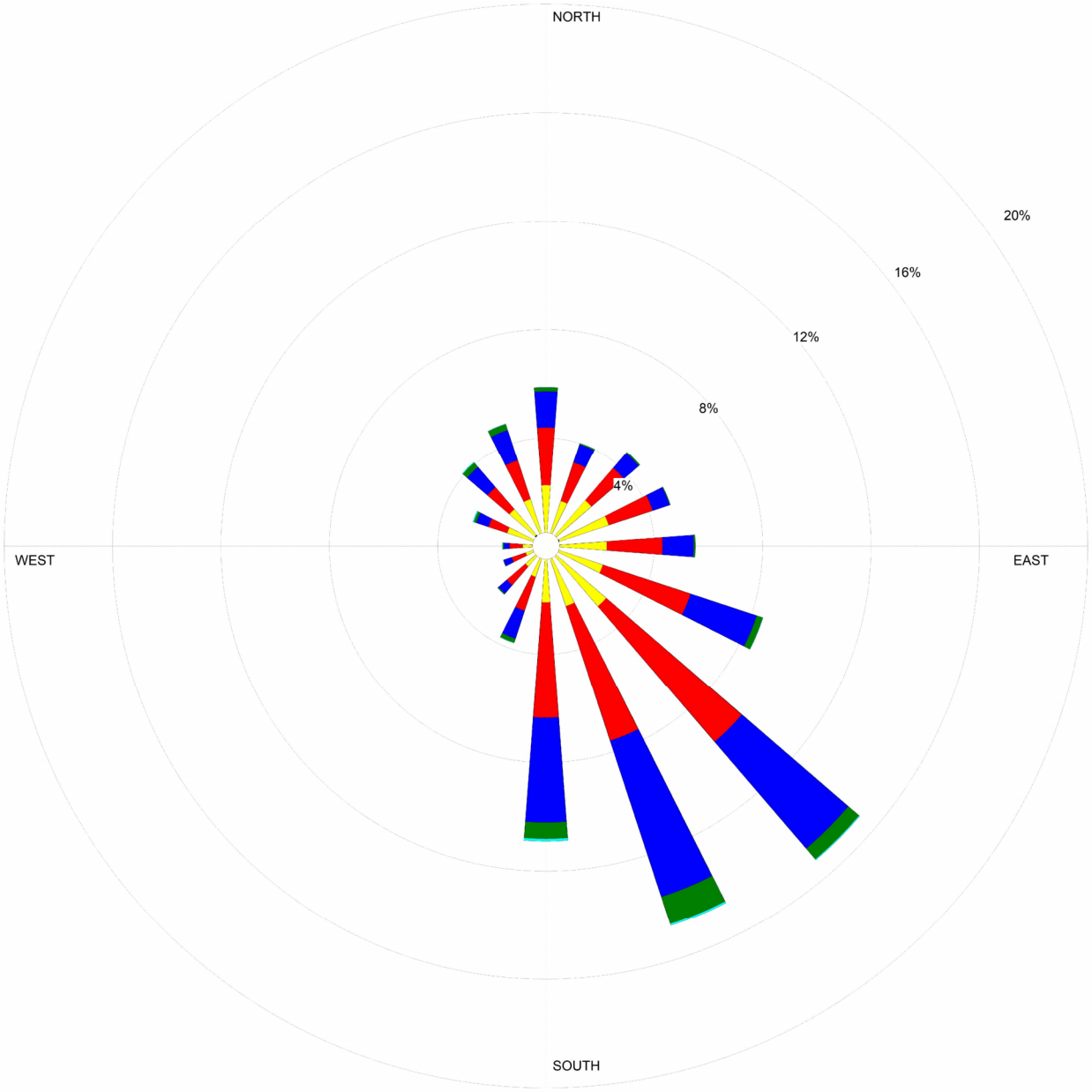
Wind Speed (m/s)

- > 11.06
- 8.49 - 11.06
- 5.40 - 8.49
- 3.34 - 5.40
- 1.80 - 3.34
- 0.51 - 1.80

MODELER	DATE	COMPANY NAME
Sara West	**8/29/2002**	**USDA-ARS**
DISPLAY	UNIT	COMMENTS
Wind Speed	**m/s**	
AVG. WIND SPEED	CALM WINDS	
4.68 m/s	**4.93%**	
ORIENTATION	PLOT YEAR-DATE-TIME	
Direction (blowing from)	**1961 Mar 1 - Mar 31 Midnight - 11 PM**	

WIND ROSE PLOT

Station #12960 - HOUSTON/INTERCONTINENTAL ARPT, TX



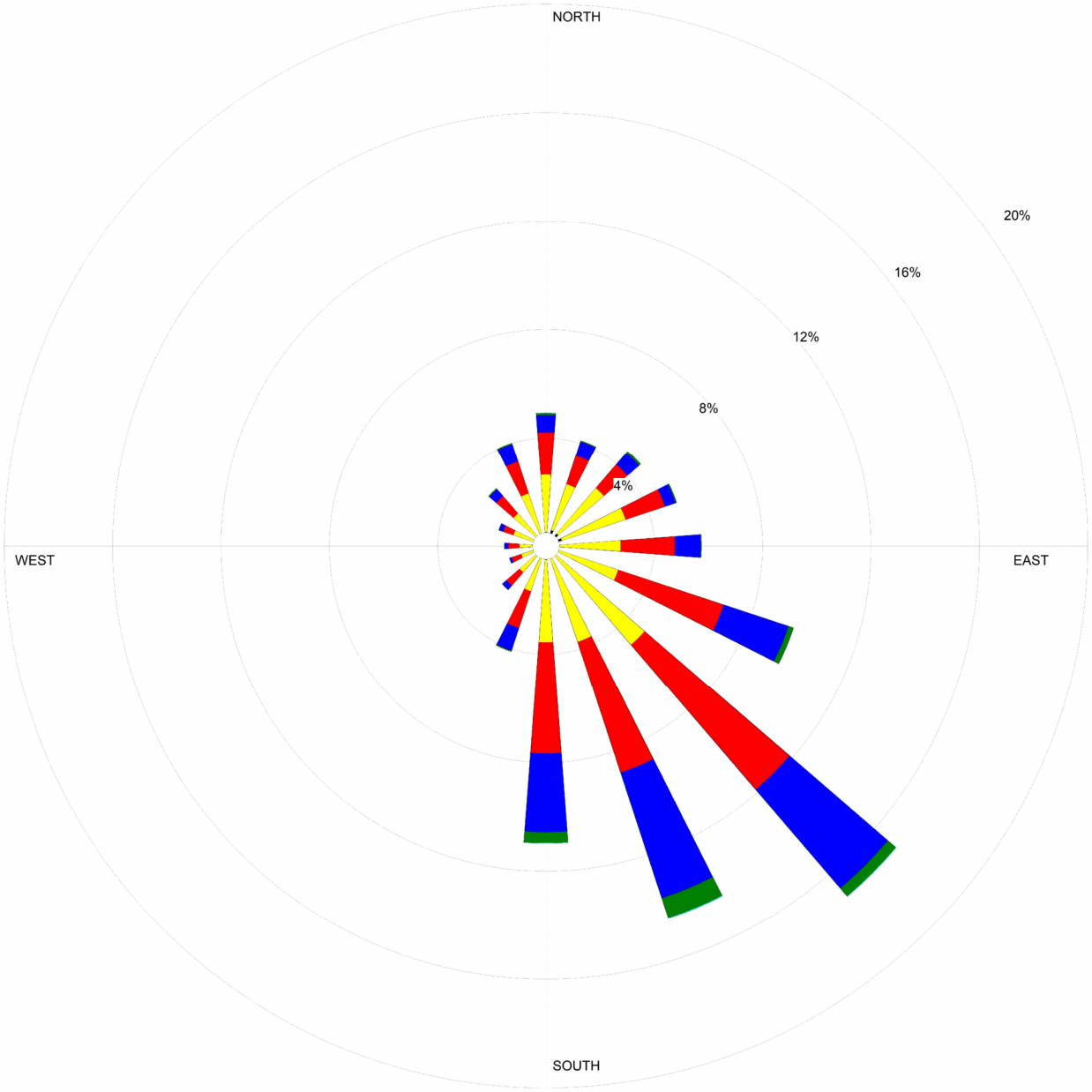
Wind Speed (m/s)

- > 11.06
- 8.49 - 11.06
- 5.40 - 8.49
- 3.34 - 5.40
- 1.80 - 3.34
- 0.51 - 1.80

MODELER **Sara West**	DATE **8/29/2002**	COMPANY NAME **USDA-ARS**
DISPLAY **Wind Speed**	UNIT **m/s**	COMMENTS
AVG. WIND SPEED **4.63 m/s**	CALM WINDS **4.65%**	
ORIENTATION **Direction (blowing from)**	PLOT YEAR-DATE-TIME **1961** **Apr 1 - Apr 30** **Midnight - 11 PM**	

WIND ROSE PLOT

Station #12960 - HOUSTON/INTERCONTINENTAL ARPT, TX



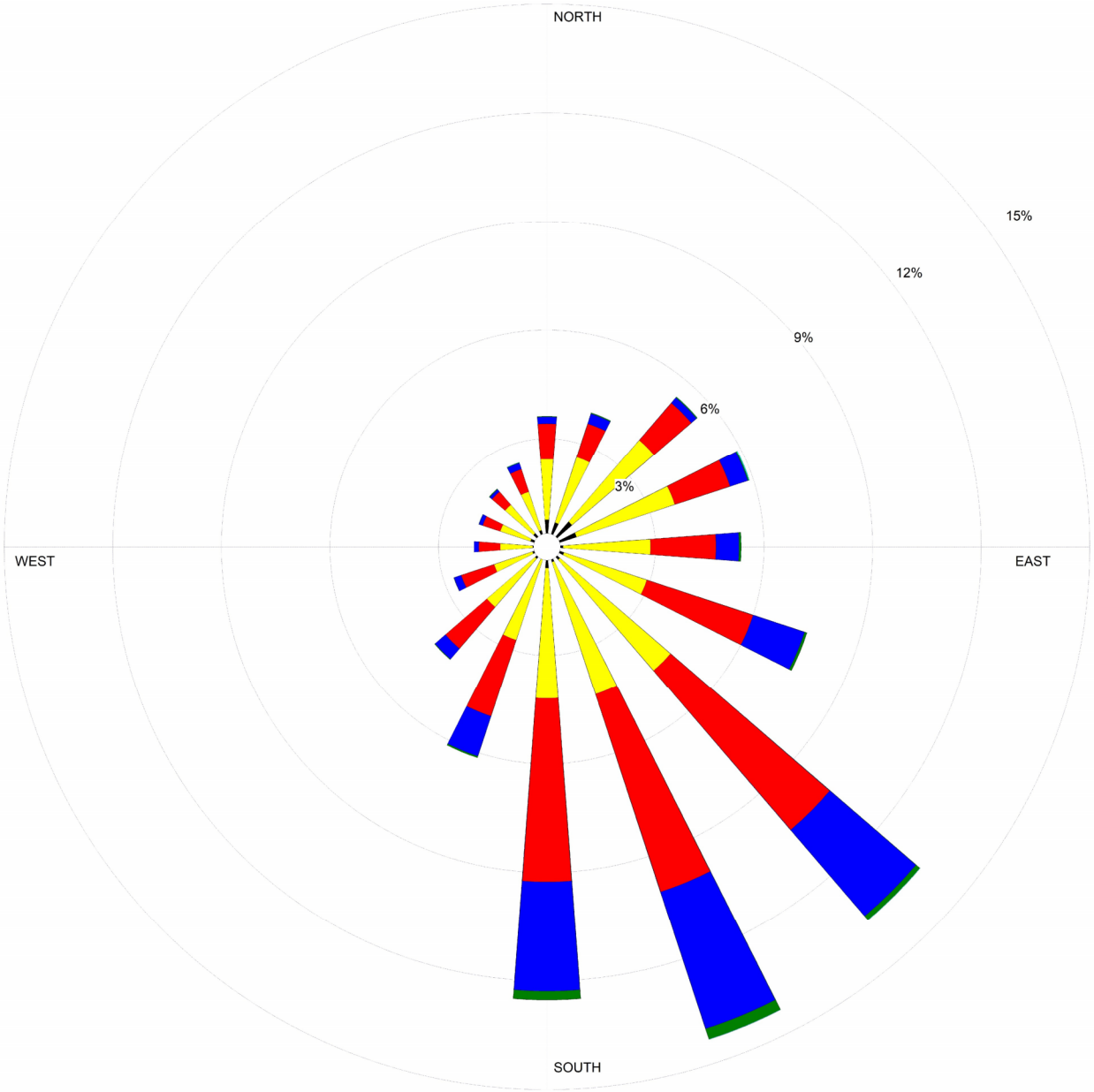
Wind Speed (m/s)

- > 11.06
- 8.49 - 11.06
- 5.40 - 8.49
- 3.34 - 5.40
- 1.80 - 3.34
- 0.51 - 1.80

MODELER **Sara West**	DATE **8/29/2002**	COMPANY NAME **USDA-ARS**
DISPLAY **Wind Speed**	UNIT **m/s**	COMMENTS
AVG. WIND SPEED **4.17 m/s**	CALM WINDS **5.43%**	
ORIENTATION **Direction (blowing from)**	PLOT YEAR-DATE-TIME **1961** **May 1 - May 31** **Midnight - 11 PM**	

WIND ROSE PLOT

Station #12960 - HOUSTON/INTERCONTINENTAL ARPT, TX



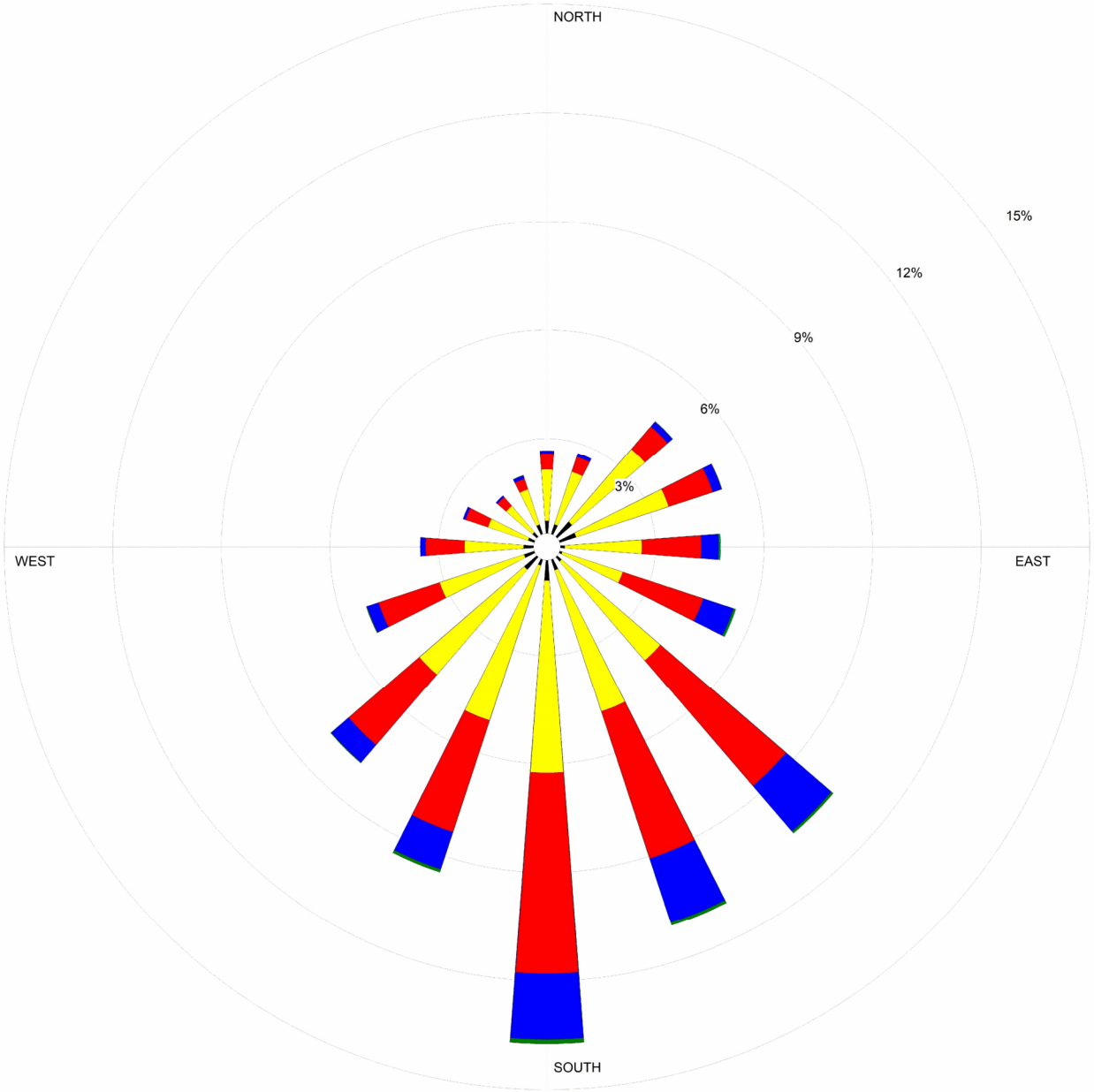
Wind Speed (m/s)

- > 11.06
- 8.49 - 11.06
- 5.40 - 8.49
- 3.34 - 5.40
- 1.80 - 3.34
- 0.51 - 1.80

MODELER **Sara West**	DATE **8/29/2002**	COMPANY NAME **USDA-ARS**
DISPLAY **Wind Speed**	UNIT **m/s**	COMMENTS
AVG. WIND SPEED **3.84 m/s**	CALM WINDS **6.10%**	
ORIENTATION **Direction (blowing from)**	PLOT YEAR-DATE-TIME **1961** **Jun 1 - Jun 30** **Midnight - 11 PM**	

WIND ROSE PLOT

Station #12960 - HOUSTON/INTERCONTINENTAL ARPT, TX



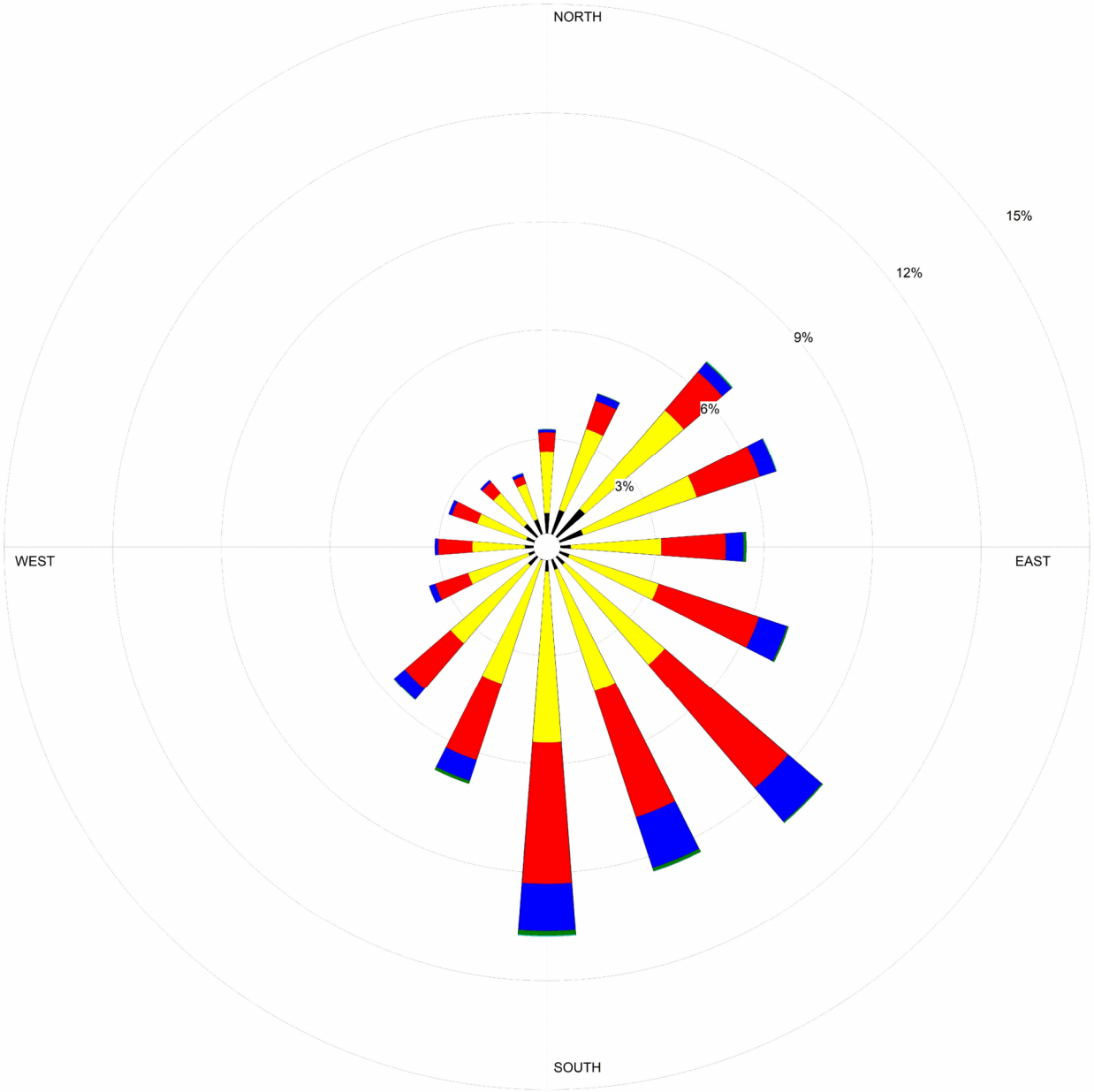
Wind Speed (m/s)

- > 11.06
- 8.49 - 11.06
- 5.40 - 8.49
- 3.34 - 5.40
- 1.80 - 3.34
- 0.51 - 1.80

MODELER **Sara West**	DATE **8/29/2002**	COMPANY NAME **USDA-ARS**
DISPLAY **Wind Speed**	UNIT **m/s**	COMMENTS
AVG. WIND SPEED **3.45 m/s**	CALM WINDS **6.88%**	
ORIENTATION **Direction (blowing from)**	PLOT YEAR-DATE-TIME **1961 Jul 1 - Jul 31 Midnight - 11 PM**	

WIND ROSE PLOT

Station #12960 - HOUSTON/INTERCONTINENTAL ARPT, TX



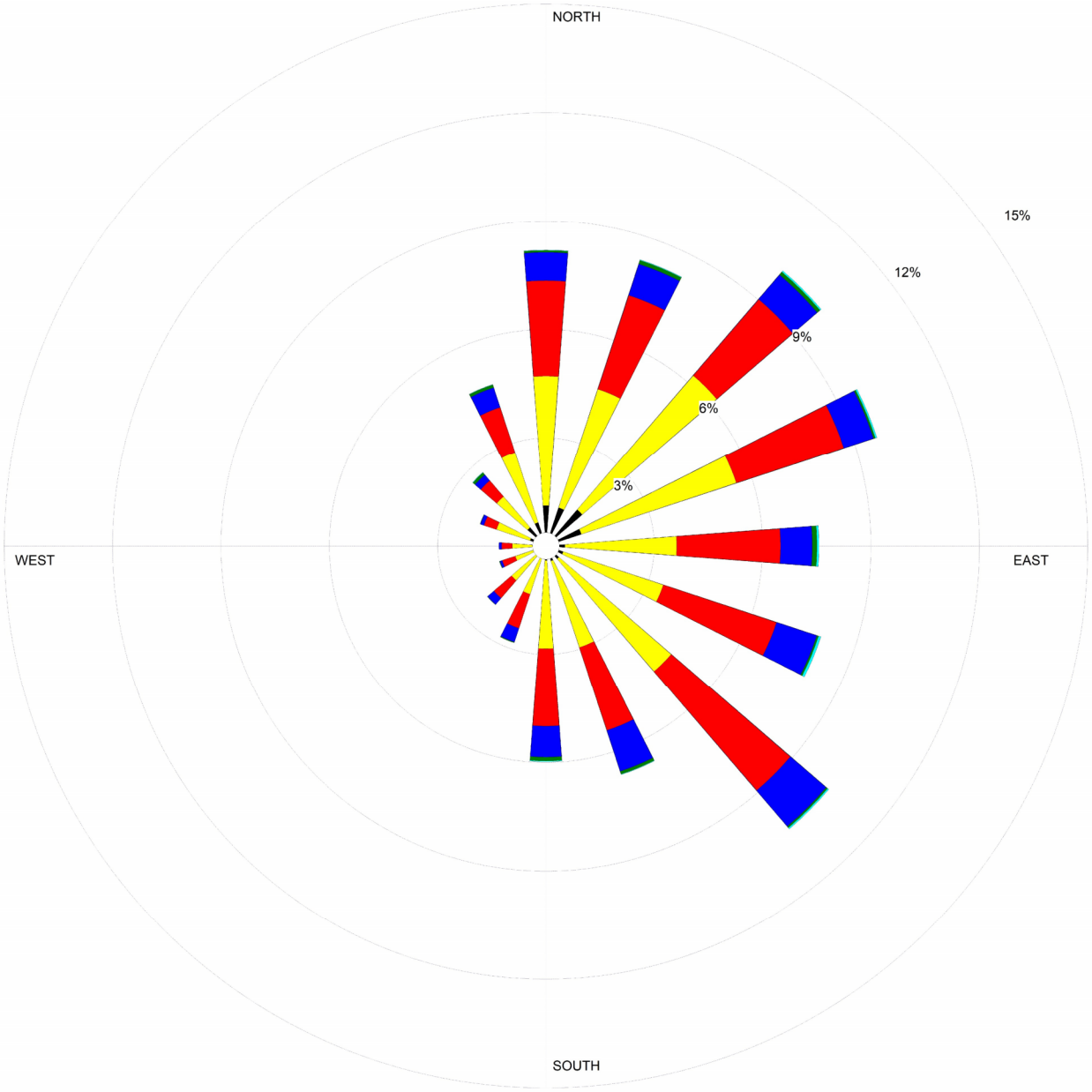
Wind Speed (m/s)

- > 11.06
- 8.49 - 11.06
- 5.40 - 8.49
- 3.34 - 5.40
- 1.80 - 3.34
- 0.51 - 1.80

MODELER	DATE	COMPANY NAME
Sara West	**8/29/2002**	**USDA-ARS**
DISPLAY	UNIT	COMMENTS
Wind Speed	**m/s**	
AVG. WIND SPEED	CALM WINDS	
3.34 m/s	**9.47%**	
ORIENTATION	PLOT YEAR-DATE-TIME	
Direction (blowing from)	**1961 Aug 1 - Aug 31 Midnight - 11 PM**	

WIND ROSE PLOT

Station #12960 - HOUSTON/INTERCONTINENTAL ARPT, TX



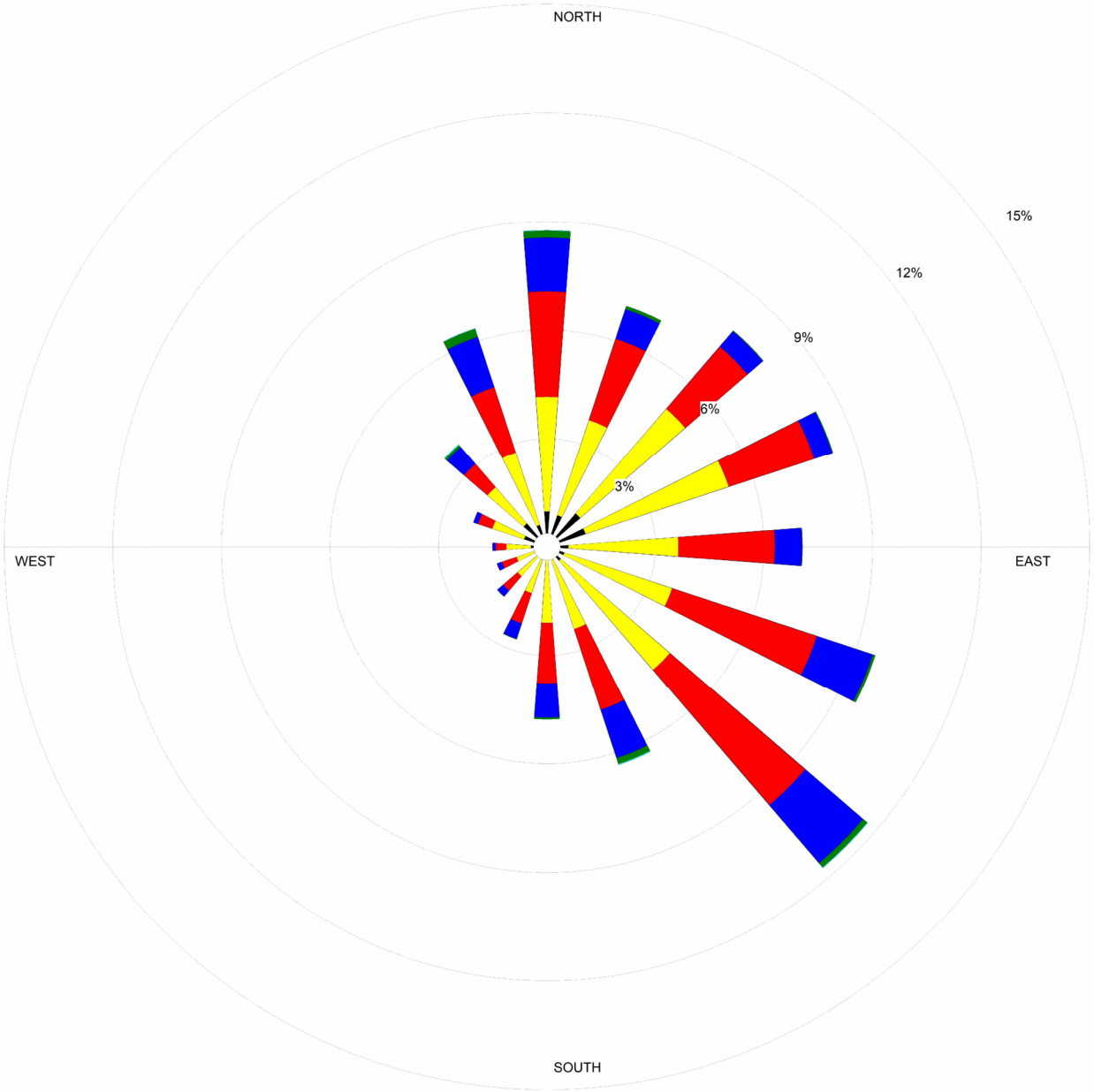
Wind Speed (m/s)

- > 11.06
- 8.49 - 11.06
- 5.40 - 8.49
- 3.34 - 5.40
- 1.80 - 3.34
- 0.51 - 1.80

MODELER **Sara West**	DATE **8/29/2002**	COMPANY NAME **USDA-ARS**
DISPLAY **Wind Speed**	UNIT **m/s**	COMMENTS
AVG. WIND SPEED **3.58 m/s**	CALM WINDS **8.26%**	
ORIENTATION **Direction (blowing from)**	PLOT YEAR-DATE-TIME **1961** **Sep 1 - Sep 30** **Midnight - 11 PM**	

WIND ROSE PLOT

Station #12960 - HOUSTON/INTERCONTINENTAL ARPT, TX



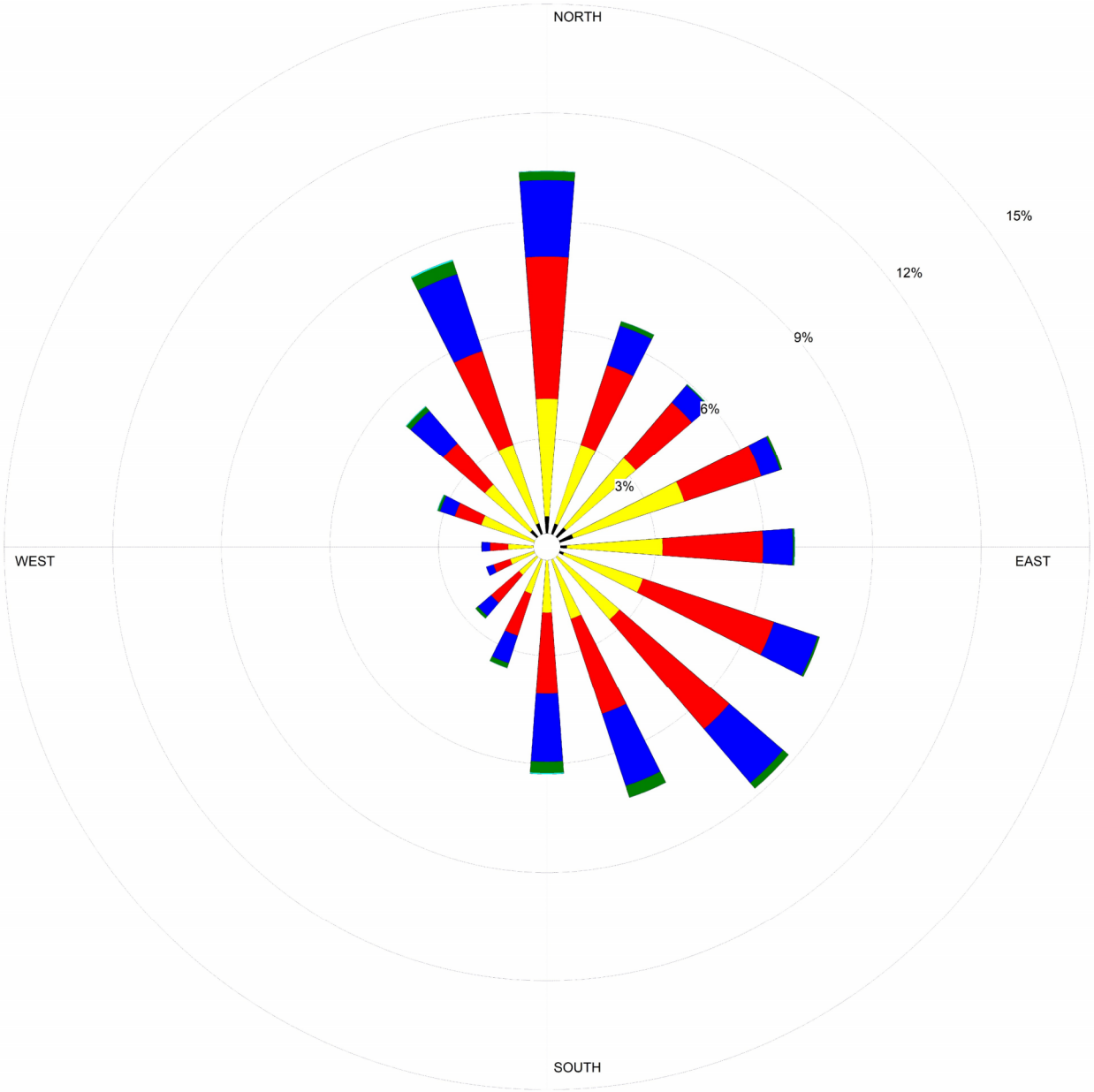
Wind Speed (m/s)

- > 11.06
- 8.49 - 11.06
- 5.40 - 8.49
- 3.34 - 5.40
- 1.80 - 3.34
- 0.51 - 1.80

MODELER **Sara West**	DATE **8/29/2002**	COMPANY NAME **USDA-ARS**
DISPLAY **Wind Speed**	UNIT **m/s**	COMMENTS
AVG. WIND SPEED **3.71 m/s**	CALM WINDS **8.83%**	
ORIENTATION **Direction (blowing from)**	PLOT YEAR-DATE-TIME **1961** **Oct 1 - Oct 31** **Midnight - 11 PM**	

WIND ROSE PLOT

Station #12960 - HOUSTON/INTERCONTINENTAL ARPT, TX



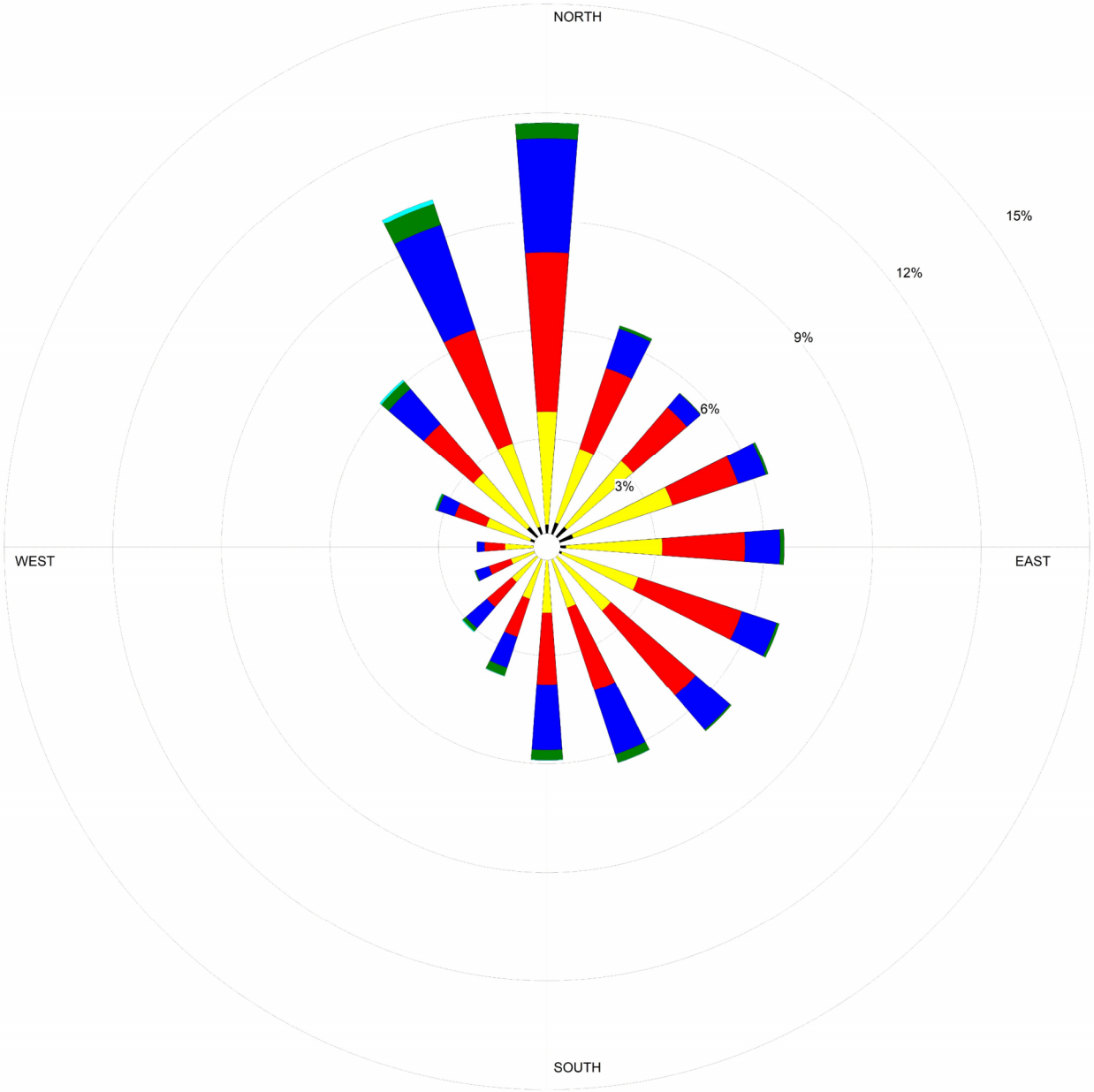
Wind Speed (m/s)

- > 11.06
- 8.49 - 11.06
- 5.40 - 8.49
- 3.34 - 5.40
- 1.80 - 3.34
- 0.51 - 1.80

MODELER **Sara West**	DATE **8/29/2002**	COMPANY NAME **USDA-ARS**
DISPLAY **Wind Speed**	UNIT **m/s**	COMMENTS
AVG. WIND SPEED **4.09 m/s**	CALM WINDS **6.63%**	
ORIENTATION **Direction (blowing from)**	PLOT YEAR-DATE-TIME **1961** **Nov 1 - Nov 30** **Midnight - 11 PM**	

WIND ROSE PLOT

Station #12960 - HOUSTON/INTERCONTINENTAL ARPT, TX



Wind Speed (m/s)

- > 11.06
- 8.49 - 11.06
- 5.40 - 8.49
- 3.34 - 5.40
- 1.80 - 3.34
- 0.51 - 1.80

MODELER **Sara West**	DATE **8/29/2002**	COMPANY NAME **USDA-ARS**
DISPLAY **Wind Speed**	UNIT **m/s**	COMMENTS
AVG. WIND SPEED **4.18 m/s**	CALM WINDS **7.10%**	
ORIENTATION **Direction (blowing from)**	PLOT YEAR-DATE-TIME **1961** **Dec 1 - Dec 31** **Midnight - 11 PM**	

APPENDIX NO. 1

Design Calculations

ACORN RANCH WWTP

Phase 1: 60,000 GPD

Data	Quantity					
Permitted Average Daily Flow	60,000	gpd	42	gpm	0.093	cfs
Peak 2-hour Flow	240,000	gpd	167	gpm	0.371	cfs
BOD5 Loading	300	mg/l				
Maximum Aeration Zone Loading	35	lbs of BOD5 / 1,000 cf				
Minimum Aerobic Digester Loading	20	cf/lbs of BOD5/day				
Minimum SRT for Digester	40	days	@		1.5	% Concentration
Maximum Clarifier Surface Loading	1,200	gpd/sf (@ peak flow)				
Minimum Clarifier Detention Time	1.8	hr (@ peak flow)				
Minimum Disinfection Basin Detention Time	20	min (@ peak flow)				
Air Supply (Aeration Zone)	3,200	scfm/day/lb of BOD5				
Air Supply (Aerobic Digester)	30	scfm/1,000 cf of volume				
Air Supply (Disinfection)	20	scfm/1,000 cf of volume				

Calculations of Requirements

BOD5 Loading	150.12	lbs/day

Unit Requirements	Quantity	
Aeration Zone Volume	4,289	cf
Aerobic Digester Volume at Minimum Loading	3,002	cf
Aerobic Digester Volume at Minimum SRT	1,801	cf
Clarifier Surface Area	200	sf
Clarifier Volume at Minimum Detention Time	2,406	cf
Disinfection Volume	446	cf

Air Supply Requirements	Quantity	
Aeration Process	313	scfm
Digester	92	scfm
Disinfection	10	scfm
Air Lift Pumps & Initial Mixing	34	scfm
Total Air Required	450	scfm

Note: The process calculation is based on 10' of submergence with a correction factor of 1.56 and clean water transfer efficiency of 0.85% per foot of submergence.

Proposed Unit Features

Proposed Units	Quantity		#Units	Length	Width	Height	SWD
Aeration Zone Volume	4,536	cf	1	36	12	12.17	10.50
Aerobic Digester Volume	3,073	cf	1	24	12	12.17	10.67
Clarifier Surface Area	254	sf	1		18	13.17	
Clarifier Volume	2,545	cf					10.00
Chlorine Contact Volume	480	cf	1	12	8	7.17	5.00
Blowers	450	scfm	2	30.0	hp		

APPENDIX NO.

Odor Abatement Equipment

Table 1: Design Specifications, Performance Requirements and Major System Components

I. DESIGN SPECIFICATIONS AND PERFORMANCE REQUIREMENTS:	**MCS-024**
Design AirFlow Rate, cfm	160
Average Inlet H_2S Concentration, ppm	10
Peak Inlet H_2S Concentration, ppm	25
Maximum Outlet H_2S Concentration, ppm	0.1
Removal Efficiency, %	99
II. MAJOR SYSTEM COMPONENTS:	
Exhaust Fan	
AirFlow, cfm	160
SP at Fan Inlet, in W.C.	1.0
Pressure Drop across Carbon Media, in W.C.	5.0
Total SP, in W.C.	6.0
Brake Horspower, BHP	0.77
Motor Horsepower, HP	1.0
Interconnecting Ductwork and Damper	Included
Carbon Adsorber	
Vessel Diameter, ft	2.0
Number of Beds	1
Superficial Velocity, fpm	51
Straight Shell Height, ft	4.7
Carbon Bed Height, ft	3.0
Carbon Media, lbs	283
Carbon Media	
Vapor Phase , Bituminous Coal, 0.3 g of H_2S/cc of Carbon Capacity	Included
Exhaust Stack	Included
Electrical Control Panel	Included

Table 2: Estimated Carbon Life

CARBON REPLACEMENT

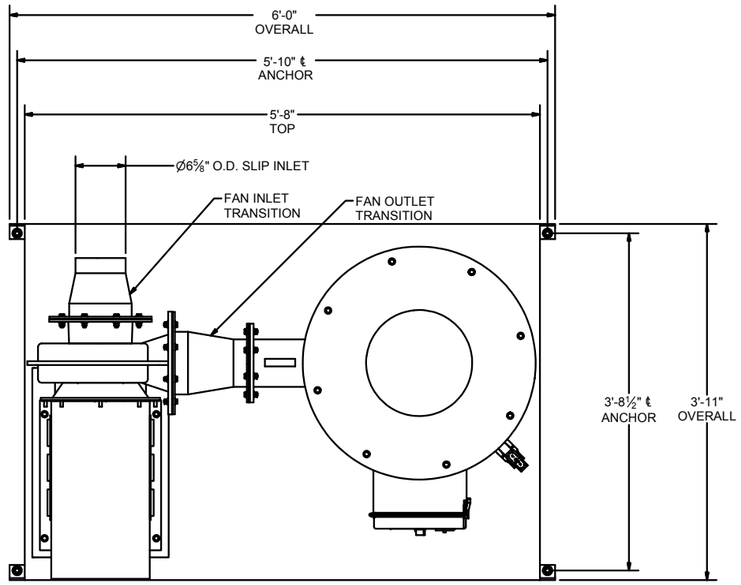
	MCS-024
At Average Inlet H_2S Concentration	
Carbon Capacity, g H_2S/cc carbon	0.3
Carbon Density, g carbon/cc carbon	0.5
Carbon Capacity, g H_2S/g carbon	0.6
Total Carbon in System, lbs	283
Usable Carbon at Breakthrough (80% of capacity), lbs	226
Lbs of H_2S Adsorbed for Usuable Carbon in System	141
Lbs H_2S/day	0.2
Carbon Life, days	694
No. of Carbon Changes/year	0.5
At Peak Inlet H_2S Concentration	
Carbon Capacity, g H_2S/cc carbon	0.3
Carbon Density, g carbon/cc carbon	0.5
Carbon Capacity, g H_2S/g carbon	0.6
Total Carbon in System, lbs	283
Usable Carbon at Breakthrough (80% of capacity), lbs	226
Lbs of H_2S Adsorbed for Usuable Carbon in System	141
Lbs H_2S/day	0.5
Carbon Life, days	278
No. of Carbon Changes/year	1.3

CAUTION:

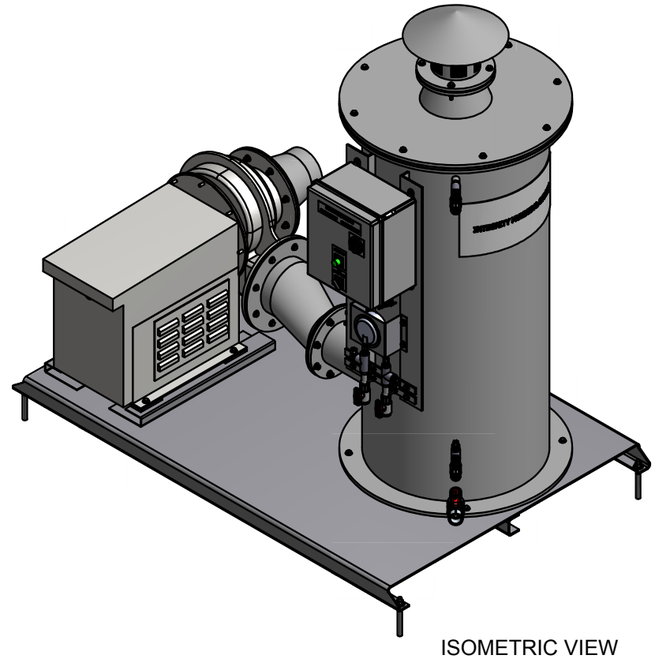
The life of carbon depends on several factors including all odor compounds in the incoming air stream which can be adsorbed on the carbon, and the humidity of the airstream. The carbon life is presented as an estimate only and IMS does not guarantee any life cycle for the carbon.

MODULAR CARBON SYSTEM (MCS - 024)	
AIRFLOW	160 CFM
H2S CAPACITY	10 PPM (AVG); 25 PPM (MAX)
VESSEL DIMENSIONS	2'-0" I.D. X 4'-8" SSH
SKID OVERALL DIMENSIONS	6'-0" L X 3'-11" W X 6'-2" H
APPROXIMATE WEIGHT	1,200 LBS.
INLET DUCT CONNECTION	6-5/8" O.D. SLIP
INLET DUCT HEIGHT	20.5"

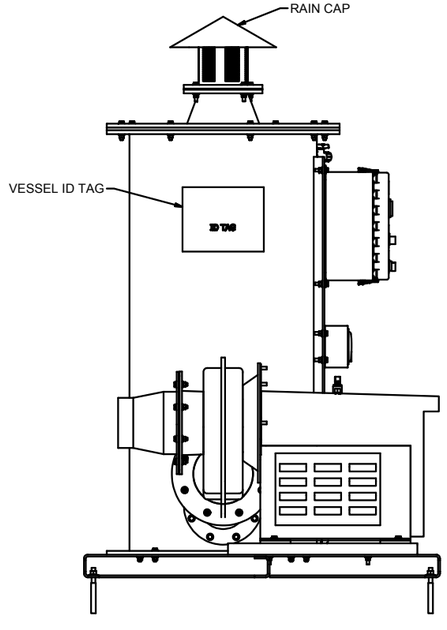
FIRST OPTION (OR EQUAL)



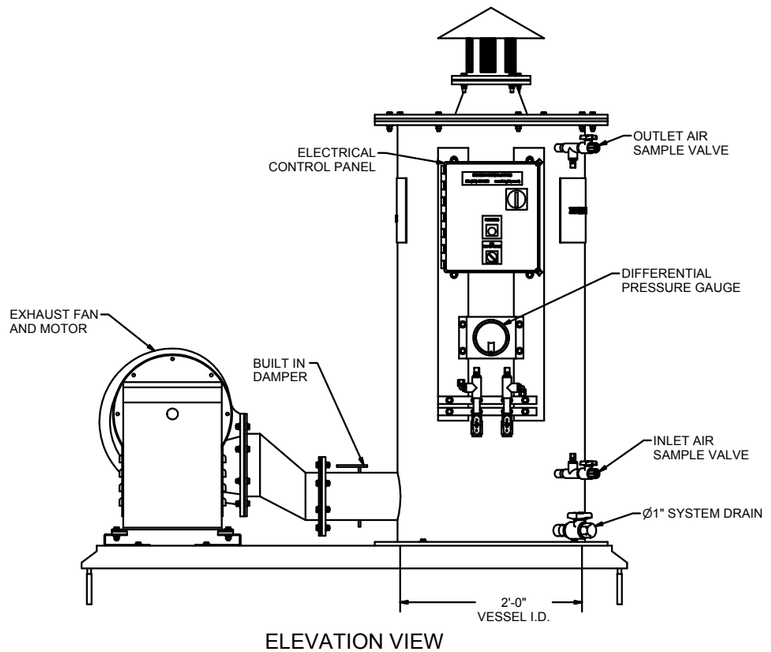
PLAN VIEW



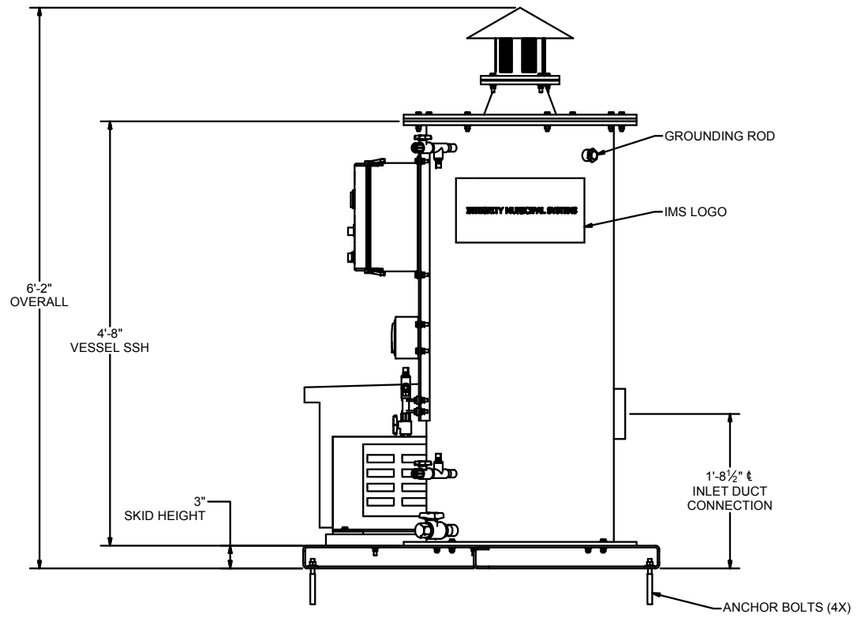
ISOMETRIC VIEW



SIDE VIEW



ELEVATION VIEW



SIDE VIEW

THIRD ANGLE PROJECTION

ALL WELD SYMBOL DIMENSIONS ARE MINIMUM.
DIMENSIONS IN [mm] ARE MILLIMETERS.
DO NOT SCALE DRAWING

DRAWN PER ASME Y14.5M
UNLESS OTHERISE SPECIFIED
ALL DIMENSIONS ARE INCHES
AND TOLERANCES TO BE AS FOLLOWS.

FABRICATION	MACHINE
.XX +/- .06	.XXX +/-.005
.X +/- .13	.XX +/-.01
[X +/- .25]	.X +/- .03
< +/- .5	[X +/- .05]

STD: BORDER-11X17MI

BAR = 1" AT PLOT SCALE

REV	DESCRIPTION	DATE	DWN	CHKD	APVD	ECN
0	STANDARD	2/11/20	JO			

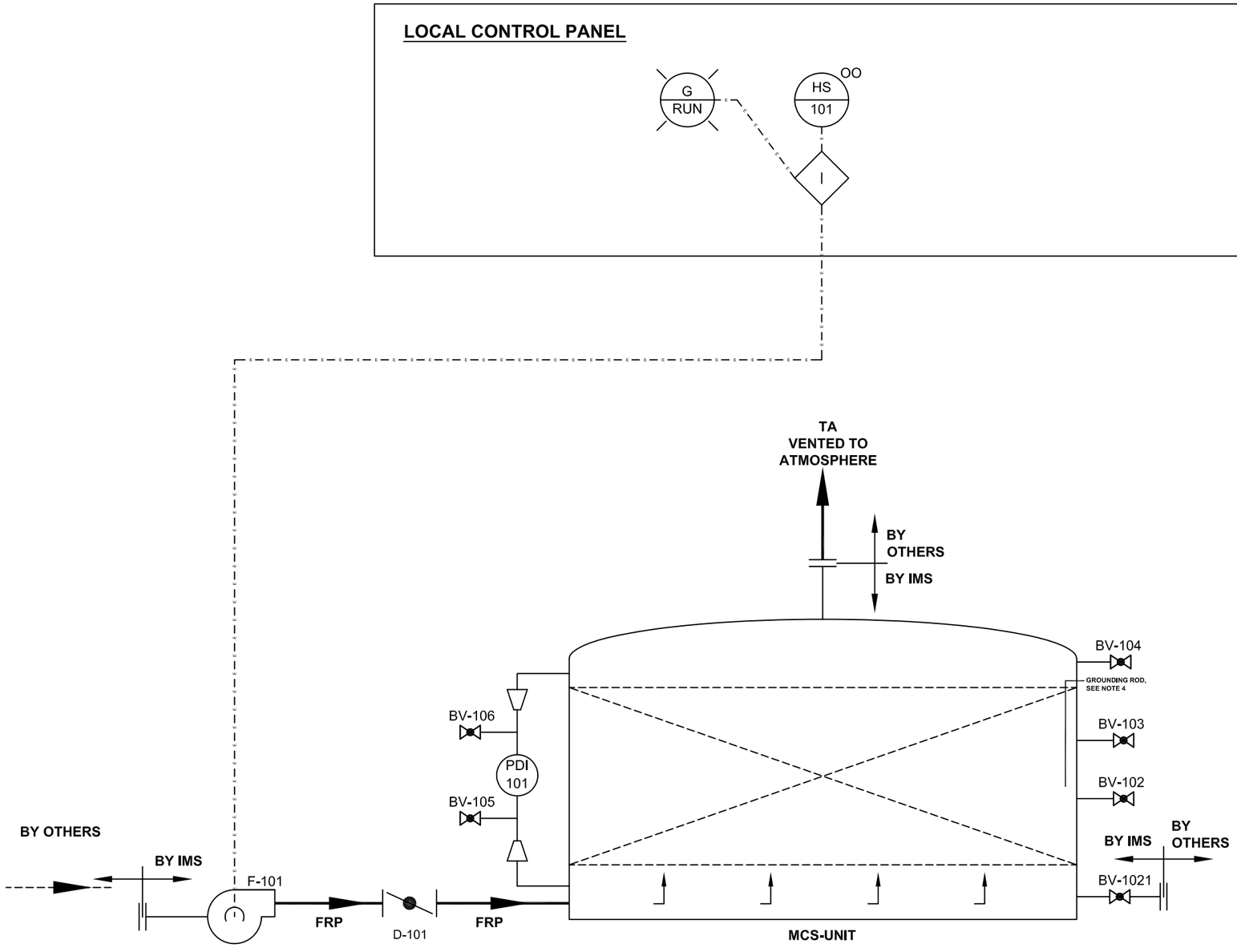
		DATE
DESIGNER	JO	2/11/2020
CHECKER		
ENGINEER		
MANAGER		
FILE:	F5151 SGA.iam	
SCALE:	NTS	

TITLE: STANDARD
GENERAL ARRANGEMENT SALES DRAWING; MCS-024

CLIENT

Integrity MUNICIPAL SYSTEMS
13135 DANIELSON ST., SUITE 204
SAN DIEGO, CA 92064, USA
TEL: 858-486-1620

PROJECT	CODE	DRAWING	SHEET	REV
		F5151 SGA	1 OF 1	0



F-101
FIBERGLASS EXHAUST FAN
VOLTAGE: 460V, 3PH, 60 HZ

MCS-UNIT
SKID MOUNTED CARBON ADSORBER SYSTEM
MATERIAL: FIBERGLASS

NOTES:
1. INLET DUCT FROM ODOR SOURCE(S) TO FAN INLET TO BE PROVIDED AND INSTALLED BY OTHERS.
2. ALL UTILITIES TO BE PROVIDED BY OTHERS. SYSTEM INSTALLATION BY OTHERS.
3. POWER SUPPLY TO LCP BY OTHERS.
4. GROUND WIRE TO GROUNDING ROD BY OTHERS.

REV	DESCRIPTION	DATE	DWN	CHKD	APVD	ECN

STD: BORDER–11X17CA BAR = 1" AT PLOT SCALE

		DATE
DESIGNER	ZA	
CHECKER	KR	
ENGINEER	ZA	
MANAGER	KR	
FILE:	RJCS–XXXX–PID	
SCALE:	NTS	

TITLE: SKID MOUNTED CARBON ADSORBER ODOR CONTROL SYSTEM
PROCESS AND INSTRUMENTATION DIAGRAM
MCS–UNIT

CLIENT

Integrity MUNICIPAL SYSTEMS
13135 DANIELSON ST., SUITE 204
POWAY, CA 92064, USA
TEL: 858–486–1620

PROJECT	CODE	DRAWING	SHEET	REV
	–		1 OF 1	–

SKID-MOUNTED CARBON ADSORBER (MCS Series)

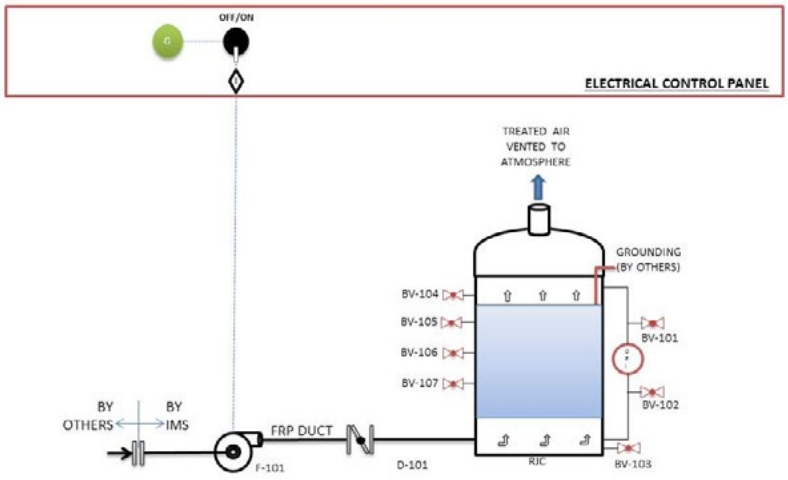
The IMS Model MCS carbon adsorber is a once-through activated carbon odor removal system designed to treat hydrogen sulfide (H_2S) & organic odors (VOCs) found in municipal wastewater collection systems and treatment processes. The MCS is a factory-assembled, skid-mounted odor control system complete with exhaust fan, damper, interconnecting ductwork, vessel, activated carbon media and local control panel. All components are mounted, piped, and wired on an epoxy coated carbon steel skid. System is designed for continuous and automatic operation as well as manual operation as required.

MCS

SUPERIOR PERFORMANCE MEDIA

The IMS carbon systems are designed to work with a wide selection of media:

- Virgin activated carbon media for low odor levels
- High capacity carbon for higher H_2S concentrations



MCS Process & Instrumentation Diagram

MAJOR SYSTEM COMPONENTS

- Epoxy Coated Steel Equipment Skid
- FRP Exhaust Fan
- FRP Transition Duct
- FRP Inlet Damper
- FRP Carbon Adsorber Vessel and Exhaust Stack
- Activated Carbon Media
- Electrical Control Panel

HOW IT WORKS

The exhaust fan operates continuously, pulling foul air from the process area and passing it through the carbon media. A volume control damper at the system inlet allows regulation of airflow through the carbon adsorber.

Inside the vessel, the foul air flows through a densely packed bed of activated carbon. The odorous compounds are removed from the airstream through a combination of physical adsorption and chemisorption. Odorous compounds are physically adsorbed in the carbon pores, and some may undergo chemical reaction to form elemental sulfur and sulfuric acid. This process continues until the activated carbon pores are filled up and the odorous compounds break through and are released out the stack.

SYSTEM FEATURES & BENEFITS

- Superior non-corrosive material
- Easy to operate
- Suitable for outdoor installation
- Fan sound enclosure (Optional)
- Compact, skid-mounted design
- Pre-assembled and factory tested

MCS ACTIVATED CARBON ODOR CONTROL SYSTEM STANDARD MODEL DESIGN DATA

Model	Airflow Rate CFM (m^3/h)	Vessel Dimensions I.D. x SSH ft (mm)	Overall Dimensions (LxWxH) ft (mm)	Inlet Connection inches (mm)	Approx. Weight* lbs (kg)	Carbon Weight lbs (kg)	Fan Motor HP (kw)
MCS-018	110 (190)	18" x 54" (460 x 1370)	6'-0" x 3'-11" x 6'-0" (1830 x 1190 x 1830)	4 (100)	1000 (450)	160 (70)	1 (.75)
MCS-024	200 (340)	24" x 56" (610 x 1420)	6'-0" x 3'-11" x 6'-2" (1830 x 1190 x 1880)	6 (150)	1200 (550)	280 (130)	1 (.75)
MCS-030	300 (510)	30" x 56" (760 x 1420)	7'-0" x 4'-5" x 6'-2" (2130 x 1350 x 1880)	6 (150)	1500 (680)	440 (200)	2 (1.5)
MCS-036	425 (720)	36" x 58" (910 x 1470)	7'-0" x 4'-5" x 6'-5" (2130 x 1350 x 1960)	8 (200)	1700 (770)	640 (290)	2 (1.5)
MCS-042	600 (1020)	42" x 58" (1070 x 1470)	9'-1" x 5'-3" x 6'-5" (2770 x 1600 x 1960)	8 (200)	2300 (1040)	870 (390)	2 (1.5)
MCS-048	750 (1270)	48" x 60" (1220 x 1520)	9'-1" x 5'-3" x 6'-11" (2770 x 1600 x 2110)	10 (250)	2600 (1180)	1130 (510)	2 (1.5)
MCS-054	1000 (1700)	54" x 60" (1370 x 1520)	10'-1" x 6'-1" x 6'-11" (3070 x 1850 x 2110)	10 (250)	3200 (1450)	1430 (650)	3 (2.25)
MCS-060	1250 (2120)	60" x 62" (1525 x 1570)	10'-1" x 6'-1" x 7'-1" (3070 x 1850 x 2160)	12 (300)	3600 (1630)	1770 (800)	3 (2.25)

*Approximate weight is an estimate

13135 DANIELSON STREET, SUITE 204 POWAY, CA 92064
PHONE: (858) 486-1620 FAX: (616) 772-2693 www.integrityms.net

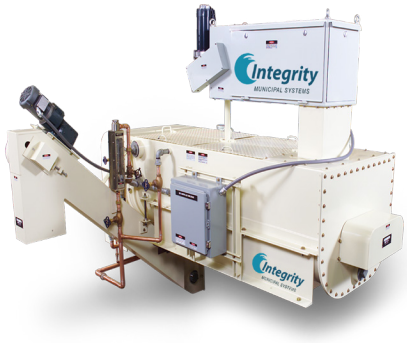
Integrity MUNICIPAL SYSTEMS

Integrity MUNICIPAL SYSTEMS

PRODUCT LINE OVERVIEW

Integrity Municipal Systems (IMS) is a specialty engineering company devoted to the design and supply of innovative, pre-assembled, process solutions for the water and wastewater industry. With over 25 years of systems engineering innovation and project execution, the IMS team has the knowledge and dedication to tackle your odor control and chemical feed needs. IMS has achieved a reputation for producing unique, practical, and cost-effective solutions for our customers. We are committed to providing quality, service, and overall value that exceed your expectations.

Lime Slaker Systems (A-758 & A-758 Plus)



The A-758 and A-758 Plus IMS Lime Slaker Systems provide continuous high volume lime slurries (up to 8,000 lbs/hour) for industrial and municipal process pH adjustment, flocculation, and chemical reaction. The superior paste-type slaking technology consistently produces a higher strength and more reactive lime slurry resulting in more efficient and more economical use of the quicklime. Systems are factory assembled and tested for quick and easy installation, and include options for lime feed and grit removal.

Lime Slaker Feeders

Series 31-165 Gravimetric Feeder

Series 32-215 Volumetric Feeder

Series 32-300 Volumetric Feeder

Chemical Feed Systems

IMS chemical feed systems are pre-assembled, fully-functional chemical delivery systems for water treatment applications. These compact, user-friendly chemical skids include local storage tanks, full secondary containment, dosing pumps, instrumentation and controls. Systems are piped and wired at the factory for easy and quick hook-up.

Fluoride Feed System

IMS Fluoride Feed Systems use sodium fluoride for community water fluoridation. They are designed with separate saturator and solution tanks, unlike conventional methods, to assure complete saturation, high reliability, low maintenance and ease of use.

Aqueous Ammonia Feed System

IMS packaged Aqueous Ammonia Feed Systems are used in the formation of chloramines for disinfection. The system includes a heavy-duty pressure rated aqueous ammonia storage tank, integral ammonia fume scrubber, peristaltic dosing pump, instrumentation and controls in a fully contained, pre-assembled skid. Optional enclosure, shown right, is ideal for outdoor or remote locations. The FRP shelter houses the equipment in an air conditioned environment and comes complete with lighting, ventilation fan, and breaker panel.

Odor Control Systems

Standardized, pre-engineered, factory assembled odor control systems for treating odors at sewage pump stations and wastewater treatment plants. Systems are simple to install, reducing installed cost and delivery time.

Biological Odor Control Systems

The I-BOx™ Biological Odor Control System (Patent Pending) uses a two-stage process with a biological stage to remove 99% of the hydrogen sulfide (H_2S), followed by an activated carbon polishing stage to remove residual H_2S and organic odors. Standard models are available to treat up to 5,000 cfrm (8,500 m^3/h) of odorous air.

Carbon Odor Control Systems

The carbon adsorber odor control systems consist of an exhaust fan, damper, interconnecting ductwork, vessel with activated carbon (3 ft. bed) and a control panel. The carbon odor control systems are designed to work with a wide selection of media: virgin activated carbon for low odor level, and high capacity carbon for higher H_2S concentrations.

MCS Carbon Odor Control System

Standard models are available to treat up to 1,400 cfm (2400 m^3/h) of odorous air in a single carbon stage.

BCS Carbon Odor Control System

Standard models treat up to 6,800 cfm (11600 m^3/h) in a single carbon stage and up to 20,000 cfm (34000 m^3/h) in a dual carbon bed system.

Emergency Chlorine Scrubbers

IMS wet emergency chlorine scrubber systems contain and treat accidental releases of chlorine gas, limiting the atmospheric release of chlorine to less than 1 ppm. The compact scrubber systems are factory pre-assembled, piped, wired and tested, with a low profile suitable for either indoor or outdoor installation. The system design surpasses the requirements of the Uniform Fire Code.

EVS-150

This multi-stage wet scrubber system treats chlorine vapors from a bank of 150lb (70kg) chlorine cylinders, at leak rates of 28 lbs/min or more.

EVS-2000

This multi-stage wet scrubber system treats up to 3 tons of chlorine vapor, at leak rates of 100 lbs/min or more.

EVS-2000C

The EVS-2000C emergency chlorine scrubber is a multi-stage wet scrubber system designed to treat up to 1 ton of chlorine vapor, at leak rates of 100 lbs/min or more.

13135 DANIELSON STREET, SUITE 204 POWAY, CA 92064
PHONE: (858) 486-1620 FAX: (858) 486-1659 www.integrityms.net

Integrity MUNICIPAL SYSTEMS

CARBTROL®

AIR PURIFICATION CANISTERS 140-200 LB. ACTIVATED CARBON

G-1
G-2
G-3

The CARBTROL "G" Canisters handles flows up to 500 CFM.

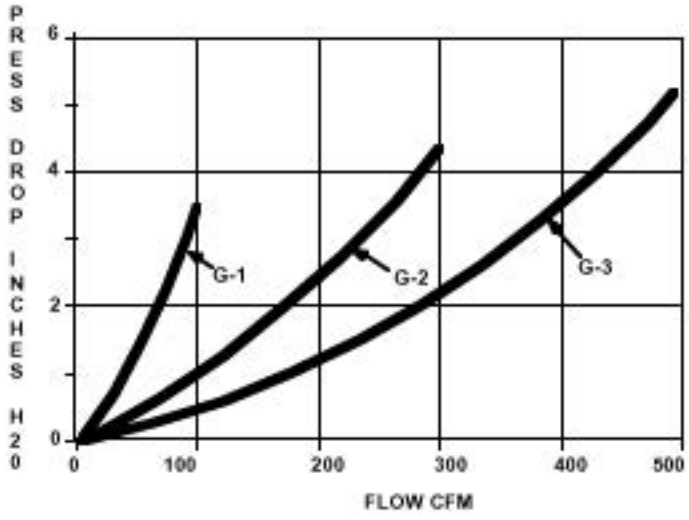
SECOND OPTION (OR EQUAL)

FEATURES

- High activity carbon.
- Epoxy lined steel or polyethylene construction.
- Acceptable for transport of hazardous spent carbon.
- Side drain for removal of accumulated condensate.
- Low pressure drop.
- PVC internal piping.
- High temperature (180°F) steel units available.

APPLICATIONS

- Soil vapor remediation
- Air stripper exhausts
- Tank vents
- Exhaust hoods
- Work area purification
- Sewage plant odor control



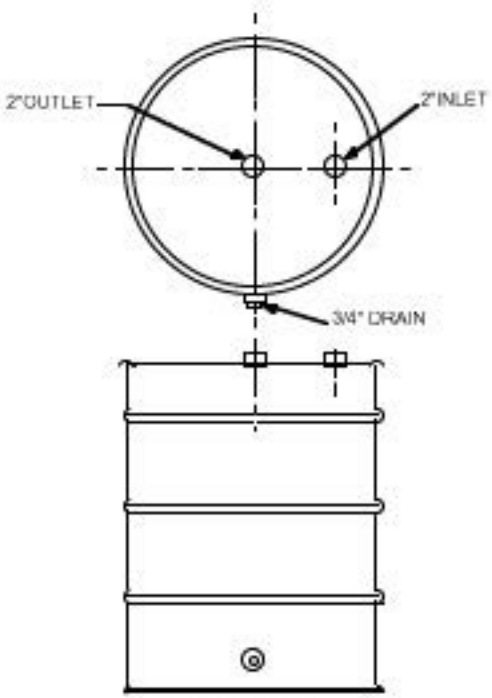
 Rev. 4/5/19 AT-116/#1

CARBTROL®
CORPORATION
955 Connecticut Ave., Suite 5202
Bridgeport, CT 06607
800-242-1150 Fax: 203-337-4347
www.carbtrol.com info@carbtrol.com

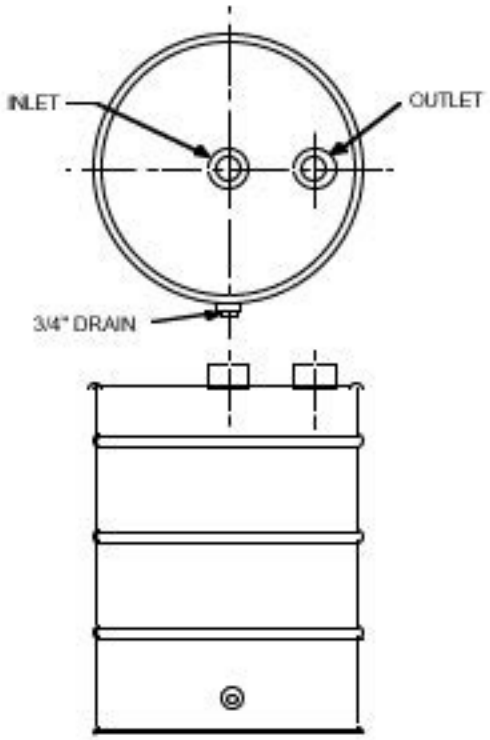
CARBTROL®

AIR PURIFICATION CANISTERS
140-200 LB. ACTIVATED CARBON

G-1
G-2
G-3



MODEL G-1



MODEL G-2,G-3

SPECIFICATIONS

MODEL	DIAMETER/HEIGHT	CARBON WEIGHT	INLET/OUTLET	MAXIMUM RATED FLOW	APPROXIMATE SHIP WEIGHT
G-1*	24"/36"	200 lbs.	2"/2"	100 CFM	250 lbs.
G-2*	24"/36"	170 lbs.	4"/4"	300 CFM	220 lbs.
G-3P	24"/36"	140 lbs.	6"/4"	500 CFM	190 lbs.
G-3S	24"/34"	140 lbs.	4"/4"	500 CFM	180 lbs.

* Specify: Polyethylene (P) or Epoxy Lined Steel (S)

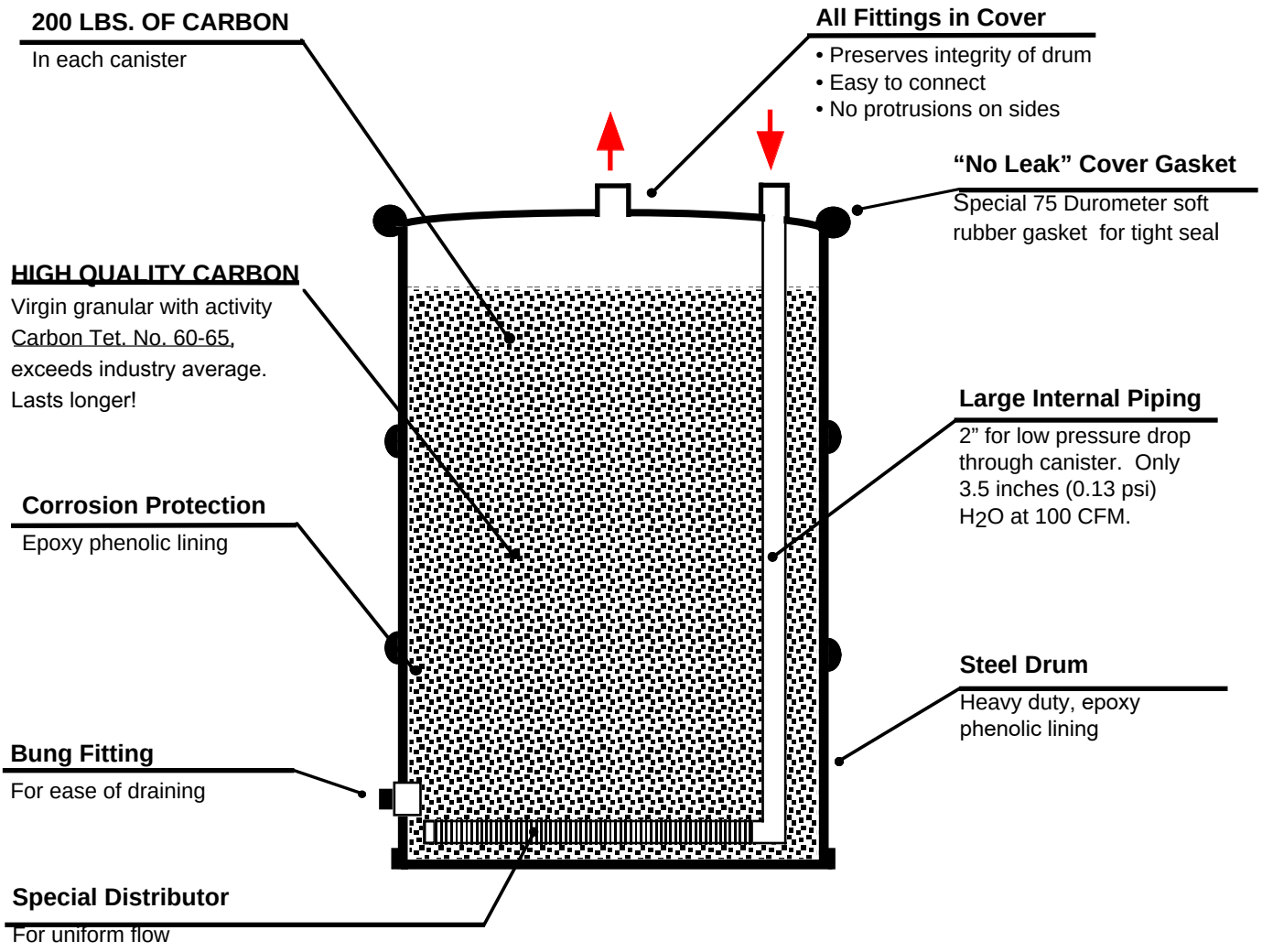
SAFETY

Certain chemical compounds in the presence of activated carbon may oxidize, decompose or polymerize. This could result in temperature increases sufficient to cause ignition of the activated carbon or adsorbed material. If a compounds reaction with activated carbon is unknown, appropriate tests should be considered.

CARBTROL® CORPORATION
955 Connecticut Ave., Suite 5202
Bridgeport, CT 06607
800-242-1150 Fax: 203-337-4347
www.carbtrol.com info@carbtrol.com

CARBTROL®

Here's Why CARBTROL'S G-1 Vapor Phase Canister Is the Best !!



AT-116/#2

CARBTROL® CORPORATION
200 Benton St.
Stratford, CT 06615
800-242-1150 Fax: 203-337-4347
www.carbtrol.com info@carbtrol.com

EXHIBIT 8

S.P.I.F. - SUPPLEMENTAL

PERMIT INFORMATION

FORM

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

FOR AGENCIES REVIEWING DOMESTIC OR INDUSTRIAL TPDES WASTEWATER PERMIT APPLICATIONS

TCEQ USE ONLY:

Application type: _____Renewal _____Major Amendment ____Minor Amendment _____New

County: _____ Segment Number: _____

Admin Complete Date: _____

Agency Receiving SPIF:

_____ Texas Historical Commission _____ U.S. Fish and Wildlife

_____ Texas Parks and Wildlife Department _____ U.S. Army Corps of Engineers

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

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

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

The following applies to all applications:

1. Permittee: East Waller County Management District

   Permit No. WQ00 N/A EPA ID No. TX Click here to enter text.

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

   The Acorn Ranch WWTP is located 300 ft West and 600 ft North of the intersection of Lakeside Drive and Robin Hood Dr.

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

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

First and Last Name: Ali Safari

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

Title: Senior Design Engineer

Mailing Address: 1080 Eldridge Parkway, Suite 600

City, State, Zip Code: Houston, TX 77077

Phone No.: (281) 921 8765 Ext.: Click here to enter text. Fax No.: Click here to enter text.

E-mail Address: asafari@dccm.com

2. List the county in which the facility is located: Waller
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.

Detention pond; thence to Brushy Creek; thence to Spring Creek in Segment No. 1008_02 of the San Jacinto 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:

N/A

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:

February 2025 – July 2026

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

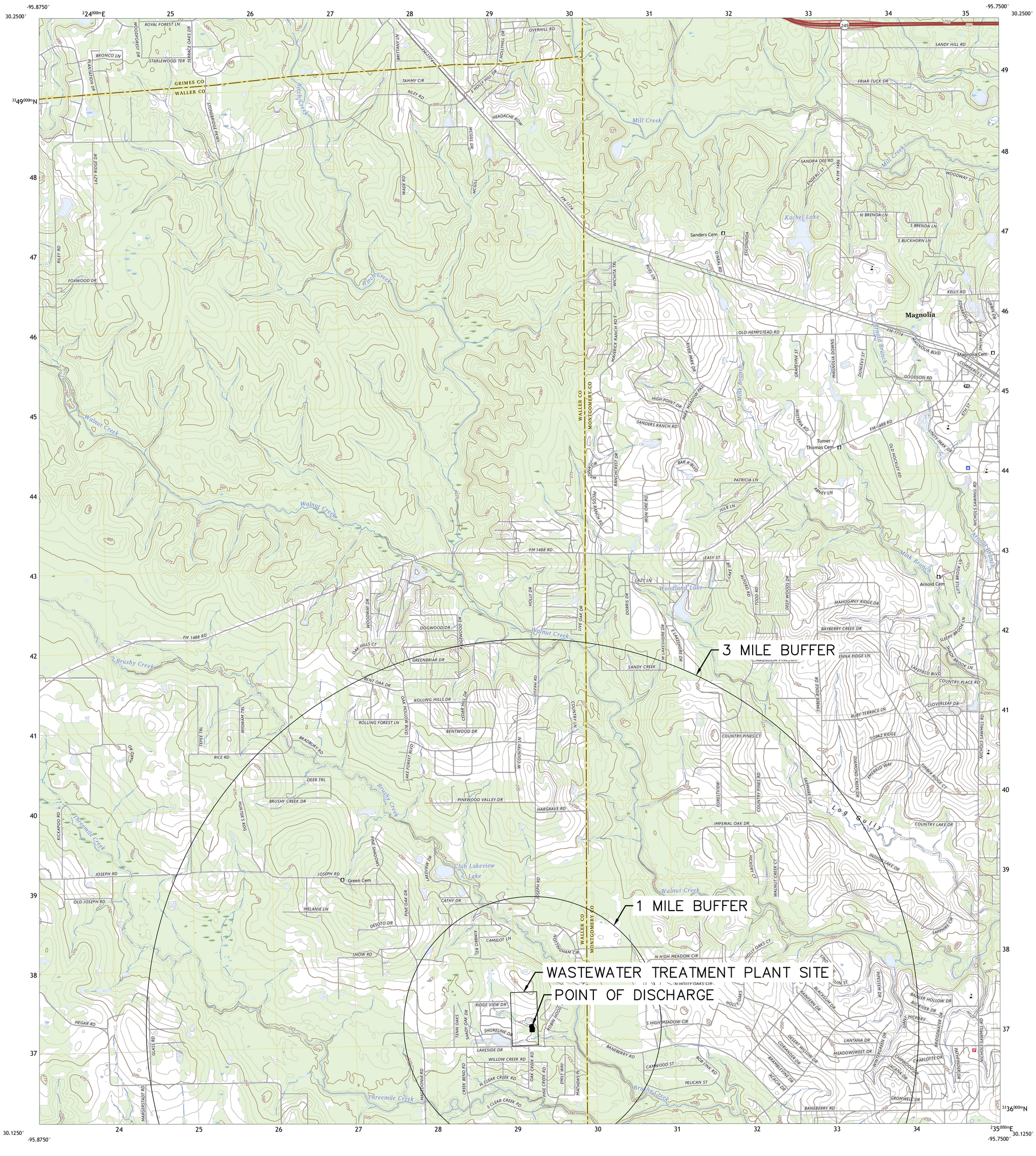
N/A

USGS science for a changing world

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

The National Map US Topo

MAGNOLIA WEST QUADRANGLE
TEXAS
7.5-MINUTE SERIES



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 15R

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
Roads.....U.S. Census Bureau, 2015
Names.....GNIS, 1979 - 2023
Hydrography.....National Hydrography Dataset, 2003 - 2022
Contours.....National Elevation Dataset, 2010
Boundaries.....Multiple sources; see metadata file 2021 - 2022

Wetlands.....FWS National Wetlands Inventory Not Available

MN
GN
2°13'
39 MILS
1°25'
25 MILS
UTM GRID AND 2023 MAGNETIC NORTH DECLINATION AT CENTER OF SHEET

U.S. National Grid
100,000 - m Square ID
TP
Grid Zone Designation
15R

SCALE 1:24 000

1 0.5 0 KILOMETERS 1 2
1000 500 0 METERS 1000 2000
1 0.5 0 1
MILES
1000 0 1000 2000 3000 4000 5000 6000 7000 8000 9000 10000
FEET

CONTOUR INTERVAL 5 FEET
NORTH AMERICAN VERTICAL DATUM OF 1988

This map was produced to conform with the National Geospatial Program US Topo Product Standard.

TEXAS
QUADRANGLE LOCATION

1	2	3
4		5
6	7	8

1 Stoneham
2 Plantersville
3 Keenan
4 Waller NW
5 Magnolia East
6 Waller
7 Hockley
8 Rose Hill
ADJOINING QUADRANGLES

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

NSN 7643016397146
NGA REF NO. USGSX24K27250

MAGNOLIA WEST, TX
2023

ACORN RANCH
WASTEWATER TREATMENT PLANT
DISCHARGE PERMIT APPLICATION
USGS MAP EXHIBIT A

Binkley & Barfield
DCCM

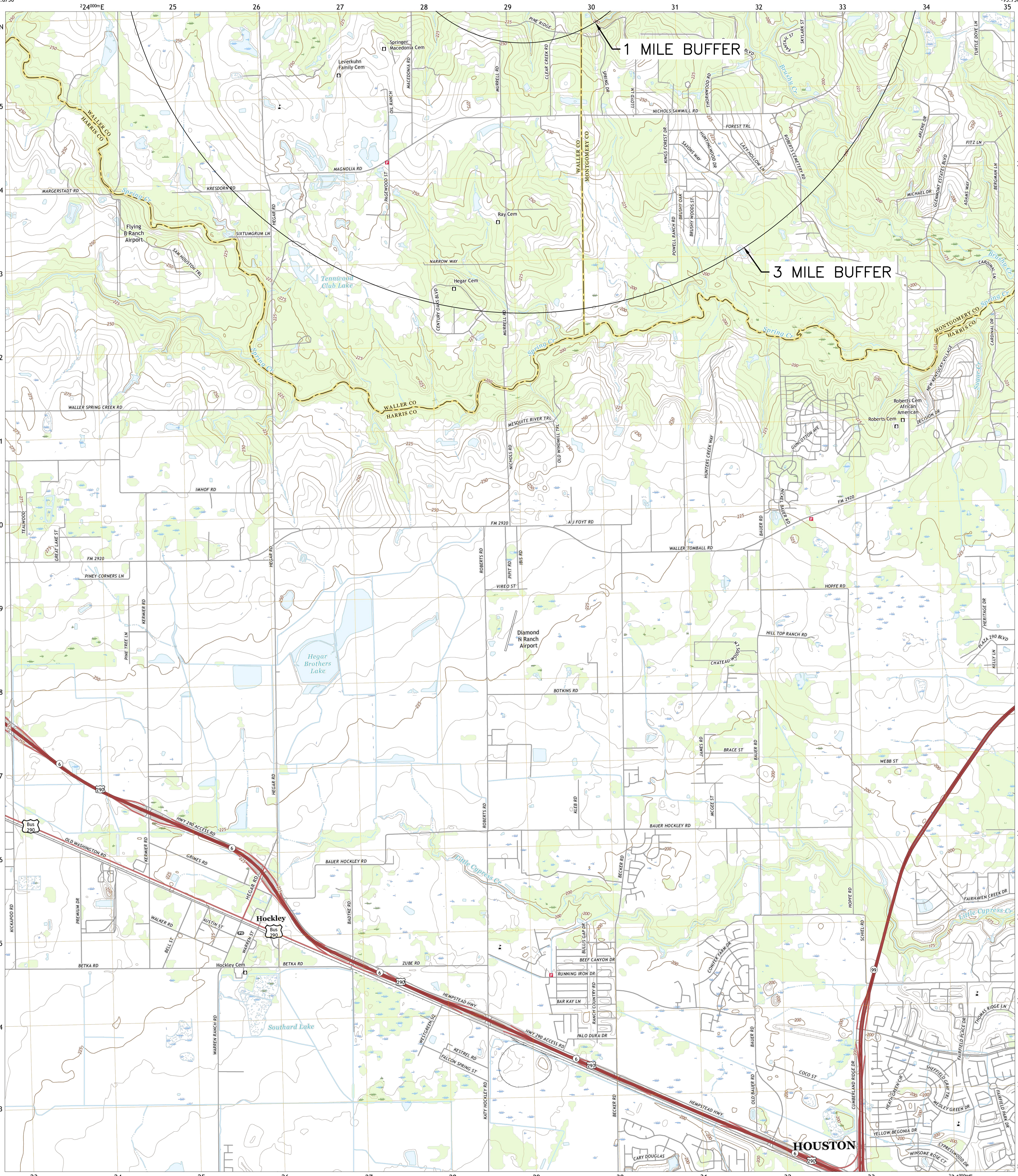
Binkley & Barfield, Inc. | TxEng F-257
1710 Seamist Dr, Houston, TX 77008
713.869.3433 | BinkleyBarfield.com

DATE: June 24
SCALE: AS NOTED

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

The National Map US Topo

HOCKLEY QUADRANGLE
TEXAS
7.5-MINUTE SERIES



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 15R
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
Roads.....U.S. Census Bureau, 2015 - 2019
Names.....GNIS, 1979 - 2022
Hydrography.....National Hydrography Dataset, 2003 - 2018
Contours.....National Elevation Dataset, 2010
Boundaries.....Multiple sources; see metadata file 2019 - 2021

Wetlands.....FWS National Wetlands Inventory Not Available

MN
GN
1°25´
25 MILS
2°37´
47 MILS
UTM GRID AND 2019 MAGNETIC NORTH DECLINATION AT CENTER OF SHEET

U.S. National Grid
100,000 - m Square ID
TP
Grid Zone Designation 15R

SCALE 1:24 000
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1000 500 0 1000 2000 METERS
1 0.5 0 1 MILES
1000 0 1000 2000 3000 4000 5000 6000 7000 8000 9000 10000 FEET

CONTOUR INTERVAL 5 FEET
NORTH AMERICAN VERTICAL DATUM OF 1988

This map was produced to conform with the
National Geospatial Program US Topo Product Standard.

TEXAS
QUADRANGLE LOCATION

1	2	3
4		5
6	7	8

ADJOINING QUADRANGLES
1 Waller NW
2 Magnolia West
3 Magnolia East
4 Waller
5 Rose Hill
6 Hockley Mound
7 Warren Lake
8 Cypress

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

HOCKLEY, TX
2022

NSN. 7643016396553
NGA REF NO. USGSX24K20612

ACORN RANCH
WASTEWATER TREATMENT PLANT
DISCHARGE PERMIT APPLICATION
USGS MAP EXHIBIT B

Binkley & Barfield
DCCM
Binkley & Barfield, Inc. | TxEng F-257
1710 Seamist Dr, Houston, TX 77008
713.869.3433 | BinkleyBarfield.com

DATE: June 24
SCALE: AS NOTED

J:\EWCMD\2400000217.000_ACORN RANCH WWTP TPDES PERMIT APP\6.00_CADD\6.03_DRAWINGS\24-0217-PD-USGS MAP EXHIBIT.DWG | HBREAUX | SAVED: Wednesday, July 3, 2024 3:44:32 PM | PLOTTED: Thursday, July 11, 2024 10:50:51 AM

EXHIBIT 9

TREATMENT UNITS

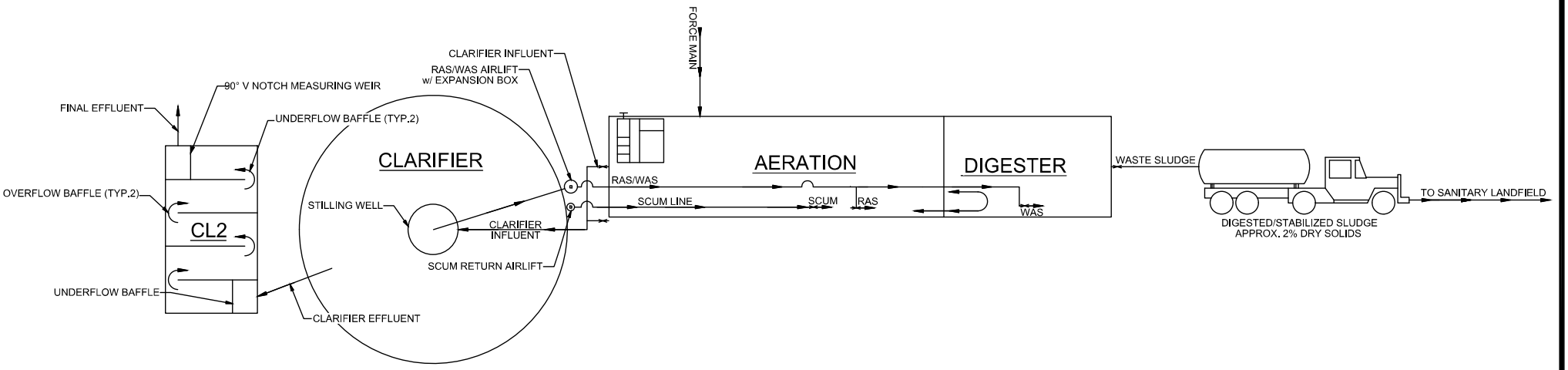
Interim I Phase

Table 1.0(1) – Treatment Units

Treatment Unit Type	Number of Units	Dimensions (L x W x D)
Aerobic Digester	1	24’ x 12’ x 12.17’
Aeration Basin	1	36’ x 12’ x 12.17’
Clarifier	1	18’ Diameter x 13.17’ Depth
Chlorine Basin	1	12’ x 8’ x 7.17’

EXHIBIT 10

PROCESS FLOW DIAGRAM



PROCESS FLOW DIAGRAM

EAST WALLER COUNTY
MANAGEMENT DISTRICT
ACORN RANCH WASTEWATER
TREATMENT PLANT
PROCESS FLOW DIAGRAM

r.g. miller

DCCM

R.G. Miller Engineers, Inc. | TxEng F - 487

1080 Eldridge Parkway, Ste 600
Houston, TX 77077

713.461.9600 | rgmiller.com

DATE: SEPTEMBER 2024 SCALE: N.T.S.

EXHIBIT 11

SITE DRAWING

DET.
3.7 AC.

W.W.T.P.
.9 AC.

DET.
6.7 AC.

LAKESIDE DRIVE

LAND USE SUMMARY

- SFR – 40' X 120' (55) 30%
- SFR – 45' X 120' (72) 39%
- SFR – 50' X 120' (57) 31%
- DETENTION/AMENITY (+/– 10.4 AC.)
- PARK (+/– 1.1 AC.)
- TRAIL (+/– 3,700 L.F.)

ACORN RANCH
SCHEMATIC PLAN

DATE: AUGUST, 2024 SCALE: 1" = 100'
TOTAL LOTS – 184

ENGINEER

r.g. miller

DCCM

R.G. Miller Engineers, Inc. | TxEng F - 487
16340 Park Ten Place, Ste 350
Houston, TX 77084
713.461.9600 | rgmiller.com

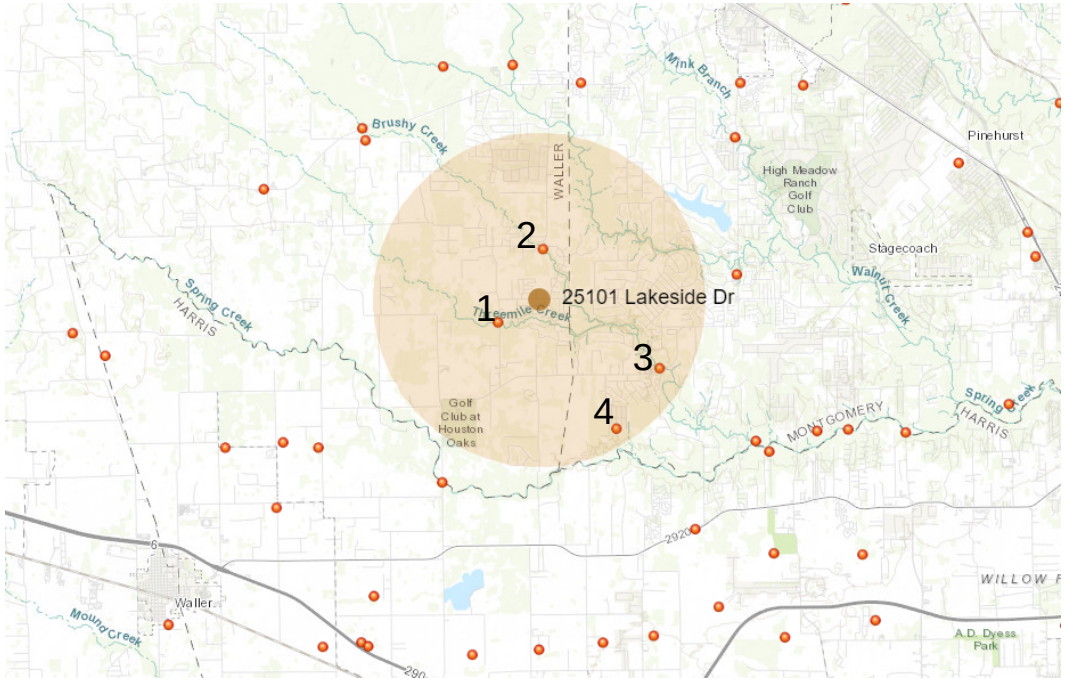
EXHIBIT 12

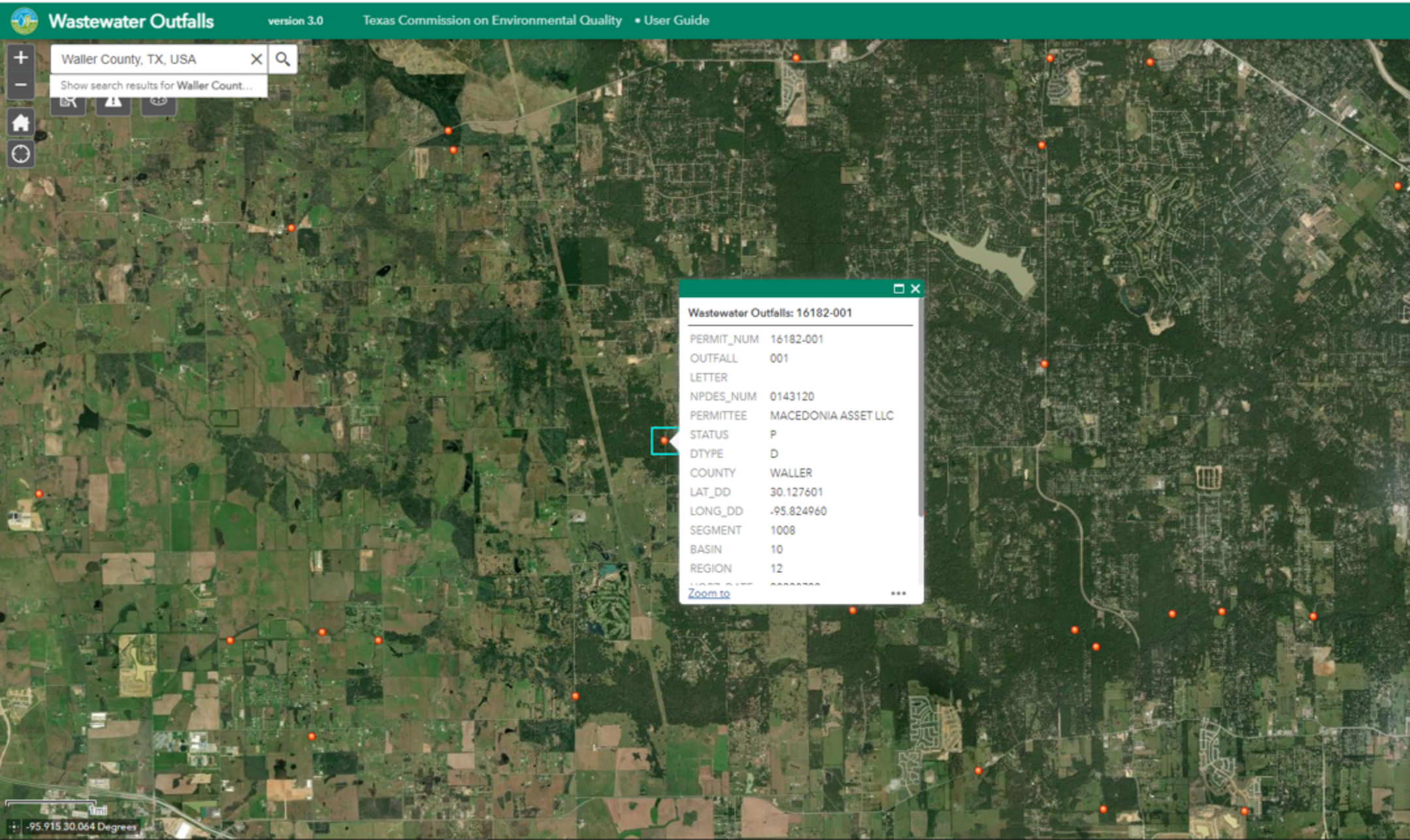
NEARBY WWTP

Acorn Ranch WWTP

Technical Report 1.1.1.B.3

Facility	Collection System	Permittee's Name	Permit Number
1	Woodside Manor WWTP	Macedonia Asset LLC – Shelley Young	WQ0016182001
2	Maple Woods WWTP	Joseph Rd WWTP LLC - Jason Schultz	WQ0016347001
3	Mike Emmons Development WWTP	7E Property Holdings LP - Mr. Mike Emmons	WQ0015500001
4	Brushy Creek WWTP	Aqua Texas Inc - Scot Foltz	WQ0012898001




Wastewater Outfalls
version 3.0
Texas Commission on Environmental Quality • User Guide
Waller County, TX, USA
Show search results for Waller Count...
Wastewater Outfalls: 16182-001
PERMIT_NUM 16182-001
OUTFALL 001
LETTER
NPDES_NUM 0143120
PERMITTEE MACEDONIA ASSET LLC
STATUS P
DTYPE D
COUNTY WALLER
LAT_DD 30.127601
LONG_DD -95.824960
SEGMENT 1008
BASIN 10
REGION 12
Zoom to
1mi
-95.915 30.064 Degrees

From: Shelley Young <syoung@waterengineers.com>
Sent: Thursday, July 11, 2024 10:34 AM
To: Haley Breaux
Cc: Li Chen
Subject: RE: TPDES Permit for New District

This facility has not been built yet, but will only have capacity of 80,000 gpd for the development it will service. It will have no excess capacity.

Regards,

Shelley B. Young, P.E.
WaterEngineers, Inc.
17230 Huffmeister Rd.
Cypress, TX ~ 77429
tel: 281-373-0500
fax: 281-373-1113
www.waterengineers.com

From: Haley Breaux <HBreaux@binkleybarfield.com>
Sent: Thursday, July 11, 2024 10:04 AM
To: Shelley Young <syoung@waterengineers.com>
Cc: Li Chen <LC@binkleybarfield.com>
Subject: TPDES Permit for New District

To whom it may concern,

East Waller County Management District is looking to build a new domestic MBR wastewater treatment plant and is currently applying for a new TPDES discharge permit. Per TCEQ form 10054 Domestic Technical Report 1.1, displayed below, we are required to reach out to all WWTP within a 3-mile radius of the proposed facility to request service. We have identified the facility listed below as falling within the 3-mile radius. Attached is the proposed WWTP location with a proposed capacity of 70,000 GPD or 0.07 MGD. Please express any concerns or interest in accepting our wastewater.

Permits:

WQ0016347001 Woodside Manor WWTP

Domestic Technical Report 1.1 from TCEQ form 10054:

3. ***Nearby WWTPs or collection systems***

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

☒ Yes ☐ No

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

Attachment: Click to enter text.

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

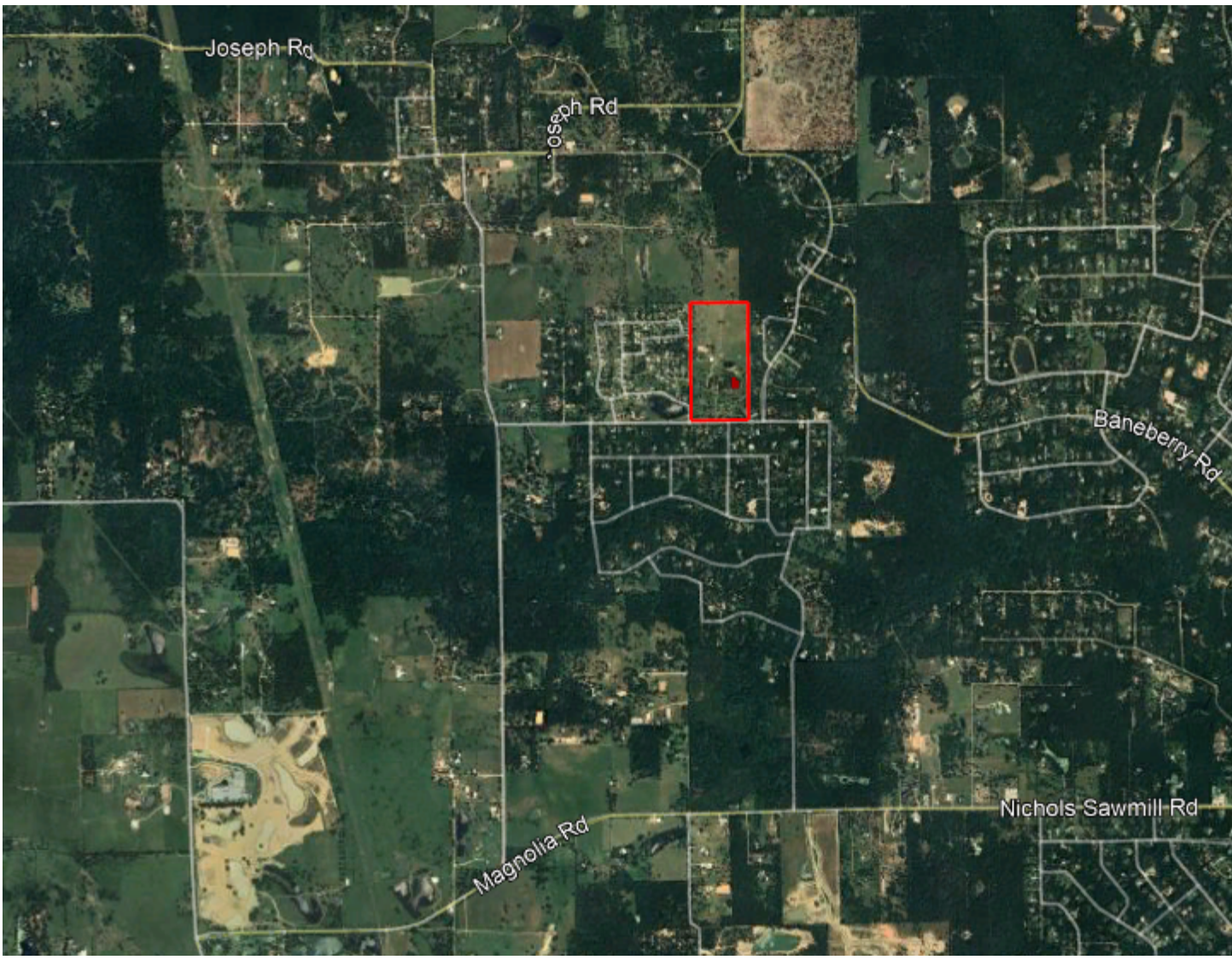
Attachment: Click to enter text.

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

Attachment: Click to enter text.

Preliminary WWTP location:

WWTP LOCATION KMZ ATTACHED



If you are not the preferred recipient of this email, please forward this message to the responsible party.

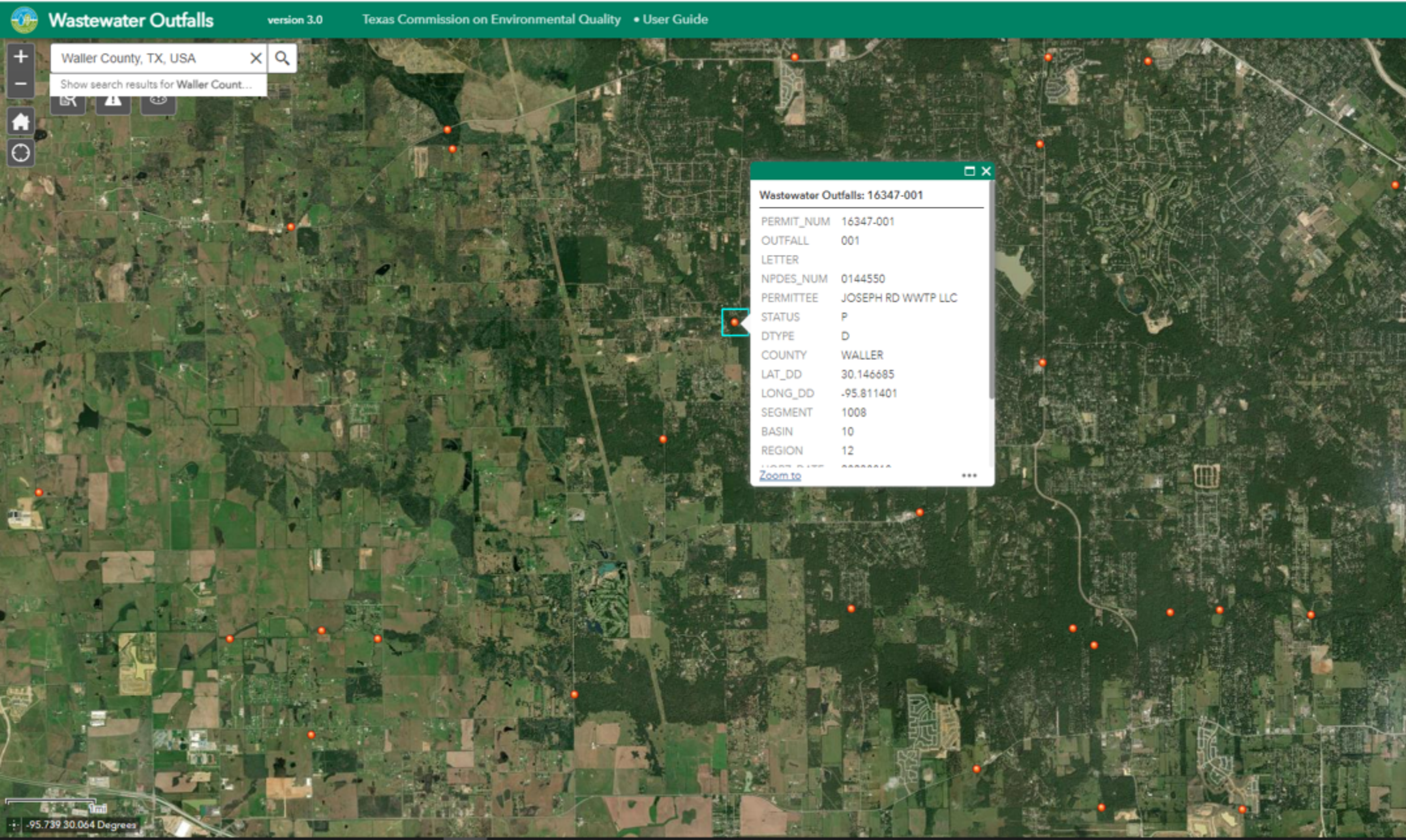
Thank you,

Haley Breaux
Design Engineer

Binkley & Barfield | DCCM

A 1710 Seamist Drive, Houston, Texas 77008

P 713.869.3433 **x** 1321


Wastewater Outfalls
version 3.0
Texas Commission on Environmental Quality
• User Guide
Waller County, TX, USA
Show search results for Waller Count...
Wastewater Outfalls: 16347-001
PERMIT_NUM 16347-001
OUTFALL 001
LETTER
NPDES_NUM 0144550
PERMITTEE JOSEPH RD WWTP LLC
STATUS P
DTYPE D
COUNTY WALLER
LAT_DD 30.146685
LONG_DD -95.811401
SEGMENT 1008
BASIN 10
REGION 12
Zoom to
1mi
-95.739 30.064 Degrees

RE: TPDES Permit for New District - Acorn Ranch WWTP

Schultz, Jason W. <jschultz@gfnet.com>
Mon 7/29/2024 7:19 AM

To:Haley Breaux <HBreaux@binkleybarfield.com>
Cc:Li Chen <LC@binkleybarfield.com>;Ali Safari <asafari@rgmiller.com>

Haley,

I apologize, I have been out of the office. Per your email below, the Maple Woods WWTP does not have capacity to serve your development. Should you have any questions or require additional information please let me know.

Than You,

Jason W. Schultz, P.E. | Senior Project Manager
Gannett Fleming | 3100 W. Alabama St., Houston, TX 77098
O 713.527.6487 | **C** 713.816.0113 | jschultz@gfnet.com
Excellence Delivered As Promised
gannettfleming.com | Stay connected: *LinkedIn* | *Facebook* | *Instagram*

From: Haley Breaux <HBreaux@binkleybarfield.com>
Sent: Tuesday, July 23, 2024 3:51 PM
To: Schultz, Jason W. <jschultz@gfnet.com>
Cc: Li Chen <LC@binkleybarfield.com>; Ali Safari <asafari@rgmiller.com>
Subject: Re: TPDES Permit for New District - Acorn Ranch WWTP

Jason,

As you are aware when submitting a TCEQ Permit Request there are several steps that must be taken. One of those tasks includes reaching out to facilities within a 3-mile radius of the proposed facility to inquire about flow acceptance. From my understanding the Maple Woods WWTP is within that 3-mile range and has a pending permit as of May 20,2024 with a daily average flow not to exceed 200,000 gpd. A response stating either the rejection or acceptance to the previous email is required per TCEQ Permitting.

If you are not the intended recipient of this message, please notify me immediately or extend this email to the responsible party. I look forward to hearing from you soon.

Thank you,

Haley Breaux
Design Engineer

Binkley & Barfield | DCCM
713.869.3433 x 1321 p

From: Haley Breaux <HBreaux@binkleybarfield.com>
Sent: Monday, July 15, 2024 8:19 AM
To: jason.schultz@decorp.com <jason.schultz@decorp.com>
Cc: Li Chen <LC@binkleybarfield.com>
Subject: TPDES Permit for New District - Acorn Ranch WWTP

To whom it may concern,

East Waller County Management District is looking to build a new domestic MBR wastewater treatment plant and is currently applying for a new TPDES discharge permit. Per TCEQ form 10054 Domestic Technical Report 1.1, displayed below, we are required to reach out to all WWTP within a 3-mile radius of the proposed facility to request service. We have identified the facility listed below as falling within the 3-mile radius. Attached is the proposed WWTP location with a proposed capacity of 75,000 GPD or 0.08 MGD. Please express any concerns or interest in accepting our wastewater.

Permits:

WQ0016347001 - Maple Woods WWTP

Domestic Technical Report 1.1 from TCEQ form 10054:

3. ***Nearby WWTPs or collection systems***

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

☒ Yes ☐ No

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

Attachment: Click to enter text.

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

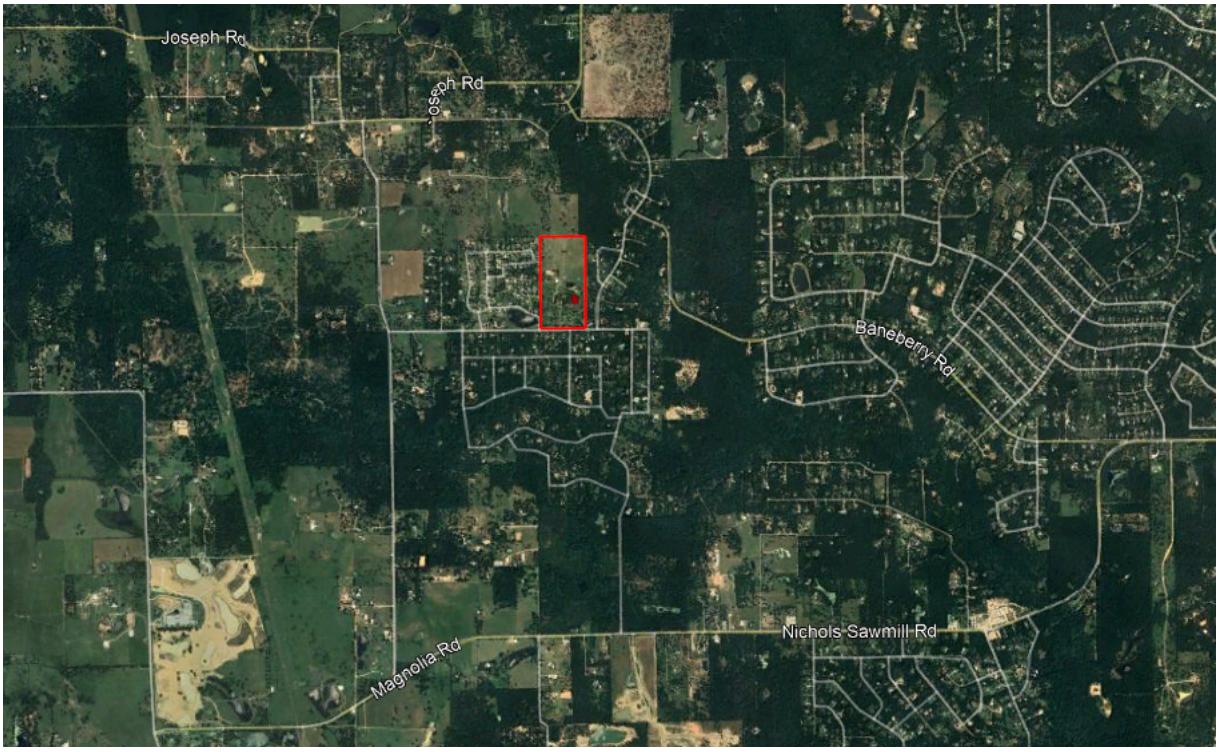
Attachment: Click to enter text.

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

Attachment: Click to enter text.

Preliminary WWTP location:

WWTP LOCATION KMZ ATTACHED



If you are not the preferred recipient of this email, please forward this message to the responsible party.

Thank you,

Haley Breaux
Design Engineer

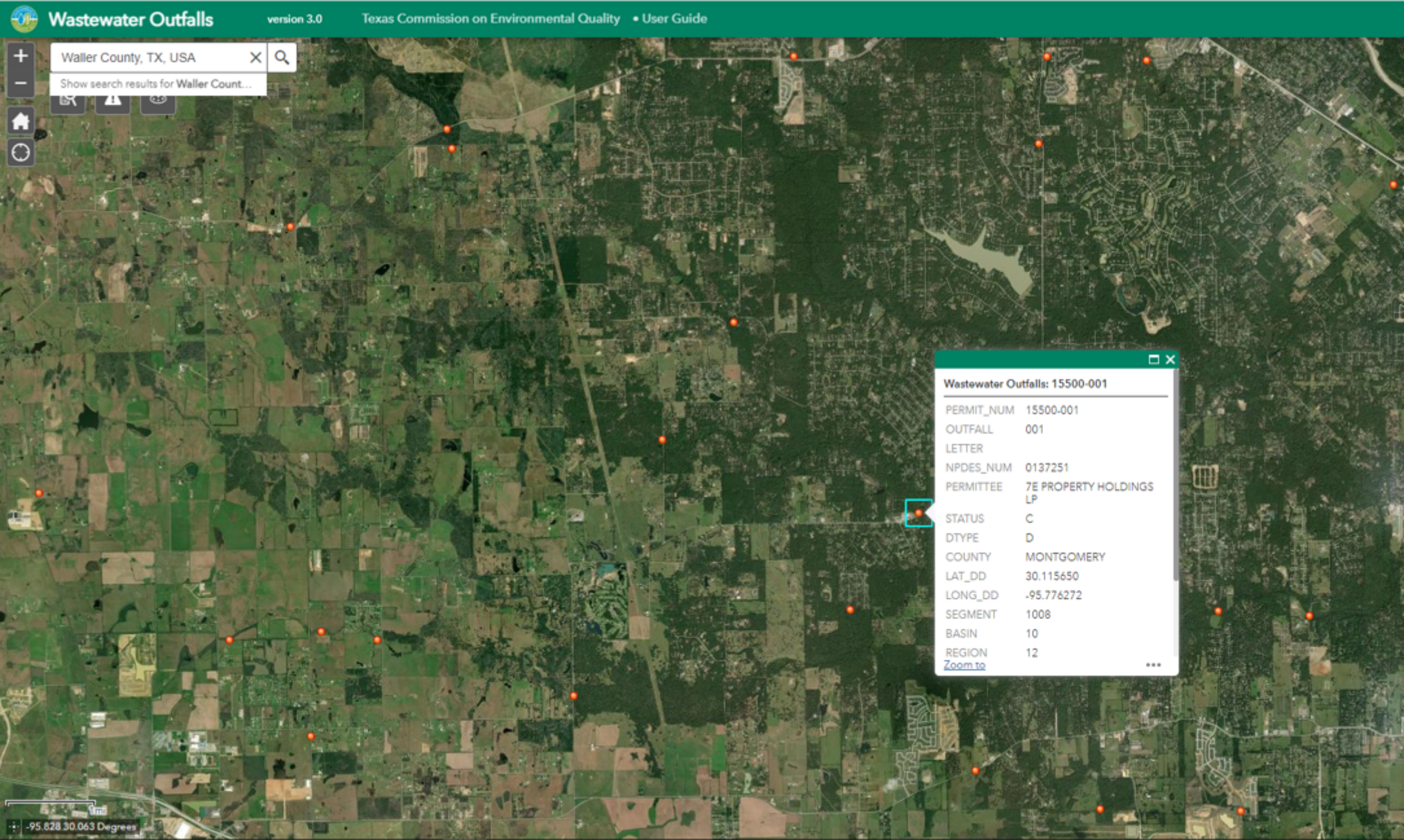
Binkley&Barfield | DCCM

A 1710 Seamist Drive, Houston, Texas 77008
P 713.869.3433 **x** 1321
BinkleyBarfield.com |

Haley Breaux
Design Engineer

Binkley&Barfield | DCCM

A 1710 Seamist Drive, Houston, Texas 77008
P 713.869.3433 **x** 1321
BinkleyBarfield.com |


Wastewater Outfalls
version 3.0
Texas Commission on Environmental Quality • User Guide
Waller County, TX, USA
Show search results for Waller Count...
Wastewater Outfalls: 15500-001
PERMIT_NUM 15500-001
OUTFALL 001
LETTER
NPDES_NUM 0137251
PERMITTEE 7E PROPERTY HOLDINGS LP
STATUS C
DTYPE D
COUNTY MONTGOMERY
LAT_DD 30.115650
LONG_DD -95.776272
SEGMENT 1008
BASIN 10
REGION 12
Zoom to
-95.828 30.063 Degrees

RE: TPDES Permit for New District - Acorn Ranch WWTP

Mike Emmons <mike@rapidwastesolutions.com>
Wed 7/31/2024 11:50 AM
To:Haley Breaux <HBreaux@binkleybarfield.com>
Cc:Li Chen <LC@binkleybarfield.com>;Ali Safari <asafari@rgmiller.com>

We don't have the capacity to accommodate your needs.

Thanks,

Loretta Emmons
713-515-7590

From: Haley Breaux <HBreaux@binkleybarfield.com>
Sent: Wednesday, July 31, 2024 11:22 AM
To: Mike Emmons <mike@rapidwastesolutions.com>
Cc: Li Chen <LC@binkleybarfield.com>; Ali Safari <asafari@rgmiller.com>
Subject: Re: TPDES Permit for New District - Acorn Ranch WWTP

Good Afternoon,

Please confirm you have received my prior email concerning the Mike Emmons Development WWTP availability to accommodate accepting flow from Acorn Ranch. Feel free to let me know if there are any issues or questions.

Thank you,
Haley Breaux
Design Engineer

Binkley & Barfield | DCCM
713.869.3433 x 1321 p

From: Haley Breaux <HBreaux@binkleybarfield.com>
Sent: Friday, July 26, 2024 1:29 PM
To: mike@rapidwastesolutions.com <mike@rapidwastesolutions.com>
Cc: Li Chen <LC@binkleybarfield.com>; Ali Safari <asafari@rgmiller.com>
Subject: TPDES Permit for New District - Acorn Ranch WWTP

Mike,

Thank you for speaking with me earlier. East Waller County Management District is looking to build a new domestic MBR wastewater treatment plant and is currently applying for a new TPDES discharge permit. Per TCEQ form 10054 Domestic Technical Report 1.1, displayed below, we are required to reach out to all WWTP within a 3-mile radius of the proposed facility to request service. We have identified the facility listed below as falling within the 3-mile radius. Attached is the proposed WWTP location with a proposed capacity of 70,000 GPD or 0.07 MGD. Please express any concerns or interest in accepting our wastewater.

Permits:
WQ0015500001 - Mike Emmons Development WWTP

Domestic Technical Report 1.1 from TCEQ form 10054:

3. Nearby WWTPs or collection systems

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

☒ Yes ☐ No

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

Attachment: Click to enter text.

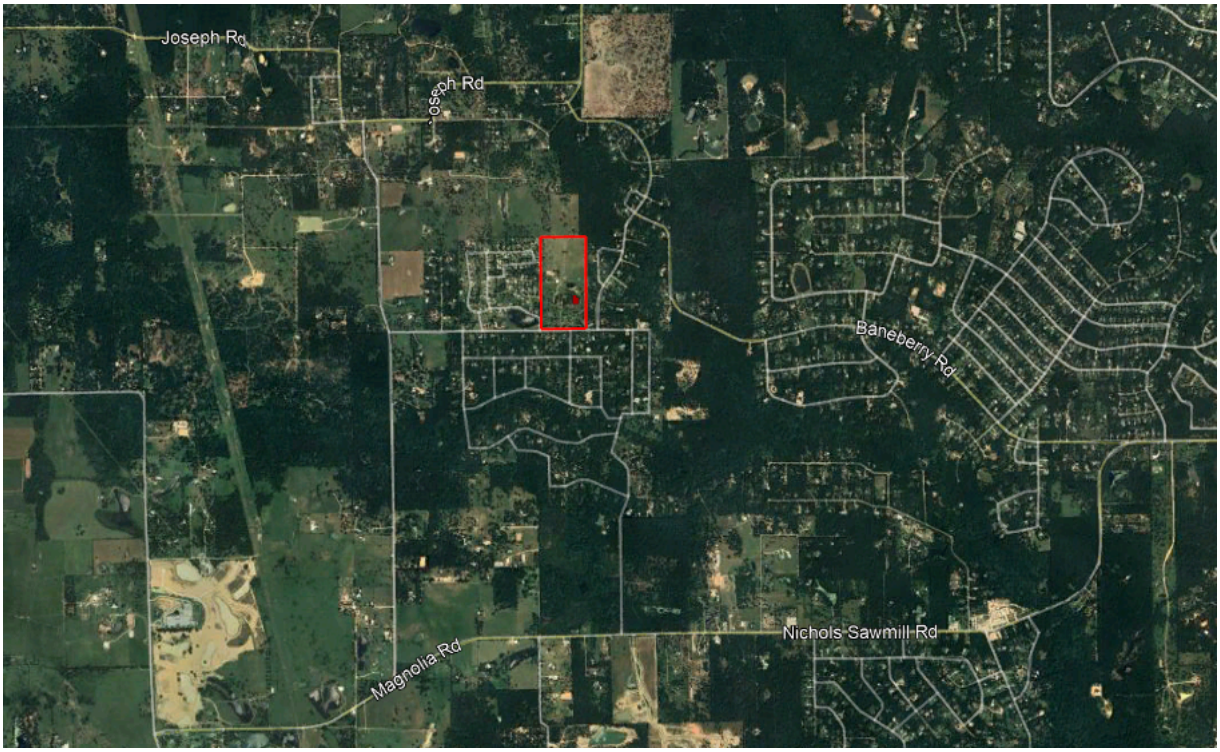
If yes, attach proof of mailing a request for service to each facility and collection system, the letters requesting service, and correspondence from each facility and collection system.

Attachment: Click to enter text.

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

Attachment: Click to enter text.

Preliminary WWTP location:
WWTP LOCATION KMZ ATTACHED



If you are not the preferred recipient of this email, please forward this message to the responsible party.

Thank you,

Haley Breaux
Design Engineer

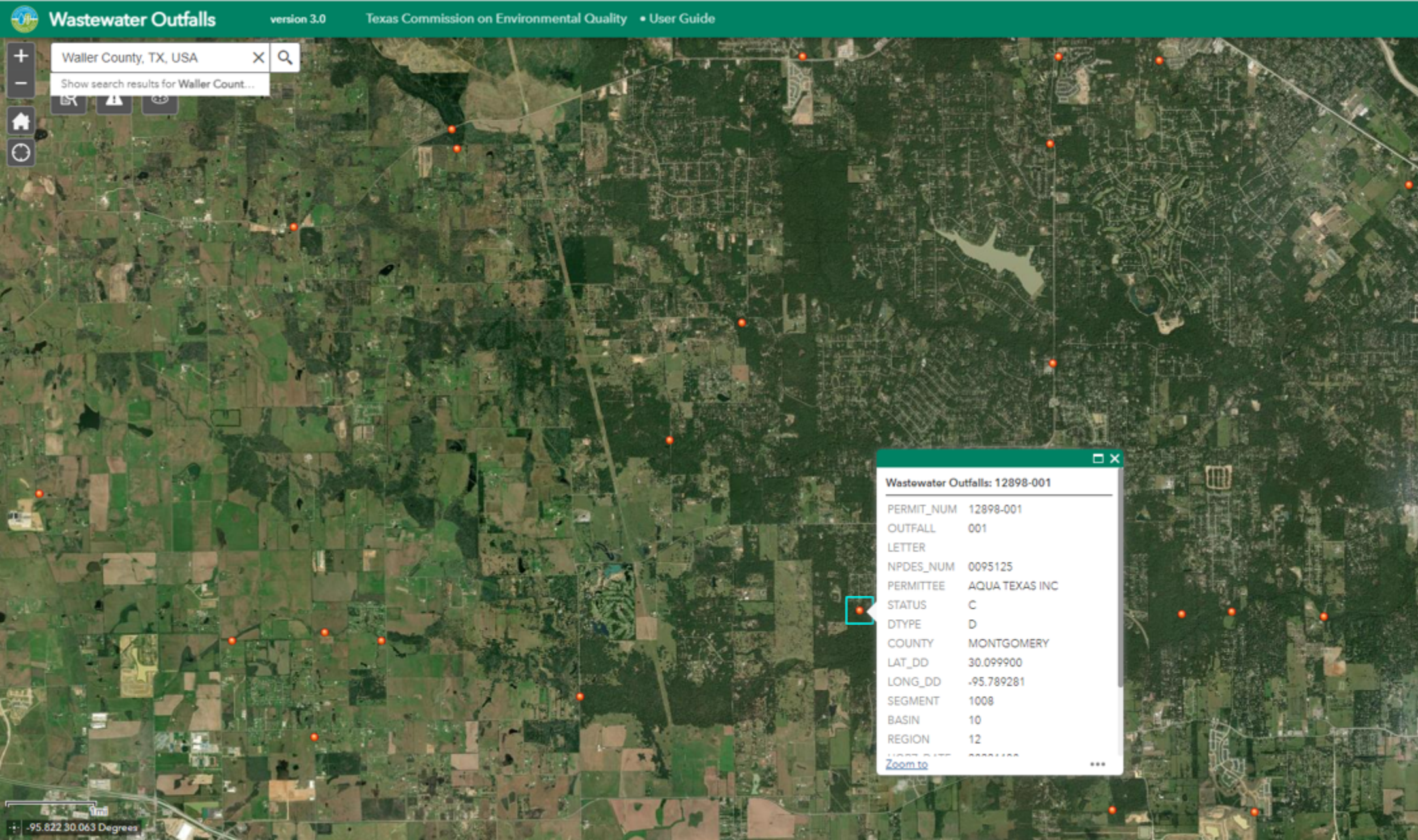
Binkley&Barfield | DCCM

A 1710 Seamist Drive, Houston, Texas 77008
P 713.869.3433 **x** 1321
BinkleyBarfield.com |

Haley Breaux
Design Engineer

Binkley&Barfield | DCCM

A 1710 Seamist Drive, Houston, Texas 77008
P 713.869.3433 **x** 1321
BinkleyBarfield.com |


Wastewater Outfalls
version 3.0
Texas Commission on Environmental Quality • User Guide
Waller County, TX, USA
Show search results for Waller Count...
Wastewater Outfalls: 12898-001
PERMIT_NUM 12898-001
OUTFALL 001
LETTER
NPDES_NUM 0095125
PERMITTEE AQUA TEXAS INC
STATUS C
DTYPE D
COUNTY MONTGOMERY
LAT_DD 30.099900
LONG_DD -95.789281
SEGMENT 1008
BASIN 10
REGION 12
Zoom to
-95.822 30.063 Degrees

RE: [EXTERNAL] Re: TPDES Permit for New District - Acorn Ranch WWTP

Foltz, Scot W <swfoltz@aquaamerica.com>
Fri 7/26/2024 1:13 PM
To:Haley Breaux <HBreaux@binkleybarfield.com>
Cc:Li Chen <LC@binkleybarfield.com>;Ali Safari <asafari@rgmiller.com>

Given the volume and distance Aqua is not able to serve at this time.

Scot W. Foltz
Environmental Compliance Manager
Aqua Texas Inc.
O: 512-990-4400 x56101
M: 512-844-6475

AQUA

From: Haley Breaux <HBreaux@binkleybarfield.com>
Sent: Tuesday, July 23, 2024 3:58 PM
To: Foltz, Scot W <swfoltz@aquaamerica.com>
Cc: Li Chen <LC@binkleybarfield.com>; Ali Safari <asafari@rgmiller.com>
Subject: [EXTERNAL] Re: TPDES Permit for New District - Acorn Ranch WWTP

Scot,

As you are aware when submitting a TCEQ Permit Request there are several steps that must be taken. One of those tasks includes reaching out to facilities within a 3-mile radius of the proposed facility to inquire about flow acceptance. From my understanding the Brushy Creek WWTP is within that 3-mile range and has an active permit that was renewed as of June 16,2023 with a daily average flow not to exceed 0.075 MGD. A response stating either the rejection or acceptance to the previous email is required per TCEQ Permitting.

If the information provided is inaccurate or you are not the intended recipient of this message, please notify me immediately or extend this email to the responsible party. I look forward to hearing from you soon.

Thank you,

Haley Breaux
Design Engineer

Binkley & Barfield | DCCM
713.869.3433 x 1321 p

From: Haley Breaux <HBreaux@binkleybarfield.com>
Sent: Monday, July 15, 2024 11:49 AM
To: swfoltz@aquaamerica.com <swfoltz@aquaamerica.com>
Cc: Li Chen <LC@binkleybarfield.com>; Nicholas Kallmyer <NKallmyer@rgmiller.com>
Subject: Re: TPDES Permit for New District - Acorn Ranch WWTP

Good Afternoon,

Please confirm you have received my prior email concerning the Brushy Creek WWTP availability to accommodate accepting flow from Acorn Ranch. Feel free to let me know if there are any issues or questions.

Thank you,

Haley Breaux
Design Engineer

Binkley & Barfield | DCCM
713.869.3433 x 1321 p

Haley Breaux
Design Engineer

A 1710 Seamist Drive, Houston, Texas 77008
P 713.869.3433 **x** 1321
BinkleyBarfield.com |

From: Haley Breaux
Sent: Thursday, July 11, 2024 10:06 AM
To: swfoltz@aqyaamerica.com <swfoltz@aqyaamerica.com>
Cc: Li Chen <LC@binkleybarfield.com>
Subject: TPDES Permit for New District - Acorn Ranch WWTP

To whom it may concern,

East Waller County Management District is looking to build a new domestic MBR wastewater treatment plant and is currently applying for a new TPDES discharge permit. Per TCEQ form 10054 Domestic Technical Report 1.1, displayed below, we are required to reach out to all WWTP within a 3-mile radius of the proposed facility to request service. We have identified the facility listed below as falling within the 3-mile radius. Attached is the proposed WWTP location with a proposed capacity of 70,000 GPD or 0.07 MGD. Please express any concerns or interest in accepting our wastewater.

Permits:
WQ0012898001 - Brushy Creek WWTF

Domestic Technical Report 1.1 from TCEQ form 10054:

Preliminary WWTP location:
WWTP LOCATION KMZ ATTACHED

If you are not the preferred recipient of this email, please forward this message to the responsible party.

Thank you,

Haley Breaux
Design Engineer

BinkleyBarfield.com
A 1710 Seamist Drive, Houston, Texas 77008
P 713.869.3433 **x** 1321
BinkleyBarfield.com | Facebook LinkedIn Instagram YouTube

EXHIBIT 13

DESIGN CALCULATIONS

ACORN RANCH WWTP

Phase 1: 60,000 GPD

Data	Quantity					
Permitted Average Daily Flow	60,000	gpd	42	gpm	0.093	cfs
Peak 2-hour Flow	240,000	gpd	167	gpm	0.371	cfs
BOD5 Loading	300	mg/l				
Maximum Aeration Zone Loading	35	lbs of BOD5 / 1,000 cf				
Minimum Aerobic Digester Loading	20	cf/lbs of BOD5/day				
Minimum SRT for Digester	40	days	@		1.5	% Concentration
Maximum Clarifier Surface Loading	1,200	gpd/sf (@ peak flow)				
Minimum Clarifier Detention Time	1.8	hr (@ peak flow)				
Minimum Disinfection Basin Detention Time	20	min (@ peak flow)				
Air Supply (Aeration Zone)	3,200	scfm/day/lb of BOD5				
Air Supply (Aerobic Digester)	30	scfm/1,000 cf of volume				
Air Supply (Disinfection)	20	scfm/1,000 cf of volume				

Calculations of Requirements

BOD5 Loading	150.12	lbs/day

Unit Requirements	Quantity	
Aeration Zone Volume	4,289	cf
Aerobic Digester Volume at Minimum Loading	3,002	cf
Aerobic Digester Volume at Minimum SRT	1,801	cf
Clarifier Surface Area	200	sf
Clarifier Volume at Minimum Detention Time	2,406	cf
Disinfection Volume	446	cf

Air Supply Requirements	Quantity	
Aeration Process	313	scfm
Digester	92	scfm
Disinfection	10	scfm
Air Lift Pumps & Initial Mixing	34	scfm
Total Air Required	450	scfm

Note: The process calculation is based on 10' of submergence with a correction factor of 1.56 and clean water transfer efficiency of 0.85% per foot of submergence.

Proposed Unit Features

Proposed Units	Quantity		#Units	Length	Width	Height	SWD
Aeration Zone Volume	4,536	cf	1	36	12	12.17	10.50
Aerobic Digester Volume	3,073	cf	1	24	12	12.17	10.67
Clarifier Surface Area	254	sf	1		18	13.17	
Clarifier Volume	2,545	cf					10.00
Chlorine Contact Volume	480	cf	1	12	8	7.17	5.00
Blowers	450	scfm	2	30.0	hp		

EXHIBIT 14

FEMA FIRM

NOTES TO USERS

This map is for use in administering the National Flood Insurance Program. It does not necessarily identify all areas subject to flooding, particularly from local drainage sources of small size. The **community map repository** should be consulted for possible updated or additional flood hazard information.

To obtain more detailed information in areas where **Base Flood Elevations** (BFEs) and/or **floodways** have been determined, users are encouraged to consult the Flood Profiles and Floodway Data and/or Summary of Stillwater Elevations tables contained within the Flood Insurance Study (FIS) report that accompanies this FIRM. Users should be aware that BFEs shown on the FIRM represent rounded whole- foot elevations. These BFEs are intended for flood insurance rating purposes only and should not be used as the sole source of flood elevation information. Accordingly, flood elevation data presented in the FIS report should be utilized in conjunction with the FIRM for purposes of construction and/or floodplain management.

Coastal Base Flood Elevations shown on this map apply only landward of 0.0' North American Vertical Datum of 1988 (NAVD 88). Users of this FIRM should be aware that coastal flood elevations are also provided in the Summary of Stillwater Elevations table in the Flood Insurance Study report for this jurisdiction. Elevations shown in the Summary of Stillwater Elevations table should be used for construction and/or floodplain management purposes when they are higher than the elevations shown on this FIRM.

Boundaries of the **floodways** were computed at cross sections and interpolated between cross sections. The floodways were based on hydraulic considerations with regard to requirements of the National Flood Insurance Program. Floodway widths and other pertinent floodway data are provided in the Flood Insurance Study report for this jurisdiction.

Certain areas not in Special Flood Hazard Areas may be protected by **flood control structures.** Refer to Section 2.4 "Flood Protection Measures" of the Flood Insurance Study report for information on flood control structures for this jurisdiction.

The **projection** used in the preparation of this map was Texas State Plane south central zone (FIPSZONE 4204). The **horizontal datum** was NAD83, GRS1980 spheroid. Differences in datum, spheroid, projection or State Plane zones used in the production of FIRMs for adjacent jurisdictions may result in slight positional differences in map features across jurisdiction boundaries. These differences do not affect the accuracy of the FIRM.

Flood elevations on this map are referenced to the North American Vertical Datum of 1988. These flood elevations must be compared to structure and ground elevations referenced to the same **vertical datum.** For information regarding conversion between the National Geodetic Vertical Datum of 1929 and the North American Vertical Datum of 1988, visit the National Geodetic Survey website at http://www.ngs.noaa.gov/ or contact the National Geodetic Survey at the following address:

NGS Information Services
NOAA, N/NGS12
National Geodetic Survey
SSMC- 3, #9202
1315 East- West Highway
Silver Spring, MD 20910- 3282

To obtain current elevation, description, and/or location information for **bench marks** shown on this map, please contact the Information Services Branch of the National Geodetic Survey at **(301) 713- 3242,** or visit its website at http://www.ngs.noaa.gov/.

Base map information shown on this FIRM was provided in digital format by Waller County and Houston-Galveston Area Council (H-GAC). This dataset was digitized at a scale of at least 1:24,000 from H-GAC aerial photography dated 2002 and 2004.

This map reflects more detailed and up- to- date **stream channel configurations** than those shown on the previous FIRM for this jurisdiction. The floodplains and floodways that were transferred from the previous FIRM may have been adjusted to conform to these new stream channel configurations. As a result, the Flood Profiles and Floodway Data tables *in the Flood Insurance Study report (which contains authoritative hydraulic data)* may reflect stream channel distances that differ from what is shown on this map.

Corporate limits shown on this map are based on the best data available at the time of publication. Because changes due to annexations or de- annexations may have occurred after this map was published, map users should contact appropriate community officials to verify current corporate limit locations.

Please refer to the separately printed **Map Index** for an overview map of the county showing the layout of map panels; community map repository addresses; and a Listing of Communities table containing National Flood Insurance Program dates for each community as well as a listing of the panels on which each community is located.

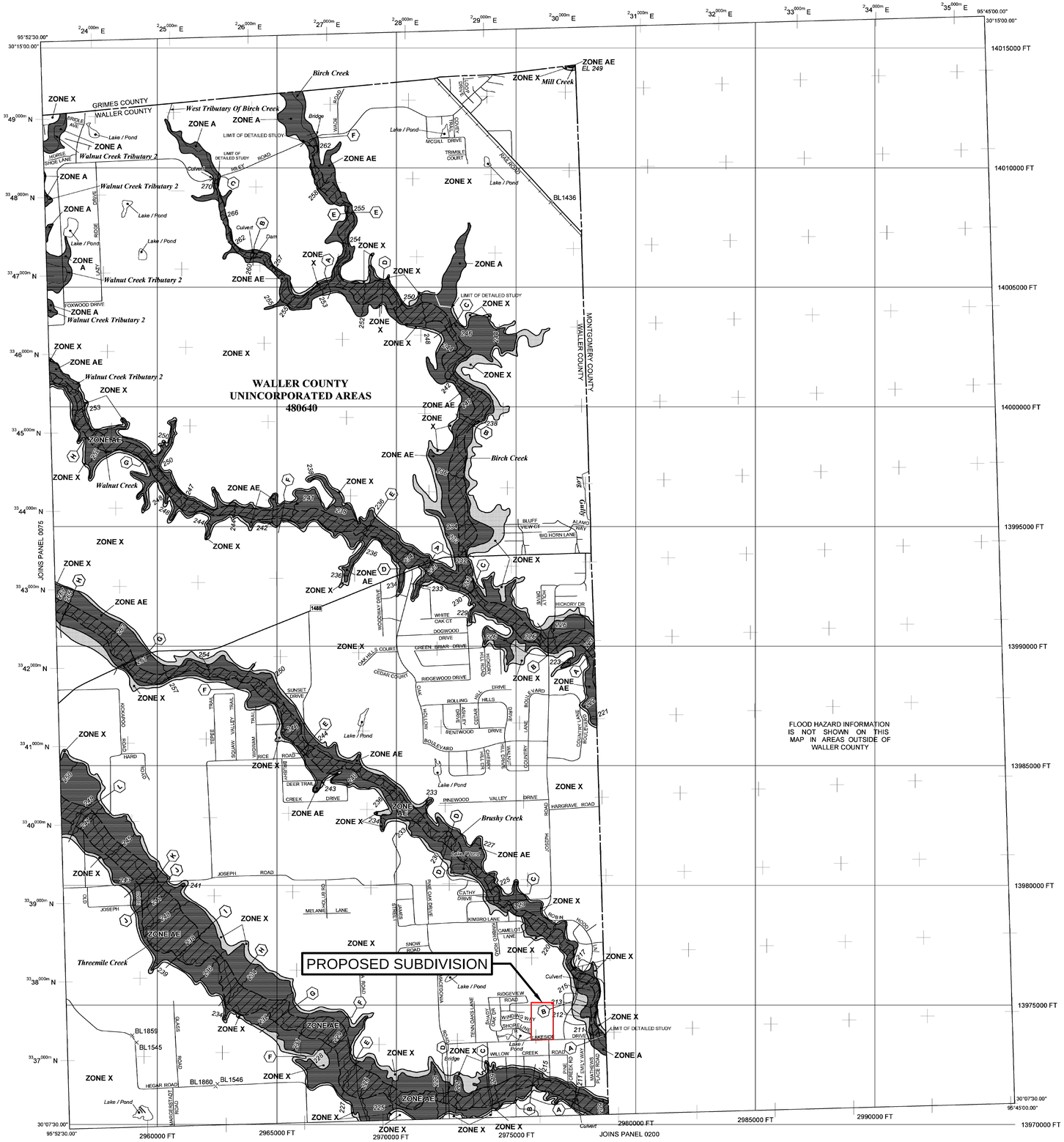
Contact the **FEMA Map Service Center** at 1- 800- 358- 9616 for information on available products associated with this FIRM. Available products may include previously issued Letters of Map Change, *a Flood Insurance Study report,* and/or digital versions of this map. The FEMA Map Service Center may also be reached by Fax at 1- 800- 358- 9620 and its website at http://www.msc.fema.gov/.

If you have **questions about this map** or questions concerning the National Flood Insurance Program in general, please call **1- 877- FEMA MAP** (1- 877- 336- 2627) or visit the FEMA website at http://www.fema.gov/.

ACORN RANCH
WASTEWATER TREATMENT PLANT
DISCHARGE PERMIT APPLICATION
FEMA FIRM MAP

Binkley & Barfield, Inc. | TxEng F-257
1710 Seamist Dr, Houston, TX 77008
713.869.3433 | BinkleyBarfield.com

DATE: June 24 SCALE: AS NOTED



LEGEND

SPECIAL FLOOD HAZARD AREAS (SFHAs) SUBJECT TO INUNDATION BY THE 1% ANNUAL CHANCE FLOOD

The 1% annual chance flood (100-year flood), also known as the base flood, is the flood that has a 1% chance of being equalled or exceeded in any given year. The Special Flood Hazard Area is the area subject to flooding by the 1% annual chance flood. Areas of Special Flood Hazard include Zones A, AE, AH, AO, AR, A99, V and VE. The Base Flood Elevation is the water-surface elevation of the 1% annual chance flood.

- ZONE A — No Base Flood Elevations determined.
- ZONE AE — Base Flood Elevations determined.
- ZONE AH — Flood depths of 1 to 3 feet (usually areas of ponding); Base Flood Elevations determined.
- ZONE AO — Flood depths of 1 to 3 feet (usually sheet flow on sloping terrain); average depths determined. For areas of alluvial fan flooding, velocities also determined.
- ZONE AR — Special Flood Hazard Area formerly protected from the 1% annual chance flood by a flood control system that was subsequently decertified. Zone AR indicates that the former flood control system is being restored to provide protection from the 1% annual chance or greater flood.
- ZONE A99 — Area to be protected from 1% annual chance flood by a Federal flood protection system under construction; no Base Flood Elevations determined.
- ZONE V — Coastal flood zone with velocity hazard (wave action); no Base Flood Elevations determined.
- ZONE VE — Coastal flood zone with velocity hazard (wave action); Base Flood Elevations determined.

FLOODWAY AREAS IN ZONE AE

The floodway is the channel of a stream plus any adjacent floodplain areas that must be kept free of encroachment so that the 1% annual chance flood can be carried without substantial increases in flood heights.

OTHER FLOOD AREAS

- ZONE X — Areas of 0.2% annual chance flood; areas of 1% annual chance flood with average depths of less than 1 foot or with drainage areas less than 1 square mile; and areas protected by levees from 1% annual chance flood.

OTHER AREAS

- ZONE X — Areas determined to be outside the 0.2% annual chance floodplain.
- ZONE D — Areas in which flood hazards are undetermined, but possible.

COASTAL BARRIER RESOURCES SYSTEM (CBRS) AREAS

OTHERWISE PROTECTED AREAS (OPAs)

CBRS areas and OPAs are normally located within or adjacent to Special Flood Hazard Areas.

- Floodplain boundary
- Floodway boundary
- Zone D boundary
- CBRS and OPA boundary
- Boundary dividing Special Flood Hazard Areas of different Base Flood Elevations, flood depths or flood velocities.
- 513 — Base Flood Elevation line and value; elevation in feet*
- (EL 987) — Base Flood Elevation value where uniform within zone; elevation in feet*

* Referenced to the North American Vertical Datum of 1988 (NAVD 88)

- A — A — Cross section line
- 23 — 23 — Transect line
- 97°07'30", 32°22'30" — Geographic coordinates referenced to the North American Datum of 1983 (NAD 83)
- 4275000mN — 1000-meter Universal Transverse Mercator grid , zone 15
- 6000000 FT — 5000-foot grid : Texas State Plane coordinate system, south central zone (FIPSZONE 4204), Lambert Conformal Conic
- DX5510 × — Bench mark (see explanation in Notes to Users section of this FIRM panel)
- M1.5 — River Mile

MAP REPOSITORIES
Refer to Map Repositories list on Map Index

EFFECTIVE DATE OF COUNTYWIDE
FLOOD INSURANCE RATE MAP
February 18, 2009
EFFECTIVE DATE(S) OF REVISION(S) TO THIS PANEL

For community map revision history prior to countywide mapping, refer to the Community Map History table located in the Flood Insurance Study report for this jurisdiction.

To determine if flood insurance is available in this community, contact your insurance agent or call the National Flood Insurance Program at 1- 800- 638- 6620.

MAP SCALE 1" = 2000'
1000 0 2000 4000 FEET
600 0 600 1200 METERS

NFIP
NATIONAL FLOOD INSURANCE PROGRAM

PANEL 0100E

FIRM
FLOOD INSURANCE RATE MAP
WALLER COUNTY, TEXAS
AND INCORPORATED AREAS

PANEL 100 OF 425
(SEE MAP INDEX FOR FIRM PANEL LAYOUT)

CONTAINS:

COMMUNITY	NUMBER	PANEL	SUFFIX
WALLER COUNTY	480640	0100	E

Notice to User: The **Map Number** shown below should be used when placing map orders; the **Community Number** shown above should be used on insurance applications for the subject community.

MAP NUMBER
48473C0100E
EFFECTIVE DATE
FEBRUARY 18, 2009

Federal Emergency Management Agency

NOTES TO USERS

This map is for use in administering the National Flood Insurance Program. It does not necessarily identify all areas subject to flooding, particularly from local drainage sources of small size. The **community map repository** should be consulted for possible updated or additional flood hazard information.

To obtain more detailed information in areas where **Base Flood Elevations** (BFEs) and/or **floodways** have been determined, users are encouraged to consult the Flood Profiles and Floodway Data and/or Summary of Stillwater Elevations tables contained within the Flood Insurance Study (FIS) report that accompanies this FIRM. Users should be aware that BFEs shown on the FIRM represent rounded whole-foot elevations. These BFEs are intended for flood insurance rating purposes only and should not be used as the sole source of flood elevation information. Accordingly, flood elevation data presented in the FIS report should be utilized in conjunction with the FIRM for purposes of construction and/or floodplain management.

Coastal Base Flood Elevations shown on this map apply only landward of 0.0' North American Vertical Datum of 1988 (NAVD 88). Users of this FIRM should be aware that coastal flood elevations are also provided in the Summary of Stillwater Elevations table in the Flood Insurance Study report for this jurisdiction. Elevations shown in the Summary of Stillwater Elevations table should be used for construction and/or floodplain management purposes when they are higher than the elevations shown on this FIRM.

Boundaries of the **floodways** were computed at cross sections and interpolated between cross sections. The floodways were based on hydraulic considerations with regard to requirements of the National Flood Insurance Program. Floodway widths and other pertinent floodway data are provided in the Flood Insurance Study report for this jurisdiction.

Certain areas not in Special Flood Hazard Areas may be protected by **flood control structures**. Refer to Section 2.4 "Flood Protection Measures" of the Flood Insurance Study report for information on flood control structures for this jurisdiction.

The **projection** used in the preparation of this map was Texas State Plane south central zone (FIPSZONE 4204). The **horizontal datum** was NAD83, GRS1980 spheroid. Differences in datum, spheroid, projection or State Plane zones used in the production of FIRMs for adjacent jurisdictions may result in slight positional differences in map features across jurisdiction boundaries. These differences do not affect the accuracy of the FIRM.

Flood elevations on this map are referenced to the North American Vertical Datum of 1988. These flood elevations must be compared to structure and ground elevations referenced to the same **vertical datum.** For information regarding conversion between the National Geodetic Vertical Datum of 1929 and the North American Vertical Datum of 1988, visit the National Geodetic Survey website at http://www.ngs.noaa.gov/ or contact the National Geodetic Survey at the following address:

NGS Information Services
NOAA, N/NGS12
National Geodetic Survey
SSMC- 3, #9202
1315 East- West Highway
Silver Spring, MD 20910- 3282

To obtain current elevation, description, and/or location information for **bench marks** shown on this map, please contact the Information Services Branch of the National Geodetic Survey at **(301) 713- 3242,** or visit its website at http://www.ngs.noaa.gov/.

Base map information shown on this FIRM was provided in digital format by Waller County and Houston-Galveston Area Council (H-GAC). This dataset was digitized at a scale of at least 1:24,000 from H-GAC aerial photography dated 2002 and 2004.

This map reflects more detailed and up- to- date **stream channel configurations** than those shown on the previous FIRM for this jurisdiction. The floodplains and floodways that were transferred from the previous FIRM may have been adjusted to conform to these new stream channel configurations. As a result, the Flood Profiles and Floodway Data tables *in the Flood Insurance Study report (which contains authoritative hydraulic data)* may reflect stream channel distances that differ from what is shown on this map.

Corporate limits shown on this map are based on the best data available at the time of publication. Because changes due to annexations or de- annexations may have occurred after this map was published, map users should contact appropriate community officials to verify current corporate limit locations.

Please refer to the separately printed **Map Index** for an overview map of the county showing the layout of map panels; community map repository addresses; and a Listing of Communities table containing National Flood Insurance Program dates for each community as well as a listing of the panels on which each community is located.

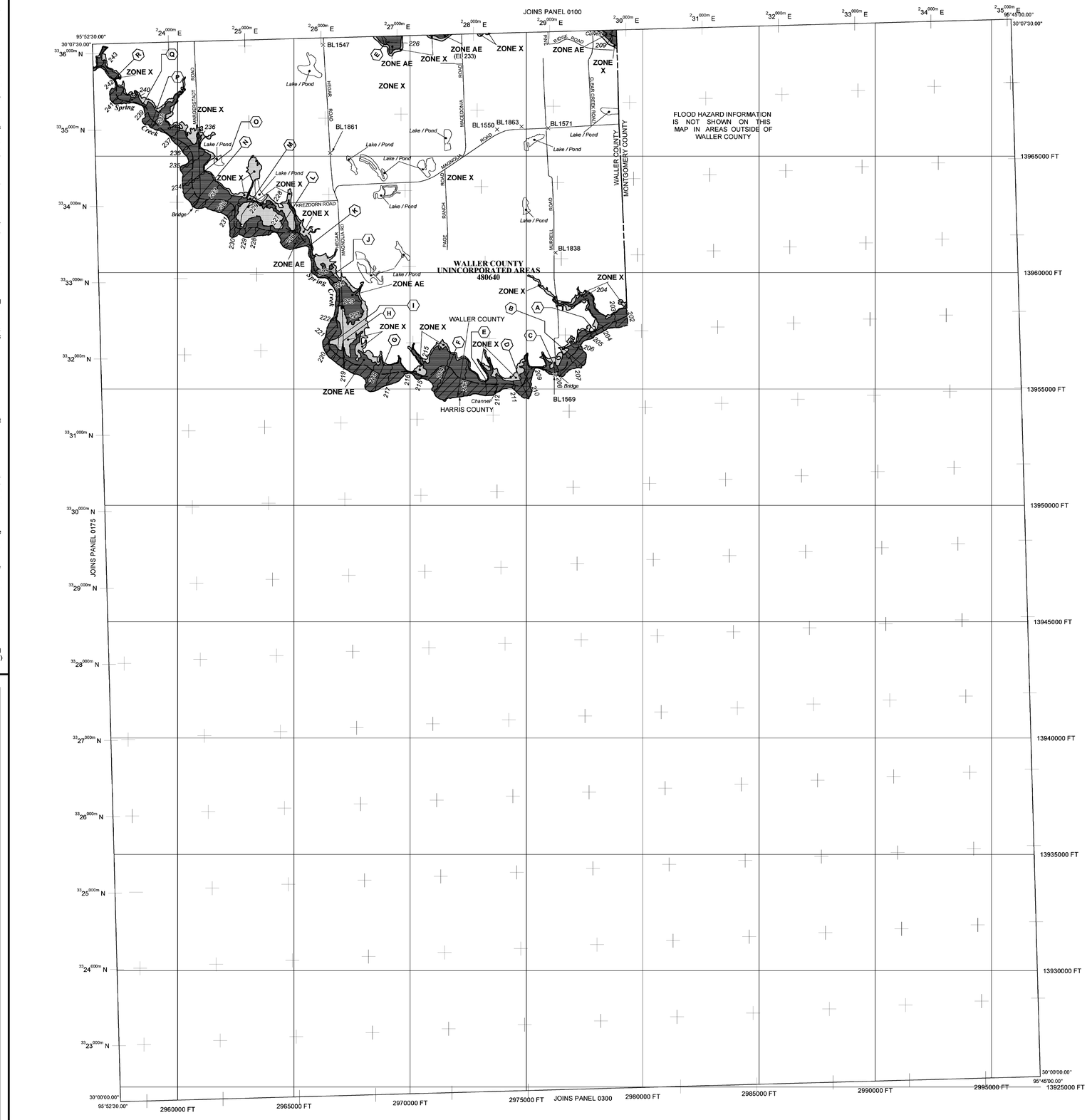
Contact the **FEMA Map Service Center** at 1- 800- 358- 9616 for information on available products associated with this FIRM. Available products may include previously issued Letters of Map Change, *a Flood Insurance Study report,* and/or digital versions of this map. The FEMA Map Service Center may also be reached by Fax at 1- 800- 358- 9620 and its website at http://www.msc.fema.gov/.

If you have **questions about this map** or questions concerning the National Flood Insurance Program in general, please call **1- 877- FEMA MAP** (1- 877- 336- 2627) or visit the FEMA website at http://www.fema.gov/.

ACORN RANCH
WASTEWATER TREATMENT PLANT
DISCHARGE PERMIT APPLICATION
FEMA FIRM MAP

Binkley & Barfield, Inc. | TxEng F-257
1710 Seamist Dr, Houston, TX 77008
713.869.3433 | BinkleyBarfield.com

DATE: June 24 SCALE: AS NOTED



LEGEND

SPECIAL FLOOD HAZARD AREAS (SFHAs) SUBJECT TO INUNDATION BY THE 1% ANNUAL CHANCE FLOOD

The 1% annual chance flood (100-year flood), also known as the base flood, is the flood that has a 1% chance of being equaled or exceeded in any given year. The Special Flood Hazard Area is the area subject to flooding by the 1% annual chance flood. Areas of Special Flood Hazard include Zones A, AE, AH, AO, AR, A99, V and VE. The Base Flood Elevation is the water-surface elevation of the 1% annual chance flood.

ZONE A	No Base Flood Elevations determined.
ZONE AE	Base Flood Elevations determined.
ZONE AH	Flood depths of 1 to 3 feet (usually areas of ponding); Base Flood Elevations determined.
ZONE AO	Flood depths of 1 to 3 feet (usually sheet flow on sloping terrain); average depths determined. For areas of alluvial fan flooding, velocities also determined.
ZONE AR	Special Flood Hazard Area formerly protected from the 1% annual chance flood by a flood control system that was subsequently decertified. Zone AR indicates that the former flood control system is being restored to provide protection from the 1% annual chance or greater flood.
ZONE A99	Area to be protected from 1% annual chance flood by a Federal flood protection system under construction; no Base Flood Elevations determined.
ZONE V	Coastal flood zone with velocity hazard (wave action); no Base Flood Elevations determined.
ZONE VE	Coastal flood zone with velocity hazard (wave action); Base Flood Elevations determined.

FLOODWAY AREAS IN ZONE AE

The floodway is the channel of a stream plus any adjacent floodplain areas that must be kept free of encroachment so that the 1% annual chance flood can be carried without substantial increases in flood heights.

OTHER FLOOD AREAS

ZONE X	Areas of 0.2% annual chance flood; areas of 1% annual chance flood with average depths of less than 1 foot or with drainage areas less than 1 square mile; and areas protected by levees from 1% annual chance flood.

OTHER AREAS

ZONE X	Areas determined to be outside the 0.2% annual chance floodplain.
ZONE D	Areas in which flood hazards are undetermined, but possible.

COASTAL BARRIER RESOURCES SYSTEM (CBRS) AREAS

OTHERWISE PROTECTED AREAS (OPAs)

CBRS areas and OPAs are normally located within or adjacent to Special Flood Hazard Areas.

	Floodplain boundary
	Floodway boundary
	Zone D boundary
	CBRS and OPA boundary
	Boundary dividing Special Flood Hazard Areas of different Base Flood Elevations, flood depths or flood velocities.
513	Base Flood Elevation line and value; elevation in feet*
(EL 987)	Base Flood Elevation value where uniform within zone; elevation in feet*

* Referenced to the North American Vertical Datum of 1988 (NAVD 88)

A — A	Cross section line
23 — 23	Transect line
97°07'30", 32°22'30"	Geographic coordinates referenced to the North American Datum of 1983 (NAD 83)
4275000mN	1000-meter Universal Transverse Mercator grid , zone 15
6000000 FT	5000-foot grid : Texas State Plane coordinate system, south central zone (FIPSZONE 4204), Lambert Conformal Conic
DX5510 ×	Bench mark (see explanation in Notes to Users section of this FIRM panel)
• M1.5	River Mile

MAP REPOSITORIES
Refer to Map Repositories list on Map Index

EFFECTIVE DATE OF COUNTYWIDE
FLOOD INSURANCE RATE MAP
February 18, 2009
EFFECTIVE DATE(S) OF REVISION(S) TO THIS PANEL

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To determine if flood insurance is available in this community, contact your insurance agent or call the National Flood Insurance Program at 1- 800- 638- 6620.

MAP SCALE 1" = 2000'
1000 0 2000 4000 FEET
600 0 600 1200 METERS

NFIP
NATIONAL FLOOD INSURANCE PROGRAM

PANEL 0200E

FIRM
FLOOD INSURANCE RATE MAP
WALLER COUNTY, TEXAS
AND INCORPORATED AREAS

PANEL 200 OF 425
(SEE MAP INDEX FOR FIRM PANEL LAYOUT)

CONTAINS:

COMMUNITY	NUMBER	PANEL	SUFFIX
WALLER COUNTY	480640	0200	E

Notice to User: The **Map Number** shown below should be used when placing map orders; the **Community Number** shown above should be used on insurance applications for the subject community.

MAP NUMBER
48473C0200E
EFFECTIVE DATE
FEBRUARY 18, 2009

Federal Emergency Management Agency

NOTES TO USERS

This map is for use in administering the National Flood Insurance Program. It does not necessarily identify all areas subject to flooding, particularly from local drainage sources of small size. The **community map repository** should be consulted for possible updated or additional flood hazard information.

To obtain more detailed information in areas where **Base Flood Elevations** (BFEs) and/or **floodways** have been determined, users are encouraged to consult the Flood Profiles and Floodway Data and/or Summary of Stillwater Elevations tables contained within the Flood Insurance Study (FIS) report that accompanies this FIRM. Users should be aware that BFEs shown on the FIRM represent rounded whole–foot elevations. These BFEs are intended for flood insurance rating purposes only and should not be used as the sole source of flood elevation information. Accordingly, flood elevation data presented in the FIS report should be utilized in conjunction with the FIRM for purposes of construction and/or floodplain management.

Coastal Base Flood Elevations shown on this map apply only landward of 0.0' North American Vertical Datum of 1988 (NAVD 88). Users of this FIRM should be aware that coastal flood elevations are also provided in the Summary of Stillwater Elevations table in the Flood Insurance Study report for this jurisdiction. Elevations shown in the Summary of Stillwater Elevations table should be used for construction and/or floodplain management purposes when they are higher than the elevations shown on this FIRM.

Boundaries of the **floodways** were computed at cross sections and interpolated between cross sections. The floodways were based on hydraulic considerations with regard to requirements of the National Flood Insurance Program. Floodway widths and other pertinent floodway data are provided in the Flood Insurance Study report for this jurisdiction.

Certain areas not in Special Flood Hazard Areas may be protected by **flood control structures.** Refer to Section 2.4 "Flood Protection Measures" of the Flood Insurance Study report for information on flood control structures for this jurisdiction.

The **projection** used in the preparation of this map was Texas State Plane central zone (FIPSZONE 4203). The **horizontal datum** was NAD83, GRS1980 spheroid. Differences in datum, spheroid, projection or State Plane zones used in the production of FIRMs for adjacent jurisdictions may result in slight positional differences in map features across jurisdiction boundaries. These differences do not affect the accuracy of the FIRM.

Flood elevations on this map are referenced to the North American Vertical Datum of 1988. These flood elevations must be compared to structure and ground elevations referenced to the same **vertical datum.** For information regarding conversion between the National Geodetic Vertical Datum of 1929 and the North American Vertical Datum of 1988, visit the National Geodetic Survey website at http://www.ngs.noaa.gov/ or contact the National Geodetic Survey at the following address:

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National Geodetic Survey
SSMC–3, #9202
1315 East–West Highway
Silver Spring, MD 20910–3282

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Base map information shown on this FIRM was provided in digital format by the Montgomery County Emergency Communications District, the Montgomery Central Appraisal District, the Texas General Land Office, the Houston-Galveston Area Council, the USGS, and by FEMA.
This map may reflect more detailed or up to date stream channel configurations than those shown on the previous FIRM. The floodplains and floodways that were transferred from the previous FIRM may have been adjusted to conform to these new stream channel configurations and improved topographic data. The profile baselines depicted on this map represent the hydraulic modeling baselines that match the flood profiles and Floodway Data Tables if applicable, in the FIS report. As a result, the profile baselines may deviate significantly from the new base map channel representation and may appear outside of the floodplain.

Corporate limits shown on this map are based on the best data available at the time of publication. Because changes due to annexations or de–annexations may have occurred after this map was published, map users should contact appropriate community officials to verify current corporate limit locations.

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For information and questions about this map, available products associated with this FIRM including historic versions of this FIRM, how to order products or the National Flood Insurance Program in general, please call the FEMA Map Information eXchange at 1-877-FEMA-MAP (1-877-336-2627) or visit the **FEMA Map Service Center** website at http://msc.fema.gov. Available products may include previously issued Letters of Map Change, a Flood Insurance Study Report, and/or digital versions of this map. Many of these products can be ordered or obtained directly from the website. Users may determine the current map date for each FIRM panel by visiting the **FEMA Map Service Center** website or by calling the FEMA Map Information eXchange.

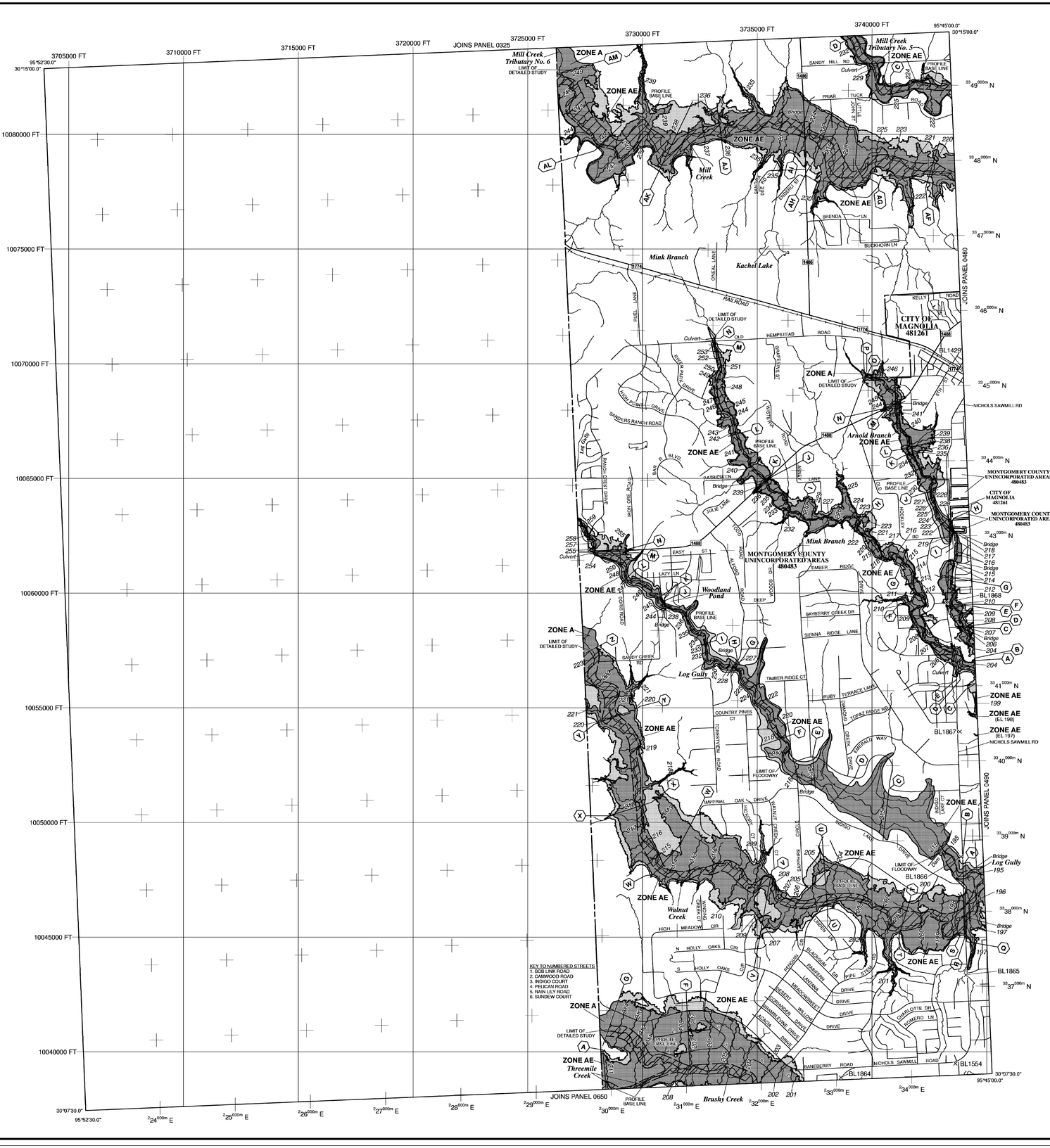
ACORN RANCH
WASTEWATER TREATMENT PLANT
DISCHARGE PERMIT APPLICATION
FEMA FIRM MAP

Binkley&Barfield

DCCM

Binkley & Barfield, Inc. | TxEng F-257
1710 Seamist Dr, Houston, TX 77008
713.869.3433 | BinkleyBarfield.com

DATE: June 24 SCALE: AS NOTED



LEGEND

SPECIAL FLOOD HAZARD AREAS (SFHAs) SUBJECT TO INUNDATION BY THE 1% ANNUAL CHANCE FLOOD

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ZONE A	No Base Flood Elevations determined.
ZONE AE	Base Flood Elevations determined.
ZONE AH	Flood depths of 1 to 3 feet (usually areas of ponding); Base Flood Elevations determined.
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ZONE AR	Special Flood Hazard Area formerly protected from the 1% annual chance flood by a flood control system that was subsequently decertified. Zone AR indicates that the former flood control system is being restored to provide protection from the 1% annual chance or greater flood.
ZONE A99	Area to be protected from 1% annual chance flood by a Federal flood protection system under construction; no Base Flood Elevations determined.
ZONE V	Coastal flood zone with velocity hazard (wave action); no Base Flood Elevations determined.
ZONE VE	Coastal flood zone with velocity hazard (wave action); Base Flood Elevations determined.

FLOODWAY AREAS IN ZONE AE

The floodway is the channel of a stream plus any adjacent floodplain areas that must be kept free of encroachment so that the 1% annual chance flood can be carried without substantial increases in flood heights.

OTHER FLOOD AREAS

ZONE X	Areas of 0.2% annual chance flood; areas of 1% annual chance flood with average depths of less than 1 foot or with drainage areas less than 1 square mile; and areas protected by levees from 1% annual chance flood.

OTHER AREAS

ZONE X	Areas determined to be outside the 0.2% annual chance floodplain.
ZONE D	Areas in which flood hazards are undetermined, but possible.

COASTAL BARRIER RESOURCES SYSTEM (CBRS) AREAS

OTHERWISE PROTECTED AREAS (OPAs)

CBRS areas and OPAs are normally located within or adjacent to Special Flood Hazard Areas.

- Floodplain boundary
- Floodway boundary
- Zone D boundary
- CBRS and OPA boundary
- Boundary dividing Special Flood Hazard Areas of different Base Flood Elevations, flood depths or flood velocities.
- 513 — Base Flood Elevation line and value; elevation in feet*
- (EL 987) — Base Flood Elevation value where uniform within zone; elevation in feet*

* Referenced to the North American Vertical Datum of 1988 (NAVD 88)

- A–A — Cross section line
- 23–23 — Transect line
- 97°07'30", 32°22'30" — Geographic coordinates referenced to the North American Datum of 1983 (NAD 83)
- 4275000mN — 1000-meter Universal Transverse Mercator grid ticks, zone 15
- 6000000 FT — 5000-foot grid values: Texas State Plane coordinate system, central zone (FIPSZONE 4203), Lambert Conformal Conic
- DX5510 — Bench mark (see explanation in Notes to Users section of this FIRM panel)
- M1.5 — River Mile

MAP REPOSITORIES
Refer to Map Repositories list on Map Index

EFFECTIVE DATE OF COUNTYWIDE
FLOOD INSURANCE RATE MAP
December 19, 1996
EFFECTIVE DATE(S) OF REVISION(S) TO THIS PANEL
August 18, 2014 - to reflect updated topographic information, to update corporate limits to change Base Flood Elevations and Special Flood Hazard Areas, to add roads and road names, and to incorporate previously issued Letters of Map Revision.

For community map revision history prior to countywide mapping, refer to the Community Map History table located in the Flood Insurance Study report for this jurisdiction.

To determine if flood insurance is available in this community, contact your insurance agent or call the National Flood Insurance Program at 1-800-638-6620.

MAP SCALE 1" = 2000'
1000 0 2000 4000 FEET
600 0 600 1200 METERS

NFIP
NATIONAL FLOOD INSURANCE PROGRAM

PANEL 0475G

FIRM
FLOOD INSURANCE RATE MAP
MONTGOMERY COUNTY, TEXAS
AND INCORPORATED AREAS

PANEL 475 OF 750
(SEE MAP INDEX FOR FIRM PANEL LAYOUT)
CONTAINS:

COMMUNITY	NUMBER	PANEL	SUFFIX
MONTGOMERY COUNTY	480483	0475	G
MAGNOLIA, CITY OF	481261	0475	G

Notice to User: The **Map Number** shown below should be used when placing map orders; the **Community Number** shown above should be used on insurance applications for the subject community.

MAP NUMBER
48339C0475G
MAP REVISED
AUGUST 18, 2014

Federal Emergency Management Agency

NOTES TO USERS

This map is for use in administering the National Flood Insurance Program. It does not necessarily identify all areas subject to flooding, particularly from local drainage sources of small size. The **community map repository** should be consulted for possible updated or additional flood hazard information.

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Coastal Base Flood Elevations shown on this map apply only landward of 0.0' North American Vertical Datum of 1988 (NAVD 88). Users of this FIRM should be aware that coastal flood elevations are also provided in the Summary of Stillwater Elevations table in the Flood Insurance Study report for this jurisdiction. Elevations shown in the Summary of Stillwater Elevations table should be used for construction and/or floodplain management purposes when they are higher than the elevations shown on this FIRM.

Boundaries of the **floodways** were computed at cross sections and interpolated between cross sections. The floodways were based on hydraulic considerations with regard to requirements of the National Flood Insurance Program. Floodway widths and other pertinent floodway data are provided in the Flood Insurance Study report for this jurisdiction.

Certain areas not in Special Flood Hazard Areas may be protected by **flood control structures.** Refer to Section 2.4 "Flood Protection Measures" of the Flood Insurance Study report for information on flood control structures for this jurisdiction.

The **projection** used in the preparation of this map was Texas State Plane central zone (FIPSZONE 4203). The **horizontal datum** was NAD83, GRS1980 spheroid. Differences in datum, spheroid, projection or State Plane zones used in the production of FIRMs for adjacent jurisdictions may result in slight positional differences in map features across jurisdiction boundaries. These differences do not affect the accuracy of the FIRM.

Flood elevations on this map are referenced to the North American Vertical Datum of 1988. These flood elevations must be compared to structure and ground elevations referenced to the same **vertical datum.** For information regarding conversion between the National Geodetic Vertical Datum of 1929 and the North American Vertical Datum of 1988, visit the National Geodetic Survey website at http://www.ngs.noaa.gov/ or contact the National Geodetic Survey at the following address:

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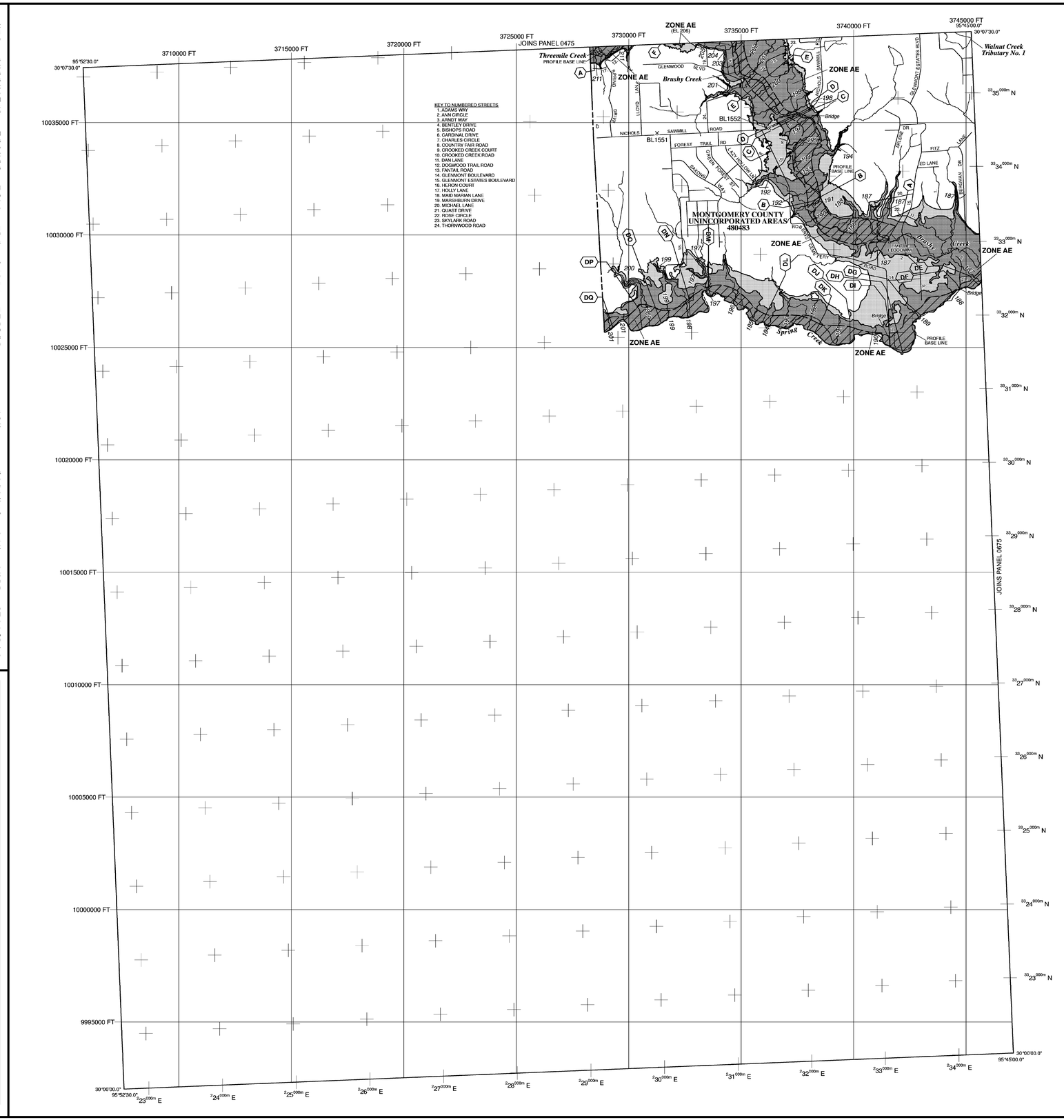
ACORN RANCH
WASTEWATER TREATMENT PLANT
DISCHARGE PERMIT APPLICATION
FEMA FIRM MAP

Binkley & Barfield, Inc. | TxEng F-257
1710 Seamist Dr, Houston, TX 77008
713.869.3433 | BinkleyBarfield.com

DATE: June 24 SCALE: AS NOTED



LEGEND

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ZONE A No Base Flood Elevations determined.

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ZONE AH Flood depths of 1 to 3 feet (usually areas of ponding); Base Flood Elevations determined.

ZONE AO Flood depths of 1 to 3 feet (usually sheet flow on sloping terrain); average depths determined. For areas of alluvial fan flooding, velocities also determined.

ZONE AR Special Flood Hazard Area formerly protected from the 1% annual chance flood by a flood control system that was subsequently decertified. Zone AR indicates that the former flood control system is being restored to provide protection from the 1% annual chance or greater flood.

ZONE A99 Area to be protected from 1% annual chance flood by a Federal flood protection system under construction; no Base Flood Elevations determined.

ZONE V Coastal flood zone with velocity hazard (wave action); no Base Flood Elevations determined.

ZONE VE Coastal flood zone with velocity hazard (wave action); Base Flood Elevations determined.

FLOODWAY AREAS IN ZONE AE

The floodway is the channel of a stream plus any adjacent floodplain areas that must be kept free of encroachment so that the 1% annual chance flood can be carried without substantial increases in flood heights.

OTHER FLOOD AREAS

ZONE X Areas of 0.2% annual chance flood; areas of 1% annual chance flood with average depths of less than 1 foot or with drainage areas less than 1 square mile; and areas protected by levees from 1% annual chance flood.

OTHER AREAS

ZONE X Areas determined to be outside the 0.2% annual chance floodplain.

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MAP REPOSITORIES
Refer to Map Repositories list on Map Index

EFFECTIVE DATE OF COUNTYWIDE
FLOOD INSURANCE RATE MAP
December 19, 1996
EFFECTIVE DATE(S) OF REVISION(S) TO THIS PANEL
August 18, 2014 - to reflect updated topographic information, to update corporate limits,to change Base Flood Elevations and Special Flood Hazard Areas, to add roads and road names, and to incorporate previously issued Letters of Map Revision.

For community map revision history prior to countywide mapping, refer to the Community Map History table located in the Flood Insurance Study report for this jurisdiction.

To determine if flood insurance is available in this community, contact your insurance agent or call the National Flood Insurance Program at 1-800-638-6620.

MAP SCALE 1" = 2000'
1000 0 2000 4000 FEET
600 0 600 1200 METERS

NFIP
NATIONAL FLOOD INSURANCE PROGRAM

PANEL 0650G

FIRM
FLOOD INSURANCE RATE MAP
MONTGOMERY COUNTY, TEXAS
AND INCORPORATED AREAS

PANEL 650 OF 750
(SEE MAP INDEX FOR FIRM PANEL LAYOUT)

CONTAINS:

COMMUNITY	NUMBER	PANEL	SUFFIX
MONTGOMERY COUNTY	480483	0650	G

Notice to User: The **Map Number** shown below should be used when placing map orders; the **Community Number** shown above should be used on insurance applications for the subject community.

MAP NUMBER
48339C0650G

MAP REVISED
AUGUST 18, 2014

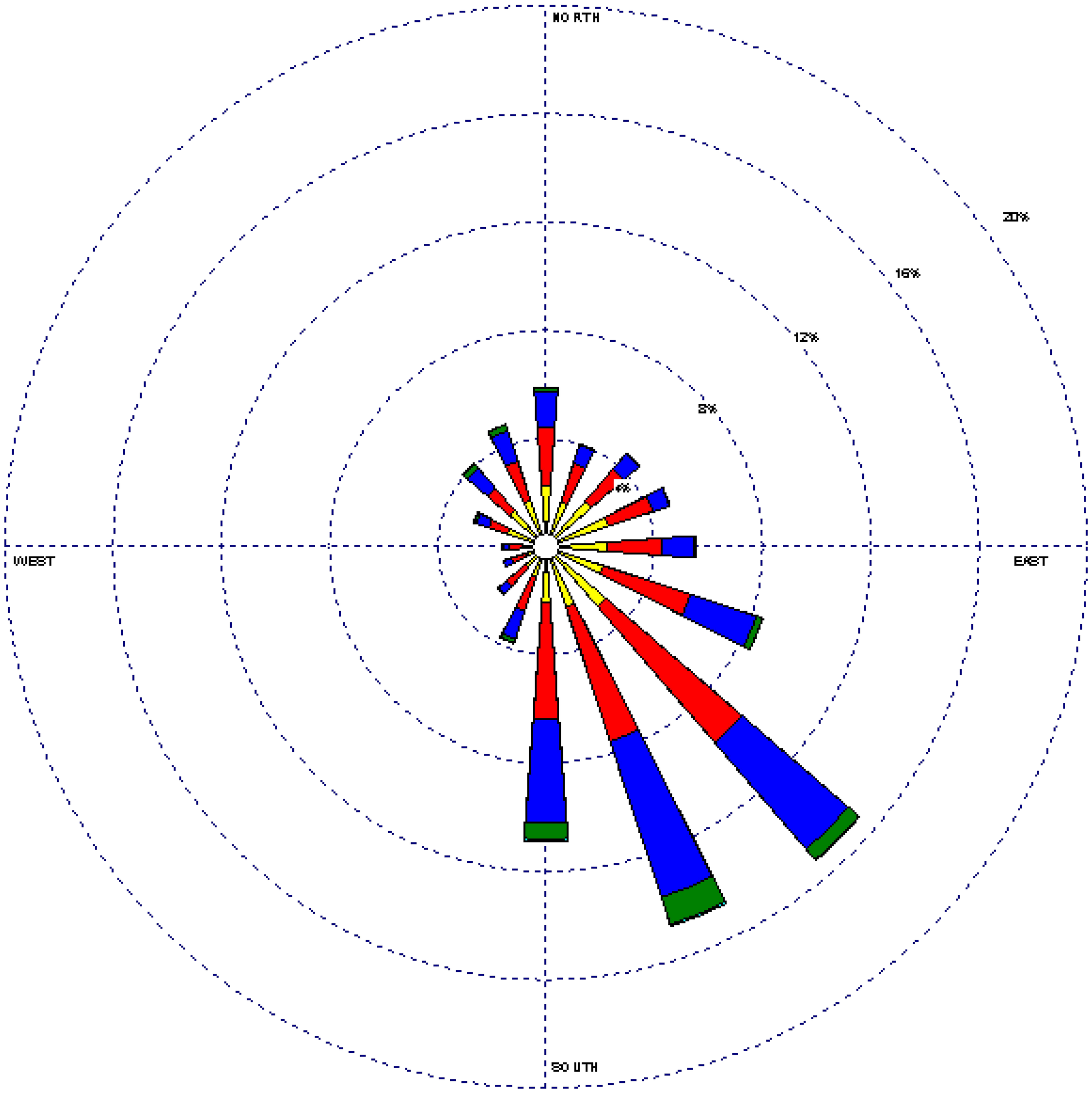
Federal Emergency Management Agency

EXHIBIT 15

WINDROSE

WIND ROSE PLOT

Station #12960 - HOUSTON/INTERCONTINENTAL ARPT, TX



Wind Speed (m/s) > 11.06 8.49 - 11.06 5.40 - 8.49 3.34 - 5.40 1.80 - 3.34 0.51 - 1.80	MODELER Sara West	DATE 8/29/2002	COMPANY NAME USDA-ARS
	DISPLAY Wind Speed	UNIT m/s	COMMENTS
	AVG. WIND SPEED 4.63 m/s	CALM WINDS 4.65%	
	ORIENTATION Direction (blowing from)	PLOT YEAR-DATE-TIME 1961 Apr 1 - Apr 30 Midnight - 11 PM	

ACORN RANCH
WASTEWATER TREATMENT PLANT
DISCHARGE PERMIT APPLICATION
WINDROSE DIAGRAM

Binkley & Barfield
DCCM
Binkley & Barfield, Inc. | TxEng F-257
1710 Seamist Dr, Houston, TX 77008
713.869.3433 | BinkleyBarfield.com

DATE: June 24 SCALE: N.T.S.

EXHIBIT 16

SLUDGE MANAGEMENT

PLAN

Exhibit 16

Sludge Management Plan

Influent Design Flow: 75,000 gpd

Influent BOD Concentration: 325 mg/L

Aerobic Digester Volume: 34,113 gallons

Aeration Basin MLSS: 3,500 mg/L

Table 15(A)(1) - Sludge Production

Solids Generated	100% Flow	75% Flow	50% Flow	25% Flow
Pounds Influent BOD_5	161	121	81	40
Pounds of digested dry sludge produced*	460	344	229	115
Pounds of wet sludge produced	2818	2113	1409	704
Gallons of wet sludge produced	338	253	169	85

***Assuming 0.4 pounds of digested dry sludge produced per pound of influent BOD_5 at average temperatures and 2.5% solids concentration in the digester.**

Sludge will accumulate and thicken in the sludge tank. As WAS is diverted to the sludge tank, supernatant will decant back to the EQ tank and sludge blanket will deepen over time.

Table 15(A)(2) - Sludge Removal Schedule

Removal Schedule (days)	100% Flow	75% Flow	50% Flow	25% Flow
Days between Sludge Removal	7	11	14	30

Liquid digested sludge will be removed from the digester for disposal on a regular basis as required. The calculated cell residence time (MCRT) for the digester storage volume of 34,113 gallons will be approximately 101 days as 100% capacity and annual average digested sludge production of 460 ppd. The digested sludge will be transported by a registered hauler.

EXHIBIT 17

PLAIN LANGUAGE

SUMMARY

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

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

East Waller County Management District (CN 606207410) proposes to operate Acorn Ranch Wastewater Treatment Plant (RN N/A), an activated sludge process plant operated in the complete mix mode. The facility will be located 300 ft West and 600 ft North of the intersection of Lakeside Drive and Robin Hood Dr., in Hockley, Waller County, Texas 77447.

This application is for the proposal of a permit allowing for the discharge of treated domestic wastewater at a daily average of 75,000 gallons per day.

Discharges from the facility are expected to contain five-day carbonaceous biochemical oxygen demand (CBOD5), total suspended solids (TSS), ammonia nitrogen (NH3-N), and Escherichia coli. Additional potential pollutants are included in the Domestic Technical Report 1.0, Section 7. Domestic wastewater will be treated by an activated sludge process plant and the treatment units include a manual bar screen, aeration basins, final clarifiers, aerobic digesters, and chlorine contact chambers. The sludge will be hauled off by a licensed sludge hauler for disposal.

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

AGUAS RESIDUALES DOMESTICAS /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.

East Waller County Management District (CN 606207410) propone operar la planta de tratamiento de aguas residuals del Acorn Ranch Wastewater Treatment Plant (RN N/A), una planta de proceso de lodos activados operada en el modo de mezcla completa. La instalación estará ubicada a 300 pies al oeste y 600 pies al norte de la intersección de Lakeside Drive y Robin Hood Dr., en Hockley, Condado de Waller, Texas 77447.

Esta solicitud es para la renovación del permiso existente que permite la descarga de aguas residuales domésticas tratadas a un flujo promedio diario de 75,000 galones por día.

Se espera que las descargas de la instalación contengan demanda bioquímica de oxígeno carbónico (CBOD5) de cinco días, sólidos suspendidos totales (TSS), nitrógeno amoniacal (NH3-N) y Escherichia coli. Los contaminantes potenciales adicionales se incluyen en el Informe técnico doméstico 1.0, Sección 7. Las aguas residuales domésticas serán tratadas por una planta de proceso de lodos activados y las unidades de tratamiento incluyen una pantalla de barra manual, balsas de aireación, clarificadores finales, digestores aeróbicos y cámaras de contacto de cloro. El lodo serán acarreado por un transportador de lodos con licencia para su eliminación.

RG Miller | DCCM

October 24, 2024 Via: E-Mail

Rachel Ellis
Applications Review and Processing Team (MC148)
Water Quality Division
Texas Commission of Environmental Quality

Re: Notice of Deficiency Response Letter
East Waller County Management District
Acorn Ranch Wastewater Treatment Plant (WQ0016630001)

Dear Ms. Rachel Elllis,

This letter is in response to your letter dated October 2, 2024. The following items are intended to provide the additional information you requested:

1. Core Data Form (CDF), Section II, item 13: This item was unanswered, please update the CDF and return with the response to this letter.

   Response: Core Data Form has been revised and attached.

2. Core Data Form (CDF), Section III, item 25: The description of the facility location, which is provided in item 25 of the CDF. For clarity purposes we will describe the proposed location as follows: approximately 900 feet northwest of the intersection of Lakeside Drive and Robin Hood Lane, in Harris County, Texas 77447. Please verify and submit a revised and signed page 2 of the CDF, page 8 of the Administrative Report, page 16 of the SPIF and both English and Spanish Plain Language Summaries. If confirmed please update the listed items and return with the response to this letter.

   Response: Core Data Form, Administrative Report, SPIF, English and Spanish Plain Language Summaries have been revised and attached.

3. Administrative Report 1.0, Section 8/D: During a routine verification for the public viewing location, we have found the address differs from what was provided on the application. Please verify that the current address for the public viewing location is as follows: Melanee Smith Memorial Library, 2103 Main Street, Waller, Texas.

   Response: The address is correct. Administrative Report 1.0, Section 8/D has been revised and attached.

4. Landowner labels: Please list each name and address to be capitalized, contain no punctuation, and the appropriate two-character abbreviation must be used for the state. Each entity must be blocked and space consecutively. The format is required by the Postal Service for machine readability. In addition, do not include the numbers used to cross-reference the landowners on the landowners' map. The mailing list should be the name and address only. Please provide a mailing list via MS Word document typed in format mentioned and as example seen below. (Avery label 5160 format 3 columns across, 10 columns down for a total of 30 labels per page.)

EXAMPLES:

SHARMAN DUNN	MR AND MRS EDWARD PEABODY	BRIAR LP
RR 1 BOX 34	1405 MONTAGUE LN	PO BOX 249
SEA TX 76724	SEA TX 76710-1234	SEA TX 76710-0249

Response: Please see attached labels.

5. Administrative Report 1.0, Section 9, item D: The owner of the land is listed as RYYAN Water LP, LLC. If RYYAN Water LP, LLC is the not the owner of land and East Waller County Management District, is the owner of the land where the facility is located, please submit a revised page 7 indicating the owner of the land as East Waller County Management District. If RYYAN Water LP, LLC is the owner of land, you must provide a copy of a long-term lease agreement between East Waller County Management District and RYYAN Water LP, LLC giving East Waller County Management District use of the land for the duration of the registration. The lease agreement must contain a term for at least the length of the registration, identify number of acres, identify property by legal description of map, include the signatures of both parties, and clearly authorize to use the land for the purpose of operating the facility. If East Waller County Management District is the owner of the land where the facility is located, please submit a revised page 7 indicating the owner of the land as East Waller County Management District.

   Response: East Waller County Management District is the owner for the land and Rayyan Water will be the owner of the treatment facility. East Waller County Management District will provide an Easement to Rayyan water to own and operate the wastewater treatment plant. Because East Waller County Management District is in its early stage of its organization, an easement agreement has not been drawn yet. Administrative Report 1.0, Section 9/D has been revised and attached.

6. Map: The map you have provided does not show a highlighted discharge route for 3 miles down stream or until it reaches a segment. Please update the map and add the discharge route and return with the response to this letter.

   Response: Map have been revised and attached.

7. Landowner map: Please identify the landowner by number on the east side of landowner plot #1. Please update the map and return with the response to this letter.

   Response: Landowner map has been revised and attached.

8. 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. East Waller County Management District, 600 West 5th Street, Unit 900, Austin, Texas 78701, has applied to the Texas Commission on Environmental Quality (TCEQ) for proposed Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0016630001 (EPA I.D. No. TX0146641) to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 70,000 gallons per day. The domestic wastewater treatment facility will be located approximately 900 Feet northwest of the intersection of Lakeside Drive and Robin Hood Lane, near the city of Hockley, in Harris County, Texas 77447. The discharge route will be from the plant site to (pending RWA). TCEQ received this application on September 19, 2024. The permit application will be available for viewing and copying at Melanee Smith Memorial Library, 2103 Main Street, Waller, Texas prior to the date this notice is published in the newspaper. The application, including any updates, and associated notices are available electronically at the following webpage:

https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications. This link to an electronic map of the site or facility's general location is provided as a public courtesy and not part of the application or notice. For the exact location, refer to the application. https://gisweb.tceq.texas.gov/LocationMapper/?marker=-95.81027,30.135833&level=18

Response: The address and discharge route has been revised in the NORI below.

APPLICATION. East Waller County Management District, 600 West 5th Street, Unit 900, Austin, Texas 78701, has applied to the Texas Commission on Environmental Quality (TCEQ) for proposed Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0016630001 (EPA I.D. No. TX0146641) to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 70,000 gallons per day. The domestic wastewater treatment facility will be located approximately 700 ft northwest of the intersection of Lakeside Drive and Robin Hood Lane, in Waller County, Texas 77447.The discharge route will be from the plant site to an unnamed creek; thence to Brushy Creek; thence to Spring Creek in Segment No. 1008_02 of the San Jacinto River Basin. TCEQ received this application on September 19, 2024. The permit application will be available for viewing and copying at Melanee Smith Memorial Library, 2103 Main Street, Waller, Texas prior to the date this notice is published in the newspaper. The application, including any updates, and associated notices are available electronically at the following webpage: https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications. This link to an electronic map of the site or facility's general location is provided as a public courtesy and not part of the application or notice. For the exact location, refer to the application. https://gisweb.tceq.texas.gov/LocationMapper/?marker=-95.81027,30.135833&level=18

9. 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: Please see attached NORI translated in Spanish.

10. Please use the attached Plain Language Summary (PLS) Template to provide a plain language summary in English.

    Response: Please see attached Plain Language Summary.

11. Section 8, Item E, Item No. 5 of Administrative Report 1.0 indicates that public notices in Spanish are required. Please use the attached PLS Spanish template to translate the plain language summary into Spanish.

    Response: Please see attached Plain Language Summary translated in Spanish.

Regards,

R.G. Miller Engineers

Janessa Tran, P.E.
Project Engineer
jtran@dccm.com

L:\4928_East Waller County Management District\05135.600 Acorn Ranch WWTP\Engineering\Notes\24-10-02 NOD\Sent\LTR_RGM.docx

TCEQ Use Only

TCEQ Core Data Form

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

SECTION I: General Information

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

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

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

2. Customer Reference Number *(if issued)*	Follow this link to search for CN or RN numbers in Central Registry**	**3. Regulated Entity Reference Number** *(if issued)*
CN 60607140		**RN**

SECTION II: Customer Information

4. General Customer Information | **5. Effective Date for Customer Information Updates** (mm/dd/yyyy)

☐ New Customer ☒ Update to Customer Information ☐ Change in Regulated Entity Ownership
☐ Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)

The Customer Name submitted here may be updated automatically based on what is current and active with the Texas Secretary of State (SOS) or Texas Comptroller of Public Accounts (CPA).

6. Customer Legal Name *(If an individual, print last name first: eg: Doe, John)* — *If new Customer, enter previous Customer below:*

East Waller County Management District

7. TX SOS/CPA Filing Number	**8. TX State Tax ID** (11 digits)	**9. Federal Tax ID** (9 digits)	**10. DUNS Number** *(if applicable)*

11. Type of Customer: ☐ Corporation ☐ Individual Partnership: ☐ General ☐ Limited

Government: ☐ City ☐ County ☐ Federal ☐ Local ☐ State ☒ Other ☐ Sole Proprietorship ☐ Other:

12. Number of Employees

☒ 0-20 ☐ 21-100 ☐ 101-250 ☐ 251-500 ☐ 501 and higher

13. Independently Owned and Operated?

☒ **Yes** ☐ **No**

14. Customer Role (Proposed or Actual) – *as it relates to the Regulated Entity listed on this form. Please check one of the following*

☐ Owner ☐ Operator ☒ Owner & Operator
☐ Occupational Licensee ☐ Responsible Party ☐ VCP/BSA Applicant ☐ Other:

15. Mailing Address:	C/O Winstead PC						
	600 W. 5th Street, Suite 900						
	City	Austin	**State**	TX	**ZIP**	78701	**ZIP + 4**

16. Country Mailing Information *(if outside USA)*	**17. E-Mail Address** *(if applicable)*
	rmartin@winstead.com

18. Telephone Number	19. Extension or Code	20. Fax Number *(if applicable)*
(713) 398-7927		( ) -

SECTION III: Regulated Entity Information

21. General Regulated Entity Information *(If 'New Regulated Entity" is selected, a new permit application is also required.)*

☒ New Regulated Entity ☐ Update to Regulated Entity Name ☐ Update to Regulated Entity Information

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

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

Acorn Ranch Wastewater Treatment Plant

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

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

25. Description to Physical Location:	The wastewater treatment facility is located approximately 700 ft northwest of the intersection of Lakeside Drive and Robin Hood Lane, in Waller County, Texas 77447.

26. Nearest City	State	Nearest ZIP Code
Hockley	TX	77447

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

27. Latitude (N) In Decimal:			28. Longitude (W) In Decimal:		
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
30	8	9.3	95	48	37.5

29. Primary SIC Code (4 digits)	30. Secondary SIC Code (4 digits)	31. Primary NAICS Code (5 or 6 digits)	32. Secondary NAICS Code (5 or 6 digits)
4951			

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

To serve the Acorn Ranch subdivision

34. Mailing Address:	**C/O Winstead PC**							
	600 W. 5th Street, Suite 900							
	City	**Austin**	**State**	**TX**	**ZIP**	**78701**	**ZIP + 4**	
35. E-Mail Address:	**rmartin@winstead.com**							

36. Telephone Number	37. Extension or Code	38. Fax Number *(if applicable)*
(713) 398-7927		( ) -

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.

☐ Dam Safety	☐ Districts	☐ Edwards Aquifer	☐ Emissions Inventory Air	☐ Industrial Hazardous Waste
☐ Municipal Solid Waste	☐ New Source Review Air	☐ OSSF	☐ Petroleum Storage Tank	☐ PWS
☐ Sludge	☐ Storm Water	☐ Title V Air	☐ Tires	☐ Used Oil
☐ Voluntary Cleanup	☒ Wastewater	☐ Wastewater Agriculture	☐ Water Rights	☐ Other:

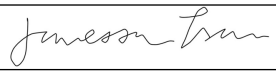
SECTION IV: Preparer Information

40. Name:	Janessa Tran	**41. Title:**	Project Engineer

42. Telephone Number	**43. Ext./Code**	**44. Fax Number**	**45. E-Mail Address**
(713 **)** 461-9600		**( )** -	jtran@dccm.com

SECTION V: Authorized Signature

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

Company:	R.G. Miller | DCCM	**Job Title:**	Project Engineer
Name *(In Print):*	Janessa Tran	**Phone:**	**(** 713 **)** 461- **9600**
Signature:		**Date:**	10/24/2024

E. Owner of effluent disposal site:

Prefix: N/A Last Name, First Name: Click to enter text.

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

Organization Name: Click to enter text.

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

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

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

Attachment: Click to enter text.

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

Prefix: N/A Last Name, First Name: Click to enter text.

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

Organization Name: Click to enter text.

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

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

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

Attachment: Click to enter text.

Section 10. TPDES Discharge Information (Instructions Page 31)

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

☐ Yes ☒ No

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

The Acorn Ranch WWTP is located approximately 700 ft northwest of the intersection of Lakeside Drive and Robin Hood Lane, in Waller County, Texas 77447.

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:

The District will discharge wastewater into an unnamed creek; thence to Brushy Creek; thence to Spring Creek in Segment No. 1008_02 of the San Jacinto River Basin.

City nearest the outfall(s): Hockley

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

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?

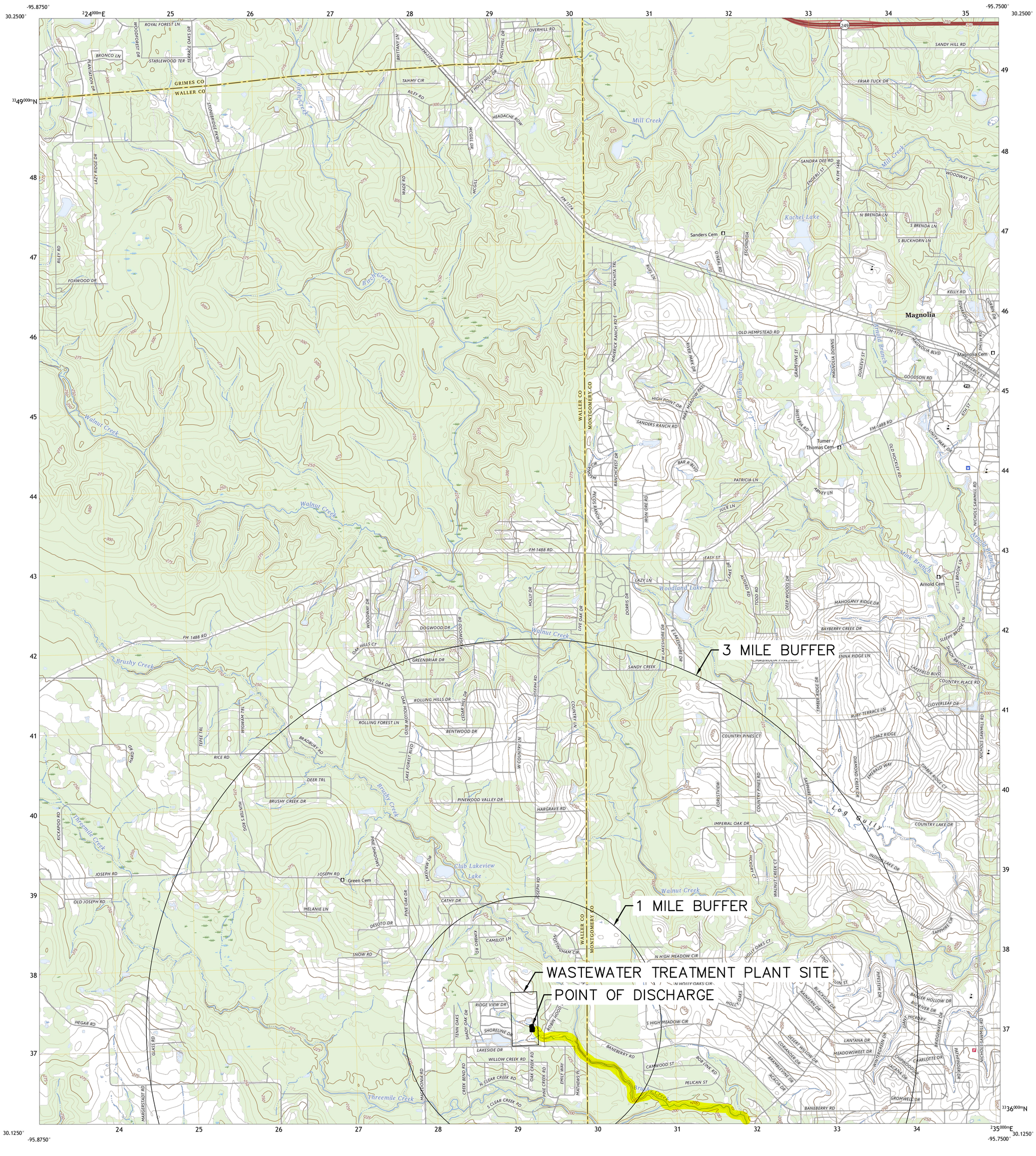
☐ Yes ☒ No

USGS science for a changing world

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

The National Map US Topo

MAGNOLIA WEST QUADRANGLE
TEXAS
7.5-MINUTE SERIES

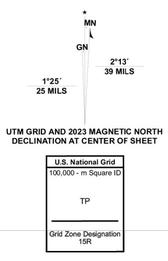


Produced by the United States Geological Survey
North American Datum of 1983 (NAD83)
World Geodetic System of 1984 (WGS84). Projection and
1 000-meter grid:Universal Transverse Mercator, Zone 15R

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
Roads.....U.S. Census Bureau, 2015
Names.....GNIS, 1979 - 2023
Hydrography.....National Hydrography Dataset, 2003 - 2022
Contours.....National Elevation Dataset, 2010
Boundaries.....Multiple sources; see metadata file 2021 - 2022

Wetlands.....FWS National Wetlands Inventory Not Available



UTM GRID AND 2023 MAGNETIC NORTH DECLINATION AT CENTER OF SHEET

U.S. National Grid
100,000 - m Square ID
TP
Grid Zone Designation
15R

SCALE 1:24 000

1 0.5 0 KILOMETERS 1 2
1000 500 0 METERS 1000 2000
1 0.5 0 1
MILES
1000 0 1000 2000 3000 4000 5000 6000 7000 8000 9000 10000
FEET

CONTOUR INTERVAL 5 FEET
NORTH AMERICAN VERTICAL DATUM OF 1988

This map was produced to conform with the National Geospatial Program US Topo Product Standard.

QUADRANGLE LOCATION

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

1	2	3
4		5
6	7	8

1 Stoneham
2 Plantersville
3 Keenan
4 Waller NW
5 Magnolia East
6 Waller
7 Hockley
8 Rose Hill

ADJOINING QUADRANGLES

NSN 7643016397146
NGA REF NO. USGSX24K27250

MAGNOLIA WEST, TX
2023

ACORN RANCH
WASTEWATER TREATMENT PLANT
DISCHARGE PERMIT APPLICATION
USGS MAP EXHIBIT A

Binkley & Barfield

DCCM

Binkley & Barfield, Inc. | TxEng F-257
1710 Seamist Dr, Houston, TX 77008
713.869.3433 | BinkleyBarfield.com

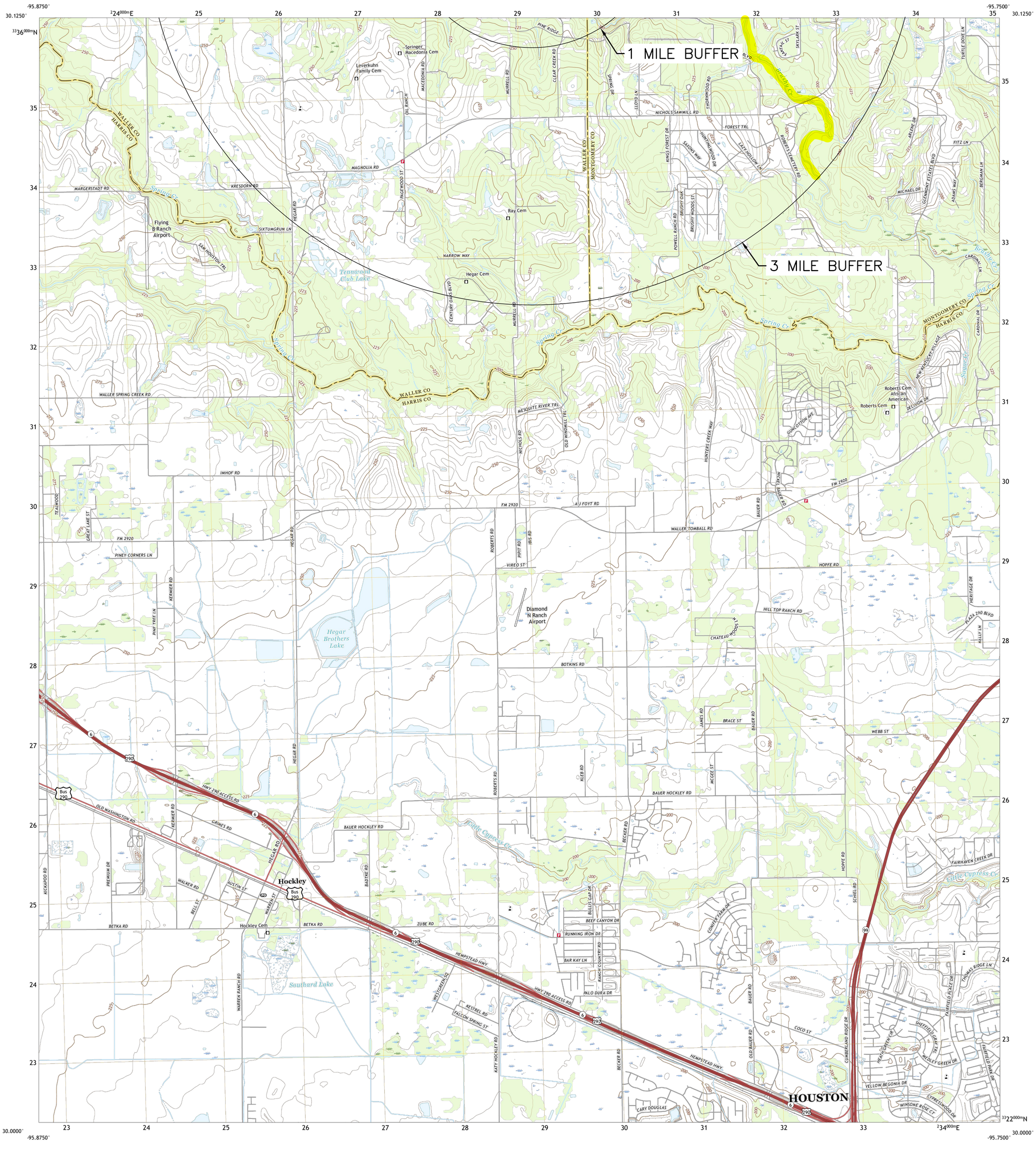
DATE: June 24

SCALE: AS NOTED

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

The National Map US Topo

HOCKLEY QUADRANGLE
TEXAS
7.5-MINUTE SERIES



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 15R
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
Roads..... U.S. Census Bureau, 2015 - 2019
Names.....GNIS, 1979 - 2022
Hydrography.....National Hydrography Dataset, 2003 - 2018
Contours.....National Elevation Dataset, 2010
Boundaries.....Multiple sources; see metadata file 2019 - 2021

Wetlands.....FWS National Wetlands Inventory Not Available

MN
GN
2°37´
47 MILS
1°25´
25 MILS
UTM GRID AND 2019 MAGNETIC NORTH DECLINATION AT CENTER OF SHEET

U.S. National Grid
100,000 - m Square ID
TP
Grid Zone Designation
15R

SCALE 1:24 000
1 0.5 0 KILOMETERS 1 2
1000 500 0 METERS 1000 2000
1 0.5 0 1
MILES
1000 0 1000 2000 3000 4000 5000 6000 7000 8000 9000 10000
FEET

CONTOUR INTERVAL 5 FEET
NORTH AMERICAN VERTICAL DATUM OF 1988

This map was produced to conform with the National Geospatial Program US Topo Product Standard.

TEXAS
QUADRANGLE LOCATION

1	2	3
4		5
6	7	8

1 Waller NW
2 Magnolia West
3 Magnolia East
4 Waller
5 Rose Hill
6 Hockley Mound
7 Warren Lake
8 Cypress
ADJOINING QUADRANGLES

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

NSN. 7643016395532
NGA REF NO. USGS X24K20612

HOCKLEY, TX
2022

ACORN RANCH
WASTEWATER TREATMENT PLANT
DISCHARGE PERMIT APPLICATION
USGS MAP EXHIBIT B

Binkley & Barfield

DCCM

Binkley & Barfield, Inc. | TxEng F-257
1710 Seamist Dr, Houston, TX 77008
713.869.3433 | BinkleyBarfield.com

DATE: June 24

SCALE: AS NOTED

J:\EWCMD\240000217.000_ACORN RANCH WWTP TPDES PERMIT APP\6.00_CADD\6.03_DRAWINGS\24-0217-PD-USGS MAP EXHIBIT.DWG | HBREAUX | SAVED: Wednesday, July 3, 2024 3:44:32 PM | PLOTTED: Thursday, July 11, 2024 10:50:51 AM

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

☒ TPDES Permit

☐ TLAP

☐ TPDES Permit with TLAP component

☐ Subsurface Area Drip Dispersal System (SADDS)

d. Check the box next to the appropriate application type

☒ New

☐ Major Amendment *with* Renewal

☐ Major Amendment *without* Renewal

☐ Renewal without changes

☐ Minor Amendment *with* Renewal

☐ Minor Amendment *without* Renewal

☐ Minor Modification of permit

e. For amendments or modifications, describe the proposed changes: Click to enter text.

f. For existing permits:

Permit Number: WQ00 Click to enter text.

EPA I.D. (TPDES only): TX Click to enter text.

Expiration Date: Click to enter text.

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?

East Waller County Management District

(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: 606207140

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: Ms. Last Name, First Name: Cooper, Lisa

Title: Chairman Credential: Click to enter text.

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

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

622 Sofi Lakes LP, LLC

(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: Ms. Last Name, First Name: Filfil, Sophia

Title: Chief Executive Manager Credential: Click to enter text.

Provide a brief description of the need for a co-permittee: Landowner

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. Exhibit 2

Section 4. Application Contact Information (Instructions Page 27)

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

A. Prefix: Mr. Last Name, First Name: Safari, Ali

Title: Senior Design Engineer Credential: Click to enter text.

Organization Name: R.G. Miller | DCCM

Mailing Address: 1080 Eldridge Parkway, Suite 600 City, State, Zip Code: Houston, Texas, 77077

Phone No.: (281)921-8765 E-mail Address: asafari@dccm.com

Check one or both: ☒ Administrative Contact ☒ Technical Contact

B. Prefix: Ms. Last Name, First Name: Tran, Janessa

Title: Project Engineer Credential: Click to enter text.

Organization Name: R.G. Miller | DCCM

Mailing Address: 1080 Eldridge Parkway, Suite 600 City, State, Zip Code: Houston, Texas, 77077

Phone No.: (713) 869-3433 E-mail Address: jtran@dccm.com

Check one or both: ☒ Administrative Contact ☒ Technical Contact

Section 5. Permit Contact Information (Instructions Page 27)

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

A. Prefix: Mr. Last Name, First Name: Safari, Ali

Title: Senior Design Engineer Credential: Click to enter text.

Organization Name: R.G. Miller | DCCM

Mailing Address: 1080 Eldridge Parkway, Suite 600 City, State, Zip Code: Houston, Texas, 77077

Phone No.: (281)921-8765 E-mail Address: asafari@dccm.com

B. Prefix: Mr. Last Name, First Name: Martin, Ross

Title: Attorney Credential: Click to enter text.

Organization Name: Winstead PC

Mailing Address: 600 W. 5th Street, Suite 900 City, State, Zip Code: Austin, Texas, 78701

Phone No.: (512)370-2931 E-mail Address: rmartin@winstead.com

Section 6. Billing Contact Information (Instructions Page 27)

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

Prefix: Ms. Last Name, First Name: Filfil, Sophia

Title: COO Credential: Click to enter text.

Organization Name: Rayyan Water LP, LLC

Mailing Address: 9018 Tri City Beach Road City, State, Zip Code: Baytown, Texas 77523

Phone No.: (713) 398-7927 E-mail Address: sophiafilfil@gmail.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: Ms. Last Name, First Name: Dana Sharbonno

Title: Client Manager Credential: Click to enter text.

Organization Name: Municipal District Services

Mailing Address: 406 W. Grand Parkway S. Suite 260 City, State, Zip Code: Katy, TX 77494

Phone No.: (281) 290-3176 E-mail Address: dsharbonno@mdswater.com

Section 8. Public Notice Information (Instructions Page 27)

A. Individual Publishing the Notices

Prefix: Ms. Last Name, First Name: Tran, Janessa

Title: Project Engineer Credential: Click to enter text.

Organization Name: R.G. Miller | DCCM

Mailing Address: 1080 Eldridge Parkway, Suite 600 City, State, Zip Code: Houston, TX 77077

Phone No.: (713) 461-9600 E-mail Address: jtran@dccm.com

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

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

☒ E-mail Address

☐ Fax

☐ Regular Mail

C. Contact permit to be listed in the Notices

Prefix: Mr. Last Name, First Name: Safari, Ali

Title: Senior Design Engineer Credential: Click to enter text.

Organization Name: R.G. Miller | DCCM

Mailing Address: 1080 Eldridge Parkway, Suite 600 City, State, Zip Code: Houston, TX 77077

Phone No.: (281)921-8765 E-mail Address: asafari@dccm.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: Melanee Smith Memorial Library

Location within the building: Click to enter text.

Physical Address of Building: 2103 Main Street

City: Waller County: Waller

Contact (Last Name, First Name): Click to enter text.

Phone No.: (936) 372-3961 Ext.: Click to enter text.

E. Bilingual Notice Requirements

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

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

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

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

   ☒ Yes ☐ No

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

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

   ☒ Yes ☐ No

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

   ☐ Yes ☒ No

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

   ☐ Yes ☒ No

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

F. Plain Language Summary Template

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

Attachment: Exhibit 17

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: Exhibit 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** Click to enter text.

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):

Acorn Ranch WWTP

C. Owner of treatment facility: Rayyan Water LP, LLC

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

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

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

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

Organization Name: 622 Sofi Lakes LP, LLC

Mailing Address: 9108 Tri City Beach Road City, State, Zip Code: Baytown, TX 77523

Phone No.: (713) 398-7927 E-mail Address: Sofiafilfil@gmail.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