



Administrative Package Cover Page

This file contains the following documents:

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



Portada de Paquete Administrativo

Este archivo contiene los siguientes documentos:

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



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

PLAIN LANGUAGE SUMMARY FOR TPDES OR TLAP PERMIT APPLICATIONS

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

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

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

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

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

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

Montgomery County Municipal Utility District No. 246 (Customer No. N/A) proposes to operate Montgomery County Municipal Utility District No. 246 waste collection system through (RN N/A), a Wastewater Treatment Plant. The facility will be located at 1.5 miles from the intersection of State Hwy 105, west of Farm to Market Road 1484, in Cut and Shoot, Montgomery County, Texas 77303. New application to discharge treated domestic wastewater on an intermittent and flow-variable basis. Discharges from the facility are expected to contain five-day biochemical oxygen demand (BOD₅), total suspended solids (TSS), ammonia nitrogen (NH₃-N), and dissolved oxygen (DO). Additional details can be found in attachment no. 12 of the permit application. This permit will not authorize the discharge of pollutants into water in the state.

Discharges from the facility are expected to contain domestic wastewater. Domestic wastewater will be treated by aerobic treatment units.

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.

Montgomery County Municipal Utility District No. 246 (Numero de Cliente: N/A) propone operar el sistema de recoleccion de Montgomery County Numero de Entidad Regulada: N/A, una Planta de Tratamiento municipal de desechos solidos. La instalación estará ubicada en a 1.5 millas de la interseccion de State Hwy 105, al oeste de Farm to Market Road 1484, en Cut and Shoot, Condado de Montgomery, Texas 77303. Nueva solicitud para desechar agua residual domestica tratada, en flujo variable e intermitente. Este permiso no autorizará una descarga de contaminantes en el agua en el estado.

Se espera que las descargas de la instalación contengan desperdicios domesticos. Agua residual domestica. **estará** tratado por unidades de tratamiento aerobico.

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY



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

PROPOSED PERMIT NO. WQ0016767001

APPLICATION. City of Richmond, 600 Morton Street, Richmond, Texas 77469, has applied to the Texas Commission on Environmental Quality (TCEQ) for proposed Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0016767001 (EPA I.D. No. TX0147699) to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 4,000,000 gallons per day. The domestic wastewater treatment facility will be located approximately 600 feet northwest of the intersection of Pitts Road and U.S. 90, near the city of Richmond, in Fort Bend County, Texas 77406. The discharge route will be from the plant site via a pipe directly to Brazos River Below Navasota River. TCEQ received this application on April 2, 2025. The permit application will be available for viewing and copying at Richmond City Hall, 402 Morton Street, Richmond, in Fort Bend County, Texas prior to the date this notice is published in the newspaper. The application, including any updates, and associated notices are available electronically at the following webpage:

<https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications>. This link to an electronic map of the site or facility's general location is provided as a public courtesy and not part of the application or notice. For the exact location, refer to the application.

<https://gisweb.tceq.texas.gov/LocationMapper/?marker=-95.73592,29.599533&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 City of Richmond at the address stated above or by calling Ms. Terri Vela, City Manager/City of Richmond, at 281-342-5456.

Issuance Date: June 9, 2025

Comisión de Calidad Ambiental del Estado de Texas



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

PERMISO PROPUESTO NO. WQ0016767001

SOLICITUD. Ciudad de Richmond, 600 Morton Street, Richmond, Texas 77469, ha solicitado a la Comisión de Calidad Ambiental del Estado de Texas (TCEQ) para el propuesto Permiso No. WQ0016767001 (EPA I.D. No. TX 0147699) 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 4,000,000 galones por día. La planta estará ubicada a 600 pies al norte de la intersección de Pitts Road y US 90 Alt. en el Condado de Fort Bend, Texas 77406. La ruta de descarga será desde el sitio de la planta a través de una tubería directamente al río Brazos, por debajo del río Navasota. La TCEQ recibió esta solicitud el 2 de abril de 2025. La solicitud para el permiso estará disponible para leerla y copiarla en Ayuntamiento, 402 Morton Street, Richmond, en el Condado de Fort Bend, 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=-95.73592,29.599533&level=18>

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

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

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

una audiencia administrativa de lo contencioso.

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

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

Después del cierre de todos los períodos de comentarios y de petición que aplican, el Director Ejecutivo enviará la solicitud y cualquier petición para reconsideración o para una audiencia de caso impugnado a los Comisionados de la TCEQ para su consideración durante una reunión programada de la Comisión.

La Comisión sólo puede conceder una solicitud de una audiencia de caso impugnado sobre los temas que el solicitante haya presentado en sus comentarios oportunos que no fueron retirados posteriormente. **Si se concede una audiencia, el tema de la audiencia estará limitado a cuestiones de hecho en disputa o cuestiones mixtas de hecho y de derecho relacionadas a intereses pertinentes y materiales de calidad del agua que se hayan presentado durante el período de comentarios.**

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

solicitudes en un condado específico. Si desea que se agregue su nombre en una de las listas designe cual lista(s) y envía por correo su pedido a la Oficina del Secretario Principal de la TCEQ.

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

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

También se puede obtener información adicional del Ciudad de Richmond a la dirección indicada arriba o llamando a Terri Vela al 281-342-5456.

Fecha de emisión: 9 de junio de 2025



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the application.

APPLICANT NAME: City of Richmond

PERMIT NUMBER (If new, leave blank): WQ00Click 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	☒	☐
Summary of Application (PLS)	☒	☐	Flow Diagram	☒	☐
Public Involvement Plan Form	☒	☐	Site Drawing	☒	☐
Technical Report 1.0	☒	☐	Original Photographs	☒	☐
Technical Report 1.1	☒	☐	Design Calculations	☒	☐
Worksheet 2.0	☒	☐	Solids Management Plan	☒	☐
Worksheet 2.1	☐	☒	Water Balance	☐	☒
Worksheet 3.0	☐	☒			
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: 124329
Check/Money Order Amount: \$2,050.00
Name Printed on Check: City of Richmond

EPAY Voucher Number: N/A

Copy of Payment Voucher enclosed? Yes ☐

Section 2. Type of Application (Instructions Page 26)

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

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

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

- ☐ Active ☒ Inactive

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

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

d. Check the box next to the appropriate application type

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

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

f. For existing permits:

Permit Number: WQ00 [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-Applcant 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?

City of Richmond

(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: 600659031

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: Hass, Rebecca

Title: Mayor

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

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

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

[Click to enter text.](#)

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

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

CN: Click to enter text.

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

Prefix: Click to enter text.

Last Name, First Name: Click to enter text.

Title: Click to enter text.

Credential: Click to enter text.

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

C. Core Data Form

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

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: Hann, Tyson
Title: Senior Project Manager Credential: P.E., D.Eng.
Organization Name: Garver
Mailing Address: 12141 Wickchester Lane City, State, Zip Code: Houston, TX 77079
Phone No.: 713-482-4789 E-mail Address: TOHann@GarverUSA.com
Check one or both: ☐ Administrative Contact ☒ Technical Contact
- B. Prefix: Ms. Last Name, First Name: Vela, Terri
Title: City Manager Credential: Click to enter text.
Organization Name: City of Richmond
Mailing Address: 402 Morton St. City, State, Zip Code: Richmond, TX 77469
Phone No.: 281-342-5456 E-mail Address: tvela@richmondtx.gov
Check one or both: ☒ Administrative Contact ☐ Technical Contact

Section 5. Permit Contact Information (Instructions Page 27)

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

- A. Prefix: Ms. Last Name, First Name: Vela, Terri
Title: City Manager Credential: Click to enter text.
Organization Name: City of Richmond
Mailing Address: 402 Morton St. City, State, Zip Code: Richmond, TX 77469
Phone No.: 281-342-5456 E-mail Address: tvela@richmondtx.gov

B. Prefix: Mr. Last Name, First Name: Bridges, Tyler
Title: Wastewater Superintendent Credential: [Click to enter text.](#)
Organization Name: City of Richmond
Mailing Address: 600 Morton St. City, State, Zip Code: Richmond, TX 77469
Phone No.: 281-342-0559 E-mail Address: tbridges@richmondtx.gov

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: Mr. Last Name, First Name: Preza, Augusto
Title: Finance Director Credential: [Click to enter text.](#)
Organization Name: City of Richmond
Mailing Address: 402 Morton St. City, State, Zip Code: Richmond, TX 77469
Phone No.: 281-342-5456 E-mail Address: apreza@richmondtx.gov

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).

C. Prefix: Mr. Last Name, First Name: Bridges, Tyler
Title: Wastewater Superintendent Credential: [Click to enter text.](#)
Organization Name: City of Richmond
Mailing Address: 600 Morton St. City, State, Zip Code: Richmond, TX 77469
Phone No.: 281-342-0559 E-mail Address: tbridges@richmondtx.gov

Section 8. Public Notice Information (Instructions Page 27)

A. Individual Publishing the Notices

Prefix: Ms. Last Name, First Name: Vela, Terri
Title: City Manager Credential: [Click to enter text.](#)
Organization Name: City of Richmond
Mailing Address: 402 Morton St. City, State, Zip Code: Richmond, TX 77469
Phone No.: 281-342-5456 E-mail Address: tvela@richmondtx.gov

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: Ms.

Last Name, First Name: Vela, Terri

Title: City Manager

Credential: Click to enter text.

Organization Name: City of Richmond

Mailing Address: 402 Morton St.

City, State, Zip Code: Richmond, TX 77469

Phone No.: 281-342-5456

E-mail Address: tvela@richmondtx.gov

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: City Hall

Location within the building: Front Lobby

Physical Address of Building: 402 Morton St.

City: Richmond, TX 77469

County: Fort Bend

Contact (Last Name, First Name): Vela, Terri

Phone No.: 281-342-5456 Ext.: Click to enter text.

E. Bilingual Notice Requirements

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

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

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

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

☒ Yes

☐ No

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

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

☒ Yes

☐ No

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

☐ Yes ☒ No

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

☐ Yes ☒ No

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

F. Summary of Application in Plain Language Template

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

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

G. Public Involvement Plan Form

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

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

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

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

City of Richmond – East Wastewater Treatment Plant

C. Owner of treatment facility: City of Richmond

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: City of Richmond

Mailing Address: 402 Morton St.

City, State, Zip Code: Richmond, TX 77469

Phone No.: 281-342-5456

E-mail Address: tvela@richmondtx.gov

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

Attachment: N/A

E. Owner of effluent disposal site:

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

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

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

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

Organization Name: [Click to enter text.](#)

Mailing Address: [Click to enter text.](#)

City, State, Zip Code: [Click to enter text.](#)

Phone No.: [Click to enter text.](#)

E-mail Address: [Click to enter text.](#)

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

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

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

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

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

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

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

Organization Name: [Click to enter text.](#)

Mailing Address: [Click to enter text.](#)

City, State, Zip Code: [Click to enter text.](#)

Phone No.: [Click to enter text.](#)

E-mail Address: [Click to enter text.](#)

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

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

Section 10. TPDES Discharge Information (Instructions Page 31)

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

☐ Yes ☐ No

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

600 ft North of intersection of Pitts Road and US 90 Alt., Richmond, TX 77406	
Property ID: R36311	Legal Description: 0062 WM Morton, Tract 70
Neighborhood Code: 5950	Geo ID: 0062-00-000-0700-901

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:

Direct Discharge to Segment No. 1202 of the Brazos River
--

City nearest the outfall(s): Richmond, TX

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

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: N/A

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

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

N/A

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

Section 12. Miscellaneous Information (Instructions Page 32)

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

☐ Yes ☒ No

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

☐ Yes ☐ No ☒ Not Applicable

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

[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: Core Data Form

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

Applicant: City of Richmond

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.

Signatory name (typed or printed): Rebecca Haas

Signature: Rebecca K. Hans Date: 2/11/2023
(Use blue ink)

Subscribed and Sworn to before me by the said Rebecca K. Hays
on this 11th day of February, 2025.
My commission expires on the 15th day of June, 2025.



Notary Public

Fort Bend
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 that the landowners list has also been provided as mailing labels in electronic format (Avery 5160).
- D. Provide the source of the landowners' names and mailing addresses: Fort Bend County Appraisal District
- 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: Attachment F: Supplemental Permit Information Form

WATER QUALITY PERMIT

PAYMENT SUBMITTAL FORM

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

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

Mail this form and the check or money order to:

BY REGULAR U.S. MAIL

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

BY OVERNIGHT/EXPRESS MAIL

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

Fee Code: WQP **Waste Permit No:** [Click to enter text.](#)

1. Check or Money Order Number: 124329
2. Check or Money Order Amount: \$2,050.00
3. Date of Check or Money Order: 3/14/2025
4. Name on Check or Money Order: City of Richmond
5. APPLICATION INFORMATION

Name of Project or Site: Richmond East WWTP

Physical Address of Project or Site: **600 ft North of intersection of Pitts Road and US 90 Alt., Richmond, TX 77406**

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

Staple Check or Money Order in This Space

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

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

Electronic Application Submittal ☒ Yes
(See application submittal requirements on page 23 of the instructions.)

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)

Summary of Application (in Plain Language) ☒ Yes



SiteTEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the application.

APPLICANT: City of Richmond

PERMIT NUMBER: [link here 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	☒	☐
Technical Report 1.0	☒	☐	Flow Diagram	☒	☐
Technical Report 1.1	☒	☐	Site Drawing	☒	☐
Worksheet 2.0	☒	☐	Original Photographs	☒	☐
Worksheet 2.1	☐	☒	Design Calculations	☒	☐
Worksheet 3.0	☐	☒	Solids Management Plan	☒	☐
Worksheet 3.1	☐	☒	Water Balance	☐	☒
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 _____

ADMINISTRATIVE REPORT 1.0



Section 1. Application Fees (Instructions Page 29)

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 ☐

Mailed Check/Money Order Number: 124329
 Check/Money Order Amount: \$2,050.00
 Name Printed on Check: City of Richmond

EPAY Voucher Number:

Copy of Payment Voucher enclosed? Yes ☐

Section 2. Type of Application (Instructions Page 29)

- | | |
|---|---|
| ☒ New TPDES | ☐ New TLAP |
| ☐ Major Amendment <u>with</u> Renewal | ☐ Minor Amendment <u>with</u> Renewal |
| ☐ Major Amendment <u>without</u> Renewal | ☐ Minor Amendment <u>without</u> Renewal |
| ☐ Renewal without changes | ☐ Minor Modification of permit |

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

For existing permits:

Permit Number: WQ00 [Click here to enter text](#)

EPA I.D. (TPDES only): TX [Click here to enter text](#)

Expiration Date:

Section 3. Facility Owner (Applicant) and Co-Applicant Information (Instructions Page 29)

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

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

City of Richmond

(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: 600659031

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

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

First and Last Name: Rebecca Haas

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

Title: Mayor

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?

(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:

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

Prefix (Mr., Ms., Miss):

First and Last Name:

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

Title:

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

C. Core Data Form

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

Attachment: A: Core Data Form

Section 4. Application Contact Information (Instructions Page 30)

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., Ms., Miss): Mr.

First and Last Name: Tyson Hann

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

Title: Senior Project Manager

Organization Name: Garver

Mailing Address: 12141 Wickchester Lane

City, State, Zip Code: 77079

Phone No.: (713) 482-4789 Ext.: Fax No.:

E-mail Address: TOHann@GarverUSA.com

Check one or both: ☐ Administrative Contact ☒ Technical Contact

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

First and Last Name: Terri Vela

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

Title: City Manager

Organization Name: City of Richmond

Mailing Address: 402 Morton Street

City, State, Zip Code: Richmond, TX 77469

Phone No.: (281) 342-5456 Ext.: Fax No.: (281) 232-8626

E-mail Address: tvela@richmondtx.gov

Check one or both: ☒ Administrative Contact ☐ Technical Contact

Section 5. Permit Contact Information (Instructions Page 30)

Provide two names of individuals that can be contacted throughout the permit term.

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

First and Last Name: Terri Vela

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

Title: City Manager

Organization Name: City of Richmond

Mailing Address: 402 Morton Street

City, State, Zip Code: Richmond, TX 77469

Phone No.: (281) 342-5456 Ext.: [Redacted] Fax No.: (281) 232-8626

E-mail Address: tvela@richmondtx.gov

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

First and Last Name: Tyler Bridges

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

Title: Wastewater Superintendent

Organization Name: City of Richmond

Mailing Address: 600 Morton Street

City, State, Zip Code: Richmond, TX 77469

Phone No.: (281) 342-0559 Ext.: [Redacted] Fax No.: (281) 232-0704

E-mail Address: tbridges@richmondtx.gov

Section 6. Billing Information (Instructions Page 30)

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

First and Last Name: Augusto Preza

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

Title: Finance Director

Organization Name: City of Richmond

Mailing Address: 402 Morton Street

City, State, Zip Code: Richmond, TX 77469

Phone No.: (281) 342-5456 Ext.: [Redacted] Fax No.: (281) 232-8626

E-mail Address: jalderete@richmondtx.gov

Section 7. DMR/MER Contact Information (Instructions Page 31)

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

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

First and Last Name: Tyler Bridges

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

Title: Wastewater Superintendent

Organization Name: City of Richmond

Mailing Address: 600 Morton Street

City, State, Zip Code: Richmond, TX 77469

Phone No.: (281) 342-0559 Ext.: Click here to enter text Fax No.: (281) 232-0704

E-mail Address: tbridges@richmondtx.gov

DMR data is required to be submitted electronically. Create an account at:

<https://www.tceq.texas.gov/permitting/netdmr/netdmr.html>.

Section 8. Public Notice Information (Instructions Page 31)

A. Individual Publishing the Notices

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

First and Last Name: Terri Vela

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

Title: City Manager

Organization Name: City of Richmond

Mailing Address: 402 Morton Street

City, State, Zip Code: Richmond, TX 77469

Phone No.: (281) 342-5456 Ext.: Click here to enter text Fax No.: (281) 232-8626

E-mail Address: tvela@richmondtx.gov

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 person to be listed in the Notices

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

First and Last Name: Terri Vela

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

Title: City Manager

Organization Name: City of Richmond

Phone No.: (281) 342-5456 Ext.:

E-mail: tvela@richmondtx.gov

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: City Hall

Location within the building: Front Lobby

Physical Address of Building: 402 Morton St. Richmond, TX 77469

City: Richmond, Texas 77469 County: Fort Bend

Contact Name: Terri Vela

Phone No.: 281-342-5456 Ext.:

E. Bilingual Notice Requirements:

This information **is required** for **new, major amendment, and renewal applications**. It is not required for minor amendment or minor modification 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

Section 9. Regulated Entity and Permitted Site Information (Instructions Page 33)

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

City of Richmond - East Wastewater Treatment Plant

C. Owner of treatment facility: City of Richmond

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

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

Prefix (Mr., Ms., Miss): link here to enter text

First and Last Name: City of Richmond

Mailing Address: 402 Morton Street

City, State, Zip Code: Richmond, TX 77469

Phone No.: 281) 342-5456

E-mail Address: hchrstian@richmondtx.gov

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

Attachment: N/A

E. Owner of effluent disposal site:

Prefix (Mr., Ms., Miss): link here to enter text

First and Last Name:

Mailing Address:

City, State, Zip Code:

Phone No.: (

E-mail Address: link here 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: N/A

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

Prefix (Mr., Ms., Miss):

First and Last Name:

Mailing Address:

City, State, Zip Code:

Phone No.: E-mail Address:

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

Attachment: N/A

Section 10. TPDES Discharge Information (Instructions Page 34)

- 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:

NW of intersection of Pitts Road and U.S. 90 Alt., Richmond, TX 77406

Property ID: R36311

Legal Description: 0062 WM Morton, Tract 70 **Neighborhood Code:** 5950

GEO ID: 0062-00-000-0700-901

- 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:

Direct discharge to Segment No. 1202 of the Brazos River (Brazos River Below Navasota River)

City nearest the outfall(s): Richmond

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

Outfall Latitude: 29.591519

Longitude: -95.729058

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

☐ Yes ☒ No

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

☐ Authorization granted ☐ Authorization pending

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

Attachment: N/A

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

N/A

Section 11. TLAP Disposal Information (Instructions Page 36)

- 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: N/A

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

- D. Disposal Site Latitude: N/A

Longitude: N/A

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

N/A

- F. 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 37)

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

☐

Yes

☒

No

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

☐

Yes

☐

No

☒

Not Applicable

If No, or if a new onsite sludge disposal authorization is being requested in this permit

application, provide an accurate location description of the sewage sludge disposal site.

N/A

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

☐ Yes ☒ No

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

N/A

- D. Do you owe any fees to the TCEQ?

☐ Yes ☒ No

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

Account number: N/A

Amount past due: N/A

- E. Do you owe any penalties to the TCEQ?

☐ Yes ☒ No

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

Enforcement order number: N/A

Amount past due: N/A

Section 13. Attachments (Instructions Page 38)

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

- ☐ Lease agreement or deed recorded easement, if the land where the treatment facility is located or the effluent disposal site are not owned by the applicant or co-applicant.
- ☒ Original full-size USGS Topographic Map with the following information:
- Applicant's property boundary
 - Treatment facility boundary
 - Labeled point of discharge for each discharge point (TPDES only)
 - Highlighted discharge route for each discharge point (TPDES only)
 - Onsite sewage sludge disposal site (if applicable)
 - Effluent disposal site boundaries (TLAP only)
 - New and future construction (if applicable)
 - 1 mile radius information
 - 3 miles downstream information (TPDES only)
 - All ponds.

- ☐ Attachment 1 for Individuals as co-applicants
- ☒ Other Attachments. Please specify: Core Data Form

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

Applicant: City of Richmond

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.

Signatory name (typed or printed): Rebecca Haas

Signature: Rebecca K. Hans Date: 2/11/2023
(Use blue ink)

Subscribed and Sworn to before me by the said Rebecca K. Haas
on this 11th day of February, 2025.
My commission expires on the 15th day of June, 2025.



Notary Public

Fort Bend
County, Texas



ADMINISTRATIVE REPORT 1.1

DOMESTIC ADMINISTRATIVE REPORT 1.1

The following information is required for new and amendment applications.

Section 1. Affected Landowner Information (Instructions Page 41)

- 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:
- ☒ Readable/Writeable CD
 - ☐ Four sets of labels
- D. Provide the source of the landowners' names and mailing addresses: Fort Bend County Appraisal District
- E. As required by *Texas Water Code § 5.115*, is any permanent school fund land affected by this application?
- ☐ Yes
 - ☒ No

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

N/A

Section 2. Original Photographs (Instructions Page 44)

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 44)

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

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

FOR AGENCIES REVIEWING DOMESTIC 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)

The SPIF must be completed as a separate document. The TCEQ will mail a copy of the SPIF to each agency as required by the TCEQ agreement with EPA. If any of the items are not completely addressed or further information is needed, you will be contacted to provide the information before the permit is issued. Each item must be completely addressed.

Do not refer to a response of any item in the permit application form. Each attachment must be provided with this form separately from the administrative report of the application. The application will not be declared administratively complete without this form being completed in its entirety including all attachments.

The following applies to all applications:

1. Permittee: City of Richmond

Permit No. WQ00

EPA ID No. TX TX0790023

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

500 ft North of intersection of Pitts Road and U.S. 90 Alt., Richmond, TX 77406

Property ID: R36311Legal Description: 0062 WM Morton, Tract 70

Neighborhood Code: 5950GEO ID: 0062-00-000-0700-901

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

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

First and Last Name: Terri Vela

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

Title: City Manager

Mailing Address: 402 Morton Street

City, State, Zip Code: Richmond, TX 77469

Phone No.: (281) 342-5456 Ext.: Fax No.: (281) 232-8626

E-mail Address: tvela@richmondtx.gov

2. List the county in which the facility is located: Fort Bend
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.

Direct discharge to Segment No. 1202 of the Brazos River (Brazos River Below Navasota River)

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

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

Construction impact consists of a proposed 20-acre treatment plant facility and outfall pipeline measuring 4,000 feet in length. Proposed ground disturbing activity for the project includes deep impacts greater than 3 feet), with a maximum depth of 60 feet in some area.

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

The site land basically consists of natural grass prairie with hardwood trees.

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

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

There are no existing structures on the property.

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

Property ID: 0062-00-000-0700-901

Owner Name: City of Richmond

Property Description: 0062 WM MORTON, TRACT 70, ACRES 29.041

PAYMENT SUBMITTAL FORM

WATER QUALITY PERMIT

PAYMENT SUBMITTAL FORM

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

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

Mail this form and the check or money order to:

BY REGULAR U.S. MAIL

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

BY OVERNIGHT/EXPRESS MAIL

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

Fee Code: WQP Waste Permit No:

1. Check or Money Order Number: 124329
2. Check or Money Order Amount: \$2,050.00
3. Date of Check or Money Order: 03/14/2025
4. Name on Check or Money Order: City of Richmond
5. APPLICATION INFORMATION

Name of Project or Site: Richmond East WWTP

Physical Address of Project or Site: 500 ft North of intersection of Pitts Road and US 90 Alt.,
Richmond, TX 77406

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

Staple Check or Money Order in This Space

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ATTACHMENT 1

INDIVIDUAL INFORMATION

Section 1. Individual Information (Instructions Page 50)

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):

Full legal name (first, middle, last):

Driver's License or State Identification Number:

Date of Birth:

Mailing Address:

City, State, and Zip Code:

Phone Number: Fax Number:

E-mail Address:

CN:

For Commission Use Only:

Customer Number:

Regulated Entity Number:

Permit Number:

CHECKLIST DEFICIENCIES

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) <i>(Required for all applications types. Must be completed in its entirety and signed. Note: Form may be signed by applicant representative.)</i>	☒		Yes
Correct and Current Industrial Wastewater Permit Application Forms <i>(TCEQ Form Nos. 10053 and 10054. Version dated 6/25/2018 or later.)</i>	☐		Yes
Water Quality Permit Payment Submittal Form (Page 19) <i>(Original payment sent to TCEQ Revenue Section. See instructions for mailing address.)</i>	☒		Yes
7.5 Minute USGS Quadrangle Topographic Map Attached <i>(Full-size map if seeking "New" permit. 8 ½ x 11 acceptable for Renewals and Amendments)</i>	☒		Yes
Current/Non-Expired, Executed Lease Agreement or Easement Attached	☒	N/A	☐ Yes
Landowners Map <i>(See instructions for landowner requirements)</i>	☐	N/A	☒ Yes

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 <i>(See instructions for landowner requirements)</i>	☐	N/A	☒ Yes
Landowners Labels or CD-RW attached <i>(See instructions for landowner requirements)</i>	☐	N/A	☒ Yes
Original signature per 30 TAC § 305.44 – Blue Ink Preferred <i>(If signature page is not signed by an elected official or principle executive officer, a copy of signature authority/delegation letter must be attached)</i>	☒		Yes

DOMESTIC 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 42)

A. Existing/Interim I Phase

Design Flow (MGD): 2.0

2-Hr Peak Flow (MGD): 8.0

Estimated construction start date: March 2027

Estimated waste disposal start date: June 2029

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): 4.0

2-Hr Peak Flow (MGD): 16.0

Estimated construction start date: TBD

Estimated waste disposal start date: TBD

D. Current Operating Phase

Provide the startup date of the facility: June 2029

Section 2. Treatment Process (Instructions Page 42)

A. Current Operating Phase

Provide a detailed description of the treatment process. **Include the type of treatment plant, mode of operation, and all treatment units.** Start with the plant's head works and

finish with the point of discharge. Include all sludge processing and drying units. **If more than one phase exists or is proposed, a description of *each phase* must be provided.**

Proposed Interim I Phase: The Richmond East Wastewater Treatment Plant will be a conventional activated sludge plant with fine screening, grit removal, extended aeration, secondary clarifiers, chlorine contact basins, waste activated sludge thickening and storage, odor control system, and plant reuse (non-potable water) system.

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)
Phase I: 2.0 MGD		
Aeration Basins	2	160 ft X 40 ft X 18 ft
Secondary Clarifiers	2	75 ft (Diameter) X 16 ft (Depth)
Chlorine Contact Basin	1	80 ft X 20 ft X 10 ft
Dechlorination Channel	1	2 ft X 20 ft X 10 ft
Post-Aeration Basin	1	22 ft X 17 ft X 12 ft
Final Phase: 4.0 MGD		
Aeration Basins	4	160 ft X 40 ft X 18 ft
Secondary Clarifiers	3	75 ft (Diameter) X 16 ft (Depth)
Chlorine Contact Basin	2	80 ft X 20 ft X 10 ft
Dechlorination Channel	2	2 ft X 20 ft X 10 ft
Post-Aeration Basin	1	22 ft X 17 ft X 12 ft

C. Process Flow Diagram

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

Attachment: Attachment G: Process Flow Diagram

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

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

- Latitude: 29.59066389
- Longitude: 95.73076667

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

- Latitude: N/A

- Longitude: N/A

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

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

Attachment: Attachment H: Site Drawing and Facility Service Area

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

See Attachment H. The area shown yellow will be serviced by the Richmond East WWTP.

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
City of Richmond	City of Richmond	Publicly Owned	11,600
		Choose an item.	
		Choose an item.	
		Choose an item.	

Section 4. Unbuilt Phases (Instructions Page 44)

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

☐ Yes ☒ No

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

☐ Yes ☐ No

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

N/A

Section 5. Closure Plans (Instructions Page 44)

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

☐ Yes ☒ No

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

☐ Yes ☐ No

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

N/A

Section 6. Permit Specific Requirements (Instructions Page 44)

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

A. Summary transmittal

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

☐ Yes ☒ No

If **yes**, provide the date(s) of approval for each phase: [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.

The permittee holds the legal title of the entire buffer zone.

C. Other actions required by the current permit

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

☐ Yes ☒ No

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

Click to enter text.

D. Grit and grease treatment

1. Acceptance of grit and grease waste

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

☐ Yes ☒ No

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

2. Grit and grease processing

Describe below how the grit and grease waste is treated at the facility. In your description, include how and where the grit and grease is introduced to the treatment

works and how it is separated or processed. Provide a flow diagram showing how grit and grease is processed at the facility.

Click to enter text.

3. *Grit disposal*

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

☐ Yes ☒ No

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

Describe the method of grit disposal.

Click to enter text.

4. *Grease and decanted liquid disposal*

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

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

Click to enter text.

E. Stormwater management

1. *Applicability*

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

☒ Yes ☐ No

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

☐ Yes ☒ No

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

2. MSGP coverage

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

☐ Yes ☒ No

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

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

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

☒ Yes ☐ No

3. Conditional exclusion

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

☐ Yes ☒ No

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

[Click to enter text.](#)

4. Existing coverage in individual permit

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

☐ Yes ☒ No

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

[Click to enter text.](#)

5. Zero stormwater discharge

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

☐ Yes ☒ No

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

Click to enter text.

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

6. Request for coverage in individual permit

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

☐ Yes ☒ No

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

Click to enter text.

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

F. Discharges to the Lake Houston Watershed

Does the facility discharge in the Lake Houston watershed?

☐ Yes ☒ No

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

Click to enter text.

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

1. Acceptance of sludge from other WWTPs

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

☐ Yes ☒ No

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

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

Click to enter text.

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

2. *Acceptance of septic waste*

Is the facility accepting or will it accept septic waste?

☐ Yes ☒ No

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

☐ Yes ☒ No

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

☐ Yes ☒ No

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

Click to enter text.

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

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

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

☐ Yes ☒ No

If yes, provide the date that the plant started accepting the waste, an estimate how much waste is accepted on a monthly basis (gallons or millions of gallons), a description of the entities generating the waste, and any distinguishing chemical or

other physical characteristic of the waste. Also note if this information has or has not changed since the last permit action.

Click to enter text.

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

Is the facility in operation?

☐ Yes ☒ No

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

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

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

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

Pollutant	Average Conc.	Max Conc.	No. of Samples	Sample Type	Sample Date/Time
CBOD ₅ , mg/l					
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					
<i>E.coli</i> (CFU/100ml) freshwater					
Enterococci (CFU/100ml) saltwater					
Total Dissolved Solids, mg/l					
Electrical Conductivity, μ mohs/cm, †					

Oil & Grease, mg/l					
Alkalinity (CaCO ₃)*, mg/l					

*TPDES permits only

†TLAP permits only

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

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

Section 8. Facility Operator (Instructions Page 49)

Facility Operator Name: TBD

Facility Operator's License Classification and Level: TBD

Facility Operator's License Number: TBD

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

A. WWTP's Sewage Sludge or 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 Sewage Sludge or Biosolids Treatment Process

Check all that apply. See instructions for guidance.

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

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

C. Sewage Sludge or Biosolids Management

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

Biosolids Management

Management Practice	Handler or Preparer Type	Bulk or Bag Container	Amount (dry metric tons)	Pathogen Reduction Options	Vector Attraction Reduction Option
Disposal in Landfill	Off-site Third-Party Handler or Preparer	Bulk	1.57	Class B: PSRP Aerobic Digestion	N/A: Disposal in Landfill
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: [TBD](#)

TCEQ permit or registration number: [TBD](#)

County where disposal site is located: [TBD](#)

E. Transportation method

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

Name of the hauler: TBD

Hauler registration number: TBD

Sludge is transported as a:

Liquid ☐

semi-liquid ☒

semi-solid ☐

solid ☐

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

A. Beneficial use authorization

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

☐ Yes ☒ No

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

☐ Yes ☐ No

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

☐ Yes ☐ No

B. Sludge processing authorization

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

Sludge Composting ☐ Yes ☒ No

Marketing and Distribution of Biosolids ☐ Yes ☒ No

Sludge Surface Disposal or Sludge Monofill ☐ Yes ☒ No

Temporary storage in sludge lagoons ☐ Yes ☒ No

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

☐ Yes ☐ No

Section 11. Sewage Sludge Lagoons (Instructions Page 53)

Does this facility include sewage sludge lagoons?

☐ Yes ☒ No

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

A. Location information

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

- Original General Highway (County) Map:

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

- USDA Natural Resources Conservation Service Soil Map:

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

- Federal Emergency Management Map:

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

- Site map:

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

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

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

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

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

[Click to enter text.](#)

B. Temporary storage information

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Provide the following information:

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

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

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

C. Liner information

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

☐ Yes ☐ No

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

[Click to enter text.](#)

D. Site development plan

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

[Click to enter text.](#)

Attach the following documents to the application.

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

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

- Copy of the closure plan

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

- Copy of deed recordation for the site

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

- Size of the sludge lagoon(s) in surface acres and capacity in cubic feet and gallons

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

- Description of the method of controlling infiltration of groundwater and surface water from entering the site

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

- Procedures to prevent the occurrence of nuisance conditions

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

E. Groundwater monitoring

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

☐ Yes ☐ No

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

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

Section 12. Authorizations/Compliance/Enforcement (Instructions Page 54)

A. Additional authorizations

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

☐ Yes ☒ No

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

[Click to enter text.](#)

B. Permittee enforcement status

Is the permittee currently under enforcement for this facility?

☐ Yes ☒ No

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

☐ Yes ☒ No

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

Click to enter text.

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

A. RCRA hazardous wastes

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

☐ Yes ☒ No

B. Remediation activity wastewater

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

☐ Yes ☒ No

C. Details about wastes received

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

Attachment: N/A

Section 14. Laboratory Accreditation (Instructions Page 64)

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: Rebecca Haas

Title: Mayor

Signature: Rebecca K. Haas

Date: 2/11/2025

DOMESTIC 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 56)

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 City of Richmond currently provides water service to approximately 26,000 people. The population within the CITY is projected to grow by almost 40,000 people in the next 25 years. The CITY owns 29 acres of land on the east side of the Brazos River that will serve multiple uses, including a new wastewater treatment plant (WWTP), stormwater detention pond, and commercial properties.

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: [Attachment I: Nearby WW Facilities](#)

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

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

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

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

Section 2. Proposed Organic Loading (Instructions Page 58)

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 BOD₅ Concentration in mg/l: [Click to enter text.](#)

Average Influent Loading (lbs/day = total average flow X average BOD₅ conc. X 8.34): [Click to enter text.](#)

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

[Click to enter text.](#)

B. Proposed organic loading

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

Table 1.1(1) – Design Organic Loading

Source	Total Average Flow (MGD)	Influent BOD5 Concentration (mg/l)
Municipality	Phase 1: 1.05 Phase 2: 2.19	250
Subdivision	Phase 1: 0.73 Phase 2: 1.46	250
Trailer park – transient	N/A	N/A
Mobile home park	N/A	N/A
School with cafeteria and showers	N/A	N/A
School with cafeteria, no showers	N/A	N/A
Recreational park, overnight use	N/A	N/A
Recreational park, day use	N/A	N/A
Office building or factory	N/A	N/A
Motel	N/A	N/A
Restaurant	N/A	N/A
Hospital	N/A	N/A
Nursing home	N/A	N/A
Other	Phase 1: 0.07 Phase 2: 0.17	250
TOTAL FLOW from all sources	Phase 1: 1.85 Phase 2: 3.82	
AVERAGE BOD ₅ from all sources		250

Section 3. Proposed Effluent Quality and Disinfection (Instructions Page 58)

A. Existing/Interim I Phase Design Effluent Quality

Biochemical Oxygen Demand (5-day), mg/l: 25.0

Total Suspended Solids, mg/l: 40.0

Ammonia Nitrogen, mg/l: 7.0

Total Phosphorus, mg/l: N/A

Dissolved Oxygen, mg/l: 4.0

Other: N/A

B. Interim II Phase Design Effluent Quality

Biochemical Oxygen Demand (5-day), mg/l: Click to enter text.

Total Suspended Solids, mg/l: Click to enter text.

Ammonia Nitrogen, mg/l: Click to enter text.

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

Dissolved Oxygen, mg/l: Click to enter text.

Other: Click to enter text.

C. Final Phase Design Effluent Quality

Biochemical Oxygen Demand (5-day), mg/l: 25.0

Total Suspended Solids, mg/l: 40.0

Ammonia Nitrogen, mg/l: 7.0

Total Phosphorus, mg/l: N/A

Dissolved Oxygen, mg/l: 4.0

Other: N/A

D. Disinfection Method

Identify the proposed method of disinfection.

☒ Chlorine: 1.0-4.0 mg/l after 29 minutes detention time at peak flow

Dechlorination process: Sodium Bisulfate

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

☐ Other: Click to enter text.

Section 4. Design Calculations (Instructions Page 58)

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

Attachment: Attachment J: Design Calculations

Section 5. Facility Site (Instructions Page 59)

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.

The development inside the regulatory floodplain for this project is anticipated to involve the placement of fill and therefore would require floodplain fill mitigation per applicable criteria. Considering the 2-foot assumption, the total floodplain fill mitigation estimated for the proposed development is approximately 18 ac-ft

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

FEMA Flood Insurance Rate Map (FIRM) No. 48157C0255L (effective date 04/02/2014)

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: [Attachment K: Windrose](#)

Section 6. Permit Authorization for Sewage Sludge Disposal (Instructions Page 59)

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 60)

Attach a solids management plan to the application.

Attachment: Attachment L: Solids Management Plan

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

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

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

DOMESTIC TECHNICAL REPORT 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 63)

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

☐ Yes ☒ No

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

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

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

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

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

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

Does the facility discharge into tidally affected waters?

☐ Yes ☒ No

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

A. Receiving water outfall

Width of the receiving water at the outfall, in feet: 350

B. Oyster waters

Are there oyster waters in the vicinity of the discharge?

☐ Yes ☒ No

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

[Click to enter text.](#)

C. Sea grasses

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

☐ Yes ☒ No

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

[Click to enter text.](#)

Section 3. Classified Segments (Instructions Page 63)

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

☒ Yes ☐ No

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

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

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

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

A. Receiving water type

Identify the appropriate description of the receiving waters.

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

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

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

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

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

B. Flow characteristics

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

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

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

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

C. Downstream perennial confluences

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

[Click to enter text.](#)

D. Downstream characteristics

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

☐ Yes ☐ No

If yes, discuss how.

[Click to enter text.](#)

E. Normal dry weather characteristics

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

[Click to enter text.](#)

Date and time of observation: [Click to enter text.](#)

Was the water body influenced by stormwater runoff during observations?

☐ Yes ☐ No

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

A. Upstream influences

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

☐ Oil field activities

☐ Urban runoff

☐ Upstream discharges

☐ Agricultural runoff

☐ Septic tanks

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

B. Waterbody uses

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

- | | |
|--|--|
| ☐ Livestock watering | ☐ Contact recreation |
| ☐ Irrigation withdrawal | ☐ Non-contact recreation |
| ☐ Fishing | ☐ Navigation |
| ☐ Domestic water supply | ☐ Industrial water supply |
| ☐ Park activities | ☐ Other(s), specify: Click to enter text. |

C. Waterbody aesthetics

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

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

DOMESTIC WORKSHEET 2.1

DOMESTIC WASTEWATER PERMIT APPLICATION

WORKSHEET 2.1: STREAM PHYSICAL CHARACTERISTICS

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

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

Section 1. General Information (Instructions Page 65)

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

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

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

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

☐ Perennial ☐ Intermittent with perennial pools

Section 2. Data Collection (Instructions Page 65)

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

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

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

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

Evidence of flow fluctuations (check one):

☐ Minor ☐ moderate ☐ severe

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

[Click to enter text.](#)

Stream transects

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

Table 2.1(1) - Stream Transect Records

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

Section 3. Summarize Measurements (Instructions Page 65)

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

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

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

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

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

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

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

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

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

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

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

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 67)

Identify the method of land disposal:

- | | |
|---|--|
| ☐ Surface application | ☐ Subsurface application |
| ☐ Irrigation | ☐ Subsurface soils absorption |
| ☐ Drip irrigation system | ☐ Subsurface area drip dispersal system |
| ☐ Evaporation | ☐ Evapotranspiration beds |
| ☐ Other (describe in detail): Click to enter text. | |

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

For existing authorizations, provide Registration Number: [Click to enter text.](#)

Section 2. Land Application Site(s) (Instructions Page 67)

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

Section 3. Storage and Evaporation Lagoons/Ponds (Instructions Page 67)

Table 3.0(2) – Storage and Evaporation Ponds

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

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 67)

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 67)

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

- 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 68)

Attach a USGS map with the following information shown and labeled. If not applicable, provide a detailed explanation indicating why. **Attachment:** [Click to enter text.](#)

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

Section 7. Groundwater Quality (Instructions Page 68)

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: [Click to enter text.](#)

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 69)

A. Soil map

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

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

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: [Click to enter text.](#)

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 70)

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

[illegible]

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

Click to enter text.

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 71)

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

A. Irrigation

Area under irrigation, in acres: [Click to enter text.](#)

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: [Click to enter text.](#)

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

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

C. Evapotranspiration beds

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

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: [Click to enter text.](#)

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 BOD₅ loading rate, in lbs BOD₅/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 72)

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.](#)

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 73)

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: [Click to enter text.](#)

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

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 73)

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.

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 74)

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

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.

[Click to enter text.](#)

E. Owner of the land where the subsurface area drip dispersal system is located: [Click to enter text.](#)

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.

[Click to enter text.](#)

Section 2. Subsurface Area Drip Dispersal System (Instructions Page 74)

A. Type of system

- ☐ Subsurface Drip Irrigation
- ☐ Surface Drip Irrigation
- ☐ Other, specify: [Click to enter text.](#)

B. Irrigation operations

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

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: [Click to enter text.](#)

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: [Click to enter text.](#)

Section 3. Required Plans (Instructions Page 74)

A. Recharge feature plan

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

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

B. Soil evaluation

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

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

C. Site preparation plan

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

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

D. Soil sampling/testing

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

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

Section 4. Floodway Designation (Instructions Page 75)

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: [Click to enter text.](#)

Section 5. Surface Waters in the State (Instructions Page 75)

A. Buffer Map

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

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

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 75)

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.

DOMESTIC WASTEWATER PERMIT APPLICATION

WORKSHEET 4.0: POLLUTANT ANALYSIS REQUIREMENTS

The following **is required** for facilities with a permitted or proposed flow of **1.0 MGD or greater**, facilities with an approved **pretreatment** program, or facilities classified as a **major** facility. See instructions for further details.

This worksheet is not required minor amendments without renewal.

Section 1. Toxic Pollutants (Instructions Page 76)

For pollutants identified in Table 4.0(1), indicate the type of sample.

Grab ☐ Composite ☐

Date and time sample(s) collected: [Click to enter text.](#)

Table 4.0(1) – Toxics Analysis

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Acrylonitrile				50
Aldrin				0.01
Aluminum				2.5
Anthracene				10
Antimony				5
Arsenic				0.5
Barium				3
Benzene				10
Benzidine				50
Benzo(a)anthracene				5
Benzo(a)pyrene				5
Bis(2-chloroethyl)ether				10
Bis(2-ethylhexyl)phthalate				10
Bromodichloromethane				10
Bromoform				10
Cadmium				1
Carbon Tetrachloride				2
Carbaryl				5
Chlordane*				0.2
Chlorobenzene				10
Chlorodibromomethane				10

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Chloroform				10
Chlorpyrifos				0.05
Chromium (Total)				3
Chromium (Tri) (*1)				N/A
Chromium (Hex)				3
Copper				2
Chrysene				5
p-Chloro-m-Cresol				10
4,6-Dinitro-o-Cresol				50
p-Cresol				10
Cyanide (*2)				10
4,4'- DDD				0.1
4,4'- DDE				0.1
4,4'- DDT				0.02
2,4-D				0.7
Demeton (O and S)				0.20
Diazinon				0.5/0.1
1,2-Dibromoethane				10
m-Dichlorobenzene				10
o-Dichlorobenzene				10
p-Dichlorobenzene				10
3,3'-Dichlorobenzidine				5
1,2-Dichloroethane				10
1,1-Dichloroethylene				10
Dichloromethane				20
1,2-Dichloropropane				10
1,3-Dichloropropene				10
Dicofol				1
Dieldrin				0.02
2,4-Dimethylphenol				10
Di-n-Butyl Phthalate				10
Diuron				0.09
Endosulfan I (alpha)				0.01

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Endosulfan II (beta)				0.02
Endosulfan Sulfate				0.1
Endrin				0.02
Epichlorohydrin				---
Ethylbenzene				10
Ethylene Glycol				---
Fluoride				500
Guthion				0.1
Heptachlor				0.01
Heptachlor Epoxide				0.01
Hexachlorobenzene				5
Hexachlorobutadiene				10
Hexachlorocyclohexane (alpha)				0.05
Hexachlorocyclohexane (beta)				0.05
gamma-Hexachlorocyclohexane (Lindane)				0.05
Hexachlorocyclopentadiene				10
Hexachloroethane				20
Hexachlorophene				10
4,4'-Isopropylidenediphenol				1
Lead				0.5
Malathion				0.1
Mercury				0.005
Methoxychlor				2
Methyl Ethyl Ketone				50
Methyl tert-butyl ether				---
Mirex				0.02
Nickel				2
Nitrate-Nitrogen				100
Nitrobenzene				10
N-Nitrosodiethylamine				20
N-Nitroso-di-n-Butylamine				20
Nonylphenol				333

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Parathion (ethyl)				0.1
Pentachlorobenzene				20
Pentachlorophenol				5
Phenanthrene				10
Polychlorinated Biphenyls (PCB's) (*3)				0.2
Pyridine				20
Selenium				5
Silver				0.5
1,2,4,5-Tetrachlorobenzene				20
1,1,2,2-Tetrachloroethane				10
Tetrachloroethylene				10
Thallium				0.5
Toluene				10
Toxaphene				0.3
2,4,5-TP (Silvex)				0.3
Tributyltin (see instructions for explanation)				0.01
1,1,1-Trichloroethane				10
1,1,2-Trichloroethane				10
Trichloroethylene				10
2,4,5-Trichlorophenol				50
TTHM (Total Trihalomethanes)				10
Vinyl Chloride				10
Zinc				5

(*1) Determined by subtracting hexavalent Cr from total Cr.

(*2) Cyanide, amenable to chlorination or weak-acid dissociable.

(*3) The sum of seven PCB congeners 1242, 1254, 1221, 1232, 1248, 1260, and 1016.

Section 2. Priority Pollutants

For pollutants identified in Tables 4.0(2)A-E, indicate type of sample.

Grab ☐ Composite ☐

Date and time sample(s) collected: [Click to enter text.](#)

Table 4.0(2)A – Metals, Cyanide, and Phenols

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Antimony				5
Arsenic				0.5
Beryllium				0.5
Cadmium				1
Chromium (Total)				3
Chromium (Hex)				3
Chromium (Tri) (*1)				N/A
Copper				2
Lead				0.5
Mercury				0.005
Nickel				2
Selenium				5
Silver				0.5
Thallium				0.5
Zinc				5
Cyanide (*2)				10
Phenols, Total				10

(*1) Determined by subtracting hexavalent Cr from total Cr.

(*2) Cyanide, amenable to chlorination or weak-acid dissociable

Table 4.0(2)B – Volatile Compounds

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Acrolein				50
Acrylonitrile				50
Benzene				10
Bromoform				10
Carbon Tetrachloride				2
Chlorobenzene				10
Chlorodibromomethane				10
Chloroethane				50
2-Chloroethylvinyl Ether				10
Chloroform				10
Dichlorobromomethane [Bromodichloromethane]				10
1,1-Dichloroethane				10
1,2-Dichloroethane				10
1,1-Dichloroethylene				10
1,2-Dichloropropane				10
1,3-Dichloropropylene [1,3-Dichloropropene]				10
1,2-Trans-Dichloroethylene				10
Ethylbenzene				10
Methyl Bromide				50
Methyl Chloride				50
Methylene Chloride				20
1,1,2,2-Tetrachloroethane				10
Tetrachloroethylene				10
Toluene				10
1,1,1-Trichloroethane				10
1,1,2-Trichloroethane				10
Trichloroethylene				10
Vinyl Chloride				10

Table 4.0(2)C – Acid Compounds

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
2-Chlorophenol				10
2,4-Dichlorophenol				10
2,4-Dimethylphenol				10
4,6-Dinitro-o-Cresol				50
2,4-Dinitrophenol				50
2-Nitrophenol				20
4-Nitrophenol				50
P-Chloro-m-Cresol				10
Pentalchlorophenol				5
Phenol				10
2,4,6-Trichlorophenol				10

Table 4.0(2)D – Base/Neutral Compounds

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Acenaphthene				10
Acenaphthylene				10
Anthracene				10
Benzidine				50
Benzo(a)Anthracene				5
Benzo(a)Pyrene				5
3,4-Benzofluoranthene				10
Benzo(ghi)Perylene				20
Benzo(k)Fluoranthene				5
Bis(2-Chloroethoxy)Methane				10
Bis(2-Chloroethyl)Ether				10
Bis(2-Chloroisopropyl)Ether				10
Bis(2-Ethylhexyl)Phthalate				10
4-Bromophenyl Phenyl Ether				10
Butyl benzyl Phthalate				10
2-Chloronaphthalene				10
4-Chlorophenyl phenyl ether				10
Chrysene				5
Dibenzo(a,h)Anthracene				5
1,2-(o)Dichlorobenzene				10
1,3-(m)Dichlorobenzene				10
1,4-(p)Dichlorobenzene				10
3,3-Dichlorobenzidine				5
Diethyl Phthalate				10
Dimethyl Phthalate				10
Di-n-Butyl Phthalate				10
2,4-Dinitrotoluene				10
2,6-Dinitrotoluene				10
Di-n-Octyl Phthalate				10
1,2-Diphenylhydrazine (as Azo- benzene)				20
Fluoranthene				10

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Fluorene				10
Hexachlorobenzene				5
Hexachlorobutadiene				10
Hexachlorocyclo-pentadiene				10
Hexachloroethane				20
Indeno(1,2,3-cd)pyrene				5
Isophorone				10
Naphthalene				10
Nitrobenzene				10
N-Nitrosodimethylamine				50
N-Nitrosodi-n-Propylamine				20
N-Nitrosodiphenylamine				20
Phenanthrene				10
Pyrene				10
1,2,4-Trichlorobenzene				10

Table 4.0(2)E - Pesticides

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Aldrin				0.01
alpha-BHC (Hexachlorocyclohexane)				0.05
beta-BHC (Hexachlorocyclohexane)				0.05
gamma-BHC (Hexachlorocyclohexane)				0.05
delta-BHC (Hexachlorocyclohexane)				0.05
Chlordane				0.2
4,4-DDT				0.02
4,4-DDE				0.1
4,4,-DDD				0.1
Dieldrin				0.02
Endosulfan I (alpha)				0.01
Endosulfan II (beta)				0.02
Endosulfan Sulfate				0.1
Endrin				0.02
Endrin Aldehyde				0.1
Heptachlor				0.01
Heptachlor Epoxide				0.01
PCB-1242				0.2
PCB-1254				0.2
PCB-1221				0.2
PCB-1232				0.2
PCB-1248				0.2
PCB-1260				0.2
PCB-1016				0.2
Toxaphene				0.3

* For PCBS, if all are non-detects, enter the highest non-detect preceded by a "<".

Section 3. Dioxin/Furan Compounds

A. Indicate which of the following compounds from may be present in the influent from a contributing industrial user or significant industrial user. Check all that apply.

- ☐ 2,4,5-trichlorophenoxy acetic acid
Common Name 2,4,5-T, CASRN 93-76-5
- ☐ 2-(2,4,5-trichlorophenoxy) propanoic acid
Common Name Silvex or 2,4,5-TP, CASRN 93-72-1
- ☐ 2-(2,4,5-trichlorophenoxy) ethyl 2,2-dichloropropionate
Common Name Erbon, CASRN 136-25-4
- ☐ 0,0-dimethyl 0-(2,4,5-trichlorophenyl) phosphorothioate
Common Name Ronnel, CASRN 299-84-3
- ☐ 2,4,5-trichlorophenol
Common Name TCP, CASRN 95-95-4
- ☐ hexachlorophene
Common Name HCP, CASRN 70-30-4

For each compound identified, provide a brief description of the conditions of its/their presence at the facility.

[Click to enter text.](#)

B. Do you know or have any reason to believe that 2,3,7,8 Tetrachlorodibenzo-P-Dioxin (TCDD) or any congeners of TCDD may be present in your effluent?

☐ Yes ☐ No

If **yes**, provide a brief description of the conditions for its presence.

[Click to enter text.](#)

C. If any of the compounds in Subsection A **or** B are present, complete Table 4.0(2)F.

For pollutants identified in Table 4.0(2)F, indicate the type of sample.

Grab ☐ Composite ☐

Date and time sample(s) collected: [Click to enter text.](#)

Table 4.0(2)F – Dioxin/Furan Compounds

Compound	Toxic Equivalenc y Factors	Wastewater Concentration (ppq)	Wastewater Equivalents (ppq)	Sludge Concentration (ppt)	Sludge Equivalents (ppt)	MAL (ppq)
2,3,7,8 TCDD	1					10
1,2,3,7,8 PeCDD	0.5					50
2,3,7,8 HxCDDs	0.1					50
1,2,3,4,6,7,8 HpCDD	0.01					50
2,3,7,8 TCDF	0.1					10
1,2,3,7,8 PeCDF	0.05					50
2,3,4,7,8 PeCDF	0.5					50
2,3,7,8 HxCDFs	0.1					50
2,3,4,7,8 HpCDFs	0.01					50
OCDD	0.0003					100
OCDF	0.0003					100
PCB 77	0.0001					0.5
PCB 81	0.0003					0.5
PCB 126	0.1					0.5
PCB 169	0.03					0.5
Total						

DOMESTIC WASTEWATER PERMIT APPLICATION

WORKSHEET 5.0: TOXICITY TESTING REQUIREMENTS

The following **is required** for facilities with a current operating design flow of **1.0 MGD or greater**, with an EPA-approved **pretreatment** program (or those required to have one under 40 CFR Part 403), or are required to perform Whole Effluent Toxicity testing. See Page 86 of the instructions for further details.

This worksheet is not required minor amendments without renewal.

Section 1. Required Tests

Indicate the number of 7-day chronic or 48-hour acute Whole Effluent Toxicity (WET) tests performed in the four and one-half years prior to submission of the application.

7-day Chronic: [Click to enter text.](#)

48-hour Acute: [Click to enter text.](#)

Section 2. Toxicity Reduction Evaluations (TREs)

Has this facility completed a TRE in the past four and a half years? Or is the facility currently performing a TRE?

☐ Yes ☐ No

If **yes**, describe the progress to date, if applicable, in identifying and confirming the toxicant.

[Click to enter text.](#)

Section 3. Summary of WET Tests

If the required biomonitoring test information has not been previously submitted via both the Discharge Monitoring Reports (DMRs) and the Table 1 (as found in the permit), provide a summary of the testing results for all valid and invalid tests performed over the past four and one-half years. Make additional copies of this table as needed.

Table 5.0(1) Summary of WET Tests

Test Date	Test Species	NOEC Survival	NOEC Sub-lethal

DOMESTIC 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 87)

A. Industrial users (IUs)

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

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

Categorical IUs:

Number of IUs: 0

Average Daily Flows, in MGD: 0

Significant IUs – non-categorical:

Number of IUs: 0

Average Daily Flows, in MGD: 0

Other IUs:

Number of IUs: 0

Average Daily Flows, in MGD: 0

B. Treatment plant interference

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

☐ Yes ☒ No

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

Click to enter text.

C. Treatment plant pass through

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

☐ Yes ☒ No

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

Click to enter text.

D. Pretreatment program

Does your POTW have an approved pretreatment program?

☐ Yes ☒ No

If **yes**, complete Section 2 only of this Worksheet.

Is your POTW required to develop an approved pretreatment program?

☐ Yes ☒ No

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

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

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

A. Substantial modifications

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

☐ Yes ☐ No

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

Click to enter text.

B. Non-substantial modifications

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

☐ Yes ☐ No

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

Click to enter text.

C. Effluent parameters above the MAL

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

Table 6.0(1) – Parameters Above the MAL

Pollutant	Concentration	MAL	Units	Date

D. Industrial user interruptions

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

☐ Yes ☐ No

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

Click to enter text.

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

A. General information

Company Name: [Click to enter text.](#)

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).

[No Industrial Users at this time.](#)

C. Product and service information

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

[No industrial users at this time.](#)

D. Flow rate information

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

Process Wastewater:

Discharge, in gallons/day: [N/A](#)

Discharge Type: ☐ Continuous ☐ Batch ☐ Intermittent

Non-Process Wastewater:

Discharge, in gallons/day: [N/A](#)

Discharge Type: ☐ Continuous ☐ Batch ☐ Intermittent

E. Pretreatment standards

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

☐ Yes ☒ No

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

☐ Yes ☒ No

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

Category: Subcategories: [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

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

CLASS V INJECTION WELL INVENTORY/AUTHORIZATION FORM

Submit the completed form to:

TCEQ
IUC Permits Team
Radioactive Materials Division
MC-233
PO Box 13087
Austin, Texas 78711-3087
512-239-6466

For TCEQ Use Only

Reg. No. _____

Date Received _____

Date Authorized _____

Section 1. General Information (Instructions Page 90)

1. TCEQ Program Area

Program Area (PST, VCP, IHW, etc.): [Click to enter text.](#)

Program ID: [Click to enter text.](#)

Contact Name: [Click to enter text.](#)

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

2. Agent/Consultant Contact Information

Contact Name: [Click to enter text.](#)

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

City, State, and Zip Code: [Click to enter text.](#)

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

3. Owner/Operator Contact Information

☐ Owner ☐ Operator

Owner/Operator Name: [Click to enter text.](#)

Contact Name: [Click to enter text.](#)

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

City, State, and Zip Code: [Click to enter text.](#)

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

4. Facility Contact Information

Facility Name: [Click to enter text.](#)

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

City, State, and Zip Code: [Click to enter text.](#)

Location description (if no address is available): [Click to enter text.](#)

Facility Contact Person: [Click to enter text.](#)

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

5. **Latitude and Longitude, in degrees-minutes-seconds**

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

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

Method of determination (GPS, TOPO, etc.): [Click to enter text.](#)

Attach topographic quadrangle map as attachment A.

6. **Well Information**

Type of Well Construction, select one:

- ☐ Vertical Injection
- ☐ Subsurface Fluid Distribution System
- ☐ Infiltration Gallery
- ☐ Temporary Injection Points
- ☐ Other, Specify: [Click to enter text.](#)

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

7. **Purpose**

Detailed Description regarding purpose of Injection System:

[Click to enter text.](#)

Attach a Site Map as Attachment B (Attach the Approved Remediation Plan, if appropriate.)

8. **Water Well Driller/Installer**

Water Well Driller/Installer Name: [Click to enter text.](#)

City, State, and Zip Code: [Click to enter text.](#)

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

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

Section 2. Proposed Down Hole Design

Attach a diagram signed and sealed by a licensed engineer as Attachment C.

Table 7.0(1) – Down Hole Design Table

Name of String	Size	Setting Depth	Sacks Cement/Grout – Slurry Volume – Top of Cement	Hole Size	Weight (lbs/ft) PVC/Steel
Casing					
Tubing					
Screen					

Section 3. Proposed Trench System, Subsurface Fluid Distribution System, or Infiltration Gallery

Attach a diagram signed and sealed by a licensed engineer as Attachment D.

System(s) Dimensions: [Click to enter text.](#)

System(s) Construction: [Click to enter text.](#)

Section 4. Site Hydrogeological and Injection Zone Data

1. Name of Contaminated Aquifer: [Click to enter text.](#)
2. Receiving Formation Name of Injection Zone: [Click to enter text.](#)
3. Well/Trench Total Depth: [Click to enter text.](#)
4. Surface Elevation: [Click to enter text.](#)
5. Depth to Ground Water: [Click to enter text.](#)
6. Injection Zone Depth: [Click to enter text.](#)
7. Injection Zone vertically isolated geologically? ☐ Yes ☐ No
Impervious Strata between Injection Zone and nearest Underground Source of Drinking Water:
Name: [Click to enter text.](#)
Thickness: [Click to enter text.](#)
8. Provide a list of contaminants and the levels (ppm) in contaminated aquifer
Attach as Attachment E.
9. Horizontal and Vertical extent of contamination and injection plume
Attach as Attachment F.
10. Formation (Injection Zone) Water Chemistry (Background levels) TDS, etc.
Attach as Attachment G.
11. Injection Fluid Chemistry in PPM at point of injection
Attach as Attachment H.
12. Lowest Known Depth of Ground Water with < 10,000 PPM TDS: [Click to enter text.](#)
13. Maximum injection Rate/Volume/Pressure: [Click to enter text.](#)
14. Water wells within 1/4 mile radius (attach map as Attachment I): [Click to enter text.](#)
15. Injection wells within 1/4 mile radius (attach map as Attachment J): [Click to enter text.](#)
16. Monitor wells within 1/4 mile radius (attach drillers logs and map as Attachment K): [Click to enter text.](#)
17. Sampling frequency: [Click to enter text.](#)
18. Known hazardous components in injection fluid: [Click to enter text.](#)

Section 5. Site History

1. Type of Facility: [Click to enter text.](#)
2. Contamination Dates: [Click to enter text.](#)
3. Original Contamination (VOCs, TPH, BTEX, etc.) and Concentrations (attach as Attachment L): [Click to enter text.](#)
4. Previous Remediation (attach results of any previous remediation as attachment M): [Click to enter text.](#)

NOTE: Authorization Form should be completed in detail and authorization given by the TCEQ before construction, operation, and/or conversion can begin. Attach additional pages as necessary.

Class V Injection Well Designations

- 5A07 Heat Pump/AC return (IW used for groundwater to heat and/or cool buildings)
- 5A19 Industrial Cooling Water Return Flow (IW used to cool industrial process equipment)
- 5B22 Salt Water Intrusion Barrier (IW used to inject fluids to prevent the intrusion of salt water into an aquifer)
- 5D02 Storm Water Drainage (IW designed for the disposal of rain water)
- 5D04 Industrial Stormwater Drainage Wells (IW designed for the disposal of rain water associated with industrial facilities)
- 5F01 Agricultural Drainage (IW that receive agricultural runoff)
- 5R21 Aquifer Recharge (IW used to inject fluids to recharge an aquifer)
- 5S23 Subsidence Control Wells (IW used to control land subsidence caused by ground water withdrawal)
- 5W09 Untreated Sewage
- 5W10 Large Capacity Cesspools (Cesspools that are designed for 5,000 gpd or greater)
- 5W11 Large Capacity Septic systems (Septic systems designed for 5,000 gpd or greater)
- 5W12 WTP disposal
- 5W20 Industrial Process Waste Disposal Wells
- 5W31 Septic System (Well Disposal method)
- 5W32 Septic System Drainfield Disposal
- 5X13 Mine Backfill (IW used to control subsidence, dispose of mining byproducts, and/or fill sections of a mine)
- 5X25 Experimental Wells (Pilot Test) (IW used to test new technologies or tracer dye studies)
- 5X26 Aquifer Remediation (IW used to clean up, treat, or prevent contamination of a USDW)
- 5X27 Other Wells
- 5X28 Motor Vehicle Waste Disposal Wells (IW used to dispose of waste from a motor vehicle site - These are currently banned)
- 5X29 Abandoned Drinking Water Wells (waste disposal)

ATTACHMENT A

Administrative Report 1.0 Item 3.C

CORE DATA FORM



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 600659031		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)					
<i>The Customer Name submitted here may be updated automatically based on what is current and active with the Texas Secretary of State (SOS) or Texas Comptroller of Public Accounts (CPA).</i>					
6. Customer Legal Name (If an individual, print last name first: eg: Doe, John)				<i>If new Customer, enter previous Customer below:</i>	
City of Richmond					
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				13. Independently Owned and Operated?	
☐ 0-20 ☐ 21-100 ☒ 101-250 ☐ 251-500 ☐ 501 and higher				☐ 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 ☐ Other: ☐ Occupational Licensee ☐ Responsible Party ☐ VCP/BSA Applicant					
15. Mailing Address:	City of Richmond				
	600 Morton Street				
	City	Richmond	State	TX	ZIP 77469 ZIP + 4 3005
16. Country Mailing Information (if outside USA)				17. E-Mail Address (if applicable)	
				tvela@richmondtx.gov	

18. Telephone Number	19. Extension or Code	20. Fax Number (if applicable)
(281) 342-5456		(281) 232-8626

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								
<i>The Regulated Entity Name submitted may be updated, in order to meet TCEQ Core Data Standards (removal of organizational endings such as Inc, LP, or LLC).</i>								
22. Regulated Entity Name (Enter name of the site where the regulated action is taking place.)								
City of Richmond East 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:	600 feet North of intersection of Pitts Road and U.S. 90 Alt., Richmond, TX 77406 Property ID: R36311; Neighborhood Code: 5950; GEO ID: 0062-00-000-0700-901							
26. Nearest City					State	Nearest ZIP Code		
Richmond					TX	77406		
<i>Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).</i>								
27. Latitude (N) In Decimal:		29.599533			28. Longitude (W) In Decimal:		-95.735927	
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds			
29	345	58.3188	-95	44	9.3372			
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)			
			221320		221310			
33. What is the Primary Business of this entity? (Do not repeat the SIC or NAICS description.)								
Wastewater Treatment								
34. Mailing Address:	600 Morton St.							
	City	Richmond	State	TX	ZIP	77469	ZIP + 4	3005
35. E-Mail Address:		tvela@richmondtx.gov						
36. Telephone Number			37. Extension or Code			38. Fax Number (if applicable)		
(281) 342-5456						(281) 232-8626		

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:	Wade Parks	41. Title:	Senior Project Manager
42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Mail Address
(713) 395-4285		() -	WPParks@garverusa.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:	City of Richmond	Job Title:	Mayor
Name (In Print):	Rebecca Haas	Phone:	(281) 342- 5456
Signature:	<i>Rebecca K. Haas</i>	Date:	<i>2/11/2025</i>

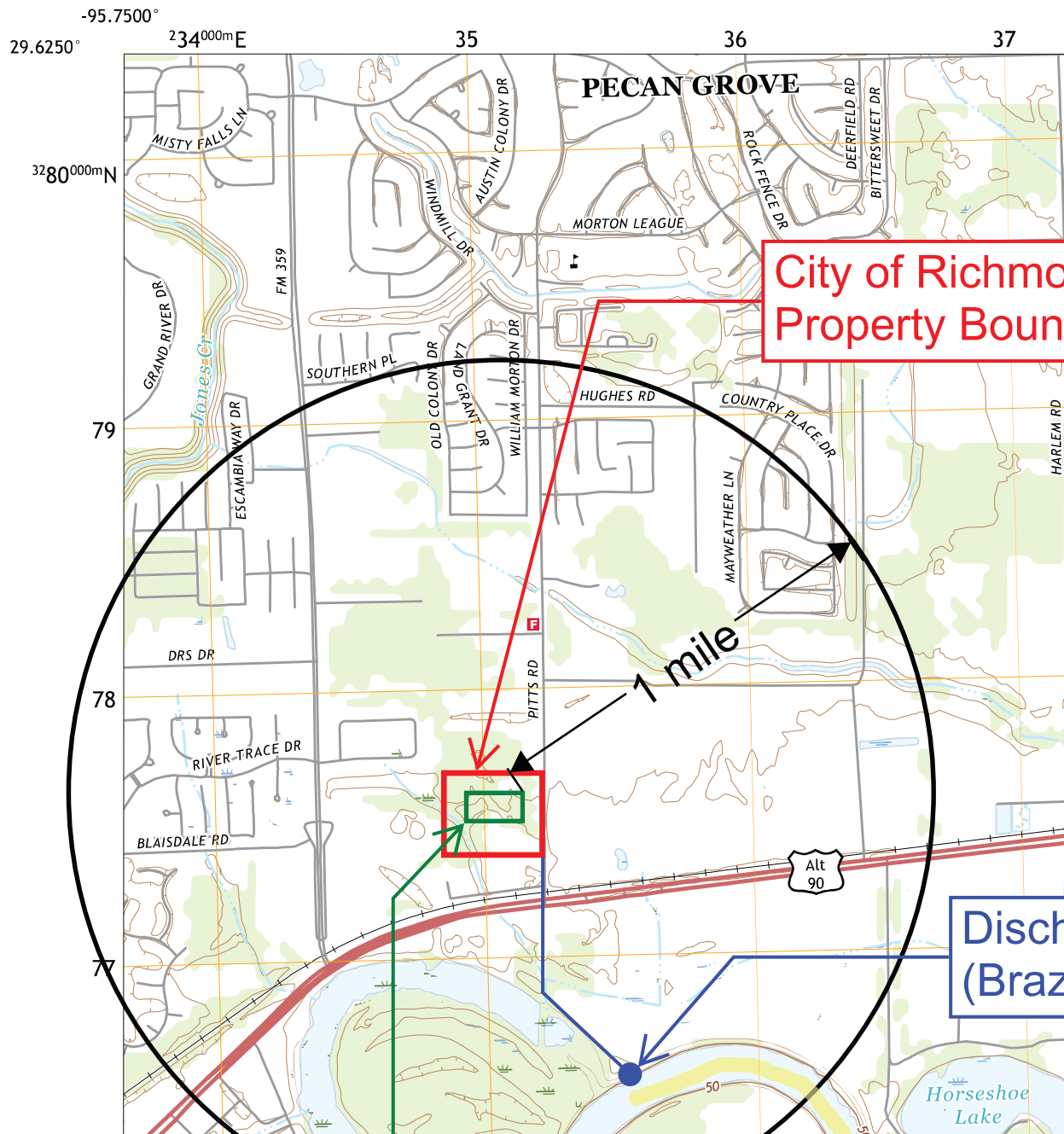
ATTACHMENT B

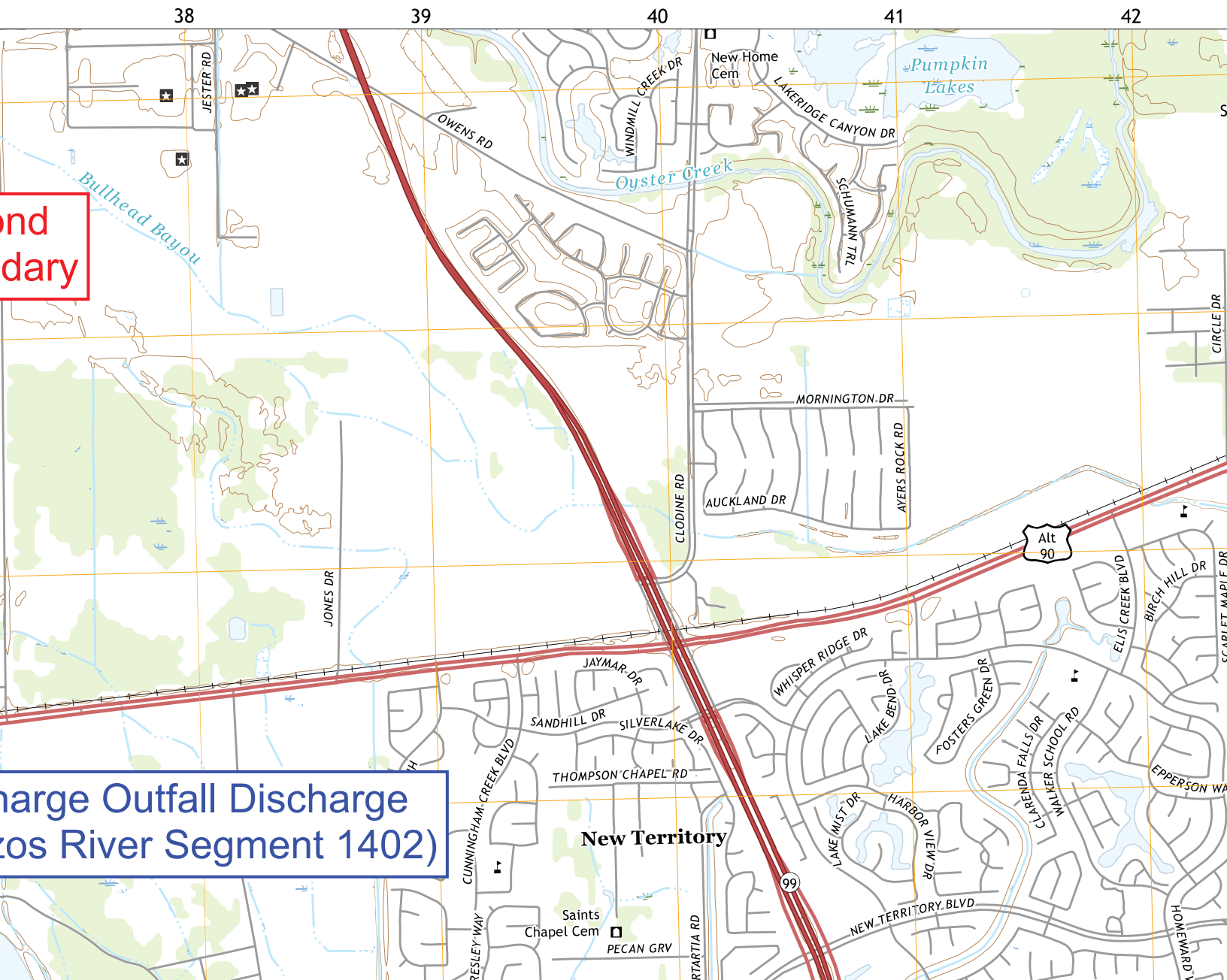
Administrative Report 1.0 Item 13

USGS QUADRANGLE MAP

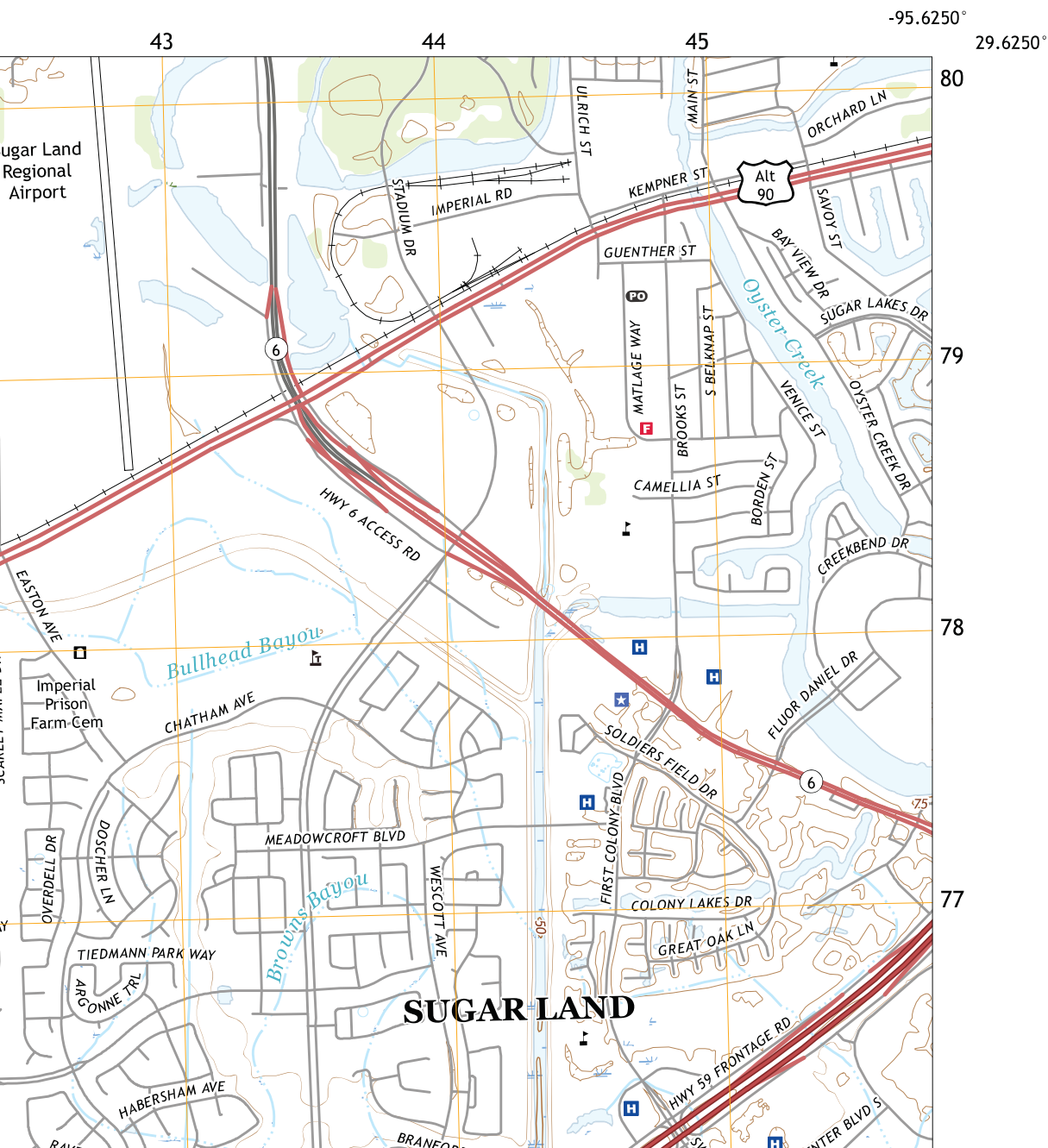


U.S. DEPARTMENT OF THE INTERIOR
U.S. GEOLOGICAL SURVEY



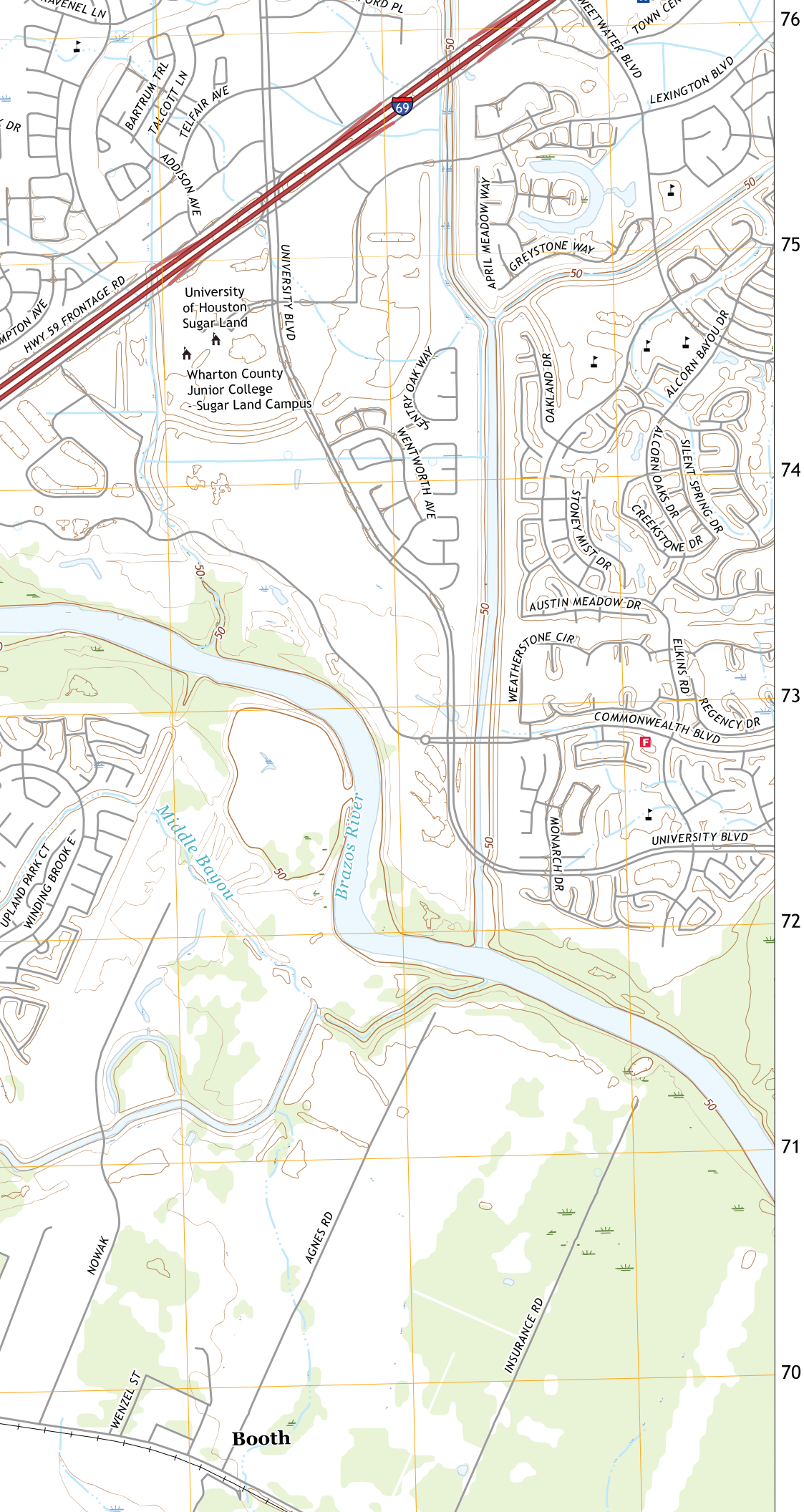


SUGAR LAND QUADRANGLE
TEXAS - FORT BEND COUNTY
7.5-MINUTE SERIES

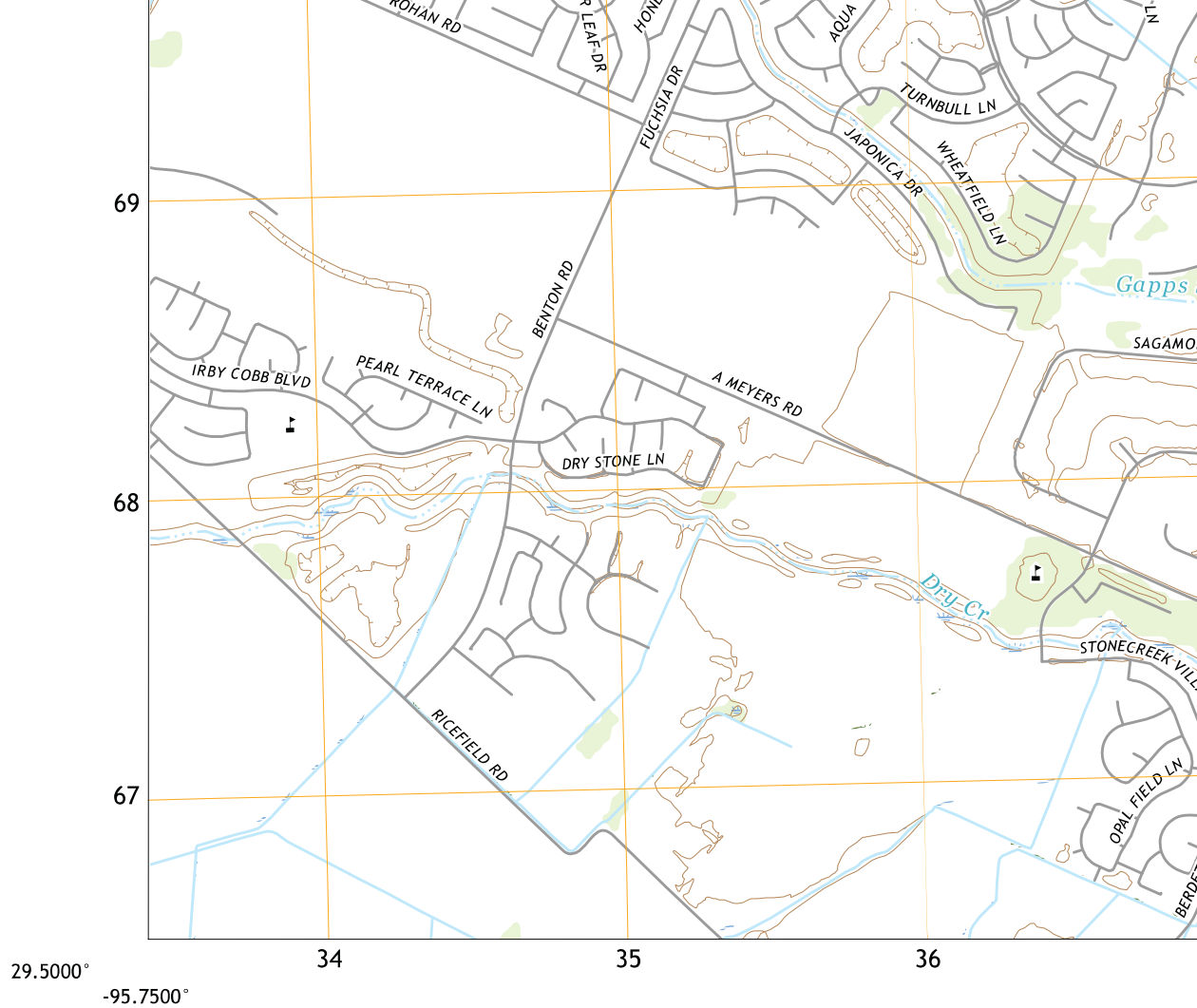


City of Richmond
Property Boundary





Booth



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.

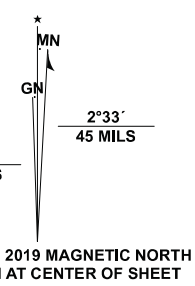
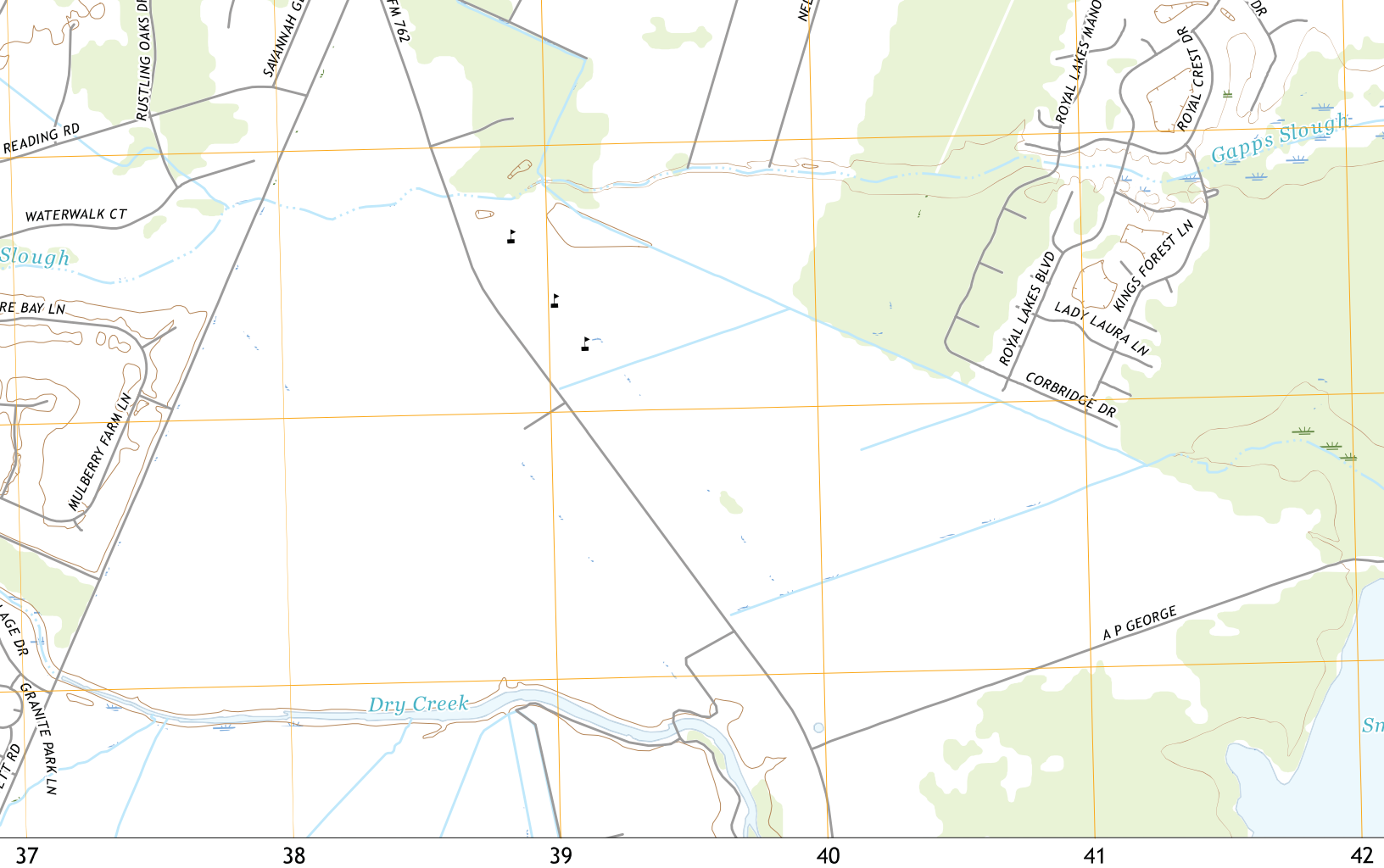
Imagery.....	NAIP, September 2016 - November 2016
Roads.....	U.S. Census Bureau, 2015
Names.....	GNIS, 1979 - 2022
Hydrography.....	National Hydrography Dataset, 2002 - 2018
Contours.....	National Elevation Dataset, 2021
Boundaries.....	Multiple sources; see metadata file 2019 - 2021

Wetlands.....	FWS	National	Wetlands	Inventory	Not	Available
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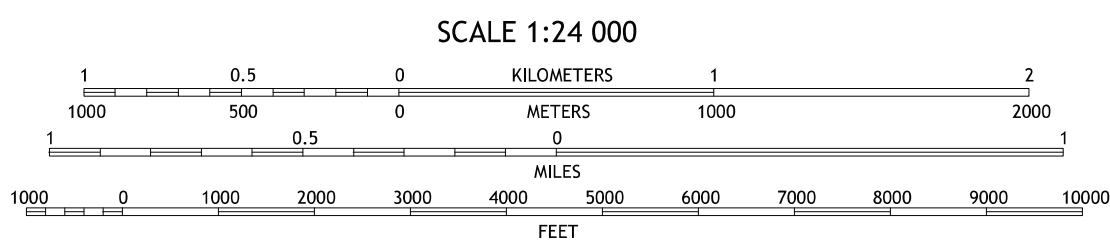
1°20'
24 MILS

UTM GRID AND
DECLINATION

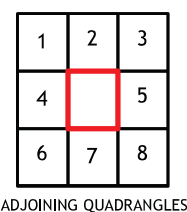


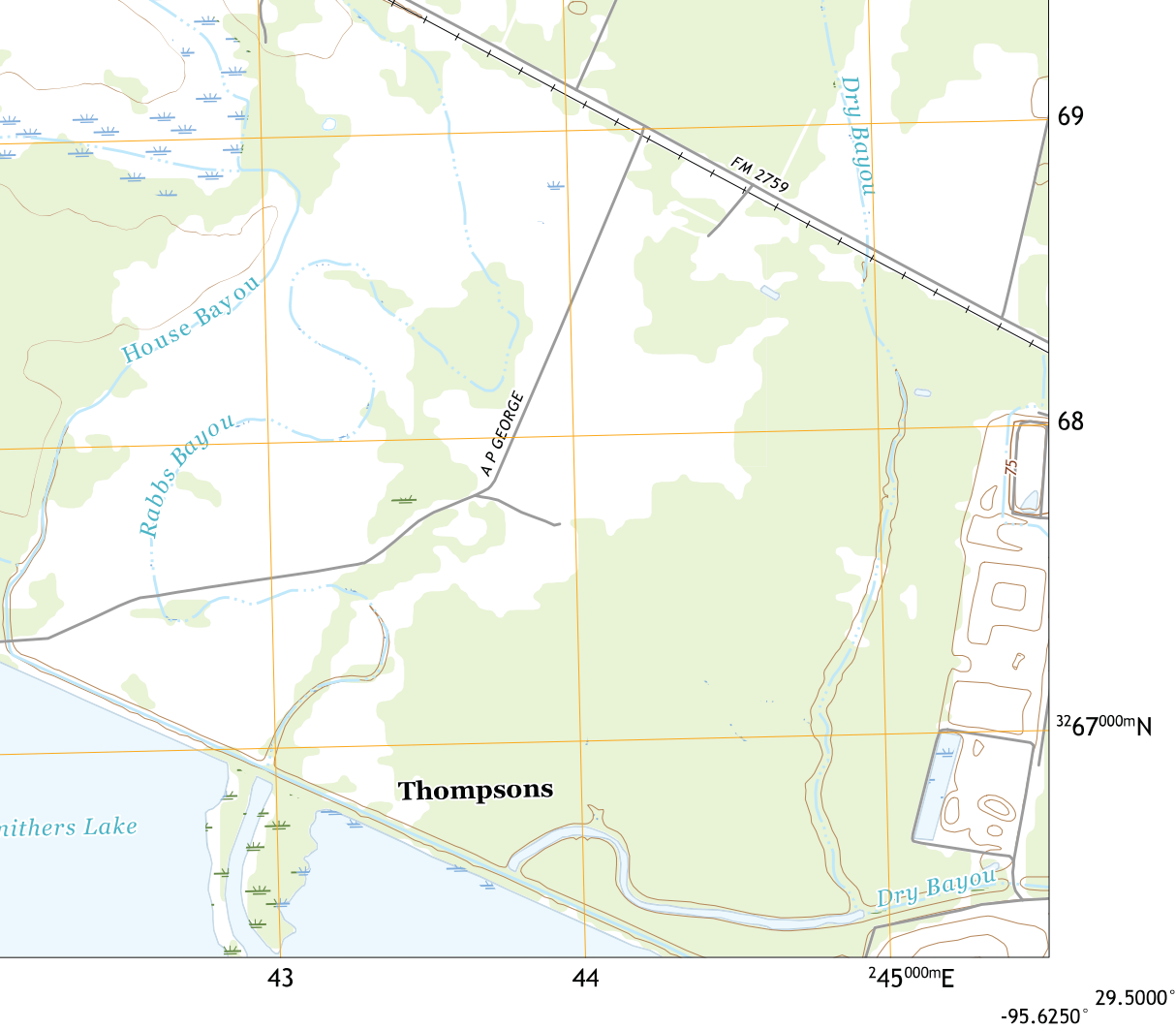


National Grid
100 - m Square ID
TN
Zone Designation
15R



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





- 1 Richmond NE
- 2 Clodine
- 3 Alief
- 4 Richmond
- 5 Missouri City
- 6 Needville
- 7 Smithers Lake
- 8 Thompsons

ROAD CLASSIFICATION

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

SUGAR LAND, TX
2022



ATTACHMENT C

Administrative Report 1.1 Item 1

AFFECTED LANDOWNER INFORMATION

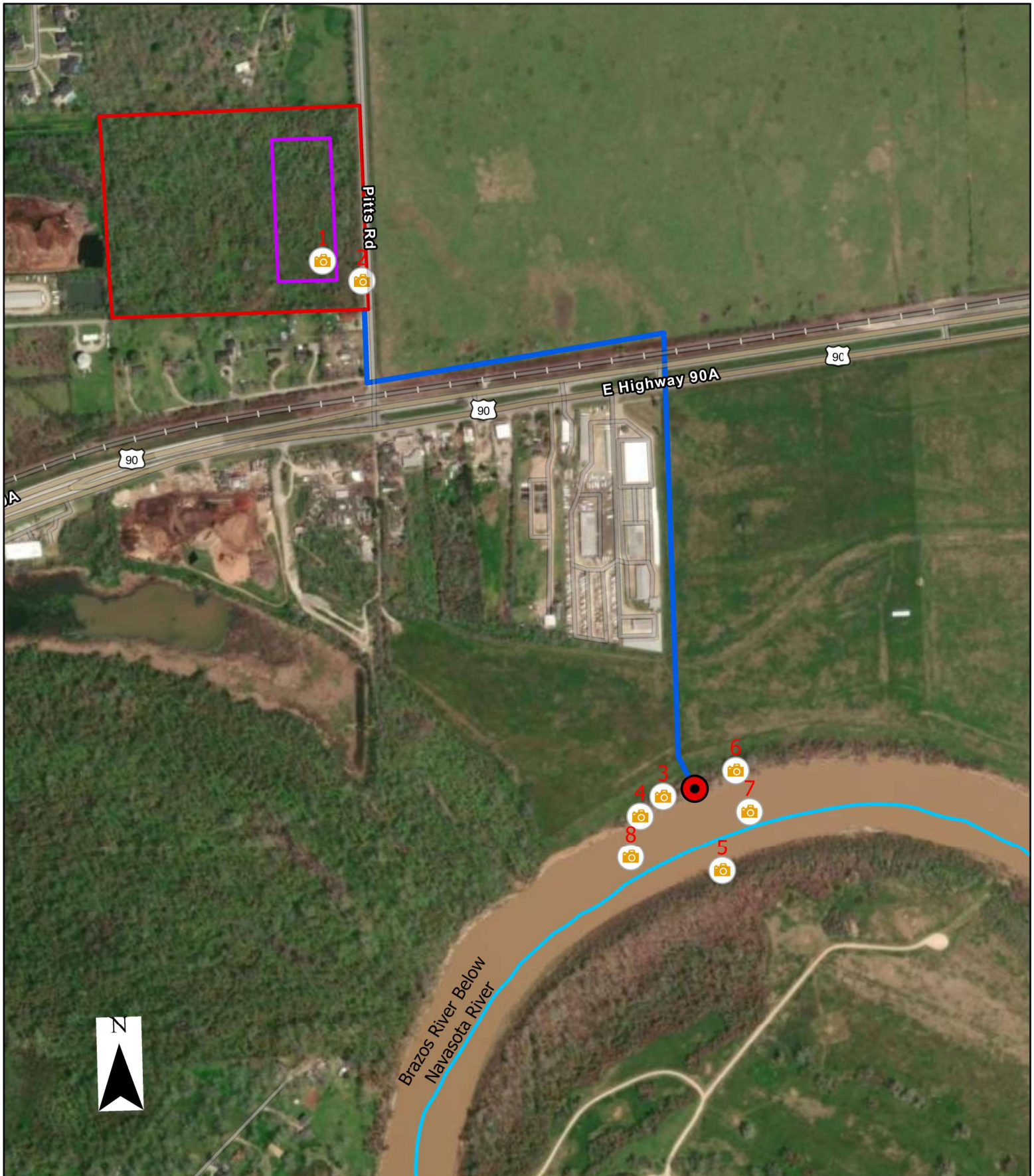


AFFECTED LANDOWNERS LIST

No.	PROPERTY ID	OWNER NAME	MAILING ADDRESS	CITY	STATE	ZIP CODE	LAND ACREAGE
1	R36236	Siml Investment Company Ltd	2330 Holmes RD	Houston	TX	77051-1014	6.59
2	R36242	Dacus Land and Cattle Company	PO Box 450862	Houston	TX	77245-0862	1.50
3	R36239	Cox Lois	11003 Needville Fairchilds RD	Needville	TX	77461-9225	6.28
4	R240030	GALVAN CLEMENTE C JR	1924 E HIGHWAY 90A	Richmond	TX	77406-2524	0.10
5	R36251	YAM Investment Inc	1912 E Highway 90A	Richmond	TX	77406-2500	5.52
6	R218095	Lone Goat # 2 LLC & Tres Hunt Family Holdings LLC	5528 Cranbrook RD	Houston	TX	77056-1611	147.35
7	R293760	Vasbinder David	2011 E HIGHWAY 90A	Richmond	TX	77469-2527	2.71
8	R36226	Robinson Callen Trust	605 Lincoln RD STE 320	Miami Beach	FL	33139-2934	12.17
9	R300097	Franks Nursery LLC	302 Fm 359 RD	Richmond	TX	77406-2406	6.50
10	R226305	SMITH JAMES C & SHERYL ANN	2123 Morton League RD	Richmond	TX	77406-1228	6.86
11	R247408	Franks Nursery LLC	302 Fm 359 RD	Richmond	TX	77406-2406	6.70
12	R36288	Zelaya Rosalio & Lucinda	103 Pitts RD	Richmond	TX	77406-2503	2.80
13	R35042	Lone Goat # 2 LLC & Tres Hunt Family Holdings LLC	5528 Cranbrook RD	Houston	TX	77056-1611	102.55
14	R34997	Henderson-Wessendorf Foundation	611 Morton ST	Richmond	TX	77469-3083	516.80
15	R36259	Gazis Sons Inc	1385 FM 359 RD	Richmond	TX	77406-2017	7.29
16	R218716	GALVAN RICHARD C & PAULA	1924 E HIGHWAY 90A REAR	Richmond	TX	77406-2524	1.00
17	R36241	All Star Storage INC	2122 E Highway 90A	Richmond	TX	77406-2528	6.98
18	R36287	Galvan Antonia	804 7th ST	Rosenberg	TX	77471-2516	3.15
19	R127809	Zelaya Rosalio & Lucinda	103 Pitts RD	Richmond	TX	77406-2503	2.10
20	R162590	Zelaya Rosalio & Lucinda	103 Pitts RD	Richmond	TX	77406-2503	1.80
21	R162591	Daffrey Brady J & Penny P	115 Pitts RD	Richmond	TX	77406-2503	1.80
22	R36289	CA & H Inc	121 Pitts RD	Richmond	TX	77406-2503	0.51
23	R36253	Rubenstein Scott	2330 Holmes RD	Houston	TX	77051-1098	0.97
24	R219093	Brasseur Wilfred P & Judy E	401 Pitts RD	Richmond	TX	77406-2509	20.59
25	R245474	Shadow Grove Estates Homeowners Assoc	PO Box 1631	Richmond	TX	77406-1631	5.41
26	R36246	GARVER C	1901 LEXINGTON ST	Houston	TX	77098-4219	23.32
27	R36303	Lone Goat # 2 LLC & Tres Hunt Family Holdings LLC	5528 Cranbrook RD	Houston	TX	77056-1611	358.85
28	R351255	City of Richmond	402 MORTON ST	Richmond	TX	77469-3121	2.00
29	R162589	Zelaya Rosalio & Lucinda	103 Pitts RD	Richmond	TX	77406-2503	2.56
30	R36308	ResVis Real Est LTD Partnership	1900 West LOOP S STE 1050	Houston	TX	77027-3295	516.65
31	R36304	Lone Goat # 2 LLC & Tres Hunt Family Holdings LLC	5528 Cranbrook RD	Houston	TX	77056-1611	20.00

ATTACHMENT D

Administrative Report 1.1 Item 2
PHOTOGRAPHS



East WWTP Site

Facility Site Boundaries

Discharge Point

Photos

TCEQ Classified Segments

Outfall Discharge Pipeline

0 0.04 0.07 0.15 Miles



PHOTOGRAPHS LOCATION MAP
East Wastewater Treatment Plant
City of Richmond, Texas

Original Photographs Richmond East WWTP

PAGE 1 - PROPOSED WWTP SITE



Photo 1 – Richmond East WWTP Proposed Site



Photo 2 – Looking West from Pitts Rd., Access to Proposed Richmond East WWTP Site

PAGE 2 - PROPOSED POINT OF DISCHARGE



Photo 3 – Proposed Richmond East WWTP Outfall Location To Brazos River Segment 1202 (looking south)



Photo 4 – Close-Up Proposed Richmond East WWTP Outfall Location To Brazos River (looking south)

PAGE 3 - PROPOSED POINT OF DISCHARGE



Photo 5 – Looking North Towards Proposed Outfall Location To Brazos River Segment 1202



Photo 6 – Portrait View of Proposed Richmond East WWTP Outfall Location (looking south)

PAGE 4 – UPSTREAM/DOWNSTREAM OF DISCHARGE



*Photo 7 – **Downstream** View Of Brazos River From Proposed Richmond East WWTP Outfall Location*

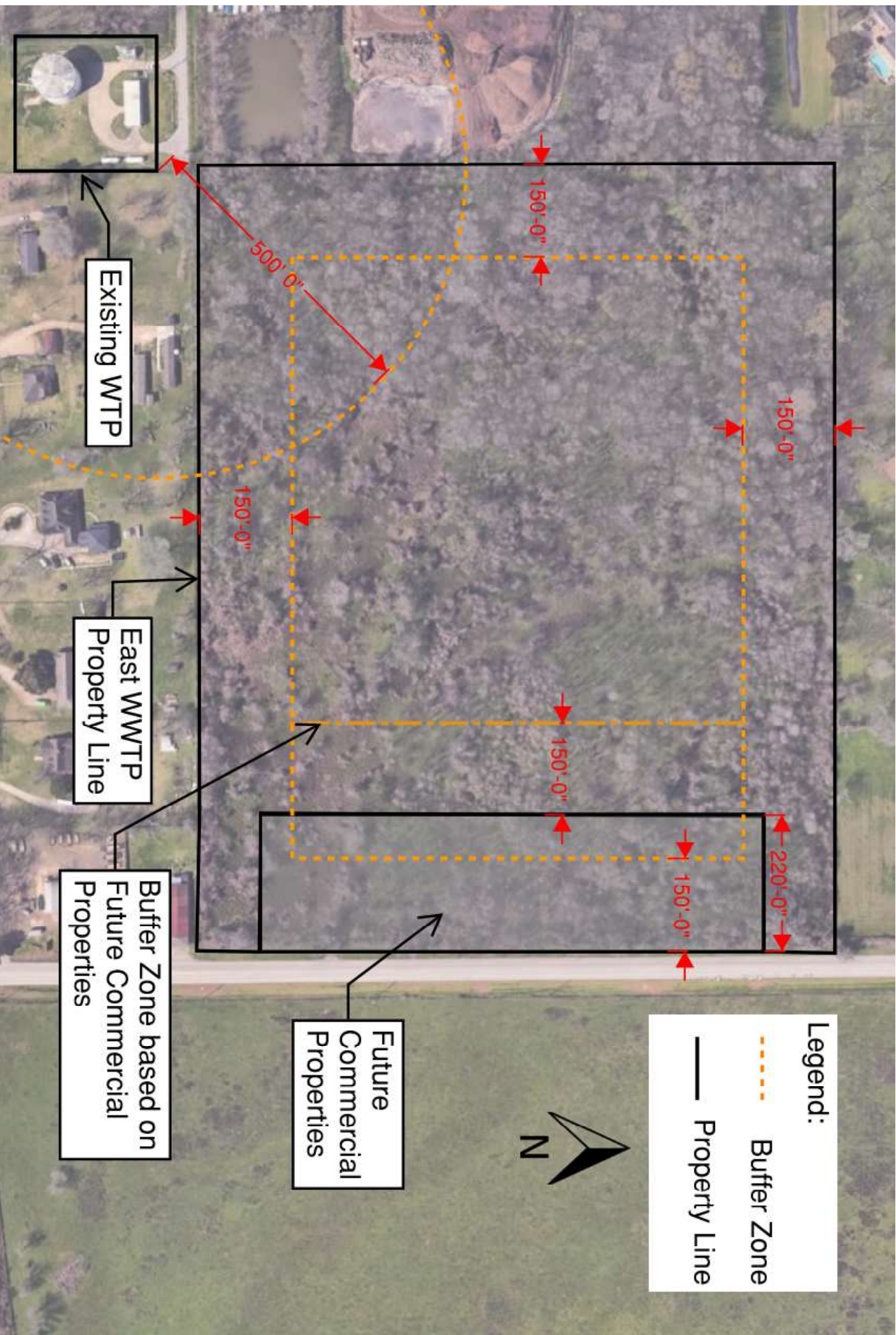


*Photo 8 - **Upstream** View Of Brazos River From Proposed Richmond East WWTP Outfall Location*

ATTACHMENT E

Administrative Report 1.1 Item 3

BUFFER ZONE MAP



ATTACHMENT F

Supplemental Permit Information (SPIF) &
USGS QUADRANGLE MAP

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: City of Richmond

Permit No. WQ00

EPA ID No. TX 0790023

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

600 ft North of intersection of Pitts Road and US 90 Alt., Richmond, TX 77406

Property ID: R36311

Legal Description: 0062 WM Morton, Tract 70

Neighborhood Code: 5950

Geo ID: 0062-00-000-0700-901

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

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

First and Last Name: Terri Vela

Credential (P.E, P.G., Ph.D., etc.): Not here to answer

Title: City Manager

Mailing Address: 402 Morton St.

City, State, Zip Code: Richmond, TX 77469

Phone No.: 281-342-5456 Ext.: Not here to answer Fax No.: 281-232-8626

E-mail Address: tvela@richmondtx.gov

2. List the county in which the facility is located: Fort Bend
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.

Direct discharge to Segment No. 1202 of the Brazos River (Brazos River below Navasota River)

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):

Construction impact consists of a proposed 20-acre treatment plant and outfall pipeline measuring 4,000 feet in length. Proposed ground disturbing activity for the project includes deep impacts greater than 3 feet, with a maximum depth of 60 feet in some areas.

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

The site land consists of natural grass prairie with hardwood trees.

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:

There are no existing structures on the property.

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

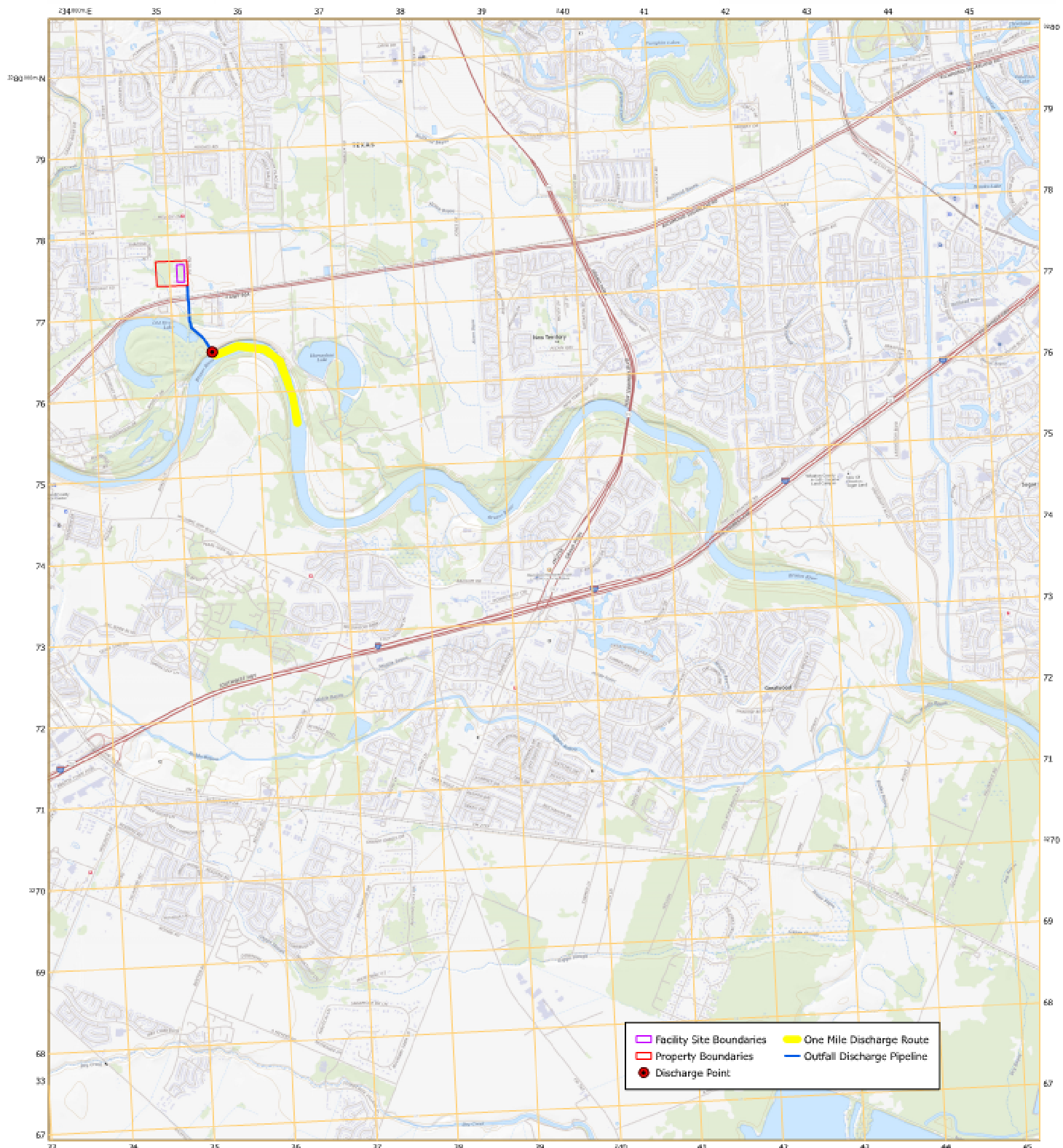
Property ID: 0062-00-000-0700-901 Owner Name: City of Richmond
Property Description: 0062 WM MORTON, TRACT 70, ACRES 29.041



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



SUGAR LAND QUADRANGLE
TEXAS - FORT BEND COUNTY
7.5-MINUTE SERIES



Produced by the United States Geological Survey

North American Datum of 1983 (NAD83)
World Geodetic System of 1984 (WGS84). Reproduction and
1:500 meter grid Universal Transverse Mercator Zone 18R
This map is not a legal document. Boundary map for
generalized for this map scale. Please verify with government
information and use the datum. Obtain permission before
entering private lands.

Product	U.S.	State	County	City	Year
Topography	National	Hydrography	Open	1998	
Boundaries	Hydrography	Open	1998		
Boundaries	Hydrography	Open	1998		

Metadata: 1/2010 National Metadata: 1/2010



CONTOUR INTERVAL: 10 FEET

NORTH AMERICAN DATUM OF 1983

This map was produced in accordance with the

National Geospatial Program (N) Topographic Standard, 2011.

A metadata file associated with this product is available at 5.1.18



ROAD CLASSIFICATION

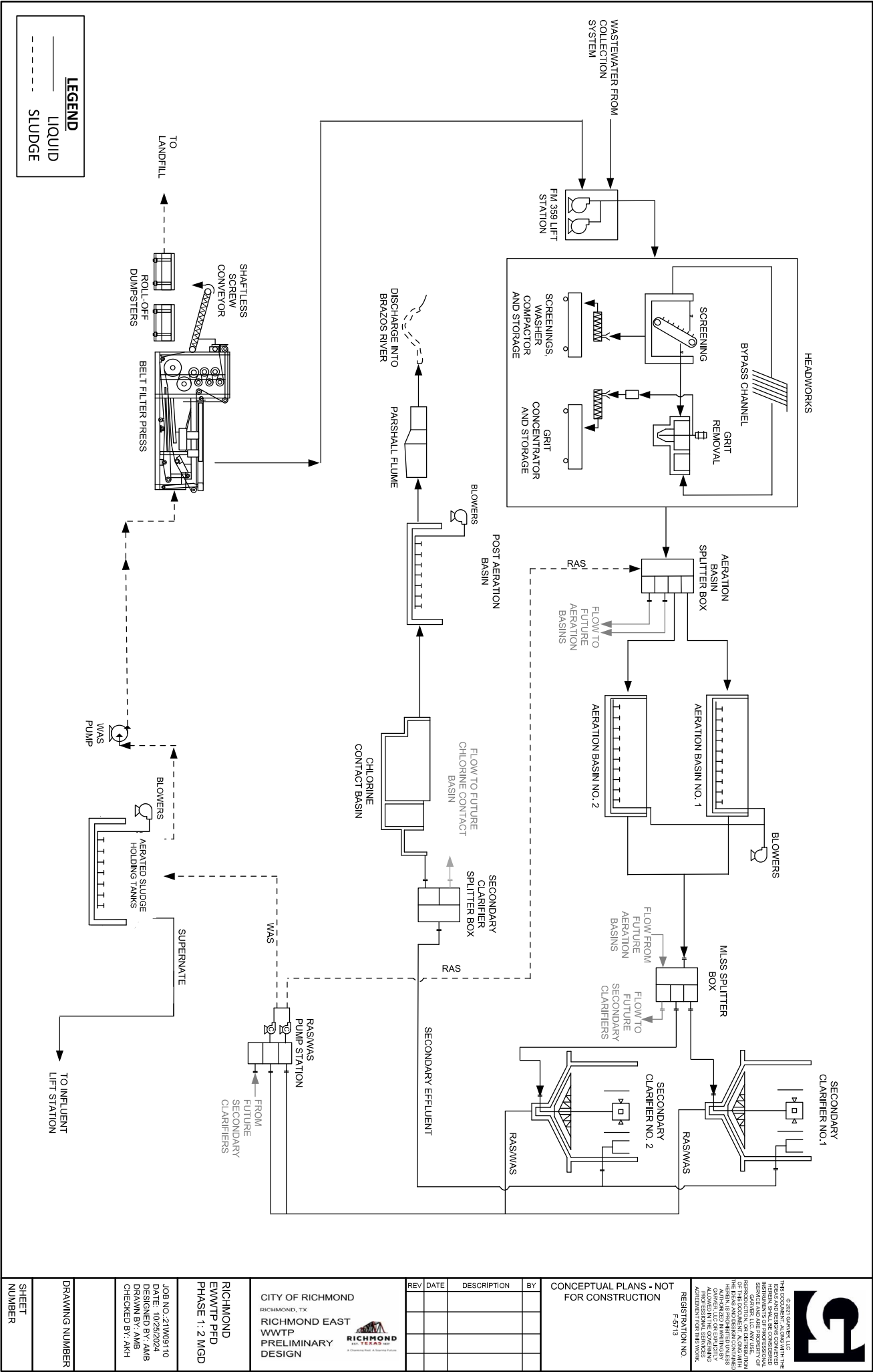
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Expressway	Thick red line	Local Road	Thin red line
Boundary Line	Thin red line	Local Road	Thin red line
Bridge	Blue line	Local Road	Thin red line
Waterway	Blue line	Local Road	Thin red line

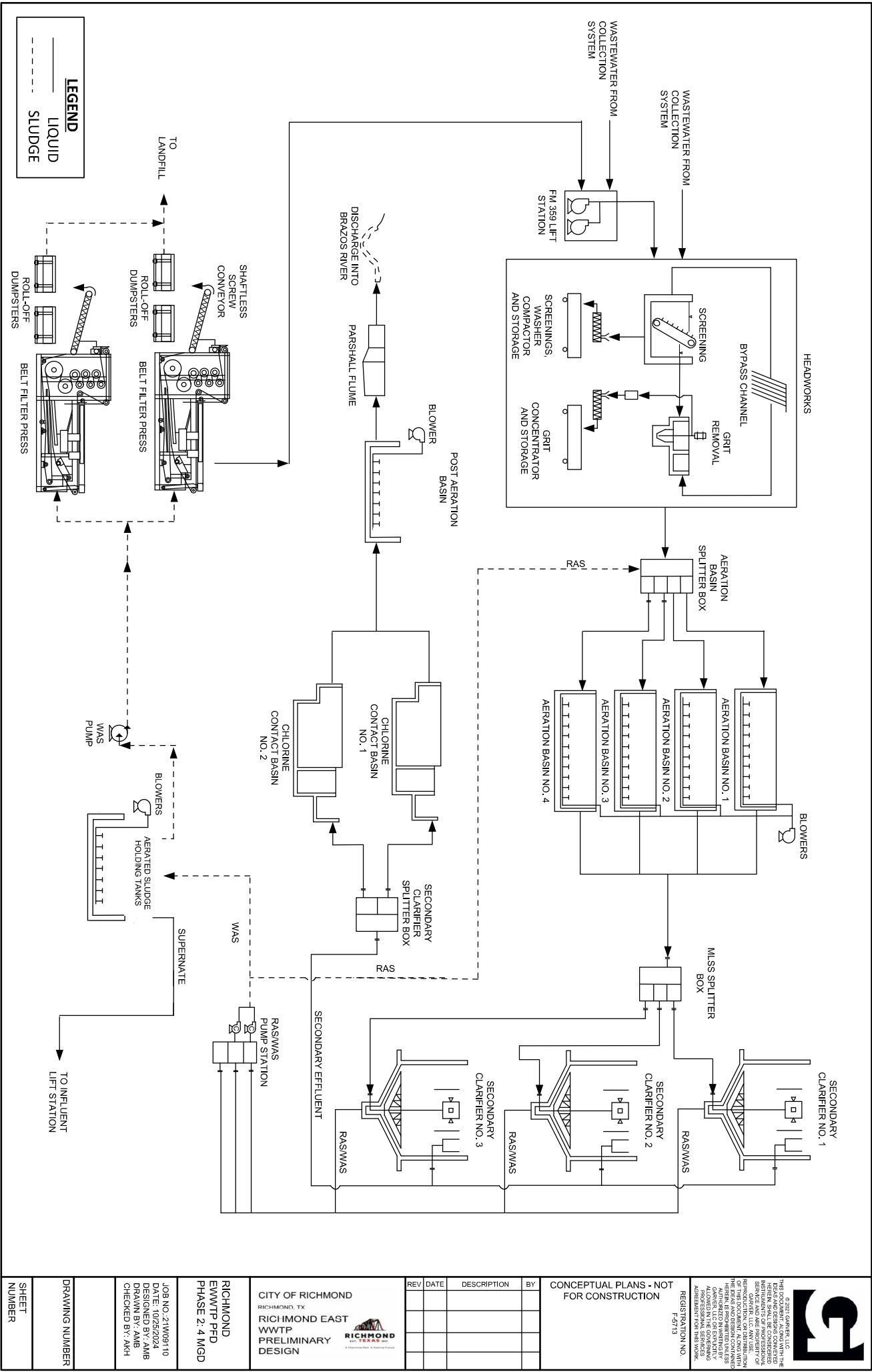
SUGAR LAND, TX
2019

ATTACHMENT G

Technical Report 1.0 Item 2.C

PROCESS FLOW DIAGRAM





THIS DOCUMENT, ALONG WITH THE DESIGN AND CONSTRUCTION OF THE RICHMOND EAST WASTEWATER TREATMENT PLANT, IS THE PROPERTY OF THE CITY OF RICHMOND, TEXAS. IT IS TO BE USED ONLY FOR THE PROJECT AND SITE SPECIFICALLY IDENTIFIED IN THIS DOCUMENT. ANY REUSE, MODIFICATION, OR ALTERATION OF THIS DOCUMENT, WITHOUT THE WRITTEN AGREEMENT OF THE CITY OF RICHMOND, TEXAS, IS PROHIBITED.

REGISTRATION NO. F-5713

CONCEPTUAL PLANS - NOT FOR CONSTRUCTION

REV	DATE	DESCRIPTION	BY

CITY OF RICHMOND
RICHMOND, TX
RICHMOND EAST
WWTP
PRELIMINARY
DESIGN

RICHMOND
EWMTP PFD
PHASE 2: 4 MGD

JOB NO. 21W09110
DATE: 10/25/2024
DESIGNED BY: AMB
DRAWN BY: AMB
CHECKED BY: AKH

DRAWING NUMBER

SHEET NUMBER

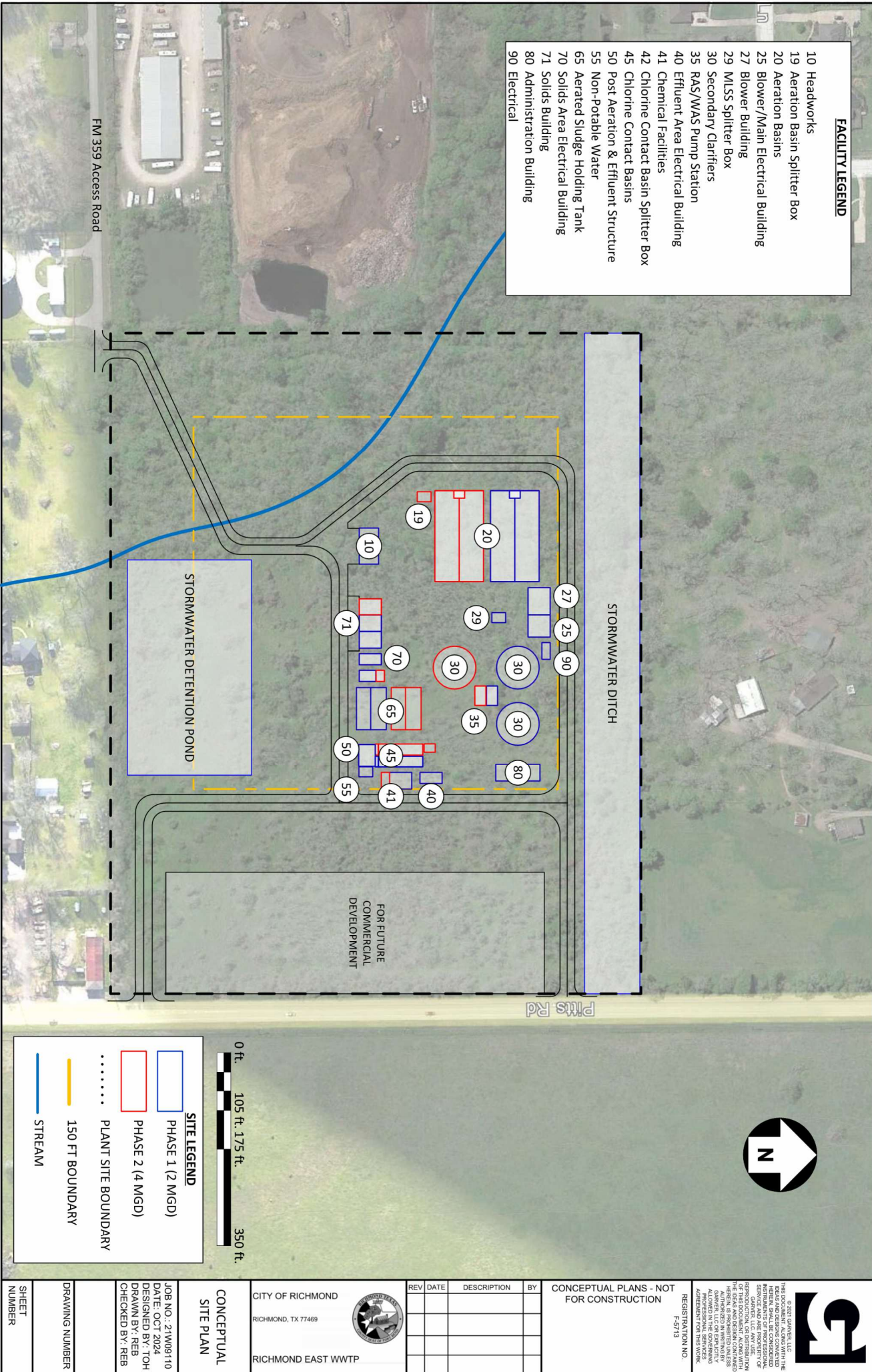
ATTACHMENT H

Technical Report 1.0 Item 3

SITE DRAWING AND FACILITIES SERVICE AREA

FACILITY LEGEND

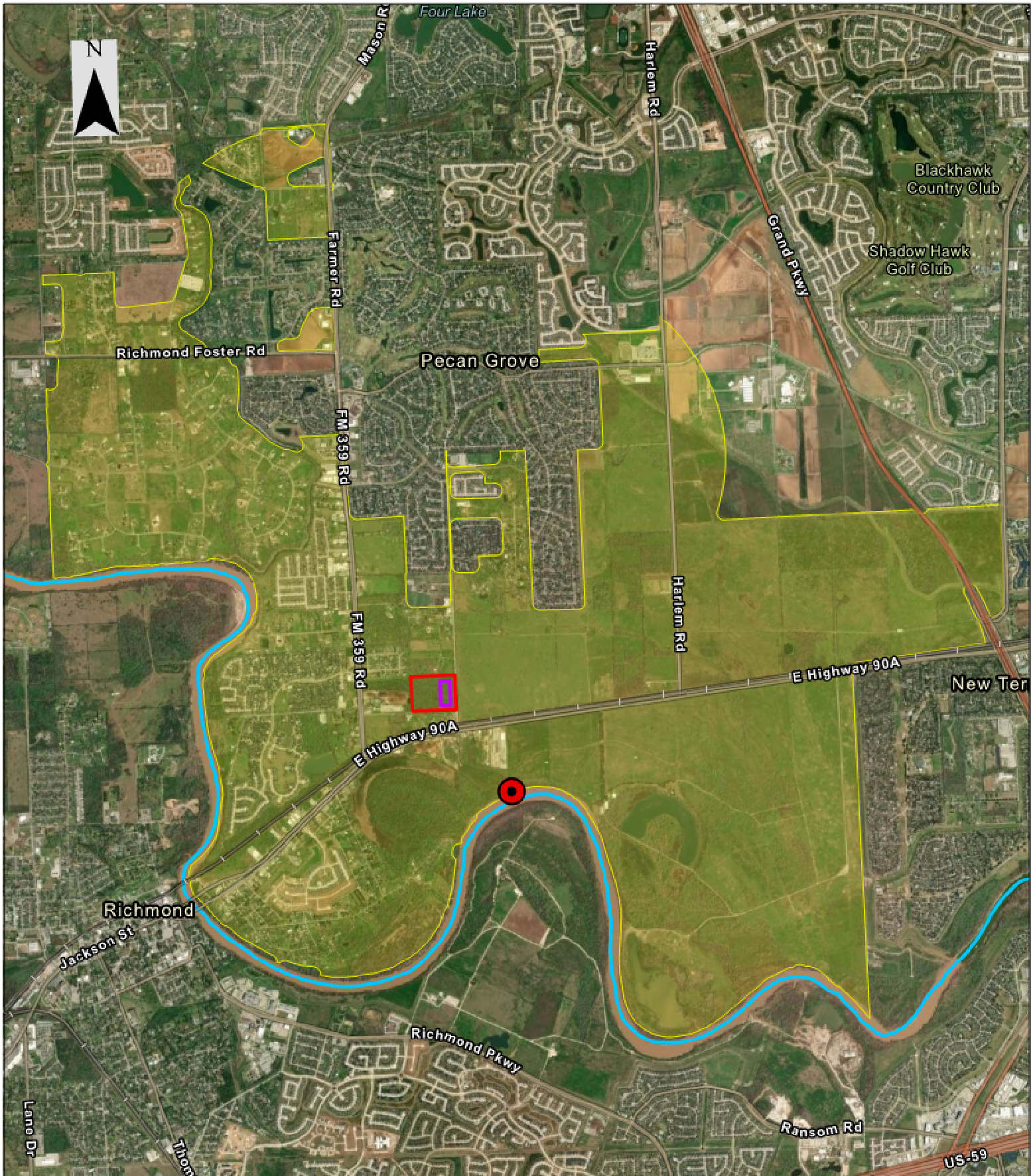
- 10 Headworks
- 19 Aeration Basin Splitter Box
- 20 Aeration Basins
- 25 Blower/Main Electrical Building
- 27 Blower Building
- 29 MLSS Splitter Box
- 30 Secondary Clarifiers
- 35 RAS/WAS Pump Station
- 40 Effluent Area Electrical Building
- 41 Chemical Facilities
- 42 Chlorine Contact Basin Splitter Box
- 45 Chlorine Contact Basins
- 50 Post Aeration & Effluent Structure
- 55 Non-Potable Water
- 65 Aerated Sludge Holding Tank
- 70 Solids Area Electrical Building
- 71 Solids Building
- 80 Administration Building
- 90 Electrical



SITE LEGEND

- PHASE 1 (2 MGD)
- PHASE 2 (4 MGD)
- PLANT SITE BOUNDARY
- 150 FT BOUNDARY
- STREAM

 CITY OF RICHMOND RICHMOND, TX 77469 RICHMOND EAST WWTP CONCEPTUAL SITE PLAN				THIS DOCUMENT, ALONG WITH THE INSTRUMENTS OF SERVICE, IS THE PROPERTY OF THE CITY OF RICHMOND. IT IS TO BE USED ONLY FOR THE PROJECT AND SITE SPECIFICALLY IDENTIFIED IN THE INSTRUMENTS OF SERVICE. ANY REUSE, REPRODUCTION, OR DISTRIBUTION OF THIS DOCUMENT, ALONG WITH THE INSTRUMENTS OF SERVICE, WITHOUT THE WRITTEN PERMISSION OF THE CITY OF RICHMOND, IS PROHIBITED. ANY VIOLATION OF THIS PROHIBITION SHALL BE CONSIDERED A VIOLATION OF THE GOVERNING AGREEMENT FOR THIS WORK. REGISTRATION NO. F-5713				 THE SEAL OF A LICENSED PROFESSIONAL ENGINEER IN THE STATE OF TEXAS. IT IS TO BE USED ONLY FOR THE PROJECT AND SITE SPECIFICALLY IDENTIFIED IN THE INSTRUMENTS OF SERVICE. ANY REUSE, REPRODUCTION, OR DISTRIBUTION OF THIS DOCUMENT, ALONG WITH THE INSTRUMENTS OF SERVICE, WITHOUT THE WRITTEN PERMISSION OF THE CITY OF RICHMOND, IS PROHIBITED. ANY VIOLATION OF THIS PROHIBITION SHALL BE CONSIDERED A VIOLATION OF THE GOVERNING AGREEMENT FOR THIS WORK.			
REV	DATE	DESCRIPTION	BY								
JOB NO.: 21W09110 DATE: OCT 2024 DESIGNED BY: TOH DRAWN BY: REB CHECKED BY: REB											
DRAWING NUMBER											
SHEET NUMBER											



- | | |
|-----------------------------------|-------------------|
| Facility Site Boundaries | WWTP Service Area |
| Discharge Point | Receiving Waters |
| Proposed WWTP Property Boundaries | |

0 0.25 0.5 1 Miles

SERVICE AREA MAP

East Wastewater Treatment Plant City of Richmond, Texas

ATTACHMENT I

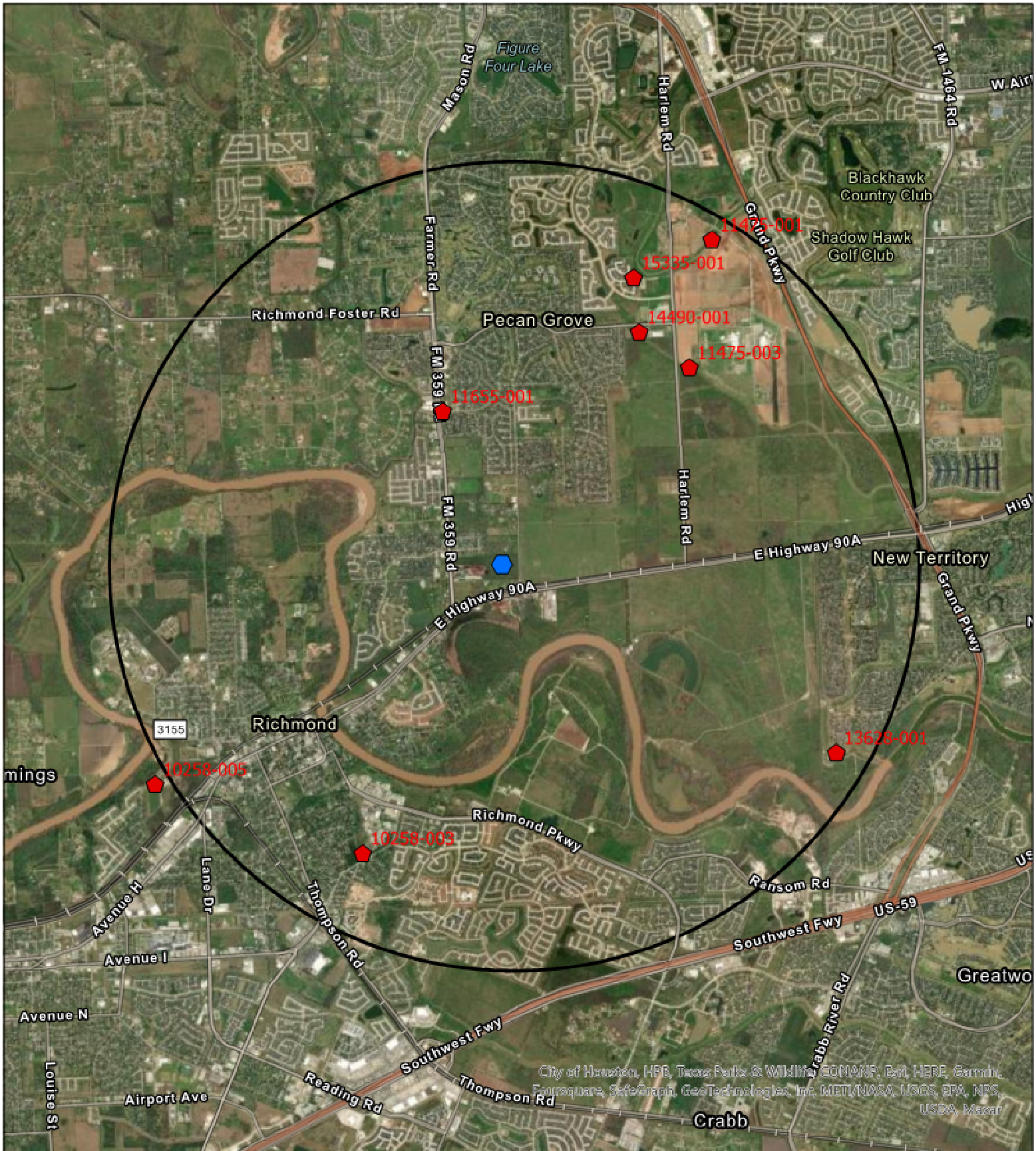
Technical Report 1.1 Item 1.B.3

NEARBY WASTEWATER FACILITIES



NEARBY WASTEWATER FACILITIES LIST

No.	PERMIT_NUM	REGULATED ENTITY NAME	Facility Name	PERMITTEE	PHYSICAL ADDRESS	MAILING ADDRESS	PERMIT STATUS	COUNTY	LAT_DD	LONG_DD
1	15335-001	RN107953705	Harvest Green WWTP	Fort Bend County Mud 134E	1600 Ft N And 800 Ft W Of Interx Plantation Dr And Harlem Rd	9 Greenway Plz Ste 1100 Houston, Tx 77046 - 3653	Active	FORT BEND	29.630001	-95.718889
2	14490-001	RN104149810	Plantation Crossing WWTP	Plantation Crossing Owners Association Inc	1800 Ft W Of Harlem Rd On Plantation Dr 250 Ft S Of Plantation Dr	Po Box 79519 Houston, Tx 77279 -9519	Active	FORT BEND	29.624138	-95.718392
3	11655-001	RN102917283	Pecan Grove WWTP	Pecan Grove Mud	1600 Fm 359 Rd Richmond Tx 77406 1257	3200 Southwest Fwy Ste 2600 Houston, Tx 77027 -7537	Active	FORT BEND	29.616205	-95.742853
4	10258-005	RN101216760	City Of Richmond WWTP	City Of Richmond	Pprox 268 Ft East Of The Intersection Of Rivermoor	402 Morton St Richmond, Tx 77469 -3121	Active	FORT BEND	29.576892	-95.779527
5	13628-001	RN102845930	New Territory Wastewater Treatment Plant	City Of Sugar Land	1000 Feet S Of The Intersection Kyle Hill Lane	Po Box 110 Sugar Land, Tx 77487 -0110	Active	FORT BEND	29.578249	-95.695587
6	11475-001	RN102320322	Tdcj Jester Unit	Texas Dept Of Criminal Justice	4 Miles East Of Richmond On Hwy 90A In Fort Bend County And Tessie Court	Po Box 4011 Huntsville, Tx 77342 -4011	Cancelled	FORT BEND	29.633853	-95.709113
7	11475-003	RN102314671	Tdcj Jester 3 Unit	Texas Dept Of Criminal Justice	3 Jester Rd, Richmond Tx 77406 8544	Po Box 4011 Huntsville, Tx 77342 -4011	Active	FORT BEND	29.620168	-95.71234
8	10258-003	RN102096310	City Of Richmond WWTP	City Of Richmond	220 Legion Dr, On The Northeast Corner Of Rabbs Bayou And Golfview Dr, Approx. 300Ft	402 Morton St Richmond, Tx 77469 -3121	Active	FORT BEND	29.568868	-95.754215



3-Mile Radius

Nearby_WW Treatment Facilities (Permit Number)

Proposed WW Treatment Facilities

0 0.5 1 2 Miles



NEARBY WWTPS
East Wastewater Treatment Plant
City of Richmond, Texas

ATTACHMENT J

Technical Report 1.1 Item 4

DESIGN CALCULATIONS

Design Calculations

Influent Quality Characteristics - The raw sewage characteristics used for design purposes are as follows:

<u>Parameter</u>	<u>Concentration</u>
BOD ₅	250 mg/L
TSS	240 mg

Influent Flow Characteristics - The hydraulic design of the facility must ensure that the facility will operate under the most extreme conditions anticipated. The facility process and hydraulic design for this facility are as follows:

Flow	Phase 1-Gallons per Day	Phase 1-Gallons per Day
Average Daily Flow	2,000,000	4,000,000
Peak 2-Hour Flow	8,000,000	16,000,000

Loading	Pounds per Day
BOD ₅	250
TSS	200
NH ₃ -N	35

Process Design - The treatment facility will be designed to produce an effluent quality in compliance with the proposed permitted parameters of:

CBOD₅ = 10 mg/L; TSS = 15 mg/L; NH₃-N = 3 mg/L; DO = 4.0 mg/L;

Cl₂ Residual = 1 to 4 mg/L after 20 minutes detention time at peak flow.

Treatment Units

Table EX4(2) - Aeration Basin

Aeration Basin	Actual Provided
Reactor Type	Plug Flow
Total Aeration Basin Volume	P1: 230,400 ft³ P2: 460,800 ft³
Number of Tanks	P1: 2 P2: 4
Tank Dimensions	Length - 160 ft Width - 40 ft Depth - 18 ft
Design MLSS	3,500 mg/L
Organic Loading Criteria (lbs BOD/1000 ft³)	Avg. Day: 18.9 Max Month: 31.8
Hydraulic Retention Time	Avg. Day: 21 hr Max Month: 15 hr
Solids Retention Time	Avg. Day: 15 day Max Month: 9.0 day
Diffuser Type	Fine Bubble
Control	DO Control with control valves

Table EX4(3) - Clarifier

Clarifier	TCEQ Requires	Actual Provided
Phase 1:		
Surface loading rate (Qpk) (gallons/day/ ft ²)	1,200 (Max)	905
Detention time (Qpk) (hr)	1.8 (Min)	3.2
Number of Clarifiers	--	2
Surface area per Clarifier (ft ²)		4,418
Volume per Clarifier (ft ³)		70,686
Side-water depth (ft)	10 (Min)	16
Maximum weir loading (Qpk) (gallons/day/ft)	30,000 (Max)	18,190
Diameter (ft)	--	75
Weir length (ft)	--	219.9
Phase 2:		
Surface loading rate (Qpk) (gallons/day/ ft ²)	1,200 (Max)	1,200
Detention time (Qpk) (hr)	1.8 (Min)	2.4
Number of Clarifiers	--	3
Surface area per Clarifier (ft ²)		4,418

Volume per Clarifier (ft3)		70,686
Side-water depth (ft)	10 (Min)	16
Maximum weir loading (Qpk) (gallons/day/ft)	30,000 (Max)	24,252
Diameter (ft)	--	75
Weir length (ft)	--	219.9

Table EX4(4) - Aerated Sludge Holding Tanks

Parameter	Design Criteria	Discussion
Min. Solids Retention Time	P1 Avg. Day: 7 days P1 MM: 4 days	Provides capacity to waste for weekend without solids disposal
Total Volume	400,000 gallons or 54,000 ft3	Phase 1 only (double for Phase 2)
Number of Tanks	2	Redundancy for shutdowns, batch, or sequence
Tank Dimensions	Length - 72 ft Width - 25 ft Depth - 15 ft	Each Tank provides 27,000 ft3
Aeration Demand	Total: 1,620 Per Tank: 810	Designed for 30 SCFM per 1,000 ft3 of tank volume
Blower Type	Positive Displacement	
Number of Blowers	3	One each per tank with swing spare
Diffuser Type	Coarse Bubble	2-inch drop diffusers
Decant Provisions	Telescoping Valves	Assisted Manual with time-based programming
Electrical, Instrumentation and Controls	Solids Electrical Building	Major equipment (blower starters/VFDs, solids PLC, etc.) housed in solids electrical building

Table EX4(5) - Chlorine Contact Chamber

Chlorine Contact Chamber	TCEQ Requires	Actual Provided
Phase 1:		
Detention time (Qpk) (minutes)	20	21.5
Volume (Qpk) (ft3)	--	16,000
Phase 2:		
Detention time (Qpk) (minutes)	20	21.5

Volume (Qpk) (ft3)	--	32,000
--------------------	----	--------

Table EX4(6) – RAS and WAS Pump System

RAS Return Ratio	Min: 0.65x Max: 1.3x	
Phase 1 - RAS Flowrate	Min: 1.3 MGD Max: 2.6 MGD	
Phase 2 - RAS Flowrate	Min: 2.6 MGD Max: 5.2 MGD	
Number of RAS Pumps	P1: 3 P2: 4	Includes one pump on standby.
Number of WAS Pumps	P1: 2 P2: 3	

Air Requirements

Table EX4(6) – Aeration Blower System

Parameter	Design Criteria	Discussion
Air Demand Considerations	Mixing, BOD Removal, Nitrification	Aeration demand for each parameter analyzed
Diffuser Fouling Factor	0.9	
Alpha Factor	0.5	
Diffuser Submergence	17 ft	
Effective Oxygen Transfer Efficiency	34%	Assumes 2% OTE/ft of submergence
Standard Oxygen Requirement	Phase 1 MM: 32,000 lb O ₂ /d Phase 2 MM: 64,000 lb O ₂ /d	Oxygen required for BOD and Nitrification
Total Aeration Requirement	Phase 1 MM: 4,990 SCFM Phase 2 MM: 9,910 SCFM	Safety Factor of 1.33 is used to convert max month demand to peak day
Number of Blowers	Phase 1: 3 Phase 2: 5	Includes one standby blower per phase
Anticipated Blower Design Point	Flow: 2,500 SCFM Pressure: 8.4 psig	
Anticipated Blower Turndown	62%	
Blower Efficiency	0.65	
Blower HP	125 HP	
Blower Control	Header Pressure Control	Maintain header pressure by varying number in service and output of blowers

Facility design features

A. Emergency Power Requirements

In accordance with 30 TAC § 217.36 and due to the number and duration of power outages that have occurred in the past, the treatment facility must incorporate an on-site automatically starting generator capable of continuously operating all critical wastewater treatment system units. The fuel tank must be sized for a run time greater than the longest power outage in the power records. This generator will provide sufficient power for the following units:

1. Influent Lift Station Pumps
2. Mechanical Bar Screen
3. Activated Sludge Mechanical Surface Aerators
4. Final Clarifier Sludge Scrapers
5. Return Activated Sludge Pump
6. Chlorination system
7. Dechlorination system
8. Effluent Metering Station
9. Lighting Panels and Control Equipment

An automatic transfer switch will be included to transfer electrical loads to the generator during an outage. In accordance with 30 TAC § 217.37, the disinfection system will automatically restart during a power outage and upon transfer back to the main power source.

B. Alarm Features

The facility will be equipped with a Supervisory Control and Data Acquisition (SCADA) system to monitor the operation of all critical treatment units. The control room will include a computer with graphic display of the treatment units that will indicate status and alarm conditions. The computer system will include an autodialer to alert facility personnel of the following conditions:

1. Power Outage
2. Influent Lift Station Wet Well High Level
3. Bar Screen Channel High Level
4. Final Clarifier Torque Overload
5. Equipment Failure
6. Chlorine Leak Detection
7. Sulfur Dioxide Leak Detection

The autodialer will store prerecorded messages concerning each alarm condition and the procedure to be followed and will call up to 8 different phone numbers until the alarm condition is acknowledged. The influent lift station and final clarifiers will also be equipped with local alarm lights for high level and high torque respectively.

C. Design Features for Reliability And Operating Flexibility

1. Influent lift station: The influent lift station will include three submersible pumps sized to meet peak flow pumping capacity with the largest unit out of service. Level switches will automatically start and stop the pumps based on influent flows and rising and falling wet well levels. High wet well level will result in an alarm condition.
2. Bar screen: The mechanical bar screen structure will include a bypass channel with a manual screen for use when needed. Slide gates will be used to isolate each channel as required.
3. Grit chamber: The grit chamber will include a bypass channel and slide gates to allow the chamber to be taken out of service for maintenance and repair.
4. Aeration basins: Two aeration basins will be included for phase 1 and four for phase 2, each capable of continuous operation. Piping and valves will be included to allow each unit to be individually isolated for draining, cleaning or repairs.
5. Final Clarifiers: Two final clarifiers will be included for phase 1 and three for phase 2, each capable of continuous operation. Piping and valves will be included to allow each unit to be individually isolated for draining, cleaning or repairs.

D. Overflow prevention

The following design features will be used to prevent the overflow of wastewater from treatment units.

1. The facility design includes a peaking factor of 4.0 to insure adequate hydraulic capacity.
2. The influent lift station will be designed with the capacity to pump peak flow with the largest single pump out of service.

The facility hydraulic design, including piping, channels, weirs, troughs and other features, will be sized to allow the 2-hour peak flow to pass through the facility without exceeding minimum freeboard requirements with any single treatment unit out of service.

ATTACHMENT K

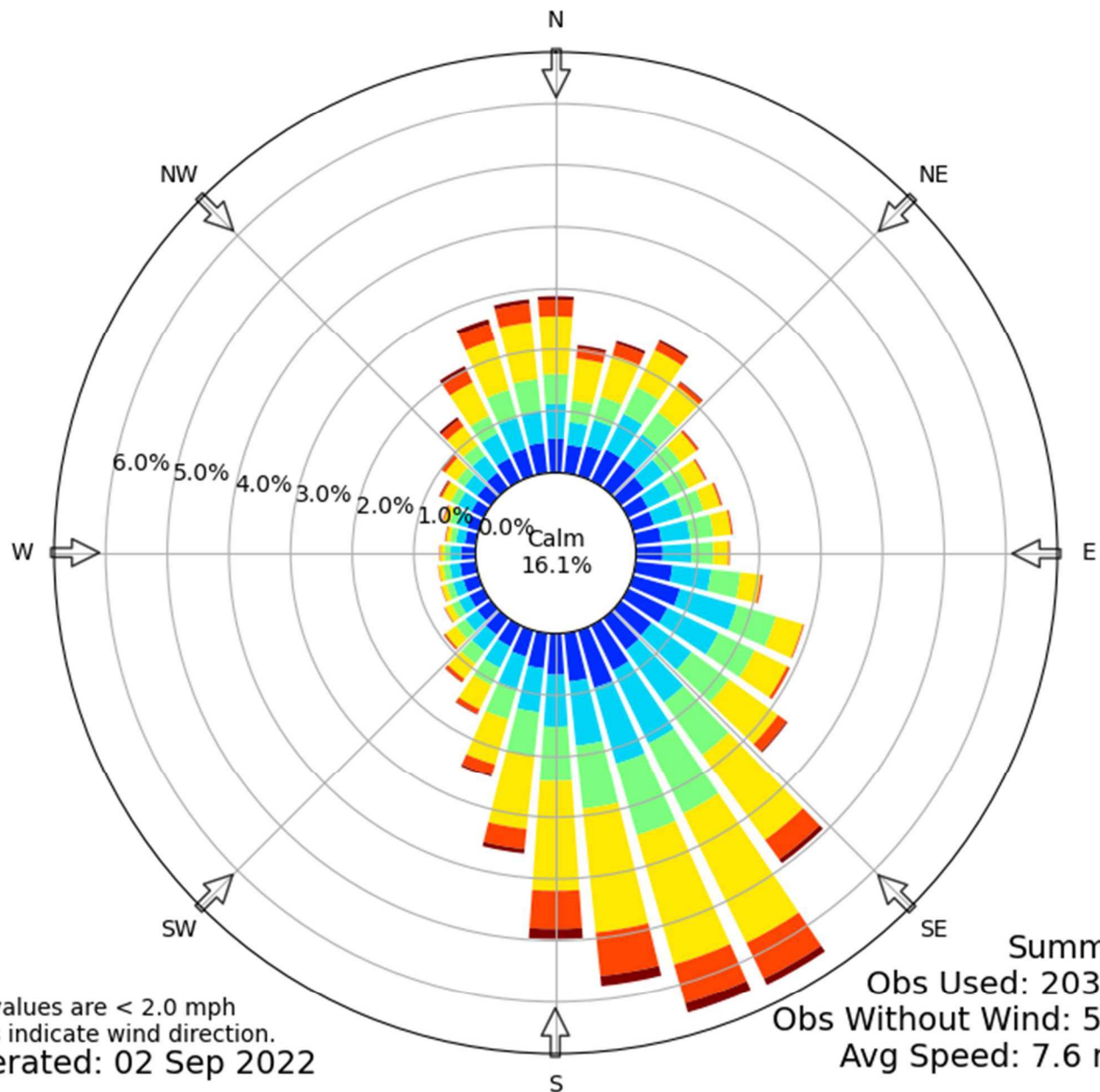
Technical Report 1.1 Item 5.B

WINDROSE



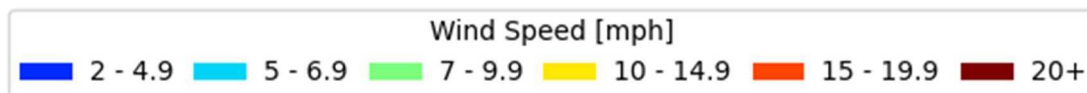
Windrose Plot for [SGR] HOUSTON/HULL FIELD

Obs Between: 01 Jul 1996 05:50 AM - 01 Sep 2022 08:53 PM America/Chicago



Calm values are < 2.0 mph
Arrows indicate wind direction.
Generated: 02 Sep 2022

Summary
Obs Used: 203964
Obs Without Wind: 5139
Avg Speed: 7.6 mph



WINDROSE

East Wastewater Treatment Plant
City of Richmond, Texas

ATTACHMENT L

Technical Report 1.1 Item 7

SOLIDS MANAGEMENT PLAN

Richmond East Wastewater Treatment Plant

Domestic Technical Report 1.0; Section 9

Permit Phase	Interim I
Average Flow (mgd)	2.000

Dimensions and Capacities of Aerobic Digester	
TCEQ Minimum Sludge Retention Time (days)	15
Digester Length (ft)	-
Digester Width (ft)	-
Digester Diameter (ft)	23
Digester (Liquid) Depth (ft)	20
Number of Digesters	1
Digester Volume (c.f.)	8,310
Digester Sludge Retention Time (days)	40

CBOD₅ Removal:	
Influent Concentration (mg/L)	280
Effluent Concentration (mg/L)	20
Net removal (mg/L)	260

Solids Generated	100% Flow	75% Flow	50% Flow	25% Flow
Pounds BOD ₅ /day Removed	4,337	3,253	2,168	1,084
Pounds of Dry Sludge Produced per day (see Note 1)	1,735	1,301	867	434
Pounds of Wet Sludge Produced per day (see Note 2)	115,648	86,736	57,824	28,912
Volume of Wet Sludge per day (gal)	13,867	10,400	6,933	3,467

Note 1: Assumes 0.4 pounds of dry sludge produced per pound of CBOD₅ removed.

Note 2: Assumes 1.5% solids.

MLSS Operating Range = 2,500 mg/L

Sludge stays in the digester, clear liquor is decanted off the digester and returned to the head of the plant. Sludge is intermittently wasted from the clarifier to the digester and returned to the aeration basin.

Removal Schedule (Days)	100% Flow	75% Flow	50% Flow	25% Flow
Days between sludge removal	4	6	9	18

Sludge will be removed from the digester when it is full of thickened solids. Sludge will be hauled by a registered sludge transporter to a permitted site for disposal.

Richmond East Wastewater Treatment Plant

Domestic Technical Report 1.0; Section 9

Permit Phase	Final
Average Flow (mgd)	4.000

Dimensions and Capacities of Aerobic Digester	
TCEQ Minimum Sludge Retention Time (days)	15
Digester Length (ft)	-
Digester Width (ft)	-
Digester Diameter (ft)	23
Digester (Liquid) Depth (ft)	20
Number of Digesters	2
Digester Volume (c.f.)	16,619
Digester Sludge Retention Time (days)	40

CBOD₅ Removal:	
Influent Concentration (mg/L)	280
Effluent Concentration (mg/L)	20
Net removal (mg/L)	260

Solids Generated	100% Flow	75% Flow	50% Flow	25% Flow
Pounds BOD ₅ /day Removed	8,674	6,505	4,337	2,168
Pounds of Dry Sludge Produced per day (see Note 1)	3,469	2,602	1,735	867
Pounds of Wet Sludge Produced per day (see Note 2)	231,296	173,472	115,648	57,824
Volume of Wet Sludge per day (gal)	27,733	20,800	13,867	6,933

Note 1: Assumes 0.4 pounds of dry sludge produced per pound of CBOD₅ removed.

Note 2: Assumes 1.5% solids.

MLSS Operating Range = 2,500 mg/L

Sludge stays in the digester, clear liquor is decanted off the digester and returned to the head of the plant. Sludge is intermittently wasted from the clarifier to the digester and returned to the aeration basin.

Removal Schedule (Days)	100% Flow	75% Flow	50% Flow	25% Flow
Days between sludge removal	4	6	9	18

Sludge will be moved from the digester when it is full of thickened solids. Sludge will be hauled by a registered sludge transporter to a permitted site for disposal.

ATTACHMENT M

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, a Public Involvement Plan is not necessary. Completion of the remaining sections not required.

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

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

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

Section 3. Application Information

Type of Application (check all that apply):

Air ☐ Initial ☐ Federal ☐ Amendment ☐ Standard Permit ☐ Title V

Waste ☐ Municipal Solid Waste ☐ Industrial and Hazardous Waste
 ☐ Radioactive Materials Licensing ☐ Underground Injection Controls

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.

The City of Richmond has planned to build new wastewater treatment facilities that will serve the east portion of the service area. The facilities will be designed considering the future population and future developments within the city's service area.

For that purpose an application to obtain a domestic wastewater discharge permit will be submitted to TCEQ. During the permitting process the city of Richmond will share information regarding the project by means of public notices in newspapers of general circulation in Ford Bend County. Also, a hard copy of the application documents will be available in a county's library for public view.

It will be considered alternative languages spoken in the area, so if necessary, alternative language public notices will be published in a newspaper in that language that has general circulation in the county or city, if available.

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.

Richmond
(City)

Fort Bend
(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 78.5
(b) Per capita income for population near the specified location 24,559
(c) Percent of minority population and percent of population by race within the specified location Hispanic or Latino (50.5%); Black or African American (22.2%), White (21.9%); Asian (4.8%)
(d) Percent of Linguistically Isolated Households by language within the specified location 39.7% Spanish (Language other than english spoken at home)
(e) Languages commonly spoken in area by percentage Not Found
(f) Community and/or Stakeholder Groups N/A
(g) Historic public interest or involvement N/A

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) George Memorial Library, 1001 Golfview Drive, Richmond, Texas 77469

Section 7. Voluntary Submittal

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

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

☒ Yes ☐ No

What types of notice will be provided?

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

ATTACHMENT N

PLAIN LANGUAGE SUMMARY

Plain Language Summary:

English:

The City of Richmond (CN600659031) proposes to operate Richmond East Wastewater Treatment Plant (RN112187869), a municipal activated sludge process plant in complete mix mode. The facility will be located at 600ft North of the intersection of Pitts Road and US 90 Alt., in Richmond, Fort Bend County, Texas 77406. This application is for a new application to discharge at a daily average flow of 4,000,000 gallons per day of treated domestic wastewater.

Discharges from the facility are expected to contain five-day carbonaceous biochemical oxygen demand (CBOD₅), total suspended solids (TSS), ammonia nitrogen (NH₃-N), and Escherichia coli. Domestic wastewater will be treated by an activated sludge process plant and the treatment units will include bar screens, grit chambers, aeration basins, secondary clarifiers, sludge digesters, a belt filter press, chlorine contact basins and a dechlorination channel.

Espanol:

La Ciudad de Richmond (CN600659031) propone operar la Planta de Tratamiento de Aguas Residuales Richmond East (RN112187869), una planta municipal con proceso de lodos activados en modo de mezcla completa. La instalación estará ubicada a 600 pies al norte de la intersección de Pitts Road y US 90 Alt., en Richmond, Condado de Fort Bend, Texas 77406. Esta solicitud es para una nueva autorización para descargar un flujo promedio diario de 4,000,000 de galones por día de aguas residuales domésticas tratadas.

Se espera que las descargas de la instalación contengan demanda bioquímica de oxígeno carbonácea de cinco días (CBOD₅), sólidos suspendidos totales (TSS), nitrógeno amoniacal (NH₃-N) y Escherichia coli.

Las aguas residuales domésticas serán tratadas mediante un proceso de lodos activados, y las unidades de tratamiento incluirán rejillas de desbaste, cámaras de arenas, tanques de aireación, clarificadores secundarios, digestores de lodos, una prensa de bandas, tanques de contacto con cloro y un canal de dechloración.

ATTACHMENT O

LETTERS TO NEARBY WASTEWATER TREATMENT FACILITIES

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE

Certified Mail Fee \$
 Return Receipt (hardcopy) \$
 Return Receipt (electronic) \$
 Certified Mail Restricted Delivery \$
 Adult Signature Required \$
 Adult Signature Restricted Delivery \$
 Postage \$

Total Postage and Fees \$

Sent to: **New Territory WWTP**
 Street and Apt. No.: **P.O. Box 110**
 City, State, ZIP+4®: **Sugar Land, TX 77487-0110**

PS Form 3800, January 2002 PSN 7530-02-000-9053 See Reverse for Instructions

CERTIFIED MAIL®

12141 Wickchester Lane
 Suite 200
 Houston, TX 77079
 GarverUSA.com

9589 0710 5270 2630 5962 79

US POSTAGE 144
 FIRST-CLASS
 OCTOBER 2004
 FROM 76252

New Territory wastewater
 Treatment Plant
 P.O. Box 110
 Sugar Land, TX 77487-0110

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE

Certified Mail Fee \$
 Return Receipt (hardcopy) \$
 Return Receipt (electronic) \$
 Certified Mail Restricted Delivery \$
 Adult Signature Required \$
 Adult Signature Restricted Delivery \$
 Postage \$

Total Postage and Fees \$

Sent to: **New Territory WWTP**
 Street and Apt. No.: **P.O. Box 110**
 City, State, ZIP+4®: **Sugar Land, TX 77487-0110**

PS Form 3800, January 2002 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.
 ■ Print your name and address on the reverse so that we can return the card to you.
 ■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
New Territory waste-water Treatment Plant
P.O. Box 110
Sugar Land, TX 77487-0110

9590 9402 9480 5069 0989 30

2. Article Number (Transfer from service label)
9589 0710 5270 2630 5962 79

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
X

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes ☒ No
 If YES, enter delivery address below:

3. Service Type ☐ Priority Mail Express®
☐ Adult Signature ☐ Registered Mail™
☐ Adult Signature Restricted Delivery ☐ Registered Mail Restricted Delivery
☒ Certified Mail® ☐ Signature Confirmation™
☐ Collect on Delivery ☐ Signature Confirmation Restricted Delivery
☐ Collect on Delivery Restricted Delivery ☐ Restricted Delivery

Domestic Return Receipt

9589 0710 5270 2830 5962 86

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee \$
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage \$
 Total Postage and Fees \$

Sent to **Harvest Green WWTP**
 Street and Apt. No. or PO Box No. **9 Greenway Plz Ste 1100**
 City, State, ZIP+4® **Houston, TX 77046-3653**

PS Form 3800, January 2002 PSN 7530-02-000-9047 See Reverse for Instructions

CERTIFIED MAIL™

12141 Wickchester Lane
Suite 200
Houston, TX 77079
GarverUSA.com

9589 0710 5270 2830 5962 86

Harvest Green WWTP
9 Greenway Plz Ste 1100
Houston, TX 77046-3653

9589 0710 5270 2830 5962 86

US POSTAGE (M)
FIRST CLASS
0633031-660495
FROM 75222

\$5.54 0

9589 0710 5270 2830 5962 86

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee \$
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage \$
 Total Postage and Fees \$

Sent to **Harvest Green WWTP**
 Street and Apt. No. or PO Box No. **9 Greenway Plz Ste 1100**
 City, State, ZIP+4® **Houston, TX 77046-3653**

PS Form 3800, January 2002 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.
 ■ Print your name and address on the reverse so that we can return the card to you.
 ■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
Harvest Green WWTP
9 Greenway Plz Ste 1100
Houston, TX 77046-3653

2. Article Number (Transfer from service label)
 9590 9402 9480 5069 0989 23

3. Service Type
☐ Adult Signature
☒ Certified Mail
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Restricted Delivery

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ X
☐ Agent
☐ Addressee

B. Received by (Printed Name)
 C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt

U.S. Postal Service[®]
CERTIFIED MAIL[®] RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com.

OFFICIAL USE

Sent out
 05/05/25

Postmark
 Here

1. Certified Mail Fee \$
 2. Return Receipt (hardcopy) \$
 3. Return Receipt (electronic) \$
 4. Certified Mail Restricted Delivery \$
 5. Adult Signature Required \$
 6. Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent to: Plantation Crossing WWTP
 Street and Apt. No. or PO Box P.O. Box 79519
 City, State, ZIP+4[®] Houston, TX 77279-9519

PS Form 3800, January 2002 PSN 7530-02-000-9053 See Reverse for Instructions

CERTIFIED MAIL

12141 Wickchester Lane
 Suite 200
 Houston, TX 77079
 GarverUSA.com

9589 0710 5270 2830 5962 55

Plantation Crossing WWTP
 P.O. Box 79519
 Houston, TX 77279-9519

9589 0710 5270 2830 5962 55

USPS 19-02
 \$5.54 0
 US POSTAGE (M)
 FIRST CLASS
 000000-000000
 PSN 7530-02-000-9053

U.S. Postal Service[®]
CERTIFIED MAIL[®] RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com.

OFFICIAL USE

Sent out
 05/05/25

Postmark
 Here

1. Certified Mail Fee \$
 2. Return Receipt (hardcopy) \$
 3. Return Receipt (electronic) \$
 4. Certified Mail Restricted Delivery \$
 5. Adult Signature Required \$
 6. Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent to: Plantation Crossing WWTP
 Street and Apt. No. or PO Box P.O. Box 79519
 City, State, ZIP+4[®] Houston, TX 77279-9519

PS Form 3800, January 2002 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.
 ■ Print your name and address on the reverse so that we can return the card to you.
 ■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
Plantation Crossing WWTP
P.O. Box 79519
Houston, TX 77279-9519

9590 9402 9480 5069 0989 47

2. Article Number (Transfer from service label)
9589 0710 5270 2830 5962 55

PS Form 3811, July 2000 PSN 7530-02-000-9053 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X

B. Received by (Printed Name) _____ C. Date of Delivery _____

D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below: _____

3. Service Type
☐ Adult Signature ☐ Registered Mail™
☐ Adult Signature Restricted Delivery ☐ Registered Mail Restricted Delivery
☒ Certified Mail ☐ Certified Mail Restricted Delivery ☐ Signature Confirmation™
☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery
☐ Restricted Delivery ☐ Restricted Delivery

U.S. Postal Service[™]
CERTIFIED MAIL[®] RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com[®].

OFFICIAL USE

Sent out
05/05/25

Postmark
None

Service Type
☐ Certified Mail Restricted Delivery
☐ Return Receipt Restricted Delivery
☐ Certified Mail Restricted Delivery
☐ Adult Signature Required
☐ Adult Signature Restricted Delivery

Postage
\$5.54

Total Postage and Fees
\$5.54

Send To
 Pecan Grove WWTP
 3200 Southwest Fwy Ste 2600
 Houston, TX 77027-7537

PS Form 3811, January 2020 PSN 7530-02-000-9003 See Reverse for Instructions

12141 Wickchester Lane
 Suite 200
 Houston, TX 77079

GARVER
 GarverUSA.com

CERTIFIED MAIL[®]

9589 0710 5270 2830 5962 62

US POSTAGE IN
 FIRST CLASS
 PERMIT NO. 1000
 HOUSTON, TX 77002

PECAN GROVE WWTP
 3200 Southwest Fwy
 Ste 2600
 Houston, TX 77027-7537

U.S. Postal Service[™]
CERTIFIED MAIL[®] RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com[®].

OFFICIAL USE

Sent out
05/05/25

Postmark
None

Service Type
☐ Certified Mail Restricted Delivery
☐ Return Receipt Restricted Delivery
☐ Certified Mail Restricted Delivery
☐ Adult Signature Required
☐ Adult Signature Restricted Delivery

Postage
\$5.54

Total Postage and Fees
\$5.54

Send To
 Pecan Grove WWTP
 3200 Southwest Fwy Ste 2600
 Houston, TX 77027-7537

PS Form 3811, January 2020 PSN 7530-02-000-9003 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.
 ■ Print your name and address on the reverse so that we can return the card to you.
 ■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 Pecan Grove WWTP
 3200 Southwest Fwy
 Ste 2600
 Houston, TX 77027-7537

2. Article Number (Transfer from service label)
 9589 0710 5270 2830 5962 62

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Agent
☐ Addressee

B. Received by (Printed Name)
☐ Yes
☐ No

C. Date of Delivery

D. Is delivery address different from item 1? If YES, enter delivery address below.

3. Service Type
☐ Adult Signature
☐ Registered Mail[™]
☐ Certified Mail[®]
☐ Certified Mail Restricted Delivery
☐ Signature Confirmation[™]
☐ Signature Confirmation Restricted Delivery
☐ Priority Mail Express[®]
☐ Registered Mail[™]
☐ Registered Mail Restricted Delivery
☐ Signature Confirmation[™]
☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2020 PSN 7530-02-000-9003 Domestic Return Receipt

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee \$
 Return Receipt (hardcopy) \$
 Return Receipt (electronic) \$
 Certified Mail Restricted Delivery \$
 Adult Signature Required \$
 Adult Signature Restricted Delivery \$
 Postage \$

Total Postage and Fees \$

Sent to TDCJ Jester 3 unit
 Street and Apt. No., PO Box No. P.O. Box 4011
 City, State, ZIP+4® Huntsville, TX 77342-4011

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

CERTIFIED MAIL®

12141 Wickchester Lane
 Suite 200
 Houston, TX 77079
 GarverUSA.com

9569 0710 5270 2830 5962 48

TDCJ Jester 3 unit
 P.O. Box 4011
 Huntsville, TX 77342-4011

9569 0710 5270 2830 5962 48

US POSTAGE 100
 FIRST CLASS
 OCT 2021 PERMIT NO. 100
 HUNTSVILLE, AL

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee \$
 Return Receipt (hardcopy) \$
 Return Receipt (electronic) \$
 Certified Mail Restricted Delivery \$
 Adult Signature Required \$
 Adult Signature Restricted Delivery \$
 Postage \$

Total Postage and Fees \$

Sent to TDCJ Jester 3 unit
 Street and Apt. No., PO Box No. P.O. Box 4011
 City, State, ZIP+4® Huntsville, TX 77342-4011

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.
 ■ Print your name and address on the reverse so that we can return the card to you.
 ■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
TDCJ Jester 3 unit
P.O. Box 4011
Huntsville, TX 77342-4011

2. Article Number (Transfer from service label)
9569 0710 5270 2830 5962 48

PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

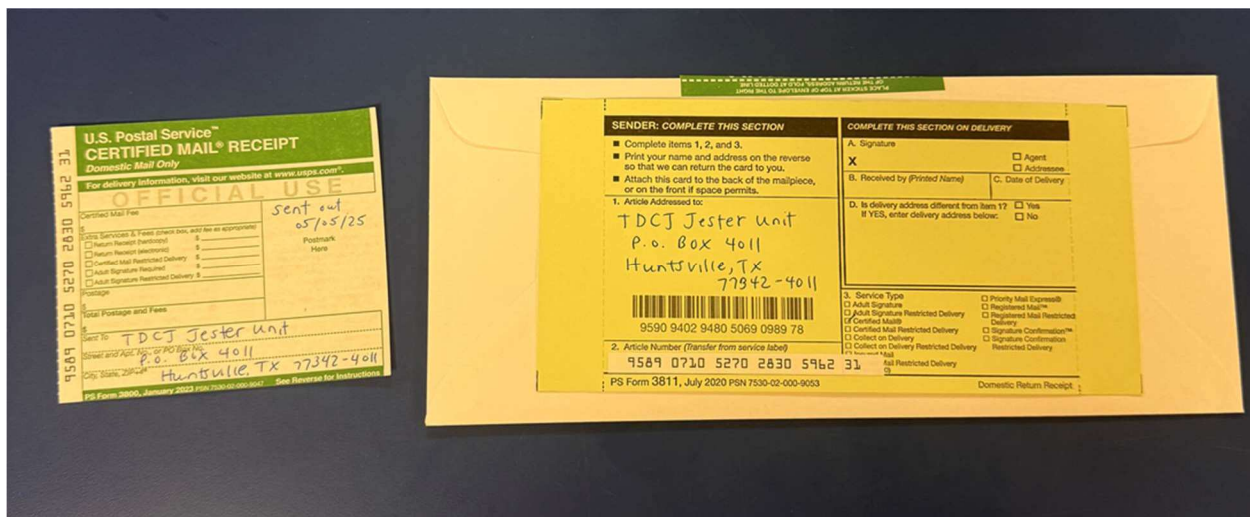
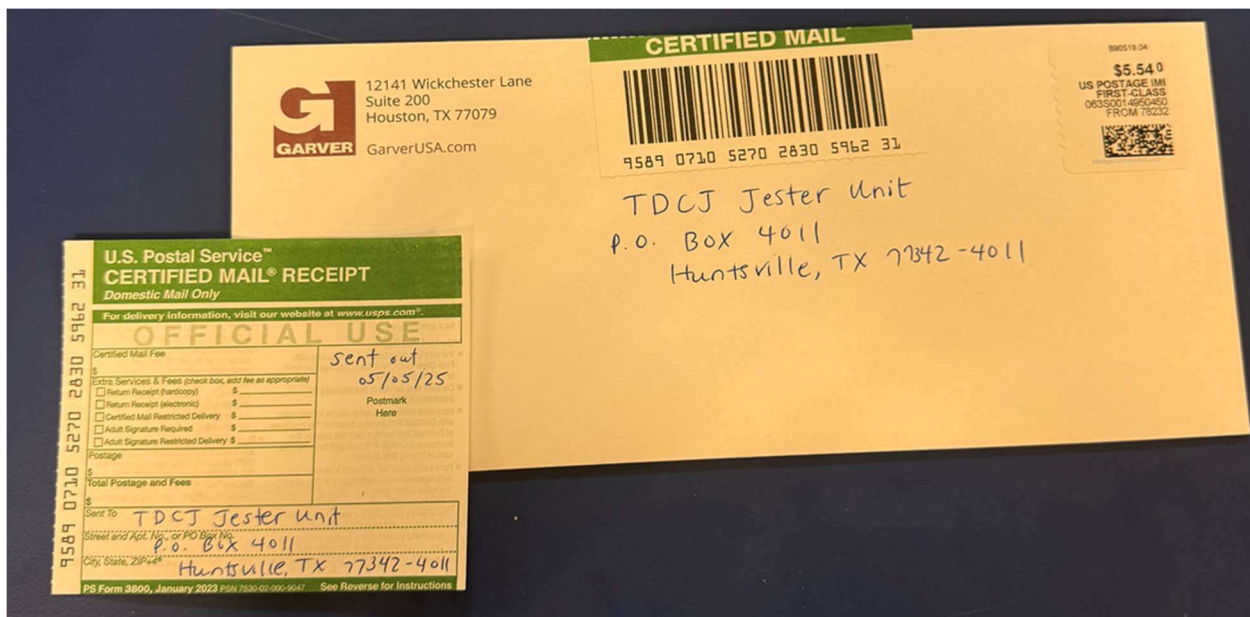
A. Signature X
☐ Agent
☐ Addressee

B. Received by (Printed Name) _____ C. Date of Delivery _____

D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Restricted Delivery

☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery



ATTACHMENT I

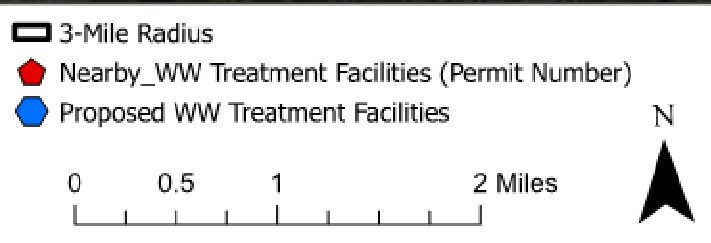
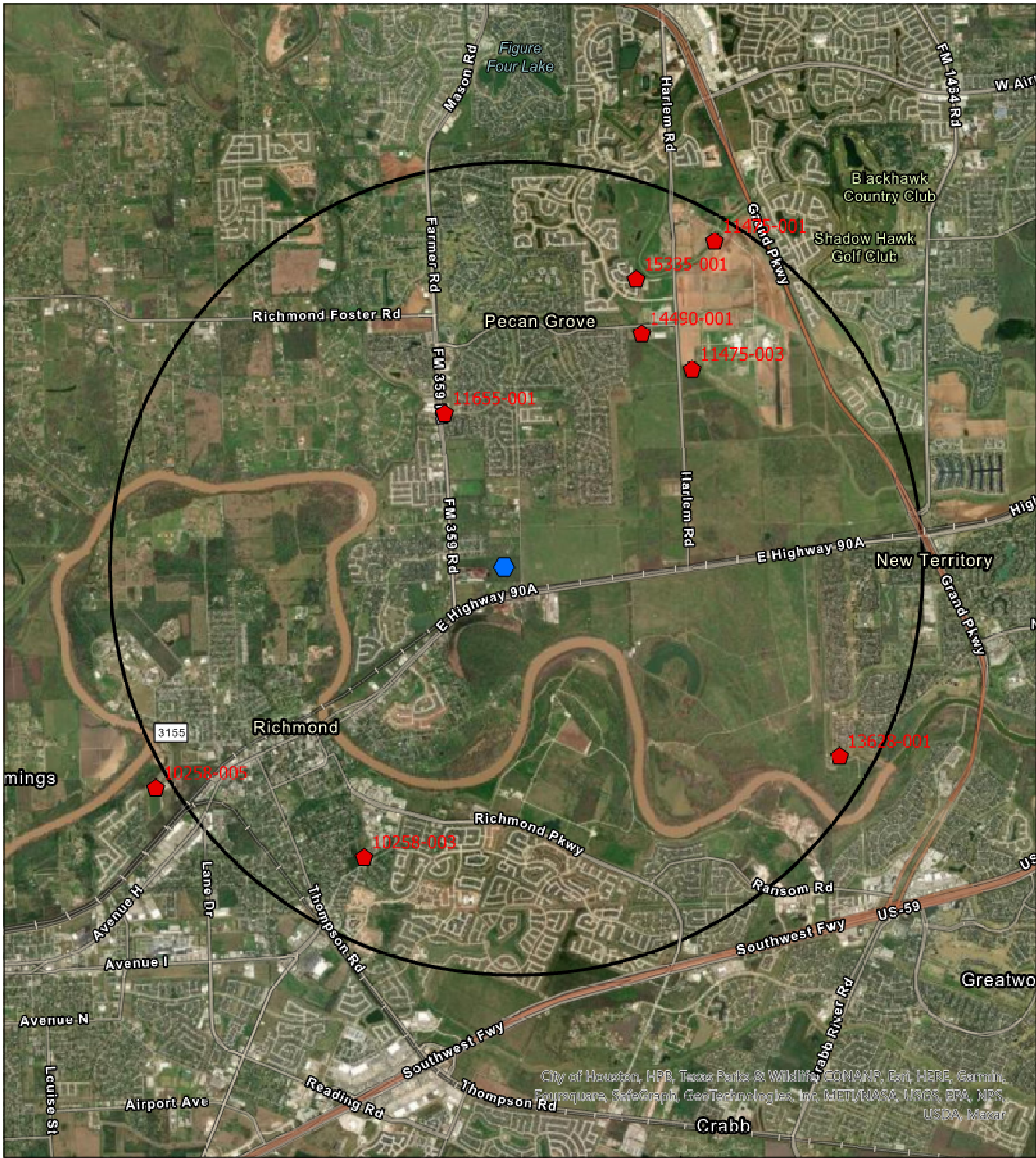
Technical Report 1.1 Item 1.B.3

NEARBY WASTEWATER FACILITIES



NEARBY WASTEWATER FACILITIES LIST

No.	PERMIT_NUM	REGULATED ENTITY NAME	Facility Name	PERMITTEE	PHYSICAL ADDRESS	MAILING ADDRESS	PERMIT STATUS	COUNTY	LAT_DD	LONG_DD
1	15335-001	RN107953705	Harvest Green WWTP	Fort Bend County Mud 134E	1600 Ft N And 800 Ft W Of Interx Plantation Dr And Harlem Rd	9 Greenway Plz Ste 1100 Houston, Tx 77046 - 3653	Active	FORT BEND	29.630001	-95.718889
2	14490-001	RN104149810	Plantation Crossing WWTP	Plantation Crossing Owners Association Inc	1800 Ft W Of Harlem Rd On Plantation Dr 250 Ft S Of Plantation Dr	Po Box 79519 Houston, Tx 77279 -9519	Active	FORT BEND	29.624138	-95.718392
3	11655-001	RN102917283	Pecan Grove WWTP	Pecan Grove Mud	1600 Fm 359 Rd Richmond Tx 77406 1257	3200 Southwest Fwy Ste 2600 Houston, Tx 77027 -7537	Active	FORT BEND	29.616205	-95.742853
4	10258-005	RN101216760	City Of Richmond WWTP	City Of Richmond	Pprox 268 Ft East Of The Intersection Of Rivermoor	402 Morton St Richmond, Tx 77469 -3121	Active	FORT BEND	29.576892	-95.779527
5	13628-001	RN102845930	New Territory Wastewater Treatment Plant	City Of Sugar Land	1000 Feet S Of The Intersection Kyle Hill Lane	Po Box 110 Sugar Land, Tx 77487 -0110	Active	FORT BEND	29.578249	-95.695587
6	11475-001	RN102320322	Tdcj Jester Unit	Texas Dept Of Criminal Justice	4 Miles East Of Richmond On Hwy 90A In Fort Bend County And Tessie Court	Po Box 4011 Huntsville, Tx 77342 -4011	Cancelled	FORT BEND	29.633853	-95.709113
7	11475-003	RN102314671	Tdcj Jester 3 Unit	Texas Dept Of Criminal Justice	3 Jester Rd, Richmond Tx 77406 8544	Po Box 4011 Huntsville, Tx 77342 -4011	Active	FORT BEND	29.620168	-95.71234
8	10258-003	RN102096310	City Of Richmond WWTP	City Of Richmond	220 Legion Dr, On The Northeast Corner Of Rabbs Bayou And Golfview Dr, Approx. 300Ft	402 Morton St Richmond, Tx 77469 -3121	Active	FORT BEND	29.568868	-95.754215



NEARBY WWTPS

East Wastewater Treatment Plant

City of Richmond, Texas

ATTACHMENT J

Technical Report 1.1 Item 4

DESIGN CALCULATIONS

Design Calculations

Influent Quality Characteristics - The raw sewage characteristics used for design purposes are as follows:

<u>Parameter</u>	<u>Concentration</u>
BOD ₅	250 mg/L
TSS	240 mg

Influent Flow Characteristics - The hydraulic design of the facility must ensure that the facility will operate under the most extreme conditions anticipated. The facility process and hydraulic design for this facility are as follows:

Flow	Phase 1-Gallons per Day	Phase 1-Gallons per Day
Average Daily Flow	2,000,000	4,000,000
Peak 2-Hour Flow	8,000,000	16,000,000

Loading	Pounds per Day
BOD ₅	250
TSS	200
NH ₃ -N	35

Process Design - The treatment facility will be designed to produce an effluent quality in compliance with the proposed permitted parameters of:

CBOD₅ = 10 mg/L; TSS = 15 mg/L; NH₃-N = 3 mg/L; DO = 4.0 mg/L;

Cl₂ Residual = 1 to 4 mg/L after 20 minutes detention time at peak flow.

Treatment Units

Table EX4(2) - Aeration Basin

Aeration Basin	Actual Provided
Reactor Type	Plug Flow
Total Aeration Basin Volume	P1: 230,400 ft³ P2: 460,800 ft³
Number of Tanks	P1: 2 P2: 4
Tank Dimensions	Length - 160 ft Width - 40 ft Depth - 18 ft
Design MLSS	3,500 mg/L
Organic Loading Criteria (lbs BOD/1000 ft³)	Avg. Day: 18.9 Max Month: 31.8
Hydraulic Retention Time	Avg. Day: 21 hr Max Month: 15 hr
Solids Retention Time	Avg. Day: 15 day Max Month: 9.0 day
Diffuser Type	Fine Bubble
Control	DO Control with control valves

Table EX4(3) - Clarifier

Clarifier	TCEQ Requires	Actual Provided
Phase 1:		
Surface loading rate (Qpk) (gallons/day/ ft ²)	1,200 (Max)	905
Detention time (Qpk) (hr)	1.8 (Min)	3.2
Number of Clarifiers	--	2
Surface area per Clarifier (ft ²)		4,418
Volume per Clarifier (ft ³)		70,686
Side-water depth (ft)	10 (Min)	16
Maximum weir loading (Qpk) (gallons/day/ft)	30,000 (Max)	18,190
Diameter (ft)	--	75
Weir length (ft)	--	219.9
Phase 2:		
Surface loading rate (Qpk) (gallons/day/ ft ²)	1,200 (Max)	1,200
Detention time (Qpk) (hr)	1.8 (Min)	2.4
Number of Clarifiers	--	3
Surface area per Clarifier (ft ²)		4,418

Volume per Clarifier (ft3)		70,686
Side-water depth (ft)	10 (Min)	16
Maximum weir loading (Qpk) (gallons/day/ft)	30,000 (Max)	24,252
Diameter (ft)	--	75
Weir length (ft)	--	219.9

Table EX4(4) - Aerated Sludge Holding Tanks

Parameter	Design Criteria	Discussion
Min. Solids Retention Time	P1 Avg. Day: 7 days P1 MM: 4 days	Provides capacity to waste for weekend without solids disposal
Total Volume	400,000 gallons or 54,000 ft3	Phase 1 only (double for Phase 2)
Number of Tanks	2	Redundancy for shutdowns, batch, or sequence
Tank Dimensions	Length - 72 ft Width - 25 ft Depth - 15 ft	Each Tank provides 27,000 ft3
Aeration Demand	Total: 1,620 Per Tank: 810	Designed for 30 SCFM per 1,000 ft3 of tank volume
Blower Type	Positive Displacement	
Number of Blowers	3	One each per tank with swing spare
Diffuser Type	Coarse Bubble	2-inch drop diffusers
Decant Provisions	Telescoping Valves	Assisted Manual with time-based programming
Electrical, Instrumentation and Controls	Solids Electrical Building	Major equipment (blower starters/VFDs, solids PLC, etc.) housed in solids electrical building

Table EX4(5) - Chlorine Contact Chamber

Chlorine Contact Chamber	TCEQ Requires	Actual Provided
Phase 1:		
Detention time (Qpk) (minutes)	20	21.5
Volume (Qpk) (ft3)	--	16,000
Phase 2:		
Detention time (Qpk) (minutes)	20	21.5

Volume (Qpk) (ft3)	--	32,000
--------------------	----	--------

Table EX4(6) – RAS and WAS Pump System

RAS Return Ratio	Min: 0.65x Max: 1.3x	
Phase 1 - RAS Flowrate	Min: 1.3 MGD Max: 2.6 MGD	
Phase 2 - RAS Flowrate	Min: 2.6 MGD Max: 5.2 MGD	
Number of RAS Pumps	P1: 3 P2: 4	Includes one pump on standby.
Number of WAS Pumps	P1: 2 P2: 3	

Air Requirements

Table EX4(6) – Aeration Blower System

Parameter	Design Criteria	Discussion
Air Demand Considerations	Mixing, BOD Removal, Nitrification	Aeration demand for each parameter analyzed
Diffuser Fouling Factor	0.9	
Alpha Factor	0.5	
Diffuser Submergence	17 ft	
Effective Oxygen Transfer Efficiency	34%	Assumes 2% OTE/ft of submergence
Standard Oxygen Requirement	Phase 1 MM: 32,000 lb O ₂ /d Phase 2 MM: 64,000 lb O ₂ /d	Oxygen required for BOD and Nitrification
Total Aeration Requirement	Phase 1 MM: 4,990 SCFM Phase 2 MM: 9,910 SCFM	Safety Factor of 1.33 is used to convert max month demand to peak day
Number of Blowers	Phase 1: 3 Phase 2: 5	Includes one standby blower per phase
Anticipated Blower Design Point	Flow: 2,500 SCFM Pressure: 8.4 psig	
Anticipated Blower Turndown	62%	
Blower Efficiency	0.65	
Blower HP	125 HP	
Blower Control	Header Pressure Control	Maintain header pressure by varying number in service and output of blowers

Facility design features

A. Emergency Power Requirements

In accordance with 30 TAC § 217.36 and due to the number and duration of power outages that have occurred in the past, the treatment facility must incorporate an on-site automatically starting generator capable of continuously operating all critical wastewater treatment system units. The fuel tank must be sized for a run time greater than the longest power outage in the power records. This generator will provide sufficient power for the following units:

1. Influent Lift Station Pumps
2. Mechanical Bar Screen
3. Activated Sludge Mechanical Surface Aerators
4. Final Clarifier Sludge Scrapers
5. Return Activated Sludge Pump
6. Chlorination system
7. Dechlorination system
8. Effluent Metering Station
9. Lighting Panels and Control Equipment

An automatic transfer switch will be included to transfer electrical loads to the generator during an outage. In accordance with 30 TAC § 217.37, the disinfection system will automatically restart during a power outage and upon transfer back to the main power source.

B. Alarm Features

The facility will be equipped with a Supervisory Control and Data Acquisition (SCADA) system to monitor the operation of all critical treatment units. The control room will include a computer with graphic display of the treatment units that will indicate status and alarm conditions. The computer system will include an autodialer to alert facility personnel of the following conditions:

1. Power Outage
2. Influent Lift Station Wet Well High Level
3. Bar Screen Channel High Level
4. Final Clarifier Torque Overload
5. Equipment Failure
6. Chlorine Leak Detection
7. Sulfur Dioxide Leak Detection

The autodialer will store prerecorded messages concerning each alarm condition and the procedure to be followed and will call up to 8 different phone numbers until the alarm condition is acknowledged. The influent lift station and final clarifiers will also be equipped with local alarm lights for high level and high torque respectively.

C. Design Features for Reliability And Operating Flexibility

1. Influent lift station: The influent lift station will include three submersible pumps sized to meet peak flow pumping capacity with the largest unit out of service. Level switches will automatically start and stop the pumps based on influent flows and rising and falling wet well levels. High wet well level will result in an alarm condition.
2. Bar screen: The mechanical bar screen structure will include a bypass channel with a manual screen for use when needed. Slide gates will be used to isolate each channel as required.
3. Grit chamber: The grit chamber will include a bypass channel and slide gates to allow the chamber to be taken out of service for maintenance and repair.
4. Aeration basins: Two aeration basins will be included for phase 1 and four for phase 2, each capable of continuous operation. Piping and valves will be included to allow each unit to be individually isolated for draining, cleaning or repairs.
5. Final Clarifiers: Two final clarifiers will be included for phase 1 and three for phase 2, each capable of continuous operation. Piping and valves will be included to allow each unit to be individually isolated for draining, cleaning or repairs.

D. Overflow prevention

The following design features will be used to prevent the overflow of wastewater from treatment units.

1. The facility design includes a peaking factor of 4.0 to insure adequate hydraulic capacity.
2. The influent lift station will be designed with the capacity to pump peak flow with the largest single pump out of service.

The facility hydraulic design, including piping, channels, weirs, troughs and other features, will be sized to allow the 2-hour peak flow to pass through the facility without exceeding minimum freeboard requirements with any single treatment unit out of service.

ATTACHMENT K

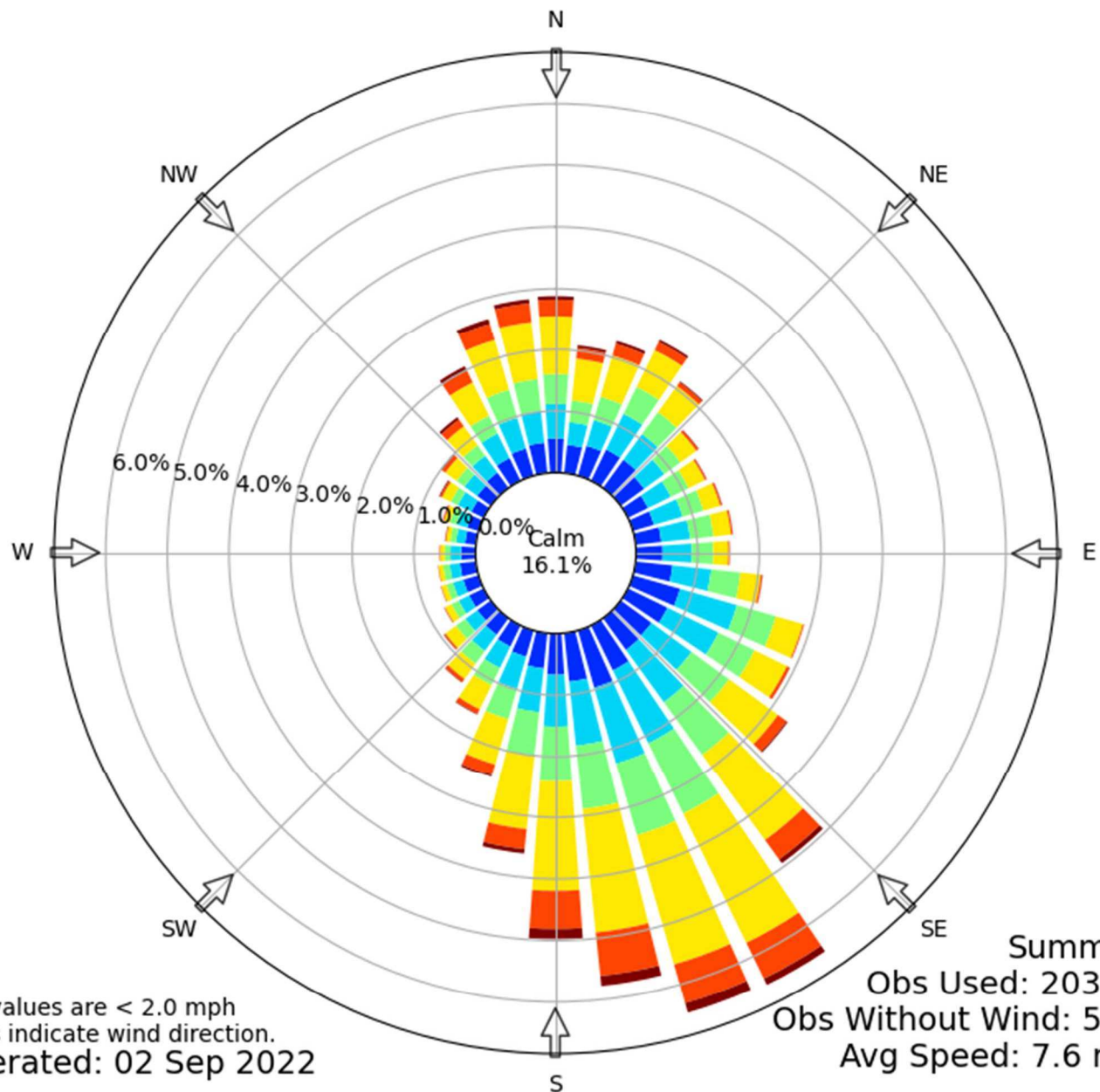
Technical Report 1.1 Item 5.B

WINDROSE



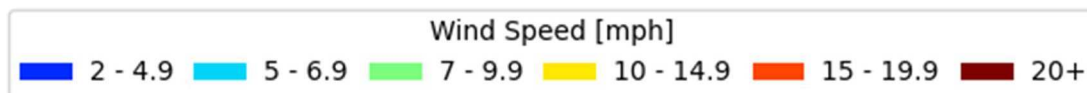
Windrose Plot for [SGR] HOUSTON/HULL FIELD

Obs Between: 01 Jul 1996 05:50 AM - 01 Sep 2022 08:53 PM America/Chicago



Calm values are < 2.0 mph
Arrows indicate wind direction.
Generated: 02 Sep 2022

Summary
Obs Used: 203964
Obs Without Wind: 5139
Avg Speed: 7.6 mph



WINDROSE

East Wastewater Treatment Plant
City of Richmond, Texas

ATTACHMENT L

Technical Report 1.1 Item 7

SOLIDS MANAGEMENT PLAN

Richmond East Wastewater Treatment Plant

Domestic Technical Report 1.0; Section 9

Permit Phase	Interim I
Average Flow (mgd)	2.000

Dimensions and Capacities of Aerobic Digester	
TCEQ Minimum Sludge Retention Time (days)	15
Digester Length (ft)	-
Digester Width (ft)	-
Digester Diameter (ft)	23
Digester (Liquid) Depth (ft)	20
Number of Digesters	1
Digester Volume (c.f.)	8,310
Digester Sludge Retention Time (days)	40

CBOD₅ Removal:	
Influent Concentration (mg/L)	280
Effluent Concentration (mg/L)	20
Net removal (mg/L)	260

Solids Generated	100% Flow	75% Flow	50% Flow	25% Flow
Pounds BOD ₅ /day Removed	4,337	3,253	2,168	1,084
Pounds of Dry Sludge Produced per day (see Note 1)	1,735	1,301	867	434
Pounds of Wet Sludge Produced per day (see Note 2)	115,648	86,736	57,824	28,912
Volume of Wet Sludge per day (gal)	13,867	10,400	6,933	3,467

Note 1: Assumes 0.4 pounds of dry sludge produced per pound of CBOD₅ removed.

Note 2: Assumes 1.5% solids.

MLSS Operating Range = 2,500 mg/L

Sludge stays in the digester, clear liquor is decanted off the digester and returned to the head of the plant. Sludge is intermittently wasted from the clarifier to the digester and returned to the aeration basin.

Removal Schedule (Days)	100% Flow	75% Flow	50% Flow	25% Flow
Days between sludge removal	4	6	9	18

Sludge will be removed from the digester when it is full of thickened solids. Sludge will be hauled by a registered sludge transporter to a permitted site for disposal.

Richmond East Wastewater Treatment Plant

Domestic Technical Report 1.0; Section 9

Permit Phase	Final
Average Flow (mgd)	4.000

Dimensions and Capacities of Aerobic Digester	
TCEQ Minimum Sludge Retention Time (days)	15
Digester Length (ft)	-
Digester Width (ft)	-
Digester Diameter (ft)	23
Digester (Liquid) Depth (ft)	20
Number of Digesters	2
Digester Volume (c.f.)	16,619
Digester Sludge Retention Time (days)	40

CBOD₅ Removal:	
Influent Concentration (mg/L)	280
Effluent Concentration (mg/L)	20
Net removal (mg/L)	260

Solids Generated	100% Flow	75% Flow	50% Flow	25% Flow
Pounds BOD ₅ /day Removed	8,674	6,505	4,337	2,168
Pounds of Dry Sludge Produced per day (see Note 1)	3,469	2,602	1,735	867
Pounds of Wet Sludge Produced per day (see Note 2)	231,296	173,472	115,648	57,824
Volume of Wet Sludge per day (gal)	27,733	20,800	13,867	6,933

Note 1: Assumes 0.4 pounds of dry sludge produced per pound of CBOD₅ removed.

Note 2: Assumes 1.5% solids.

MLSS Operating Range = 2,500 mg/L

Sludge stays in the digester, clear liquor is decanted off the digester and returned to the head of the plant. Sludge is intermittently wasted from the clarifier to the digester and returned to the aeration basin.

Removal Schedule (Days)	100% Flow	75% Flow	50% Flow	25% Flow
Days between sludge removal	4	6	9	18

Sludge will be moved from the digester when it is full of thickened solids. Sludge will be hauled by a registered sludge transporter to a permitted site for disposal.

ATTACHMENT M

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, a Public Involvement Plan is not necessary. Completion of the remaining sections not required.

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

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

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

Section 3. Application Information

Type of Application (check all that apply):

Air ☐ Initial ☐ Federal ☐ Amendment ☐ Standard Permit ☐ Title V

Waste ☐ Municipal Solid Waste ☐ Industrial and Hazardous Waste
 ☐ Radioactive Materials Licensing ☐ Underground Injection Controls

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.

The City of Richmond has planned to build new wastewater treatment facilities that will serve the east portion of the service area. The facilities will be designed considering the future population and future developments within the city's service area.

For that purpose an application to obtain a domestic wastewater discharge permit will be submitted to TCEQ. During the permitting process the city of Richmond will share information regarding the project by means of public notices in newspapers of general circulation in Ford Bend County. Also, a hard copy of the application documents will be available in a county's library for public view.

It will be considered alternative languages spoken in the area, so if necessary, alternative language public notices will be published in a newspaper in that language that has general circulation in the county or city, if available.

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.

Richmond
(City)

Fort Bend
(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 78.5
(b) Per capita income for population near the specified location 24,559
(c) Percent of minority population and percent of population by race within the specified location Hispanic or Latino (50.5%); Black or African American (22.2%), White (21.9%); Asian (4.8%)
(d) Percent of Linguistically Isolated Households by language within the specified location 39.7% Spanish (Language other than english spoken at home)
(e) Languages commonly spoken in area by percentage Not Found
(f) Community and/or Stakeholder Groups N/A
(g) Historic public interest or involvement N/A

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) George Memorial Library, 1001 Golfview Drive, Richmond, Texas 77469

Section 7. Voluntary Submittal For applicants voluntarily providing this Public Involvement Plan, who are not subject to formal public participation requirements.
Will you provide notice of this application, including notice in alternative languages? ☒ Yes ☐ No
What types of notice will be provided? ☒ Publish in alternative language newspaper ☐ Posted on Commissioner's Integrated Database Website ☐ Mailed by TCEQ's Office of the Chief Clerk ☐ Other (specify)

ATTACHMENT N

PLAIN LANGUAGE SUMMARY

Plain Language Summary:

English:

The City of Richmond (CN600659031) proposes to operate Richmond East Wastewater Treatment Plant (RN112187869), a municipal activated sludge process plant in complete mix mode. The facility will be located at 600ft North of the intersection of Pitts Road and US 90 Alt., in Richmond, Fort Bend County, Texas 77406. This application is for a new application to discharge at a daily average flow of 4,000,000 gallons per day of treated domestic wastewater.

Discharges from the facility are expected to contain five-day carbonaceous biochemical oxygen demand (CBOD₅), total suspended solids (TSS), ammonia nitrogen (NH₃-N), and Escherichia coli. Domestic wastewater will be treated by an activated sludge process plant and the treatment units will include bar screens, grit chambers, aeration basins, secondary clarifiers, sludge digesters, a belt filter press, chlorine contact basins and a dechlorination channel.

Espanol:

La Ciudad de Richmond (CN600659031) propone operar la Planta de Tratamiento de Aguas Residuales Richmond East (RN112187869), una planta municipal con proceso de lodos activados en modo de mezcla completa. La instalación estará ubicada a 600 pies al norte de la intersección de Pitts Road y US 90 Alt., en Richmond, Condado de Fort Bend, Texas 77406. Esta solicitud es para una nueva autorización para descargar un flujo promedio diario de 4,000,000 de galones por día de aguas residuales domésticas tratadas.

Se espera que las descargas de la instalación contengan demanda bioquímica de oxígeno carbonácea de cinco días (CBOD₅), sólidos suspendidos totales (TSS), nitrógeno amoniacal (NH₃-N) y Escherichia coli.

Las aguas residuales domésticas serán tratadas mediante un proceso de lodos activados, y las unidades de tratamiento incluirán rejillas de desbaste, cámaras de arenas, tanques de aireación, clarificadores secundarios, digestores de lodos, una prensa de bandas, tanques de contacto con cloro y un canal de dechloración.

ATTACHMENT O

LETTERS TO NEARBY WASTEWATER TREATMENT FACILITIES

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE

1569 0710 5270 2630 5962 79

Sent out
05/05/25

Postmark
Here

1. Certified Mail Fee \$

2. Return Receipt (hardcopy) \$

3. Return Receipt (electronic) \$

4. Certified Mail Restricted Delivery \$

5. Adult Signature Required \$

6. Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent to: New Territory WWTP

Street and Apt. No.: P.O. Box 110

City, State, ZIP+4®: Sugar Land, TX 77487-0110

PS Form 3800, January 2002 PSN 7530-02-000-9053 See Reverse for Instructions

CERTIFIED MAIL®

12141 Wickchester Lane
 Suite 200
 Houston, TX 77079
 GarverUSA.com

9569 0710 5270 2630 5962 79

USPS 15 01
\$5.54 0
 US POSTAGE 1st
 FIRST-CLASS
 OCTOBER 4, 2025
 FROM 76252

New Territory wastewater
 Treatment Plant
 P.O. Box 110
 Sugar Land, TX 77487-0110

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE

1569 0710 5270 2630 5962 79

Sent out
05/05/25

Postmark
Here

1. Certified Mail Fee \$

2. Return Receipt (hardcopy) \$

3. Return Receipt (electronic) \$

4. Certified Mail Restricted Delivery \$

5. Adult Signature Required \$

6. Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent to: New Territory WWTP

Street and Apt. No.: P.O. Box 110

City, State, ZIP+4®: Sugar Land, TX 77487-0110

PS Form 3800, January 2002 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.
 ■ Print your name and address on the reverse so that we can return the card to you.
 ■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 New Territory waste-
 water Treatment Plant
 P.O. Box 110
 Sugar Land, TX 77487-0110

9590 9402 9480 5069 0989 30

2. Article Number (Transfer from service label)
 9569 0710 5270 2630 5962 79

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
☒ Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type ☐ Priority Mail Express®
☐ Adult Signature ☐ Registered Mail™
☐ Adult Signature Restricted Delivery ☐ Registered Mail Restricted Delivery
☐ Certified Mail® ☐ Signature Confirmation™
☐ Collect on Delivery ☐ Signature Confirmation Restricted Delivery
☐ Collect on Delivery Restricted Delivery ☐ Restricted Delivery

Domestic Return Receipt

9589 0710 5270 2830 5962 86

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com™.

OFFICIAL USE

Certified Mail Fee \$
 Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage \$
 Total Postage and Fees \$

Sent to **Harvest Green WWTP**
 Street and Apt. No. or PO Box No. **9 Greenway Plz Ste 1100**
 City, State, ZIP+4® **Houston, TX 77046-3653**

PS Form 3800, January 2002 PSN 7530-02-000-9047 See Reverse for Instructions

CERTIFIED MAIL™

12141 Wickchester Lane
 Suite 200
 Houston, TX 77079
 GarverUSA.com

9589 0710 5270 2830 5962 86

Harvest Green WWTP
 9 Greenway Plz Ste 1100
 Houston, TX 77046-3653

9589 0710 5270 2830 5962 86

US POSTAGE (M)
 FIRST CLASS
 063037-660450
 FROM 75222

9589 0710 5270 2830 5962 86

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com™.

OFFICIAL USE

Certified Mail Fee \$
 Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage \$
 Total Postage and Fees \$

Sent to **Harvest Green WWTP**
 Street and Apt. No. or PO Box No. **9 Greenway Plz Ste 1100**
 City, State, ZIP+4® **Houston, TX 77046-3653**

PS Form 3800, January 2002 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.
 ■ Print your name and address on the reverse so that we can return the card to you.
 ■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
Harvest Green WWTP
9 Greenway Plz Ste 1100
Houston, TX 77046-3653

2. Article Number (Transfer from service label)
 9590 9402 9480 5069 0989 23

3. Service Type
☒ Adult Signature
☐ Certified Mail
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Restricted Delivery

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Agent
☐ Addressee

B. Received by (Printed Name)
 C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

9589 0710 5270 2830 5962 86

PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE

Sent out
 05/05/25

Postmark
 Here

1. Certified Mail Fee \$
 2. Return Receipt (hardcopy) \$
 3. Return Receipt (electronic) \$
 4. Certified Mail Restricted Delivery \$
 5. Adult Signature Required \$
 6. Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent to: Plantation Crossing WWTP
 Street and Apt. No. or PO Box P.O. Box 79519
 City, State, ZIP+4® Houston, TX 77279-9519

PS Form 3800, January 2002 PSN 7530-02-000-9053 See Reverse for Instructions

CERTIFIED MAIL

12141 Wickchester Lane
 Suite 200
 Houston, TX 77079
 GarverUSA.com

9589 0710 5270 2830 5962 55

Plantation Crossing WWTP
 P.O. Box 79519
 Houston, TX 77279-9519

9589 0710 5270 2830 5962 55

USPS 19-02
 \$5.54 0
 US POSTAGE 18M
 FIRST CLASS
 000000-000000
 PSN 7530-02-000-9053

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE

Sent out
 05/05/25

Postmark
 Here

1. Certified Mail Fee \$
 2. Return Receipt (hardcopy) \$
 3. Return Receipt (electronic) \$
 4. Certified Mail Restricted Delivery \$
 5. Adult Signature Required \$
 6. Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent to: Plantation Crossing WWTP
 Street and Apt. No. or PO Box P.O. Box 79519
 City, State, ZIP+4® Houston, TX 77279-9519

PS Form 3800, January 2002 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.
 ■ Print your name and address on the reverse so that we can return the card to you.
 ■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
Plantation Crossing WWTP
P.O. Box 79519
Houston, TX 77279-9519

9590 9402 9480 5069 0989 47

2. Article Number (Transfer from service label)
9589 0710 5270 2830 5962 55

PS Form 3811, July 2000 PSN 7530-02-000-9053 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X

B. Received by (Printed Name) _____

C. Date of Delivery _____

D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below: _____

3. Service Type
☐ Adult Signature ☐ Priority Mail Express®
☐ Adult Signature Restricted Delivery ☐ Registered Mail™
☒ Certified Mail® ☐ Registered Mail Restricted Delivery
☐ Certified Mail Restricted Delivery ☐ Signature Confirmation™
☐ Collect on Delivery ☐ Signature Confirmation Restricted Delivery
☐ Restricted Delivery ☐ Restricted Delivery

U.S. Postal Service[™]
CERTIFIED MAIL[®] RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com[®].

OFFICIAL USE

Sent out
05/05/25

Postmark
None

Service Type
☐ Certified Mail Restricted Delivery
☐ Return Receipt Restricted Delivery
☐ Certified Mail Restricted Delivery
☐ Adult Signature Required
☐ Adult Signature Restricted Delivery

Postage
\$5.54

Total Postage and Fees
\$5.54

Send To
 Pecan Grove WWTP
 3200 Southwest Fwy Ste 2600
 Houston, TX 77027-7537

PS Form 3811, January 2020 PSN 7530-02-000-9003 See Reverse for Instructions

12141 Wickchester Lane
 Suite 200
 Houston, TX 77079

GARVER
 GarverUSA.com

CERTIFIED MAIL[®]

9589 0710 5270 2830 5962 62

US POSTAGE IN
 FIRST CLASS
 PERMIT NO. 1000
 HOUSTON, TX 77002

PECAN GROVE WWTP
 3200 Southwest Fwy
 Ste 2600
 Houston, TX 77027-7537

U.S. Postal Service[™]
CERTIFIED MAIL[®] RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com[®].

OFFICIAL USE

Sent out
05/05/25

Postmark
None

Service Type
☐ Certified Mail Restricted Delivery
☐ Return Receipt Restricted Delivery
☐ Certified Mail Restricted Delivery
☐ Adult Signature Required
☐ Adult Signature Restricted Delivery

Postage
\$5.54

Total Postage and Fees
\$5.54

Send To
 Pecan Grove WWTP
 3200 Southwest Fwy Ste 2600
 Houston, TX 77027-7537

PS Form 3811, January 2020 PSN 7530-02-000-9003 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.
 ■ Print your name and address on the reverse so that we can return the card to you.
 ■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 Pecan Grove WWTP
 3200 Southwest Fwy
 Ste 2600
 Houston, TX 77027-7537

2. Article Number (Transfer from service label)
 9589 0710 5270 2830 5962 62

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Agent
☐ Addressee

B. Received by (Printed Name)
☐ Yes
☐ No

C. Date of Delivery

D. Is delivery address different from item 1? If YES, enter delivery address below.

3. Service Type
☐ Adult Signature
☐ Registered Mail[™]
☐ Certified Mail[®]
☐ Certified Mail Restricted Delivery
☐ Signature Confirmation[™]
☐ Signature Confirmation Restricted Delivery
☐ Priority Mail Express[®]
☐ Registered Mail[™]
☐ Registered Mail Restricted Delivery
☐ Signature Confirmation[™]
☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2020 PSN 7530-02-000-9003 Domestic Return Receipt

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee \$
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$
 Total Postage and Fees \$

Sent to TDCJ Jester 3 unit
 Street and Apt. No., PO Box No. P.O. Box 4011
 City, State, ZIP+4® Huntsville, TX 77342-4011

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

CERTIFIED MAIL®

12141 Wickchester Lane
 Suite 200
 Houston, TX 77079
 GarverUSA.com

9569 0710 5270 2830 5962 48

TDCJ Jester 3 unit
 P.O. Box 4011
 Huntsville, TX 77342-4011

9569 0710 5270 2830 5962 48

US POSTAGE 55.540
 FIRST CLASS
 OCT 2021-APR 2022
 FROM TEXAS

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee \$
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$
 Total Postage and Fees \$

Sent to TDCJ Jester 3 unit
 Street and Apt. No., PO Box No. P.O. Box 4011
 City, State, ZIP+4® Huntsville, TX 77342-4011

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.
 ■ Print your name and address on the reverse so that we can return the card to you.
 ■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
TDCJ Jester 3 unit
P.O. Box 4011
Huntsville, TX 77342-4011

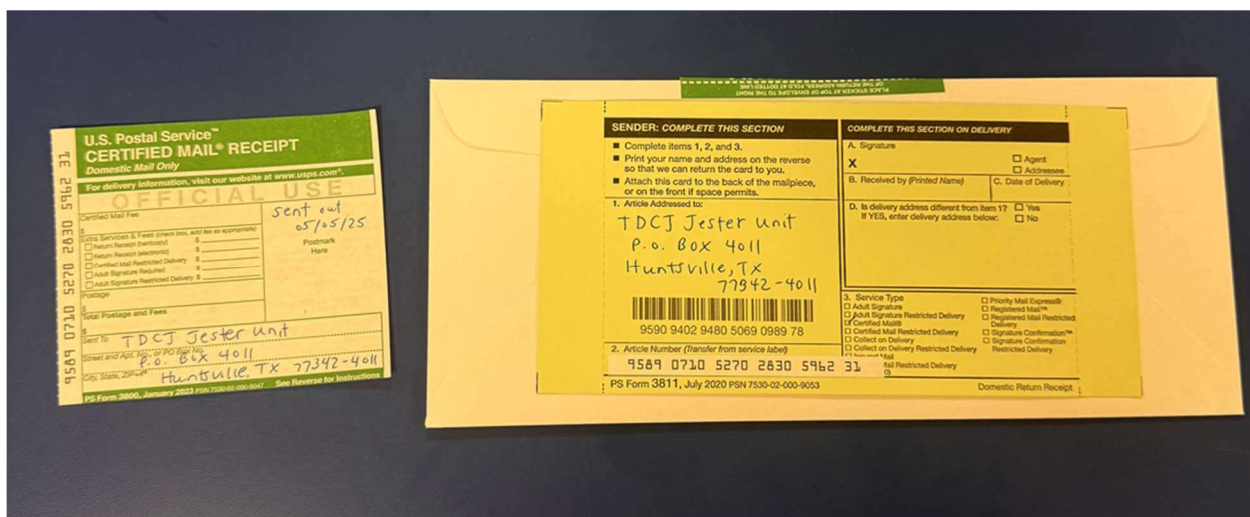
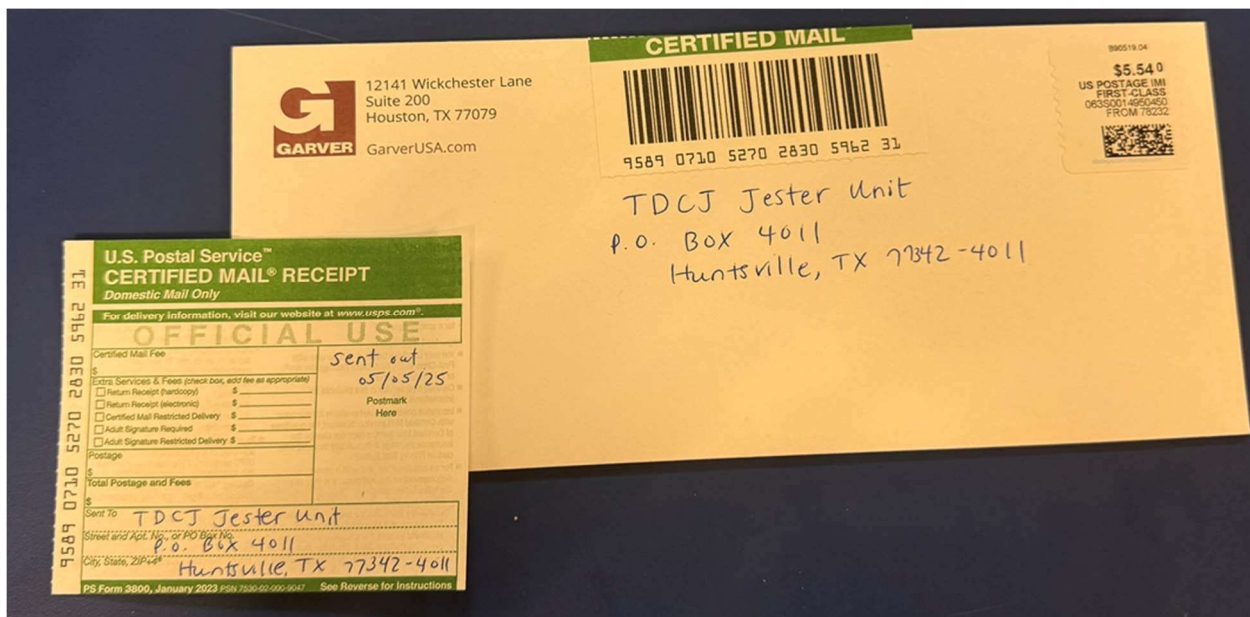
2. Article Number (Transfer from service label)
9569 0710 5270 2830 5962 48

PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
 B. Received by (Printed Name) C. Date of Delivery
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type
☐ Adult Signature ☐ Priority Mail Express®
☐ Adult Signature Restricted Delivery ☐ Registered Mail™
☐ Certified Mail® ☐ Registered Mail Restricted Delivery
☐ Certified Mail Restricted Delivery ☐ Signature Confirmation™
☐ Collect on Delivery ☐ Signature Confirmation Restricted Delivery
☐ Collect on Delivery Restricted Delivery ☐ Restricted Delivery



Francesca Findlay

From: Macmanus, Alec R. <ARMacmanus@GarverUSA.com>
Sent: Wednesday, April 23, 2025 6:39 PM
To: Francesca Findlay
Cc: Hann,Tyson O.
Subject: RE: WQ0016767001 - Spanish NORI Questions
Attachments: Municipal Discharge Spanish NORI.docx

Follow Up Flag: Follow up
Flag Status: Flagged

Ms. Findlay,

The revised permit application has been uploaded to the TCEQ's FTPS site . We addressed the items as follows:

1. The administrative and technical report were replaced with current application forms.
2. City and State were added to Administrative Report 1.0, Section 4, item A.
3. A distance was added in our description of the physical location in the Core Data Form, Section 3, item 25.
4. Core Data Form, Section 5 (Authorized Signature) is included.
5. Plain Language Summary in English and Spanish are included as Attachment N.
6. Spanish NORI as a word file is attached. Please revise the file as discussed below.
7. An updated Affected Landowner's Map is provided as Attachment C.
8. A full size USGS map in 8.5 by 11-inch portions is included as Attachment B.
9. Please revise the NORI with the changes shown in **red** below:

APPLICATION. City of Richmond, 600 Morton Street, Richmond, Texas 77469, has applied to the Texas Commission on Environmental Quality (TCEQ) for proposed Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0016767001 (EPA I.D. No. TX0147699)

to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 4,000,000 gallons per day. The domestic wastewater treatment facility will be located **600 feet** Northwest of the intersection of Pitts Road and U.S. 90, near the city of Richmond, in Fort Bend County, Texas 77406. The discharge route will be from the plant site to PENDING RWA TCEQ REVIEW. TCEQ received this application on April 2, 2025. The permit application will be available for viewing and copying at City Hall, 402 Morton Street, Richmond, in Fort Bend County, Texas prior to the date this notice is published in the newspaper. The application, including any updates, and associated notices are available electronically at the following webpage:

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

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

<https://gisweb.tceq.texas.gov/LocationMapper/?marker=-95.73592,29.599533&level=18>

10. Spanish NORI as a word file is attached. Please revise the file as discussed below.

Please reach out if you have any additional questions.

Regards,

Alec Macmanus, PE
Garver
979-321-7756

From: Francesca Findlay <Francesca.Findlay@tceq.texas.gov>
Sent: Monday, April 14, 2025 8:38 AM
To: Macmanus, Alec R. <ARMacmanus@GarverUSA.com>
Cc: Hann,Tyson O. <TOHann@GarverUSA.com>
Subject: RE: WQ0016767001 - Spanish NORI Questions

Good morning,

If everything else is correct with the Spanish nori, I can update the number and take the paragraph off. I know it is protected.
Please let me know if you have any questions.

Thank you,

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



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

How is our customer service? Fill out our online customer satisfaction survey at <http://www.tceq.texas.gov/customersurvey>.

From: Macmanus, Alec R. <ARMacmanus@GarverUSA.com>
Sent: Friday, April 11, 2025 4:27 PM
To: Francesca Findlay <Francesca.Findlay@tceq.texas.gov>
Cc: Hann,Tyson O. <TOHann@GarverUSA.com>
Subject: WQ0016767001 - Spanish NORI Questions

Ms. Findlay,

When attempting to revise the new Spanish NORI file you sent for the Richmond East WWTP (RN112187869, WQ0016767001), we are not able to edit the file due to file restrictions (except for the regions that editing is allowed.) This means we can not add the WQ number to the top of the form and we can't remove the sentence relating to the Coastal Management Program that is not applicable for this application. I know the previous versions of this document allowed for these revisions to be made. Are there instructions somewhere on how to revise these sections?

Regards,



Alec Macmanus, PE

Project Engineer

Water Team

📞 979-321-7756

📠 979-321-7756

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. WQ00

SOLICITUD. *Ciudad de Richmond, 600 Morton Street, Richmond, Texas 77469*, ha solicitado a la Comisión de Calidad Ambiental del Estado de Texas (TCEQ) para el propuesto Permiso No. WQ00659031 (EPA I.D. No. TX 0147699) 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 *4,000,000* galones por día. La planta estará ubicada *a 600 pies al norte de la intersección de Pitts Road y US 90 Alt.* en el Condado de *Fort Bend*, Texas *77406*. La ruta de descarga estará del sitio de la planta a *Descarga directa al Segmento No. 1202 del Río Brazos*. La TCEQ recibió esta solicitud el *2 de abril de 2025*. La solicitud para el permiso estará disponible para leerla y copiarla en *Ayuntamiento, 402 Morton Street, Richmond, en el Condado de Fort Bend, 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=-95.73592,29.599533&level=18>

[Include the following non-italicized sentence if the facility is located in the Coastal Management Program boundary. The Coastal Management Program boundary is the area along the Texas Coast of the Gulf of México as depicted on the map in 31 TAC §503.1 and includes part or all of the following counties: Cameron, Willacy, Kenedy, Kleberg, Nueces, San Patricio, Aransas, Refugio, Calhoun, Victoria, Jackson, Matagorda, Brazoria, Galveston, Harris, Chambers, Jefferson y Orange.] El Director Ejecutivo de la TCEQ ha revisado esta medida para ver si está de acuerdo con los objetivos y las regulaciones del Programa de Administración Costero de Texas (CMP) de acuerdo con las regulaciones del Consejo Coordinador de la Costa (CCC) y ha determinado que la acción es conforme con las metas y regulaciones pertinentes del CMP.

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

AVISO ADICIONAL. El Director Ejecutivo de la TCEQ ha determinado que la solicitud es administrativamente completa y conducirá una revisión técnica de la solicitud. Después de completar la revisión técnica, el Director Ejecutivo puede preparar un borrador del permiso y emitirá una Decisión Preliminar sobre la solicitud. **El aviso de la solicitud y la decisión**

preliminar serán publicados y enviado a los que están en la lista de correo de las personas a lo largo del condado que desean recibir los avisos y los que están en la lista de correo que desean recibir avisos de esta solicitud. El aviso dará la fecha límite para someter comentarios públicos.

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

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

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

Después del cierre de todos los períodos de comentarios y de petición que aplican, el Director Ejecutivo enviará la solicitud y cualquier petición para reconsideración o para una audiencia de caso impugnado a los Comisionados de la TCEQ para su consideración durante una reunión programada de la Comisión.

La Comisión sólo puede conceder una solicitud de una audiencia de caso impugnado sobre los temas que el solicitante haya presentado en sus comentarios oportunos que no fueron retirados posteriormente. **Si se concede una audiencia, el tema de la audiencia estará**

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

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

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

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

También se puede obtener información adicional del *Ciudad de Richmond* a la dirección indicada arriba o llamando a *Terri Vela* al *281-342-5456*.

Fecha de emisión: *[Date notice issued]*

SIMI INVESTMENT COMPANY LTD
2330 HOLMES RD
HOUSTON TX 77051-1014

HENDERSON-WESSENDORFF
FOUNDATION
611 MORTON ST
RICHMOND TX 77469-3083

SHADOW GROVE ESTATES
HOMEOWNERS ASSOC
PO BOX 1631
RICHMOND TX 77406-1631

SMITH JAMES C & SHERYL ANN
2123 MORTON LEAGUE RD
RICHMOND TX 77406-1228

QAZIS SONS INC
1385 FM 359 RD
RICHMOND TX 77406-2017

GARVER C
1901 LEXINGTON ST
HOUSTON TX 77098-4219

DACUS LAND AND CATTLE COMPANY
PO BOX 450862
HOUSTON TX 77245-0862

GALVAN RICHARD C & PAULA
1924 E HIGHWAY 90A REAR
RICHMOND TX 77406-2024

CITY OF RICHMOND
402 MORTON ST
RICHMOND TX 77469-3121

COX LOIS
11003 NEEDVILLE FAIRCHILDS RD
NEEDVILLE TX 77461-9225

ALL STAR STORAGE INC
2122 E HIGHWAY 90A
RICHMOND TX 77406-2528

RES/VLS REAL EST LTD PARTNERSHIP
1900 WEST LOOP S STE 1050
HOUSTON TX 77027-3295

COX LOIS
11003 NEEDVILLE FAIRCHILDS RD
NEEDVILLE TX 77461-9225

GALVAN ANTONIA
804 7TH ST
ROSENBERG TX 77471-2516

YAM INVESTMENT INC
1912 E HIGHWAY 90A
RICHMOND TX 77406-2500

ZELAYA ROSALIO & LUCINDA
103 PITTS RD
RICHMOND TX 77406-2503

LONE GOAT #2 LLC & TRES HUNT
FAMILY HOLDINGS LLC
5528 CRANBROOK RD
HOUSTON TX 77056-1611

DALFREY BRADY J & PENNY P
115 PITTS RD
RICHMOND TX 77406-2503

VASBINDER DAVID
2011 E HIGHWAY 90A
RICHMOND TX 77469-2527

CA & H INC
121 PITTS RD
RICHMOND TX 77406-2503

ROBINSON CALLEN TRUST
605 LINCOLN RD STE 320
MIAMI BEACH FL 33139-2934

RUBENSTEIN SCOTT
2330 HOLMES RD
HOUSTON TX 77051-1098

FRANKS NURSERY LLC
302 FM 359 RD
RICHMOND TX 77406-2406

BRASSEUR WILFRED P & JUDY E
401 PITTS RD
RICHMOND TX 77406-2509

Simi Investment Company
2330 Holmes Rd.
Houston, TX 77051-1014

Dacus Land and Cattle
Company
PO Box 450862
Houston, TX 77245-0862

Cox Lois
11003 Needville Fairchilds
Rd.
Needville, TX 77461-9225

GALVAN CLEMENTE C JR
1924 E HIGHWAY 90A
Richmond, TX 77406-2524

YAM Investment Inc
1912 E Highway 90A
Richmond, TX 77406-2500

Lone Goat # 2 LLC & Tres
Hunt Family Holdings LLC
5528 Cranbrook Rd.
Houston, TX 77056-1611

Vasbinder David
2011 E HIGHWAY 90A
Richmond, TX 77469-2527

Robinson Callen Trust
605 Lincoln RD. STE 320
Miami Beach, FL 33139-2934

Franks Nursery LLC
302 Fm 359 RD
Richmond, TX 77406-2406

Smith James C & Sheryl Ann
2123 Morton League RD
Richmond, TX 77406-1228

Franks Nursery LLC
302 Fm 359 Rd.
Richmond, TX 77406-2406

Lone Goat # 2 LLC & Tres
Hunt Family Holdings LLC
5528 Cranbrook RD
Houston, TX 77056-1611

Henderson-Wessendorff
Foundation
611 Morton ST
Richmond, TX 77469-3083

Qazis Sons Inc
1385 FM 359 RD
Richmond, TX 77406-2017

Galvan Richard C & Paula
1924 E HIGHWAY 90A REAR
Richmond, TX 77406-2024

All Star Storage INC
2122 E Highway 90A
Richmond, TX 77406-2528

Galvan Antonia
804 7th ST
Rosenberg, TX 77471-2516

Zelaya Rosalio & Lucinda
103 Pitts RD
Richmond, TX 77406-2503

Zelaya Rosalio & Lucinda
103 Pitts RD
Richmond, TX 77406-2503

Dalfrey Brady J & Penny P
115 Pitts RD
Richmond, TX 77406-2503

CA & H Inc
121 Pitts RD
Richmond, TX 77406-2503

Rubenstein Scott
2330 Holmes RD
Houston, TX 77051-1098

Brasseur Wilfred P & Judy E
401 Pitts RD
Richmond, TX 77406-2509

Shadow Grove Estates
Homeowners Assoc
PO Box 1631
Richmond, TX 77406-1631

GARVER C
1901 LEXINGTON ST
Houston, TX 77098-4219

Lone Goat # 2 LLC & Tres
Hunt Family Holdings LLC
5528 Cranbrook RD
Houston, TX 77056-1611

City of Richmond
402 MORTON ST
Richmond, TX 77469-3121

Zelaya Rosalio & Lucinda
103 Pitts RD
Richmond, TX 77406-2503

Res/VIs Real Est LTD
Partnership
1900 West LOOP S STE 1050
Houston, TX 77027-3295

Lone Goat # 2 LLC & Tres
Hunt Family Holdings LLC
5528 Cranbrook RD
Houston, TX 77056-1611

SIMI INVESTMENT COMPANY
2330 HOLMES RD
HOUSTON TX 77051-1014

DACUS LAND AND CATTLE COMPANY
PO BOX 450862
HOUSTON TX 77245-0862

COX LOIS
11003 NEEDVILLE FAIRCHILDS RD
NEEDVILLE TX 77461-9225

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1924 E HIGHWAY 90A
RICHMOND TX 77406-2524

YAM INVESTMENT INC
1912 E HIGHWAY 90A
RICHMOND TX 77406-2500

VASBINDER DAVID
2011 E HIGHWAY 90A
RICHMOND TX 77469-2527

ROBINSON CALLEN TRUST
605 LINCOLN RD STE 320
MIAMI BEACH FL 33139-2934

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302 FM 359 RD
RICHMOND TX 77406-2406

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2123 MORTON LEAGUE RD
RICHMOND TX 77406-1228

ZELAYA ROSALIO & LUCINDA
103 PITTS RD
RICHMOND TX 77406-2503

LONE GOAT #2 LLC & TRES HUNT
FAMILY HOLDINGS LLC
5528 CRANBROOK RD
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HENDERSON-WESSENDORFF
FOUNDATION
611 MORTON ST
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GALVAN RICHARD C & PAULA
1924 E HIGHWAY 90A REAR
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ALL STAR STORAGE INC
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RICHMOND TX 77406-2528

GALVAN ANTONIA
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DALFREY BRADY J & PENNY P
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1901 LEXINGTON ST
HOUSTON TX 77098-4219

RES/VLS REAL EST LTD PARTNERSHIP
1900 WEST LOOP S STE 1050
HOUSTON TX 77027-3295

ATTACHMENT C

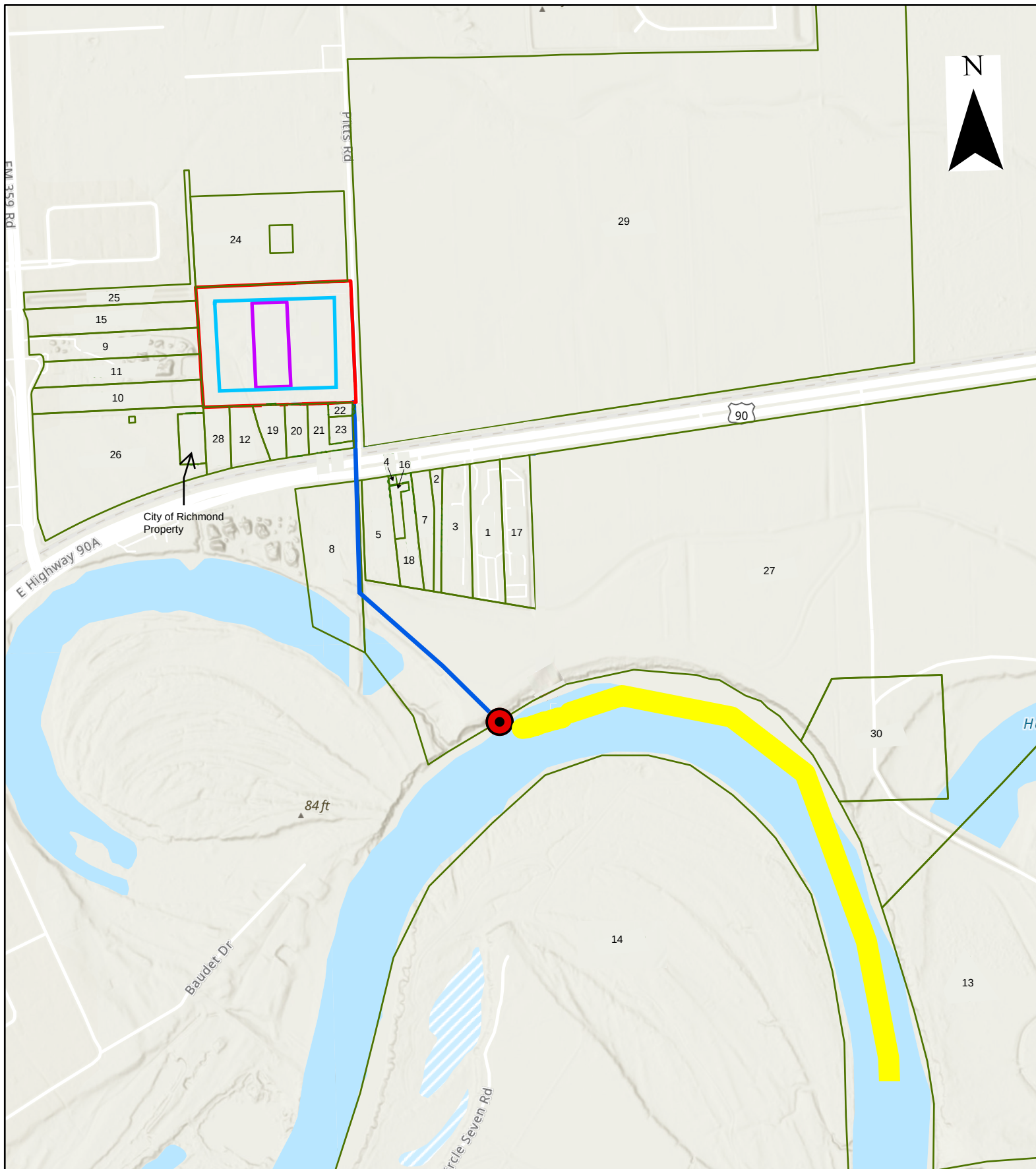
Administrative Report 1.1 Item 1

AFFECTED LANDOWNER INFORMATION



AFFECTED LANDOWNERS LIST

No.	PROPERTY ID	OWNER NAME	MAILING ADDRESS	CITY	STATE	ZIP CODE	LAND ACREAGE
1	R36236	Simi Investment Company Ltd	2330 Holmes RD	Houston	TX	77051-1014	6.59
2	R36242	Dacus Land and Cattle Company	PO Box 450862	Houston	TX	77245-0862	1.50
3	R36239	Cox Lois	11003 Needville Fairchilds RD	Needville	TX	77461-9225	6.28
4	R240030	GALVAN CLEMENTE C JR	1924 E HIGHWAY 90A	Richmond	TX	77406-2524	0.10
5	R36251	YAM Investment Inc	1912 E Highway 90A	Richmond	TX	77406-2500	5.52
7	R293760	Vasbinder David	2011 E HIGHWAY 90A	Richmond	TX	77469-2527	2.71
8	R36226	Robinson Callen Trust	605 Lincoln RD STE 320	Miami Beach	FL	33139-2934	12.17
9	R300097	Franks Nursery LLC	302 Fm 359 RD	Richmond	TX	77406-2406	6.50
10	R226305	SMITH JAMES C & SHERYL ANN	2123 Morton League RD	Richmond	TX	77406-1228	6.86
11	R247408	Franks Nursery LLC	302 Fm 359 RD	Richmond	TX	77406-2406	6.70
12	R36288	Zelaya Rosalio & Lucinda	103 Pitts RD	Richmond	TX	77406-2503	2.80
13	R35042	Lone Goat # 2 LLC & Tres Hunt Family Holdings LLC	5528 Cranbrook RD	Houston	TX	77056-1611	102.55
14	R34997	Henderson-Wessendorff Foundation	611 Morton ST	Richmond	TX	77469-3083	516.80
15	R36259	Qazis Sons Inc	1385 FM 359 RD	Richmond	TX	77406-2017	7.29
16	R218716	GALVAN RICHARD C & PAULA	1924 E HIGHWAY 90A REAR	Richmond	TX	77406-2524	1.00
17	R36241	All Star Storage INC	2122 E Highway 90A	Richmond	TX	77406-2528	6.98
18	R36287	Galvan Antonia	804 7th ST	Rosenberg	TX	77471-2516	3.15
19	R127809	Zelaya Rosalio & Lucinda	103 Pitts RD	Richmond	TX	77406-2503	2.10
20	R162590	Zelaya Rosalio & Lucinda	103 Pitts RD	Richmond	TX	77406-2503	1.80
21	R162591	Dalfrey Brady J & Penny P	115 Pitts RD	Richmond	TX	77406-2503	1.80
22	R36289	CA & H Inc	121 Pitts RD	Richmond	TX	77406-2503	0.51
23	R36253	Rubenstein Scott	2330 Holmes RD	Houston	TX	77051-1098	0.97
24	R219093	Brasseur Wilfred P & Judy E	401 Pitts RD	Richmond	TX	77406-2509	20.59
25	R245474	Shadow Grove Estates Homeowners Assoc	PO Box 1631	Richmond	TX	77406-1631	5.41
26	R36246	GARVER C	1901 LEXINGTON ST	Houston	TX	77098-4219	23.32
27	R36303	Lone Goat # 2 LLC & Tres Hunt Family Holdings LLC	5528 Cranbrook RD	Houston	TX	77056-1611	358.85
28	R162589	Zelaya Rosalio & Lucinda	103 Pitts RD	Richmond	TX	77406-2503	2.56
29	R36308	Res/VIs Real Est LTD Partnership	1900 West LOOP S STE 1050	Houston	TX	77027-3295	516.65
30	R36304	Lone Goat # 2 LLC & Tres Hunt Family Holdings LLC	5528 Cranbrook RD	Houston	TX	77056-1611	20.00



 Odor Control Buffer Zone

 Facility Site Boundaries

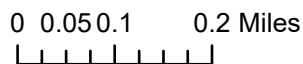
 Discharge Point

 One Mile Discharge Route

 Outfall Discharge Pipeline

 Proposed WWTP Property Boundaries

 Landowners Property Boundaries



AFFECTED LANDOWNERS MAP

East Wastewater Treatment Plant
City of Richmond, Texas

ATTACHMENT C

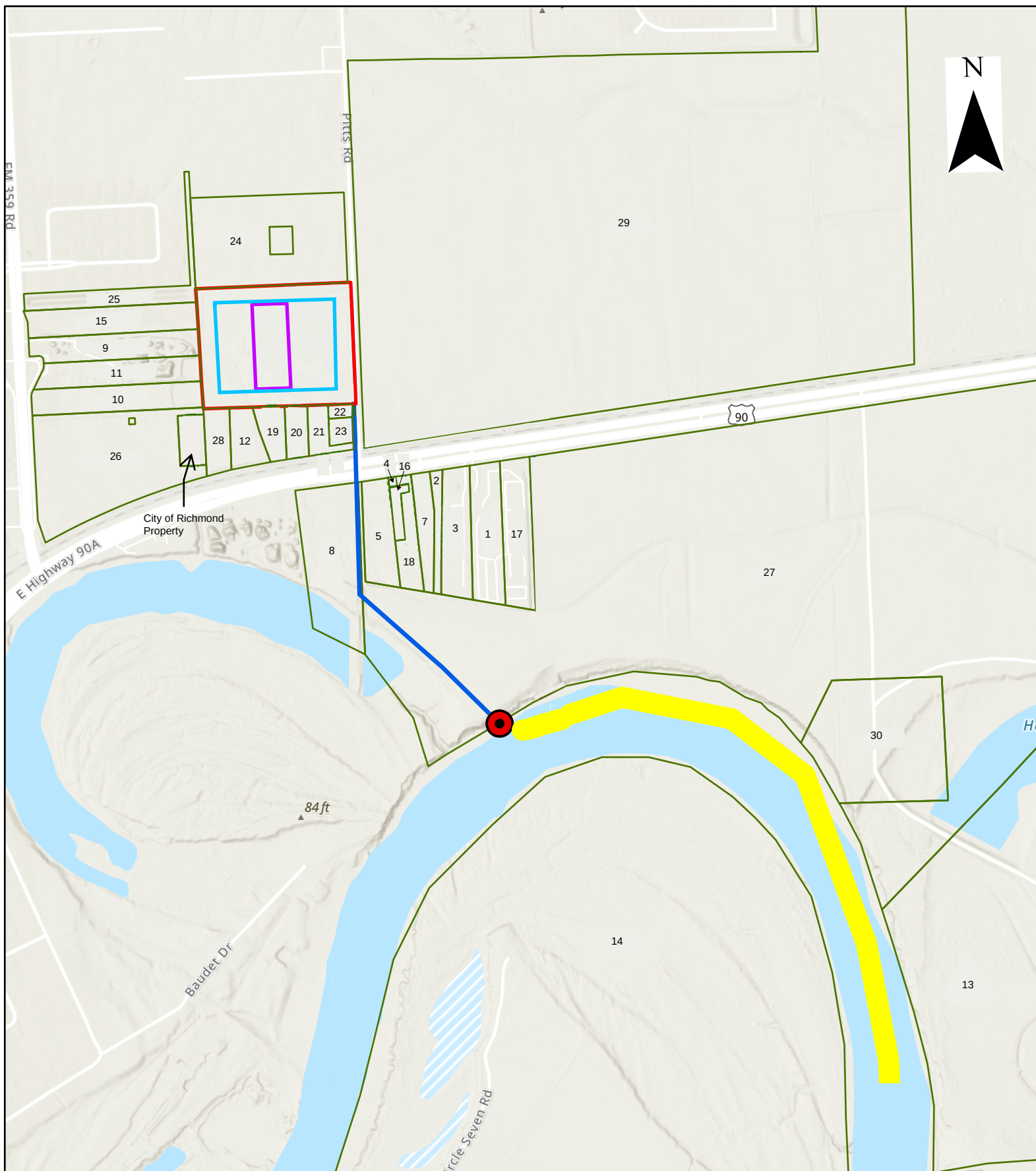
Administrative Report 1.1 Item 1

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4	R240030	GALVAN CLEMENTE C JR	1924 E HIGHWAY 90A	Richmond	TX	77406-2524	0.10
5	R36251	YAM Investment Inc	1912 E Highway 90A	Richmond	TX	77406-2500	5.52
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13	R35042	Lone Goat # 2 LLC & Tres Hunt Family Holdings LLC	5528 Cranbrook RD	Houston	TX	77056-1611	102.55
14	R34997	Henderson-Wessendorff Foundation	611 Morton ST	Richmond	TX	77469-3083	516.80
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17	R36241	All Star Storage INC	2122 E Highway 90A	Richmond	TX	77406-2528	6.98
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 Odor Control Buffer Zone

 Facility Site Boundaries

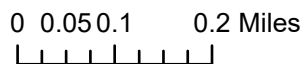
 Discharge Point

 One Mile Discharge Route

 Outfall Discharge Pipeline

 Proposed WWTP Property Boundaries

 Landowners Property Boundaries



AFFECTED LANDOWNERS MAP

East Wastewater Treatment Plant
City of Richmond, Texas

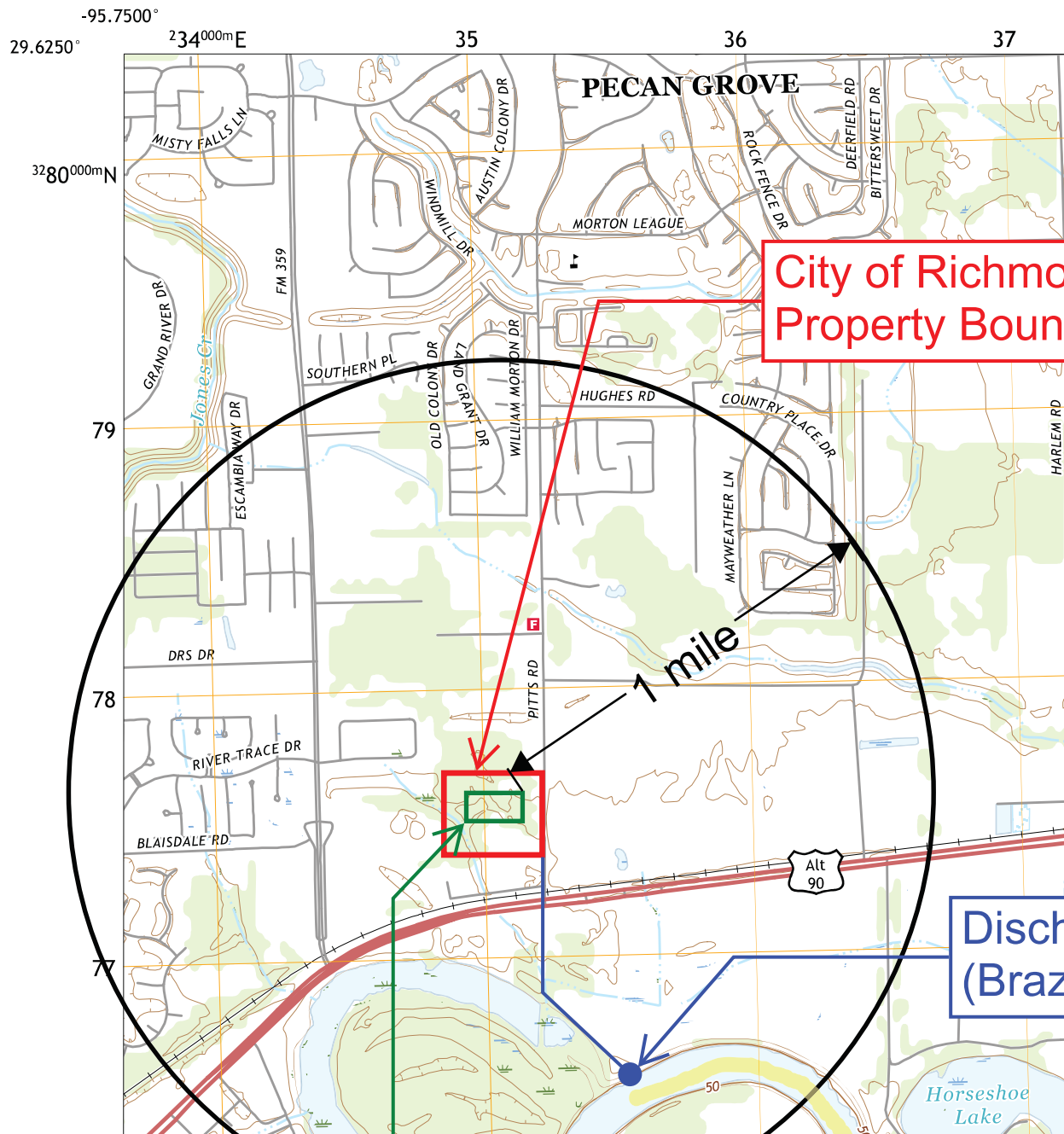
ATTACHMENT B

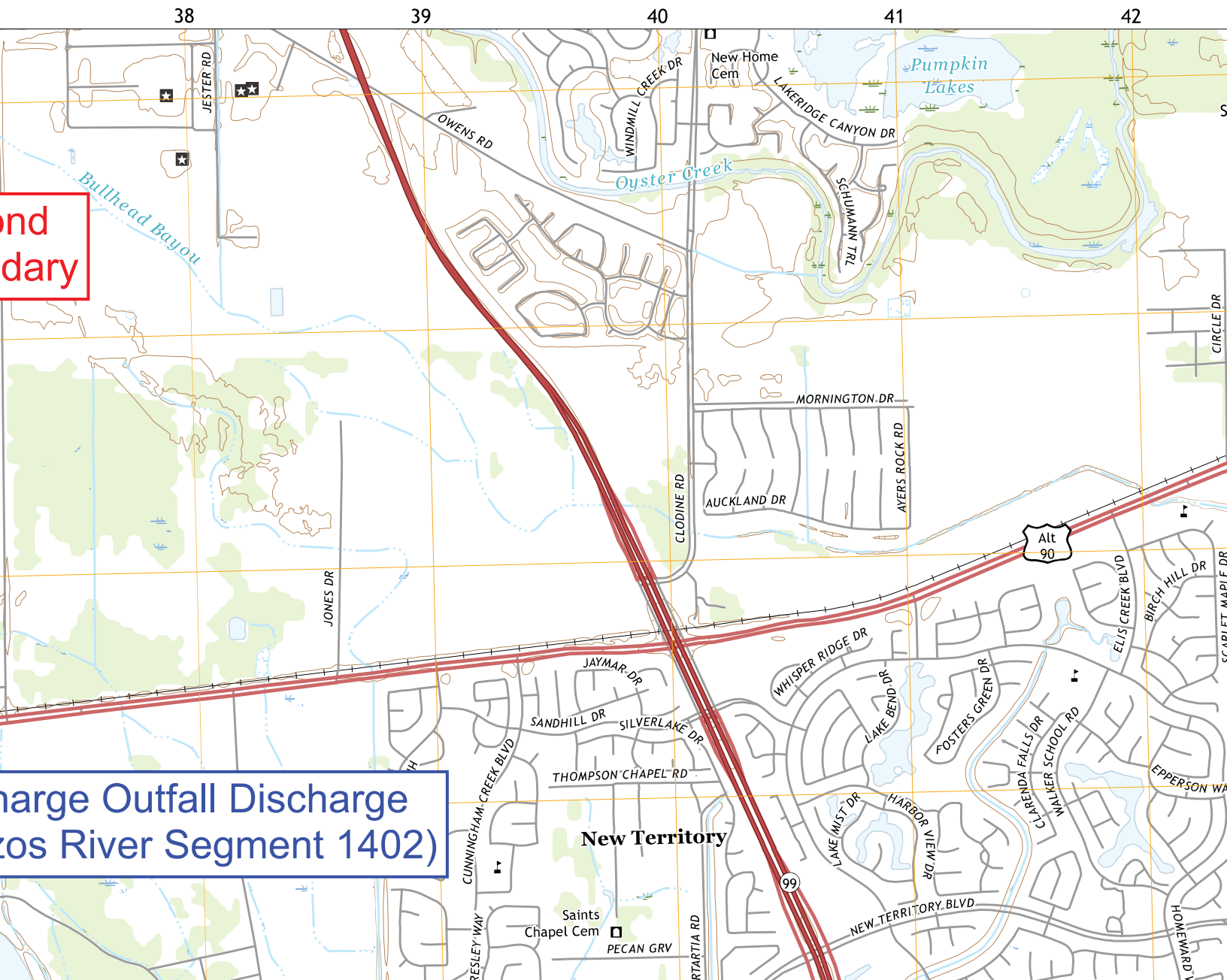
Administrative Report 1.0 Item 13

USGS QUADRANGLE MAP

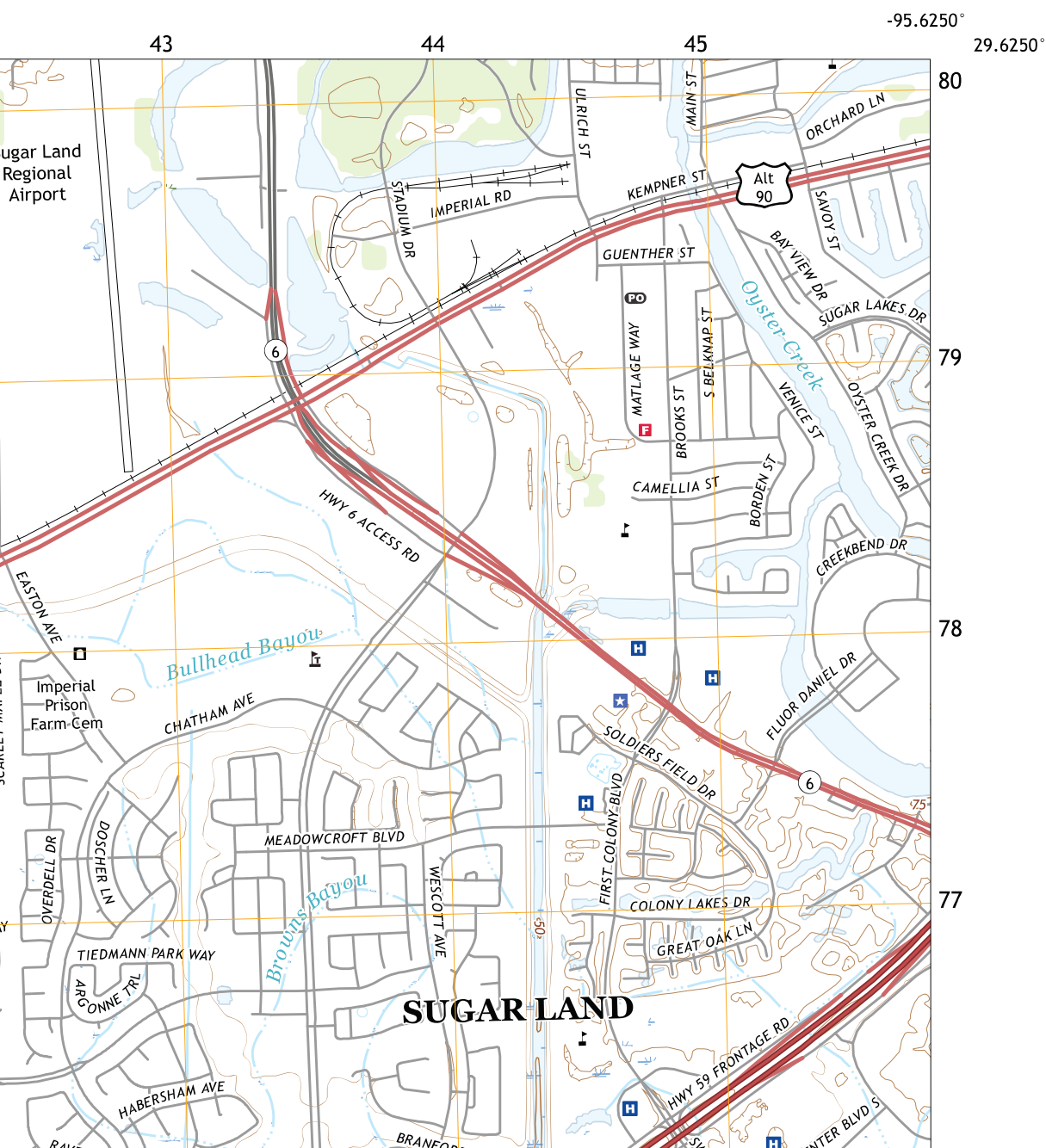


U.S. DEPARTMENT OF THE INTERIOR
U.S. GEOLOGICAL SURVEY





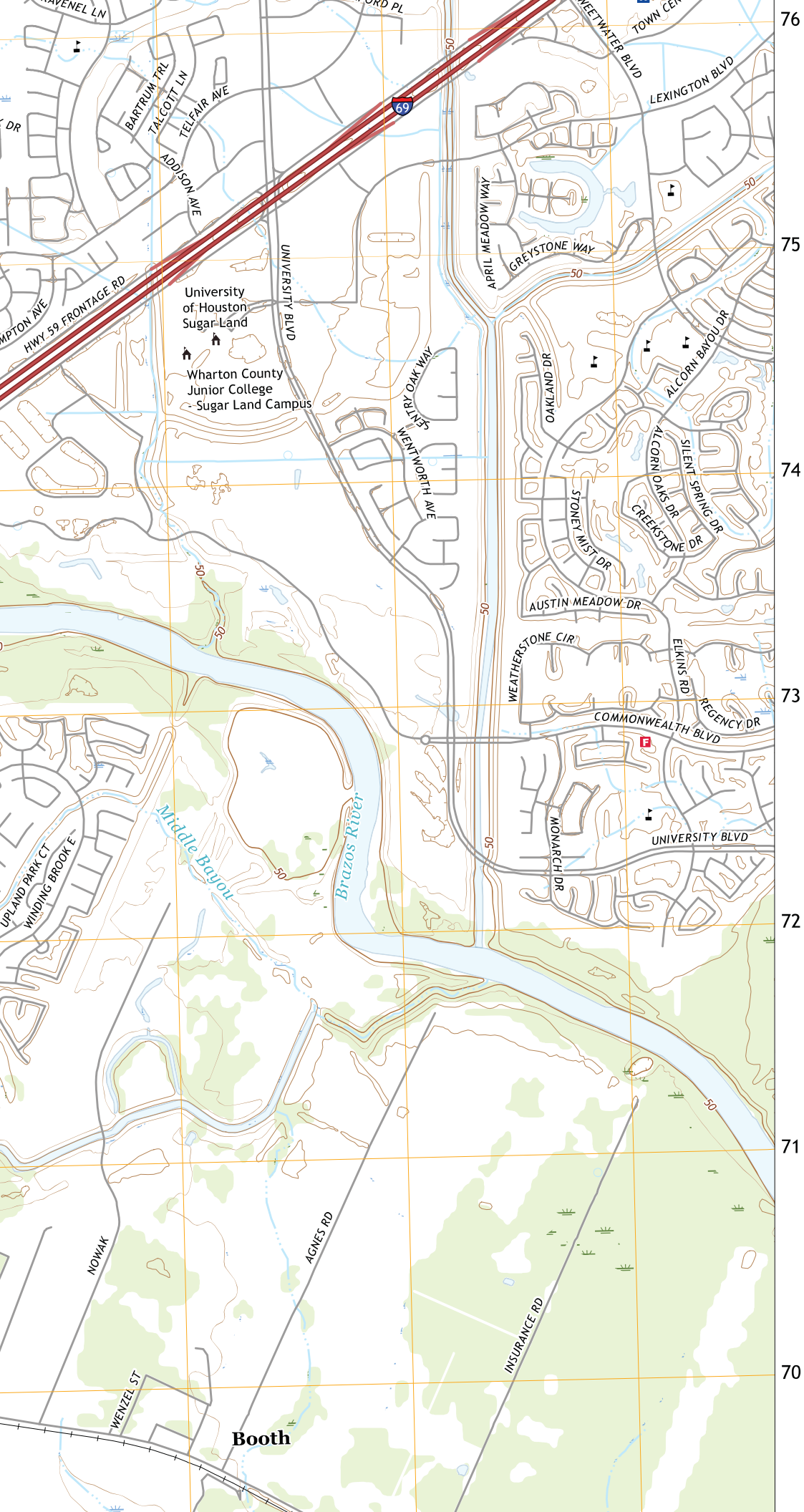
SUGAR LAND QUADRANGLE
TEXAS - FORT BEND COUNTY
7.5-MINUTE SERIES

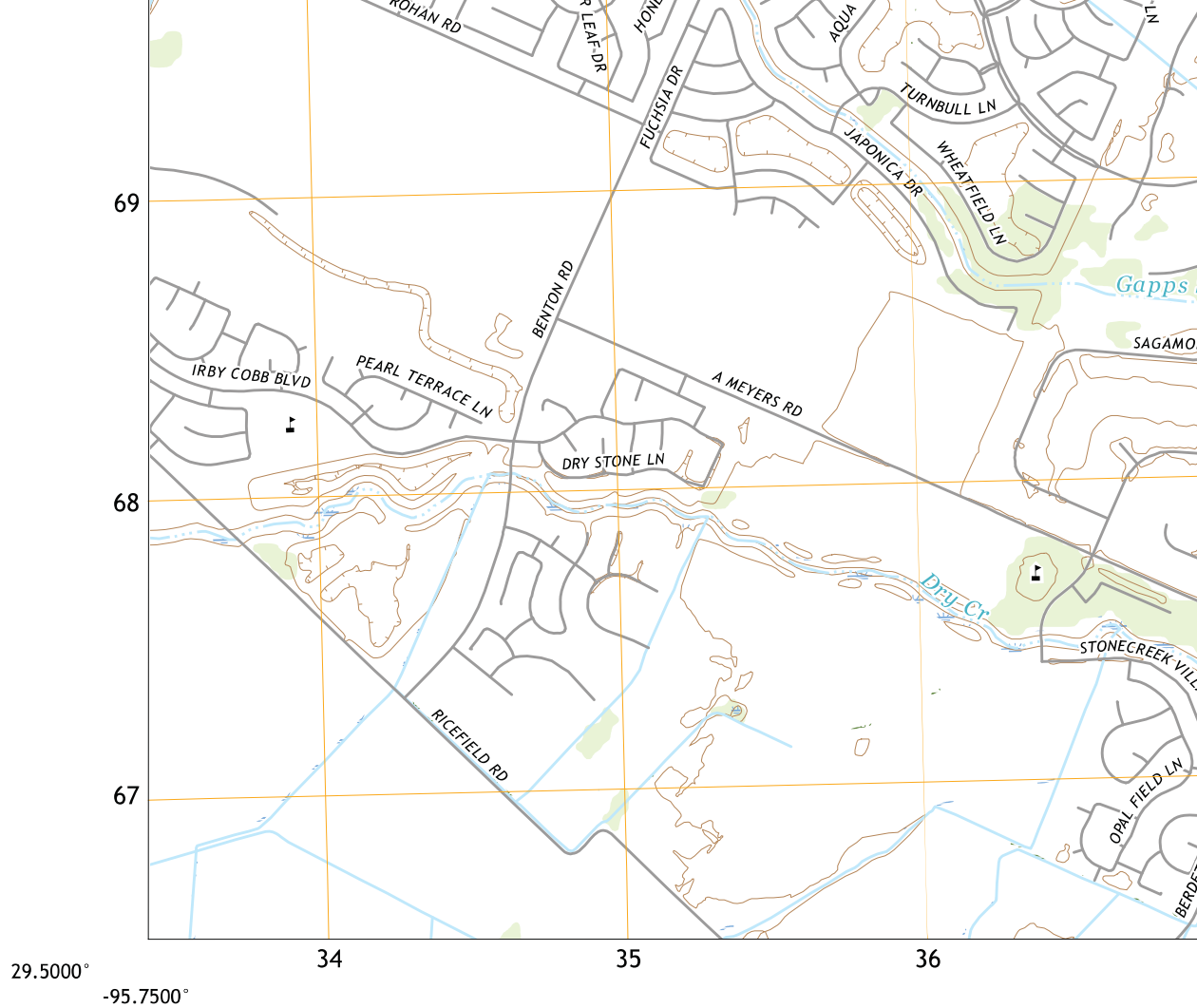


City of Richmond
Property Boundary









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

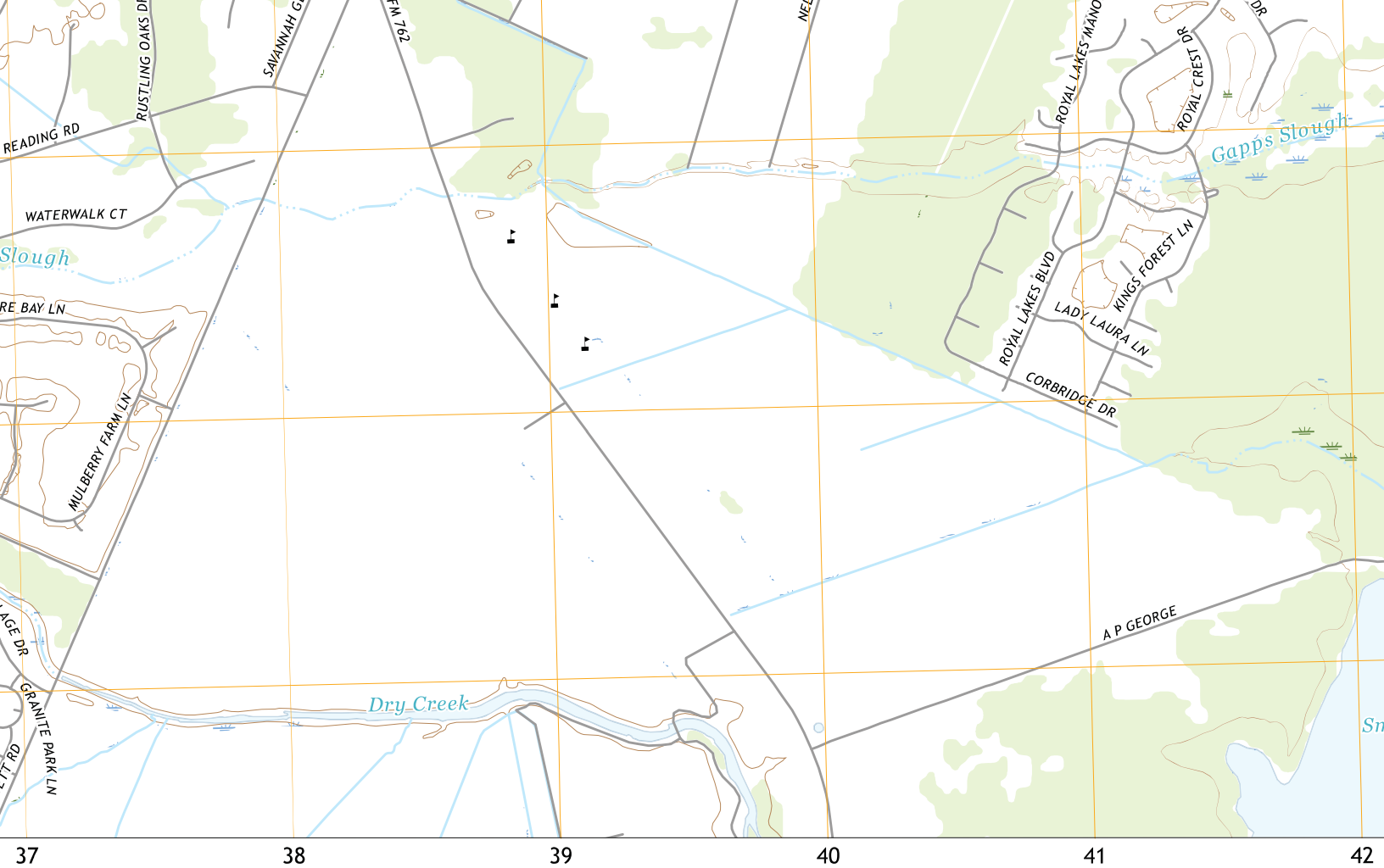
This map is not a legal document. Boundaries may be
generalized for this map scale. Private lands within government
reservations may not be shown. Obtain permission before
entering private lands.

Imagery.....	NAIP, September 2016 - November 2016
Roads.....	U.S. Census Bureau, 2015
Names.....	GNIS, 1979 - 2022
Hydrography.....	National Hydrography Dataset, 2002 - 2018
Contours.....	National Elevation Dataset, 2021
Boundaries.....	Multiple sources; see metadata file 2019 - 2021
Wetlands.....	FWS National Wetlands Inventory Not Available

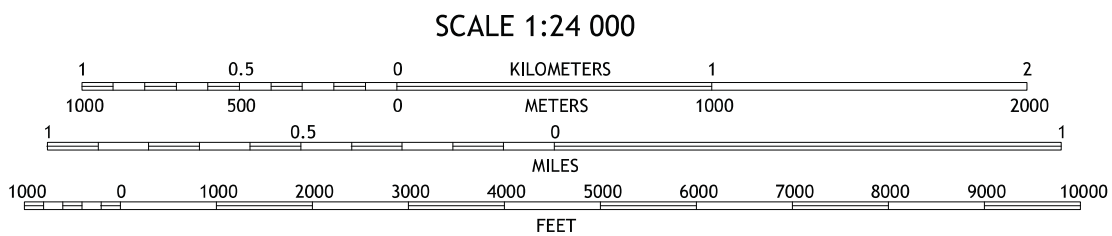
1°20'
24 MILS

UTM GRID AND
DECLINATION





National Grid
100 - m Square ID
TN
Zone Designation
15R



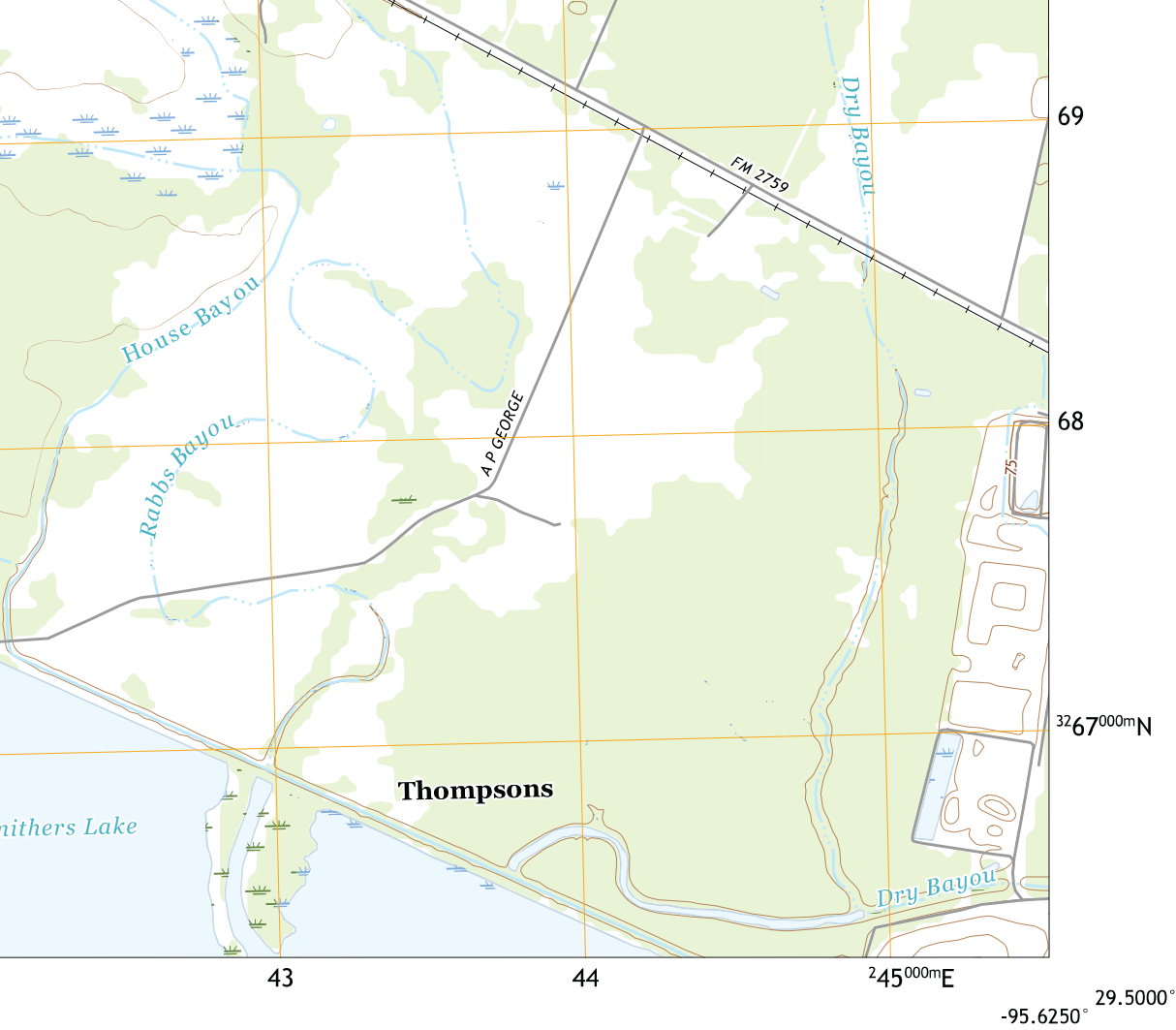
CONTOUR INTERVAL 10 FEET
NORTH AMERICAN VERTICAL DATUM OF 1988
This map was produced to conform with the
National Geospatial Program US Topo Product Standard.



QUADRANGLE LOC.

1	2	3
4		5
6	7	8

ADJOINING QUADRANGLES



- 1 Richmond NE
- 2 Clodine
- 3 Alief
- 4 Richmond
- 5 Missouri City
- 6 Needville
- 7 Smithers Lake
- 8 Thompsons

ROAD CLASSIFICATION

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

SUGAR LAND, TX
2022



ATTACHMENT C

Administrative Report 1.1 Item 1

AFFECTED LANDOWNER INFORMATION

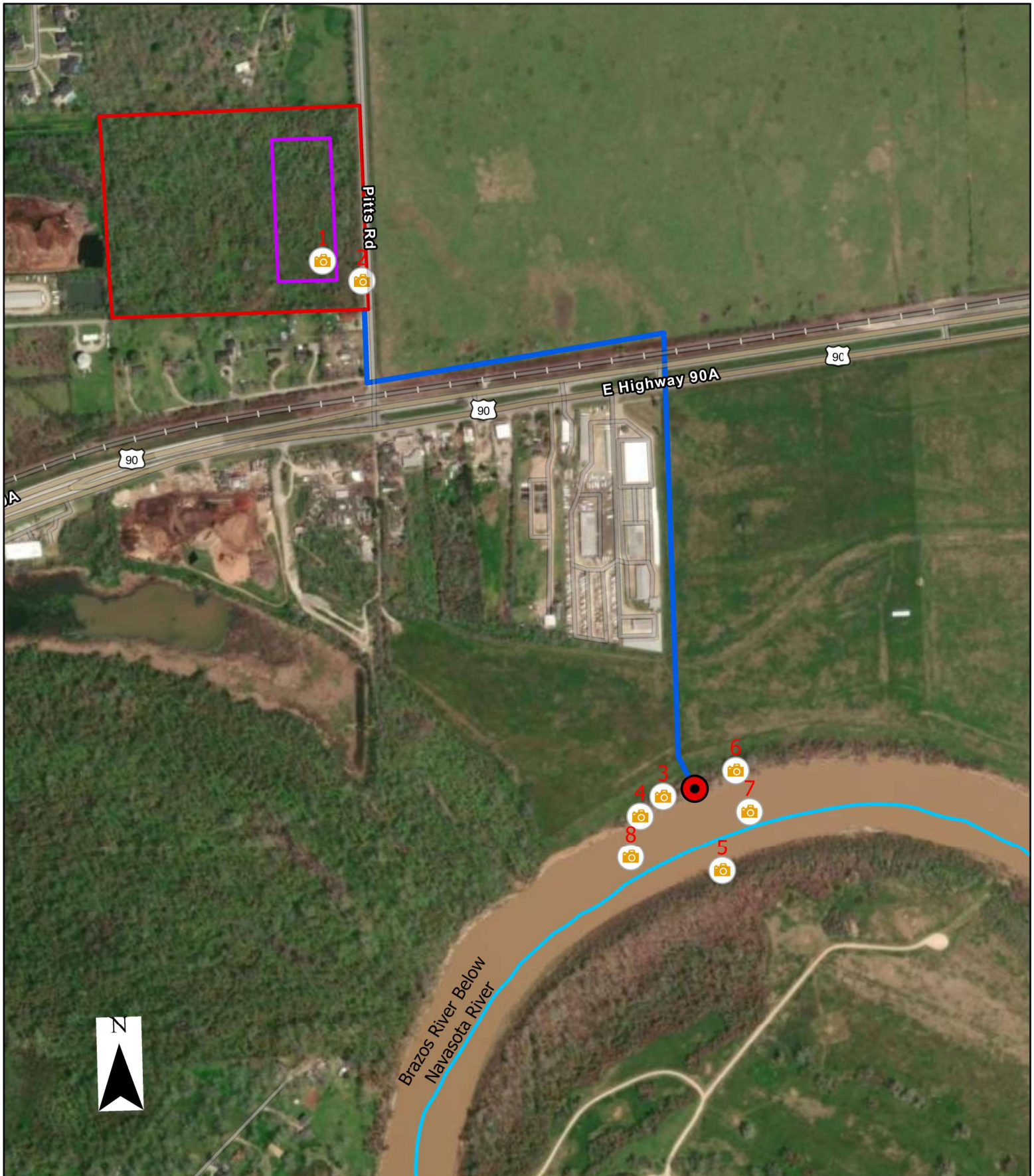
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4	R240030	GALVAN CLEMENTE C JR	1924 E HIGHWAY 90A	Richmond	TX	77406-2524	0.10
5	R36251	YAM Investment Inc	1912 E Highway 90A	Richmond	TX	77406-2500	5.52
6	R218095	Lone Goat # 2 LLC & Tres Hunt Family Holdings LLC	5528 Cranbrook RD	Houston	TX	77056-1611	147.35
7	R293760	Vasbinder David	2011 E HIGHWAY 90A	Richmond	TX	77469-2527	2.71
8	R36226	Robinson Callen Trust	605 Lincoln RD STE 320	Miami Beach	FL	33139-2934	12.17
9	R300097	Franks Nursery LLC	302 Fm 359 RD	Richmond	TX	77406-2406	6.50
10	R226305	SMITH JAMES C & SHERYL ANN	2123 Morton League RD	Richmond	TX	77406-1228	6.86
11	R247408	Franks Nursery LLC	302 Fm 359 RD	Richmond	TX	77406-2406	6.70
12	R36288	Zelaya Rosalio & Lucinda	103 Pitts RD	Richmond	TX	77406-2503	2.80
13	R35042	Lone Goat # 2 LLC & Tres Hunt Family Holdings LLC	5528 Cranbrook RD	Houston	TX	77056-1611	102.55
14	R34997	Henderson-Wessendorf Foundation	611 Morton ST	Richmond	TX	77469-3083	516.80
15	R36259	Gazis Sons Inc	1385 FM 359 RD	Richmond	TX	77406-2017	7.29
16	R218716	GALVAN RICHARD C & PAULA	1924 E HIGHWAY 90A REAR	Richmond	TX	77406-2524	1.00
17	R36241	All Star Storage INC	2122 E Highway 90A	Richmond	TX	77406-2528	6.98
18	R36287	Galvan Antonia	804 7th ST	Rosenberg	TX	77471-2516	3.15
19	R127809	Zelaya Rosalio & Lucinda	103 Pitts RD	Richmond	TX	77406-2503	2.10
20	R162590	Zelaya Rosalio & Lucinda	103 Pitts RD	Richmond	TX	77406-2503	1.80
21	R162591	Daffrey Brady J & Penny P	115 Pitts RD	Richmond	TX	77406-2503	1.80
22	R36289	CA & H Inc	121 Pitts RD	Richmond	TX	77406-2503	0.51
23	R36253	Rubenstein Scott	2330 Holmes RD	Houston	TX	77051-1098	0.97
24	R219093	Brasseur Wilfred P & Judy E	401 Pitts RD	Richmond	TX	77406-2509	20.59
25	R245474	Shadow Grove Estates Homeowners Assoc	PO Box 1631	Richmond	TX	77406-1631	5.41
26	R36246	GARVER C	1901 LEXINGTON ST	Houston	TX	77098-4219	23.32
27	R36303	Lone Goat # 2 LLC & Tres Hunt Family Holdings LLC	5528 Cranbrook RD	Houston	TX	77056-1611	358.85
28	R351255	City of Richmond	402 MORTON ST	Richmond	TX	77469-3121	2.00
29	R162589	Zelaya Rosalio & Lucinda	103 Pitts RD	Richmond	TX	77406-2503	2.56
30	R36308	ResVis Real Est LTD Partnership	1900 West LOOP S STE 1050	Houston	TX	77027-3295	516.65
31	R36304	Lone Goat # 2 LLC & Tres Hunt Family Holdings LLC	5528 Cranbrook RD	Houston	TX	77056-1611	20.00

ATTACHMENT D

Administrative Report 1.1 Item 2

PHOTOGRAPHS



East WWTP Site

Facility Site Boundaries

Discharge Point

Photos

TCEQ Classified Segments

Outfall Discharge Pipeline

0 0.04 0.07 0.15 Miles



PHOTOGRAPHS LOCATION MAP
East Wastewater Treatment Plant
City of Richmond, Texas

Original Photographs Richmond East WWTP

PAGE 1 - PROPOSED WWTP SITE



Photo 1 – Richmond East WWTP Proposed Site



Photo 2 – Looking West from Pitts Rd., Access to Proposed Richmond East WWTP Site

PAGE 2 - PROPOSED POINT OF DISCHARGE



Photo 3 – Proposed Richmond East WWTP Outfall Location To Brazos River Segment 1202 (looking south)



Photo 4 – Close-Up Proposed Richmond East WWTP Outfall Location To Brazos River (looking south)

PAGE 3 - PROPOSED POINT OF DISCHARGE



Photo 5 – Looking North Towards Proposed Outfall Location To Brazos River Segment 1202



Photo 6 – Portrait View of Proposed Richmond East WWTP Outfall Location (looking south)

PAGE 4 – UPSTREAM/DOWNSTREAM OF DISCHARGE



*Photo 7 – **Downstream** View Of Brazos River From Proposed Richmond East WWTP Outfall Location*

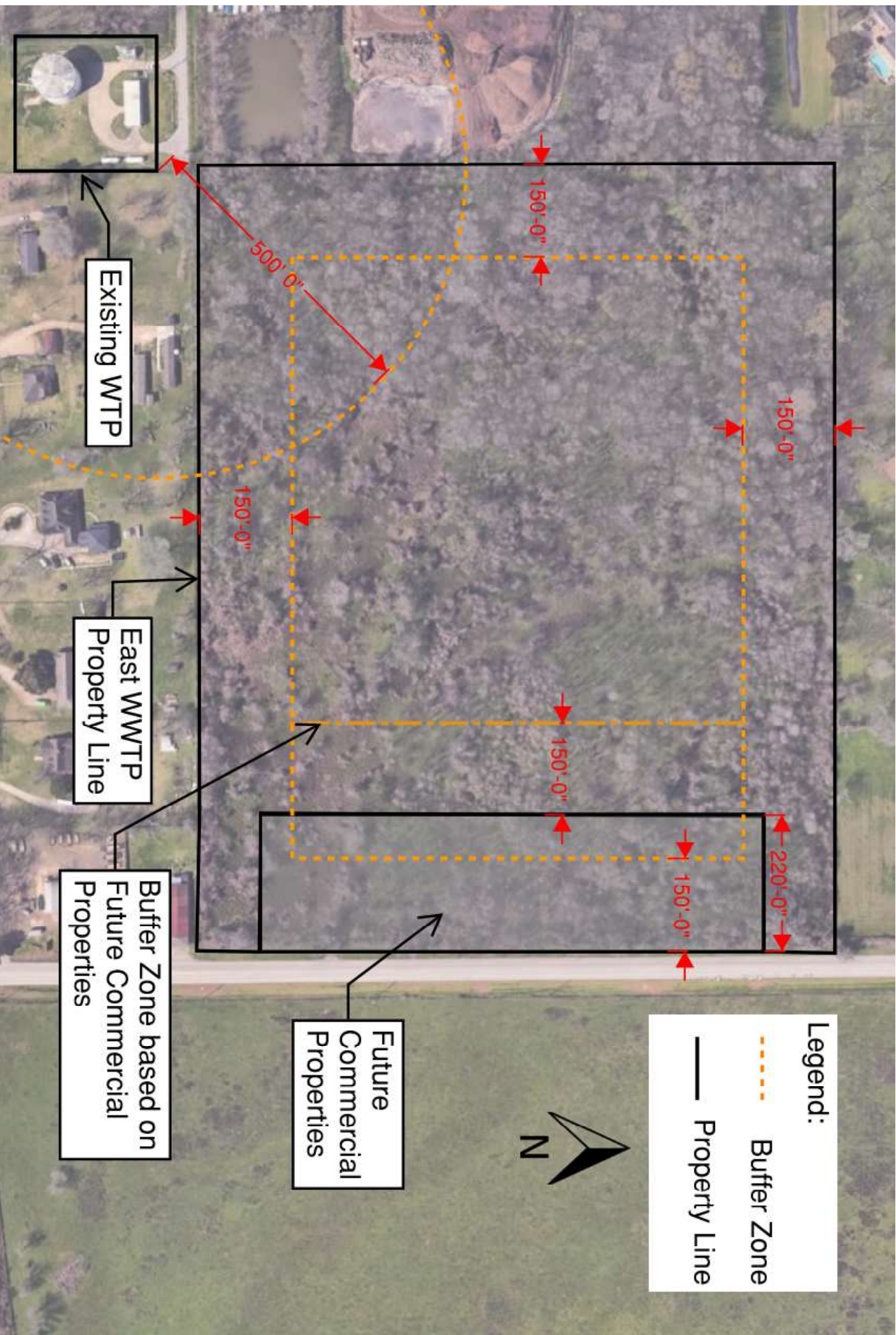


*Photo 8 - **Upstream** View Of Brazos River From Proposed Richmond East WWTP Outfall Location*

ATTACHMENT E

Administrative Report 1.1 Item 3

BUFFER ZONE MAP



ATTACHMENT F

Supplemental Permit Information (SPIF) &
USGS QUADRANGLE MAP

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: City of Richmond

Permit No. WQ00

EPA ID No. TX 0790023

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

600 ft North of intersection of Pitts Road and US 90 Alt., Richmond, TX 77406

Property ID: R36311

Legal Description: 0062 WM Morton, Tract 70

Neighborhood Code: 5950

Geo ID: 0062-00-000-0700-901

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

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

First and Last Name: Terri Vela

Credential (P.E, P.G., Ph.D., etc.): Not applicable

Title: City Manager

Mailing Address: 402 Morton St.

City, State, Zip Code: Richmond, TX 77469

Phone No.: 281-342-5456 Ext.: Not applicable Fax No.: 281-232-8626

E-mail Address: tvela@richmondtx.gov

2. List the county in which the facility is located: Fort Bend
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.

Direct discharge to Segment No. 1202 of the Brazos River (Brazos River below Navasota River)

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):

Construction impact consists of a proposed 20-acre treatment plant and outfall pipeline measuring 4,000 feet in length. Proposed ground disturbing activity for the project includes deep impacts greater than 3 feet, with a maximum depth of 60 feet in some areas.

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

The site land consists of natural grass prairie with hardwood trees.

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:

There are no existing structures on the property.

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

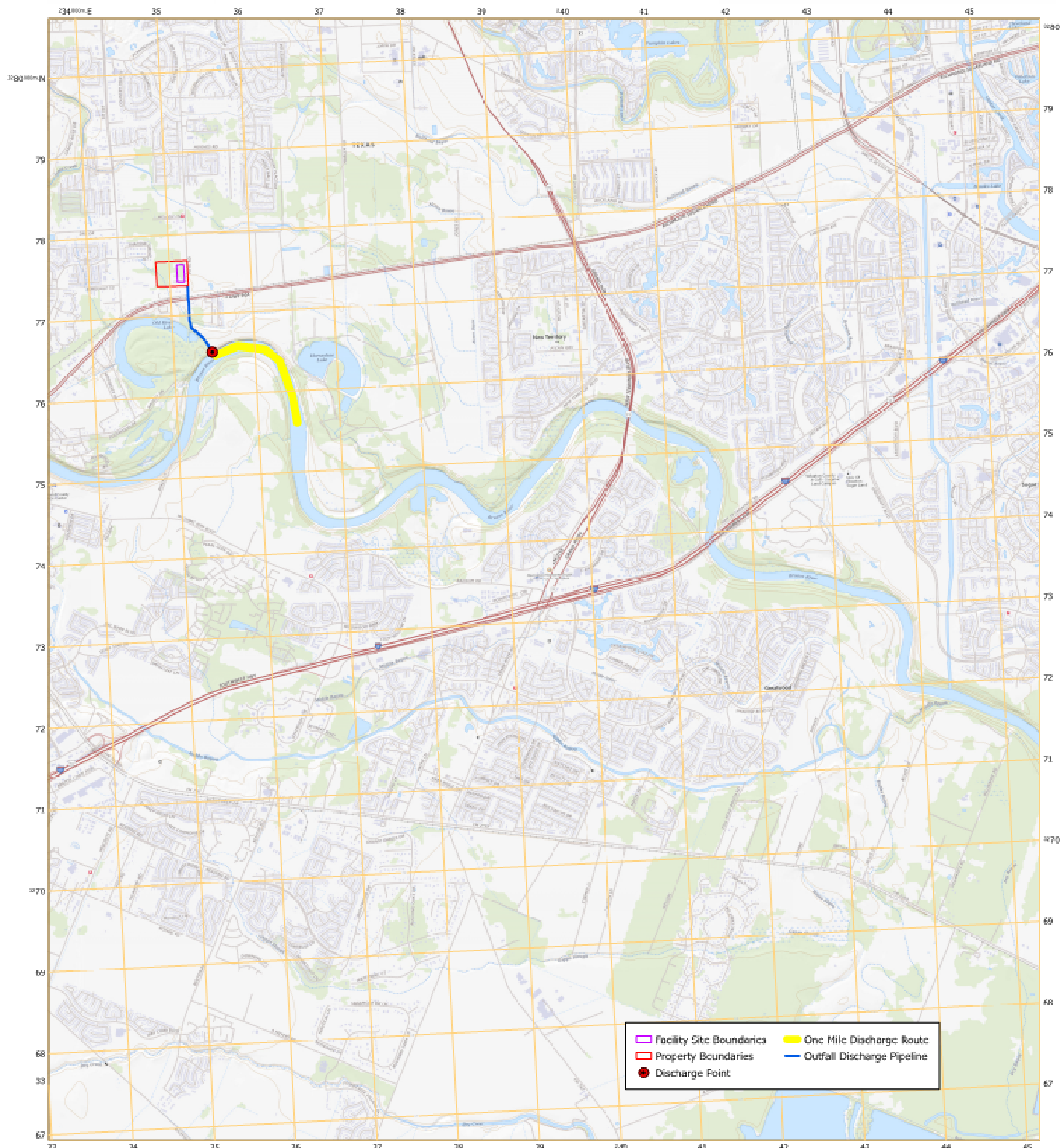
Property ID: 0062-00-000-0700-901 Owner Name: City of Richmond
Property Description: 0062 WM MORTON, TRACT 70, ACRES 29.041



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



SUGAR LAND QUADRANGLE
TEXAS - FORT BEND COUNTY
7.5-MINUTE SERIES



Produced by the United States Geological Survey

North American Datum of 1983 (NAD83)
World Geodetic System of 1984 (WGS84). Reproduction and
1:500 meter grid Universal Transverse Mercator Zone 18R
This map is not a legal document. Boundary map for
generalized for this map scale. Please verify with government
information and use the datum. Obtain permission before
entering private lands.

Product	U.S.	State	County	City	Year
Topography	National	Hydrography	State	Hydro	2018
Boundaries	Hydro	State	Hydro	Hydro	2018
Boundaries	Hydro	State	Hydro	Hydro	2018

Metadata: 1:500 National Metadata: 1:500



CONTOUR INTERVAL: 10 FEET

North American Datum of 1983

This map was produced in accordance with the

National Geospatial Program (N) Topographic Standard, 2011.

A metadata file associated with this product is available at 5.1.18



Geographic Coordinates

Geographic Coordinates

Geographic Coordinates

Geographic Coordinates

Geographic Coordinates

Geographic Coordinates

Geographic Coordinates

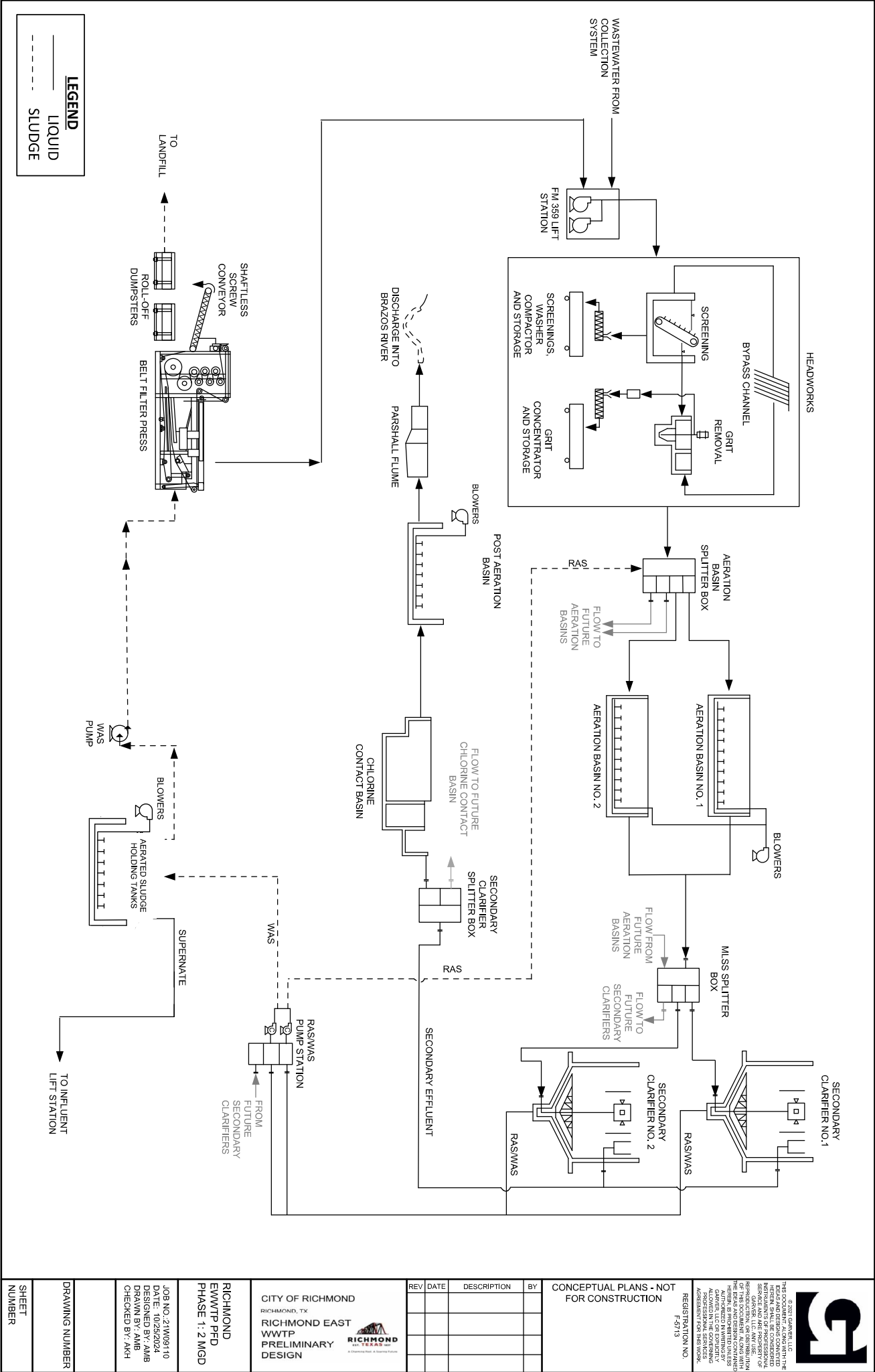
ROAD CLASSIFICATION	
Expressway	Local Connector
Boundary Road	Local Road
Loop	Loop
Interstate Road	US Route
	State Road

SUGAR LAND, TX
2019

ATTACHMENT G

Technical Report 1.0 Item 2.C

PROCESS FLOW DIAGRAM



THIS DOCUMENT, ALONG WITH THE DESIGN AND RECORD CONCEPTS, IS THE PROPERTY OF THE CITY OF RICHMOND, TEXAS. IT IS TO BE USED ONLY FOR THE PROJECT AND SITE SPECIFICALLY IDENTIFIED HEREIN. NO PART OF THIS DOCUMENT, ALONG WITH THE DESIGN AND RECORD CONCEPTS, IS TO BE REPRODUCED OR TRANSMITTED IN ANY FORM OR BY ANY MEANS, ELECTRONIC OR MECHANICAL, INCLUDING PHOTOCOPYING, RECORDING, OR BY ANY INFORMATION STORAGE AND RETRIEVAL SYSTEM, WITHOUT THE WRITTEN PERMISSION OF THE CITY OF RICHMOND, TEXAS. THE CITY OF RICHMOND, TEXAS, DOES NOT WARRANT THE ACCURACY OR COMPLETENESS OF THE INFORMATION, AND THE CITY OF RICHMOND, TEXAS, ACCEPTS NO LIABILITY FOR ANY ERRORS OR OMISSIONS. THE USER OF THIS DOCUMENT, ALONG WITH THE DESIGN AND RECORD CONCEPTS, AGREES TO HOLD THE CITY OF RICHMOND, TEXAS, HARMLESS FROM ANY AND ALL CLAIMS, DAMAGES, LOSSES, AND EXPENSES, INCLUDING ATTORNEY'S FEES, ARISING OUT OF OR RESULTING FROM THE USE OF THIS DOCUMENT, ALONG WITH THE DESIGN AND RECORD CONCEPTS.

CONCEPTUAL PLANS - NOT FOR CONSTRUCTION

REV	DATE	DESCRIPTION	BY

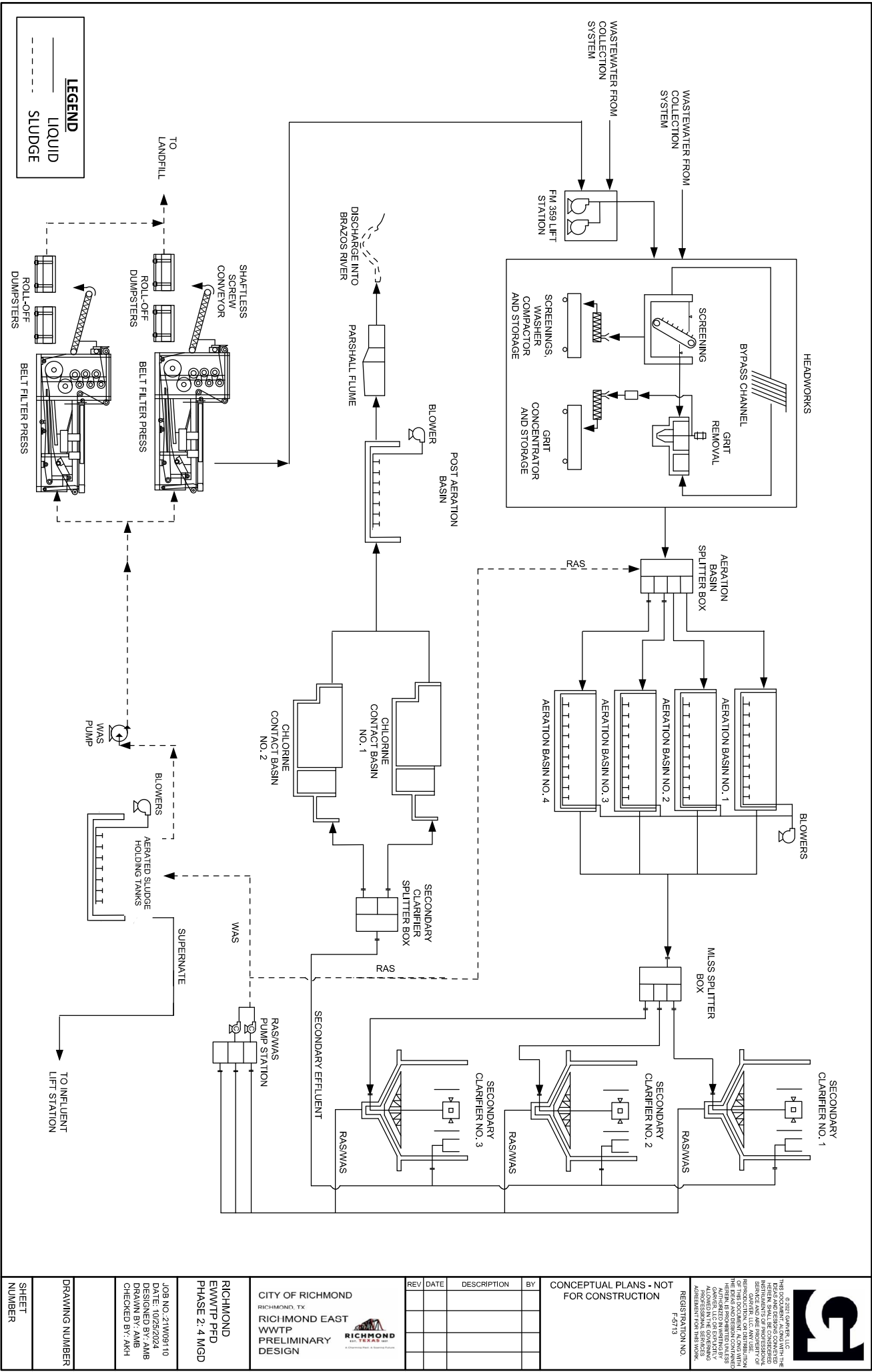
CITY OF RICHMOND
RICHMOND, TX
RICHMOND EAST
WWTP
PRELIMINARY
DESIGN

RICHMOND
EWM/TP PFD
PHASE 1: 2 MGD

JOB NO. 21W09110
DATE: 10/25/2024
DESIGNED BY: AMB
DRAWN BY: AMB
CHECKED BY: AKH

DRAWING NUMBER

SHEET
NUMBER



THIS DOCUMENT, ALONG WITH THE DESIGN AND TESTING CONCEPTS, IS THE PROPERTY OF THE CITY OF RICHMOND, TEXAS. IT IS TO BE USED ONLY FOR THE PROJECT AND SITE SPECIFICALLY IDENTIFIED HEREIN. NO PART OF THIS DOCUMENT, ALONG WITH THE DESIGN AND TESTING CONCEPTS, IS TO BE REPRODUCED OR TRANSMITTED IN ANY FORM OR BY ANY MEANS, ELECTRONIC OR MECHANICAL, INCLUDING PHOTOCOPYING, RECORDING, OR BY ANY INFORMATION STORAGE AND RETRIEVAL SYSTEM, WITHOUT THE WRITTEN PERMISSION OF THE CITY OF RICHMOND, TEXAS. THE CITY OF RICHMOND, TEXAS, DOES NOT WARRANT THE ACCURACY OR COMPLETENESS OF THE INFORMATION, AND THE CITY OF RICHMOND, TEXAS, ACCEPTS NO LIABILITY FOR ANY ERRORS OR OMISSIONS. THE USER OF THIS DOCUMENT, ALONG WITH THE DESIGN AND TESTING CONCEPTS, AGREES TO HOLD THE CITY OF RICHMOND, TEXAS, HARMLESS FROM AND AGAINST ALL CLAIMS, DAMAGES, LOSSES, AND EXPENSES, INCLUDING REASONABLE ATTORNEY'S FEES, THAT MAY BE ASSERTED AGAINST THE CITY OF RICHMOND, TEXAS, ARISING OUT OF OR RESULTING FROM THE USE OF THIS DOCUMENT, ALONG WITH THE DESIGN AND TESTING CONCEPTS, FOR ANY PURPOSE.

REGISTRATION NO. F-5713

CONCEPTUAL PLANS - NOT FOR CONSTRUCTION

REV	DATE	DESCRIPTION	BY

CITY OF RICHMOND
 RICHMOND, TX
 RICHMOND EAST
 WWTP
 PRELIMINARY
 DESIGN

RICHMOND
 EWMTP PFD
 PHASE 2.4 MGD

JOB NO. 21W09110
 DATE: 10/25/2024
 DESIGNED BY: AMB
 DRAWN BY: AMB
 CHECKED BY: AKH

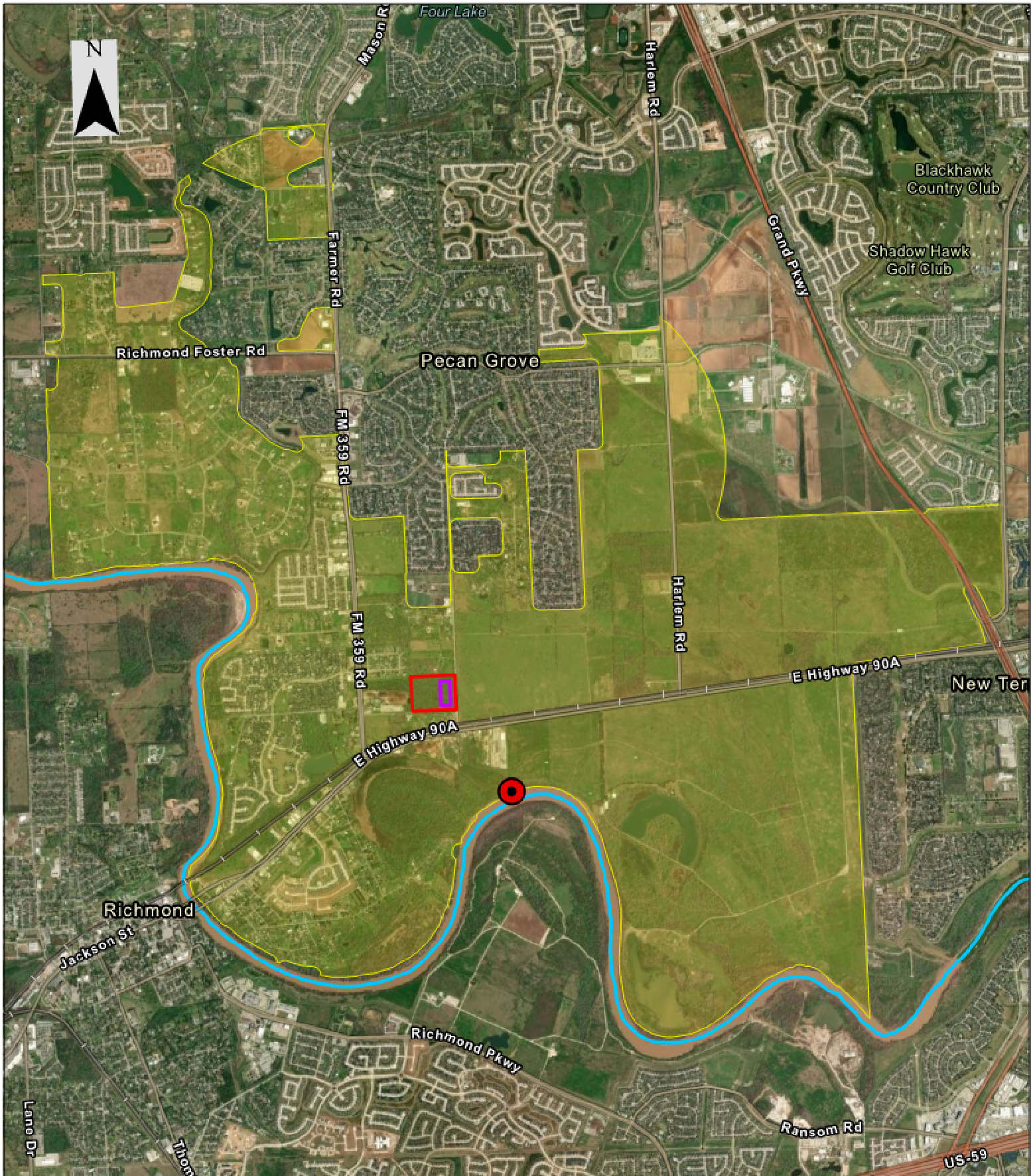
DRAWING NUMBER

SHEET
 NUMBER

ATTACHMENT H

Technical Report 1.0 Item 3

SITE DRAWING AND FACILITIES SERVICE AREA



- | | |
|-----------------------------------|-------------------|
| Facility Site Boundaries | WWTP Service Area |
| Discharge Point | Receiving Waters |
| Proposed WWTP Property Boundaries | |

0 0.25 0.5 1 Miles

SERVICE AREA MAP

East Wastewater Treatment Plant City of Richmond, Texas

ATTACHMENT I

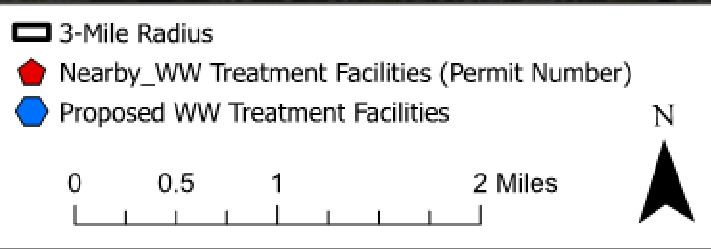
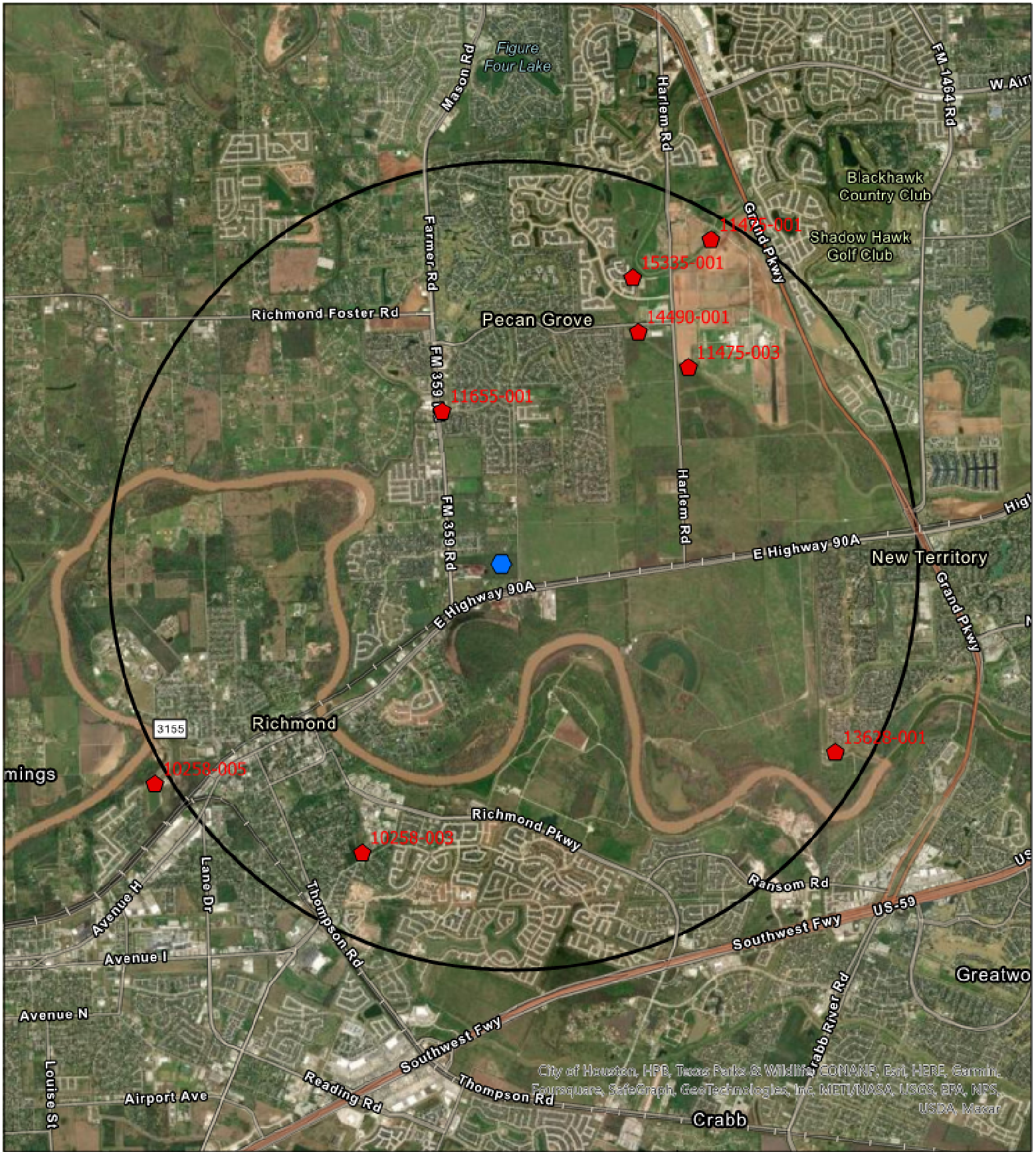
Technical Report 1.1 Item 1.B.3

NEARBY WASTEWATER FACILITIES



NEARBY WASTEWATER FACILITIES LIST

No.	PERMIT_NUM	REGULATED ENTITY NAME	Facility Name	PERMITTEE	PHYSICAL ADDRESS	MAILING ADDRESS	PERMIT STATUS	COUNTY	LAT_DD	LONG_DD
1	15335-001	RN107953705	Harvest Green WWTP	Fort Bend County Mud 134E	1600 Ft N And 800 Ft W Of Interx Plantation Dr And Harlem Rd	9 Greenway Plz Ste 1100 Houston, Tx 77046 - 3653	Active	FORT BEND	29.630001	-95.718889
2	14490-001	RN104149810	Plantation Crossing WWTP	Plantation Crossing Owners Association Inc	1800 Ft W Of Harlem Rd On Plantation Dr 250 Ft S Of Plantation Dr	Po Box 79519 Houston, Tx 77279 -9519	Active	FORT BEND	29.624138	-95.718392
3	11655-001	RN102917283	Pecan Grove WWTP	Pecan Grove Mud	1600 Fm 359 Rd Richmond Tx 77406 1257	3200 Southwest Fwy Ste 2600 Houston, Tx 77027 -7537	Active	FORT BEND	29.616205	-95.742853
4	10258-005	RN101216760	City Of Richmond WWTP	City Of Richmond	Pprox 268 Ft East Of The Intersection Of Rivermoor	402 Morton St Richmond, Tx 77469 -3121	Active	FORT BEND	29.576892	-95.779527
5	13628-001	RN102845930	New Territory Wastewater Treatment Plant	City Of Sugar Land	1000 Feet S Of The Intersection Kyle Hill Lane	Po Box 110 Sugar Land, Tx 77487 -0110	Active	FORT BEND	29.578249	-95.695587
6	11475-001	RN102320322	Tdcj Jester Unit	Texas Dept Of Criminal Justice	4 Miles East Of Richmond On Hwy 90A In Fort Bend County And Tessie Court	Po Box 4011 Huntsville, Tx 77342 -4011	Cancelled	FORT BEND	29.633853	-95.709113
7	11475-003	RN102314671	Tdcj Jester 3 Unit	Texas Dept Of Criminal Justice	3 Jester Rd, Richmond Tx 77406 8544	Po Box 4011 Huntsville, Tx 77342 -4011	Active	FORT BEND	29.620168	-95.71234
8	10258-003	RN102096310	City Of Richmond WWTP	City Of Richmond	220 Legion Dr, On The Northeast Corner Of Rabbs Bayou And Golfview Dr, Approx. 300Ft	402 Morton St Richmond, Tx 77469 -3121	Active	FORT BEND	29.568868	-95.754215



NEARBY WWTPS

East Wastewater Treatment Plant

City of Richmond, Texas

ATTACHMENT J

Technical Report 1.1 Item 4

DESIGN CALCULATIONS

Design Calculations

Influent Quality Characteristics - The raw sewage characteristics used for design purposes are as follows:

<u>Parameter</u>	<u>Concentration</u>
BOD ₅	250 mg/L
TSS	240 mg

Influent Flow Characteristics - The hydraulic design of the facility must ensure that the facility will operate under the most extreme conditions anticipated. The facility process and hydraulic design for this facility are as follows:

Flow	Phase 1-Gallons per Day	Phase 1-Gallons per Day
Average Daily Flow	2,000,000	4,000,000
Peak 2-Hour Flow	8,000,000	16,000,000

Loading	Pounds per Day
BOD ₅	250
TSS	200
NH ₃ -N	35

Process Design - The treatment facility will be designed to produce an effluent quality in compliance with the proposed permitted parameters of:

CBOD₅ = 10 mg/L; TSS = 15 mg/L; NH₃-N = 3 mg/L; DO = 4.0 mg/L;

Cl₂ Residual = 1 to 4 mg/L after 20 minutes detention time at peak flow.

Treatment Units

Table EX4(2) - Aeration Basin

Aeration Basin	Actual Provided
Reactor Type	Plug Flow
Total Aeration Basin Volume	P1: 230,400 ft³ P2: 460,800 ft³
Number of Tanks	P1: 2 P2: 4
Tank Dimensions	Length - 160 ft Width - 40 ft Depth - 18 ft
Design MLSS	3,500 mg/L
Organic Loading Criteria (lbs BOD/1000 ft³)	Avg. Day: 18.9 Max Month: 31.8
Hydraulic Retention Time	Avg. Day: 21 hr Max Month: 15 hr
Solids Retention Time	Avg. Day: 15 day Max Month: 9.0 day
Diffuser Type	Fine Bubble
Control	DO Control with control valves

Table EX4(3) - Clarifier

Clarifier	TCEQ Requires	Actual Provided
Phase 1:		
Surface loading rate (Qpk) (gallons/day/ ft ²)	1,200 (Max)	905
Detention time (Qpk) (hr)	1.8 (Min)	3.2
Number of Clarifiers	--	2
Surface area per Clarifier (ft ²)		4,418
Volume per Clarifier (ft ³)		70,686
Side-water depth (ft)	10 (Min)	16
Maximum weir loading (Qpk) (gallons/day/ft)	30,000 (Max)	18,190
Diameter (ft)	--	75
Weir length (ft)	--	219.9
Phase 2:		
Surface loading rate (Qpk) (gallons/day/ ft ²)	1,200 (Max)	1,200
Detention time (Qpk) (hr)	1.8 (Min)	2.4
Number of Clarifiers	--	3
Surface area per Clarifier (ft ²)		4,418

Volume per Clarifier (ft3)		70,686
Side-water depth (ft)	10 (Min)	16
Maximum weir loading (Qpk) (gallons/day/ft)	30,000 (Max)	24,252
Diameter (ft)	--	75
Weir length (ft)	--	219.9

Table EX4(4) - Aerated Sludge Holding Tanks

Parameter	Design Criteria	Discussion
Min. Solids Retention Time	P1 Avg. Day: 7 days P1 MM: 4 days	Provides capacity to waste for weekend without solids disposal
Total Volume	400,000 gallons or 54,000 ft3	Phase 1 only (double for Phase 2)
Number of Tanks	2	Redundancy for shutdowns, batch, or sequence
Tank Dimensions	Length - 72 ft Width - 25 ft Depth - 15 ft	Each Tank provides 27,000 ft3
Aeration Demand	Total: 1,620 Per Tank: 810	Designed for 30 SCFM per 1,000 ft3 of tank volume
Blower Type	Positive Displacement	
Number of Blowers	3	One each per tank with swing spare
Diffuser Type	Coarse Bubble	2-inch drop diffusers
Decant Provisions	Telescoping Valves	Assisted Manual with time-based programming
Electrical, Instrumentation and Controls	Solids Electrical Building	Major equipment (blower starters/VFDs, solids PLC, etc.) housed in solids electrical building

Table EX4(5) - Chlorine Contact Chamber

Chlorine Contact Chamber	TCEQ Requires	Actual Provided
Phase 1:		
Detention time (Qpk) (minutes)	20	21.5
Volume (Qpk) (ft3)	--	16,000
Phase 2:		
Detention time (Qpk) (minutes)	20	21.5

Volume (Qpk) (ft3)	--	32,000
--------------------	----	--------

Table EX4(6) – RAS and WAS Pump System

RAS Return Ratio	Min: 0.65x Max: 1.3x	
Phase 1 - RAS Flowrate	Min: 1.3 MGD Max: 2.6 MGD	
Phase 2 - RAS Flowrate	Min: 2.6 MGD Max: 5.2 MGD	
Number of RAS Pumps	P1: 3 P2: 4	Includes one pump on standby.
Number of WAS Pumps	P1: 2 P2: 3	

Air Requirements

Table EX4(6) – Aeration Blower System

Parameter	Design Criteria	Discussion
Air Demand Considerations	Mixing, BOD Removal, Nitrification	Aeration demand for each parameter analyzed
Diffuser Fouling Factor	0.9	
Alpha Factor	0.5	
Diffuser Submergence	17 ft	
Effective Oxygen Transfer Efficiency	34%	Assumes 2% OTE/ft of submergence
Standard Oxygen Requirement	Phase 1 MM: 32,000 lb O ₂ /d Phase 2 MM: 64,000 lb O ₂ /d	Oxygen required for BOD and Nitrification
Total Aeration Requirement	Phase 1 MM: 4,990 SCFM Phase 2 MM: 9,910 SCFM	Safety Factor of 1.33 is used to convert max month demand to peak day
Number of Blowers	Phase 1: 3 Phase 2: 5	Includes one standby blower per phase
Anticipated Blower Design Point	Flow: 2,500 SCFM Pressure: 8.4 psig	
Anticipated Blower Turndown	62%	
Blower Efficiency	0.65	
Blower HP	125 HP	
Blower Control	Header Pressure Control	Maintain header pressure by varying number in service and output of blowers

Facility design features

A. Emergency Power Requirements

In accordance with 30 TAC § 217.36 and due to the number and duration of power outages that have occurred in the past, the treatment facility must incorporate an on-site automatically starting generator capable of continuously operating all critical wastewater treatment system units. The fuel tank must be sized for a run time greater than the longest power outage in the power records. This generator will provide sufficient power for the following units:

1. Influent Lift Station Pumps
2. Mechanical Bar Screen
3. Activated Sludge Mechanical Surface Aerators
4. Final Clarifier Sludge Scrapers
5. Return Activated Sludge Pump
6. Chlorination system
7. Dechlorination system
8. Effluent Metering Station
9. Lighting Panels and Control Equipment

An automatic transfer switch will be included to transfer electrical loads to the generator during an outage. In accordance with 30 TAC § 217.37, the disinfection system will automatically restart during a power outage and upon transfer back to the main power source.

B. Alarm Features

The facility will be equipped with a Supervisory Control and Data Acquisition (SCADA) system to monitor the operation of all critical treatment units. The control room will include a computer with graphic display of the treatment units that will indicate status and alarm conditions. The computer system will include an autodialer to alert facility personnel of the following conditions:

1. Power Outage
2. Influent Lift Station Wet Well High Level
3. Bar Screen Channel High Level
4. Final Clarifier Torque Overload
5. Equipment Failure
6. Chlorine Leak Detection
7. Sulfur Dioxide Leak Detection

The autodialer will store prerecorded messages concerning each alarm condition and the procedure to be followed and will call up to 8 different phone numbers until the alarm condition is acknowledged. The influent lift station and final clarifiers will also be equipped with local alarm lights for high level and high torque respectively.

C. Design Features for Reliability And Operating Flexibility

1. Influent lift station: The influent lift station will include three submersible pumps sized to meet peak flow pumping capacity with the largest unit out of service. Level switches will automatically start and stop the pumps based on influent flows and rising and falling wet well levels. High wet well level will result in an alarm condition.
2. Bar screen: The mechanical bar screen structure will include a bypass channel with a manual screen for use when needed. Slide gates will be used to isolate each channel as required.
3. Grit chamber: The grit chamber will include a bypass channel and slide gates to allow the chamber to be taken out of service for maintenance and repair.
4. Aeration basins: Two aeration basins will be included for phase 1 and four for phase 2, each capable of continuous operation. Piping and valves will be included to allow each unit to be individually isolated for draining, cleaning or repairs.
5. Final Clarifiers: Two final clarifiers will be included for phase 1 and three for phase 2, each capable of continuous operation. Piping and valves will be included to allow each unit to be individually isolated for draining, cleaning or repairs.

D. Overflow prevention

The following design features will be used to prevent the overflow of wastewater from treatment units.

1. The facility design includes a peaking factor of 4.0 to insure adequate hydraulic capacity.
2. The influent lift station will be designed with the capacity to pump peak flow with the largest single pump out of service.

The facility hydraulic design, including piping, channels, weirs, troughs and other features, will be sized to allow the 2-hour peak flow to pass through the facility without exceeding minimum freeboard requirements with any single treatment unit out of service.

ATTACHMENT K

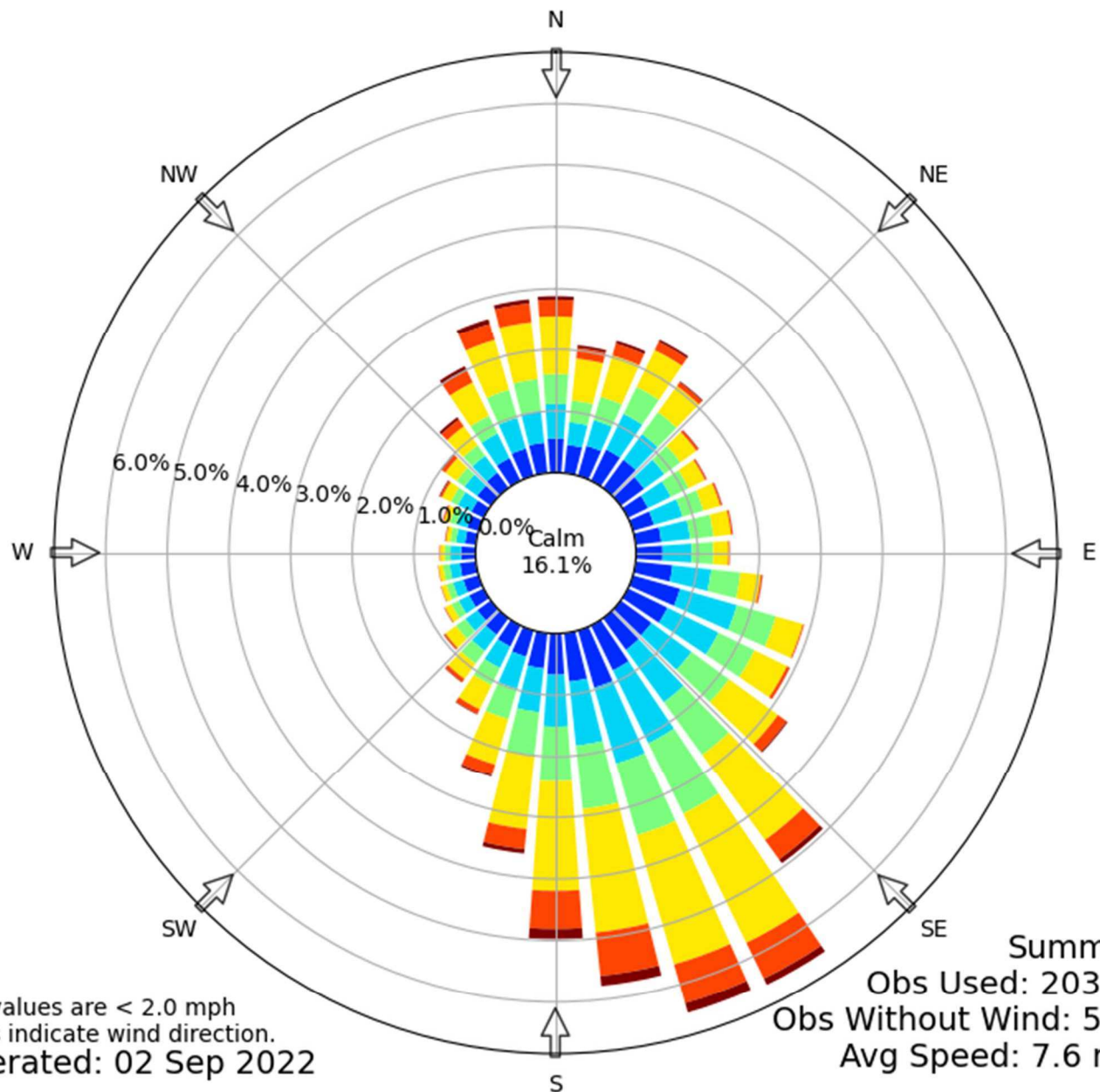
Technical Report 1.1 Item 5.B

WINDROSE



Windrose Plot for [SGR] HOUSTON/HULL FIELD

Obs Between: 01 Jul 1996 05:50 AM - 01 Sep 2022 08:53 PM America/Chicago



Wind Speed [mph]

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

WINDROSE

East Wastewater Treatment Plant

City of Richmond, Texas

ATTACHMENT L

Technical Report 1.1 Item 7

SOLIDS MANAGEMENT PLAN

Richmond East Wastewater Treatment Plant**Domestic Technical Report 1.0; Section 9**

Permit Phase	Interim I
Average Flow (mgd)	2.000

Dimensions and Capacities of Aerobic Digester	
TCEQ Minimum Sludge Retention Time (days)	15
Digester Length (ft)	-
Digester Width (ft)	-
Digester Diameter (ft)	23
Digester (Liquid) Depth (ft)	20
Number of Digesters	1
Digester Volume (c.f.)	8,310
Digester Sludge Retention Time (days)	40

CBOD₅ Removal:	
Influent Concentration (mg/L)	280
Effluent Concentration (mg/L)	20
Net removal (mg/L)	260

Solids Generated	100% Flow	75% Flow	50% Flow	25% Flow
Pounds BOD ₅ /day Removed	4,337	3,253	2,168	1,084
Pounds of Dry Sludge Produced per day (see Note 1)	1,735	1,301	867	434
Pounds of Wet Sludge Produced per day (see Note 2)	115,648	86,736	57,824	28,912
Volume of Wet Sludge per day (gal)	13,867	10,400	6,933	3,467

Note 1: Assumes 0.4 pounds of dry sludge produced per pound of CBOD₅ removed.

Note 2: Assumes 1.5% solids.

MLSS Operating Range = 2,500 mg/L

Sludge stays in the digester, clear liquor is decanted off the digester and returned to the head of the plant. Sludge is intermittently wasted from the clarifier to the digester and returned to the aeration basin.

Removal Schedule (Days)	100% Flow	75% Flow	50% Flow	25% Flow
Days between sludge removal	4	6	9	18

Sludge will be removed from the digester when it is full of thickened solids. Sludge will be hauled by a registered sludge transporter to a permitted site for disposal.

Richmond East Wastewater Treatment Plant

Domestic Technical Report 1.0; Section 9

Permit Phase	Final
Average Flow (mgd)	4.000

Dimensions and Capacities of Aerobic Digester	
TCEQ Minimum Sludge Retention Time (days)	15
Digester Length (ft)	-
Digester Width (ft)	-
Digester Diameter (ft)	23
Digester (Liquid) Depth (ft)	20
Number of Digesters	2
Digester Volume (c.f.)	16,619
Digester Sludge Retention Time (days)	40

CBOD₅ Removal:	
Influent Concentration (mg/L)	280
Effluent Concentration (mg/L)	20
Net removal (mg/L)	260

Solids Generated	100% Flow	75% Flow	50% Flow	25% Flow
Pounds BOD ₅ /day Removed	8,674	6,505	4,337	2,168
Pounds of Dry Sludge Produced per day (see Note 1)	3,469	2,602	1,735	867
Pounds of Wet Sludge Produced per day (see Note 2)	231,296	173,472	115,648	57,824
Volume of Wet Sludge per day (gal)	27,733	20,800	13,867	6,933

Note 1: Assumes 0.4 pounds of dry sludge produced per pound of CBOD₅ removed.

Note 2: Assumes 1.5% solids.

MLSS Operating Range = 2,500 mg/L

Sludge stays in the digester, clear liquor is decanted off the digester and returned to the head of the plant. Sludge is intermittently wasted from the clarifier to the digester and returned to the aeration basin.

Removal Schedule (Days)	100% Flow	75% Flow	50% Flow	25% Flow
Days between sludge removal	4	6	9	18

Sludge will be moved from the digester when it is full of thickened solids. Sludge will be hauled by a registered sludge transporter to a permitted site for disposal.

ATTACHMENT M

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, a Public Involvement Plan is not necessary. Completion of the remaining sections not required.

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

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

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

Section 3. Application Information

Type of Application (check all that apply):

Air ☐ Initial ☐ Federal ☐ Amendment ☐ Standard Permit ☐ Title V

Waste ☐ Municipal Solid Waste ☐ Industrial and Hazardous Waste
 ☐ Radioactive Materials Licensing ☐ Underground Injection Controls

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.

The City of Richmond has planned to build new wastewater treatment facilities that will serve the east portion of the service area. The facilities will be designed considering the future population and future developments within the city's service area.

For that purpose an application to obtain a domestic wastewater discharge permit will be submitted to TCEQ. During the permitting process the city of Richmond will share information regarding the project by means of public notices in newspapers of general circulation in Ford Bend County. Also, a hard copy of the application documents will be available in a county's library for public view.

It will be considered alternative languages spoken in the area, so if necessary, alternative language public notices will be published in a newspaper in that language that has general circulation in the county or city, if available.

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.

Richmond
(City)

Fort Bend
(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 78.5
(b) Per capita income for population near the specified location 24,559
(c) Percent of minority population and percent of population by race within the specified location Hispanic or Latino (50.5%); Black or African American (22.2%), White (21.9%); Asian (4.8%)
(d) Percent of Linguistically Isolated Households by language within the specified location 39.7% Spanish (Language other than english spoken at home)
(e) Languages commonly spoken in area by percentage Not Found
(f) Community and/or Stakeholder Groups N/A
(g) Historic public interest or involvement N/A

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) George Memorial Library, 1001 Golfview Drive, Richmond, Texas 77469

Section 7. Voluntary Submittal

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

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

☒ Yes ☐ No

What types of notice will be provided?

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

ATTACHMENT N

PLAIN LANGUAGE SUMMARY

Plain Language Summary:

English:

The City of Richmond (CN600659031) proposes to operate Richmond East Wastewater Treatment Plant (RN112187869), a municipal activated sludge process plant in complete mix mode. The facility will be located at 600ft North of the intersection of Pitts Road and US 90 Alt., in Richmond, Fort Bend County, Texas 77406. This application is for a new application to discharge at a daily average flow of 4,000,000 gallons per day of treated domestic wastewater.

Discharges from the facility are expected to contain five-day carbonaceous biochemical oxygen demand (CBOD₅), total suspended solids (TSS), ammonia nitrogen (NH₃-N), and Escherichia coli. Domestic wastewater will be treated by an activated sludge process plant and the treatment units will include bar screens, grit chambers, aeration basins, secondary clarifiers, sludge digesters, a belt filter press, chlorine contact basins and a dechlorination channel.

Espanol:

La Ciudad de Richmond (CN600659031) propone operar la Planta de Tratamiento de Aguas Residuales Richmond East (RN112187869), una planta municipal con proceso de lodos activados en modo de mezcla completa. La instalación estará ubicada a 600 pies al norte de la intersección de Pitts Road y US 90 Alt., en Richmond, Condado de Fort Bend, Texas 77406. Esta solicitud es para una nueva autorización para descargar un flujo promedio diario de 4,000,000 de galones por día de aguas residuales domésticas tratadas.

Se espera que las descargas de la instalación contengan demanda bioquímica de oxígeno carbonácea de cinco días (CBOD₅), sólidos suspendidos totales (TSS), nitrógeno amoniacal (NH₃-N) y Escherichia coli.

Las aguas residuales domésticas serán tratadas mediante un proceso de lodos activados, y las unidades de tratamiento incluirán rejillas de desbaste, cámaras de arenas, tanques de aireación, clarificadores secundarios, digestores de lodos, una prensa de bandas, tanques de contacto con cloro y un canal de dechloración.

ATTACHMENT O

LETTERS TO NEARBY WASTEWATER TREATMENT FACILITIES

U.S. Postal Service[™]
CERTIFIED MAIL[®] RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE

1569 0710 5270 2630 5962 79

Sent out
05/05/25

Postmark
Here

1. Certified Mail Fee \$

2. Return Receipt (hardcopy) \$

3. Return Receipt (electronic) \$

4. Certified Mail Restricted Delivery \$

5. Adult Signature Required \$

6. Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent to: New Territory WWTP

Street and Apt. No.: P.O. Box 110

City, State, ZIP+4[®]: Sugar Land, TX 77487-0110

PS Form 3800, January 2002 PSN 7530-02-000-9053 See Reverse for Instructions

CERTIFIED MAIL[®]

12141 Wickchester Lane
 Suite 200
 Houston, TX 77079
 GarverUSA.com

9569 0710 5270 2630 5962 79

USPS 15 01
\$5.54 0
 US POSTAGE 1st
 FIRST-CLASS
 OCTOBER 4, 2025
 FROM 76252

New Territory wastewater
 Treatment Plant
 P.O. Box 110
 Sugar Land, TX 77487-0110

U.S. Postal Service[™]
CERTIFIED MAIL[®] RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE

1569 0710 5270 2630 5962 79

Sent out
05/05/25

Postmark
Here

1. Certified Mail Fee \$

2. Return Receipt (hardcopy) \$

3. Return Receipt (electronic) \$

4. Certified Mail Restricted Delivery \$

5. Adult Signature Required \$

6. Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent to: New Territory WWTP

Street and Apt. No.: P.O. Box 110

City, State, ZIP+4[®]: Sugar Land, TX 77487-0110

PS Form 3800, January 2002 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.
 ■ Print your name and address on the reverse so that we can return the card to you.
 ■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 New Territory waste-
 water Treatment Plant
 P.O. Box 110
 Sugar Land, TX 77487-0110

9590 9402 9480 5069 0989 30

2. Article Number (Transfer from service label)
 9569 0710 5270 2630 5962 79

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
☒ Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type ☐ Priority Mail Express[®]
☐ Adult Signature ☐ Registered Mail[™]
☐ Adult Signature Restricted Delivery ☐ Registered Mail Restricted Delivery
☐ Certified Mail[®] ☐ Signature Confirmation[™]
☐ Certified Mail Restricted Delivery ☐ Signature Confirmation Restricted Delivery
☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery
☐ Insured[®] Mail ☐ Insured Mail Restricted Delivery
☐ Not Restricted Delivery

Domestic Return Receipt

9589 0710 5270 2830 5962 86

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee \$
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent to **Harvest Green WWTP**
 Street and Apt. No. or PO Box No. **9 Greenway Plz Ste 1100**
 City, State, ZIP+4® **Houston, TX 77046-3653**

PS Form 3800, January 2002 PSN 7530-02-000-9047 See Reverse for Instructions

CERTIFIED MAIL™

12141 Wickchester Lane
Suite 200
Houston, TX 77079
GarverUSA.com

9589 0710 5270 2830 5962 86

Harvest Green WWTP
9 Greenway Plz Ste 1100
Houston, TX 77046-3653

9589 0710 5270 2830 5962 86

US POSTAGE (M)
FIRST CLASS
063031-660-000
FROM 75222

\$5.54 0

9589 0710 5270 2830 5962 86

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee \$
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent to **Harvest Green WWTP**
 Street and Apt. No. or PO Box No. **9 Greenway Plz Ste 1100**
 City, State, ZIP+4® **Houston, TX 77046-3653**

PS Form 3800, January 2002 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.
 ■ Print your name and address on the reverse so that we can return the card to you.
 ■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
Harvest Green WWTP
9 Greenway Plz Ste 1100
Houston, TX 77046-3653

2. Article Number (Transfer from service label)
 9590 9402 9480 5069 0989 23

3. Service Type
☐ Adult Signature
☒ Certified Mail
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Restricted Delivery

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ X
☐ Agent
☐ Addressee

B. Received by (Printed Name)
 C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt

U.S. Postal Service[®]
CERTIFIED MAIL[®] RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com.

OFFICIAL USE

Sent out
 05/05/25

Postmark
 Here

Postage

Total Postage and Fees

Send To: Plantation Crossing WWTP
 P.O. Box 79519
 Houston, TX 77279-9519

PS Form 3800, January 2002 PSN 7530-02-000-9053 See Reverse for Instructions

CERTIFIED MAIL

12141 Wickchester Lane
 Suite 200
 Houston, TX 77079
 GarverUSA.com

9589 0710 5270 2830 5962 55

Plantation Crossing WWTP
 P.O. Box 79519
 Houston, TX 77279-9519

9589 0710 5270 2830 5962 55

US POSTAGE 188
 FIRST CLASS
 000000-000000
 PSN 7530-02-000-9053

U.S. Postal Service[®]
CERTIFIED MAIL[®] RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com.

OFFICIAL USE

Sent out
 05/05/25

Postmark
 Here

Postage

Total Postage and Fees

Send To: Plantation Crossing WWTP
 P.O. Box 79519
 Houston, TX 77279-9519

PS Form 3800, January 2002 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER, COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.
 ■ Print your name and address on the reverse so that we can return the card to you.
 ■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 Plantation Crossing
 WWTP
 P.O. Box 79519
 Houston, TX 77279-9519

9590 9402 9480 5069 0989 47

2. Article Number (Transfer from service label)
 9589 0710 5270 2830 5962 55

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type
☐ Adult Signature ☐ Registered Mail[™]
☐ Adult Signature Restricted Delivery ☐ Registered Mail Restricted Delivery
☒ Certified Mail[®] ☐ Signature Confirmation[™]
☐ Certified Mail Restricted Delivery ☐ Signature Confirmation Restricted Delivery
☐ Collect on Delivery ☐ Restricted Delivery

Domestic Return Receipt

PS Form 3811, July 2000 PSN 7530-02-000-9053

U.S. Postal Service[™]
CERTIFIED MAIL[®] RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com[®].

OFFICIAL USE

Sent out
05/05/25

Postmark
None

Service Type
☐ Certified Mail Restricted Delivery
☐ Return Receipt Restricted Delivery
☐ Certified Mail Restricted Delivery
☐ Adult Signature Required
☐ Adult Signature Restricted Delivery

Postage
\$5.54

Total Postage and Fees
\$5.54

Sent to
Pecan Grove WWTP
 3200 Southwest Fwy Ste 2600
 Houston, TX 77027-7537

PS Form 3811, January 2020 PSN 7530-02-000-9003 See Reverse for Instructions

12141 Wickchester Lane
 Suite 200
 Houston, TX 77079

GARVER
 GarverUSA.com

CERTIFIED MAIL[®]

9589 0710 5270 2830 5962 62

US POSTAGE IN
 FIRST CLASS
 PERMIT NO. 1000
 HOUSTON, TX 77002

PECAN GROVE WWTP
 3200 Southwest Fwy
 Ste 2600
 Houston, TX 77027-7537

U.S. Postal Service[™]
CERTIFIED MAIL[®] RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com[®].

OFFICIAL USE

Sent out
05/05/25

Postmark
None

Service Type
☐ Certified Mail Restricted Delivery
☐ Return Receipt Restricted Delivery
☐ Certified Mail Restricted Delivery
☐ Adult Signature Required
☐ Adult Signature Restricted Delivery

Postage
\$5.54

Total Postage and Fees
\$5.54

Sent to
Pecan Grove WWTP
 3200 Southwest Fwy Ste 2600
 Houston, TX 77027-7537

PS Form 3811, January 2020 PSN 7530-02-000-9003 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.
 ■ Print your name and address on the reverse so that we can return the card to you.
 ■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 Pecan Grove WWTP
 3200 Southwest Fwy
 Ste 2600
 Houston, TX 77027-7537

2. Article Number (Transfer from service label)
 9589 0710 5270 2830 5962 62

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Agent
☐ Addressee

B. Received by (Printed Name)
☐ Yes
☐ No

C. Date of Delivery

D. Is delivery address different from item 1? If YES, enter delivery address below.

3. Service Type
☐ Adult Signature
☐ Registered Mail[™]
☐ Certified Mail[®]
☐ Certified Mail Restricted Delivery
☐ Signature Confirmation[™]
☐ Signature Confirmation Restricted Delivery
☐ Priority Mail Express[®]
☐ Registered Mail[™]
☐ Registered Mail Restricted Delivery
☐ Signature Confirmation[™]
☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2020 PSN 7530-02-000-9003 Domestic Return Receipt

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee \$
 Return Receipt (hardcopy) \$
 Return Receipt (electronic) \$
 Certified Mail Restricted Delivery \$
 Adult Signature Required \$
 Adult Signature Restricted Delivery \$
 Postage \$

Total Postage and Fees \$

Sent to TDCJ Jester 3 unit
 Street and Apt. No., PO Box No. P.O. Box 4011
 City, State, ZIP+4® Huntsville, TX 77342-4011

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

CERTIFIED MAIL®

12141 Wickchester Lane
 Suite 200
 Houston, TX 77079
 GarverUSA.com

9569 0710 5270 2830 5962 48

TDCJ Jester 3 unit
 P.O. Box 4011
 Huntsville, TX 77342-4011

9569 0710 5270 2830 5962 48

US POSTAGE 100
 FIRST CLASS
 OCT 2021 PERMIT
 FROM TEXAS

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee \$
 Return Receipt (hardcopy) \$
 Return Receipt (electronic) \$
 Certified Mail Restricted Delivery \$
 Adult Signature Required \$
 Adult Signature Restricted Delivery \$
 Postage \$

Total Postage and Fees \$

Sent to TDCJ Jester 3 unit
 Street and Apt. No., PO Box No. P.O. Box 4011
 City, State, ZIP+4® Huntsville, TX 77342-4011

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.
 ■ Print your name and address on the reverse so that we can return the card to you.
 ■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
TDCJ Jester 3 unit
P.O. Box 4011
Huntsville, TX 77342-4011

2. Article Number (Transfer from service label)
9569 0710 5270 2830 5962 48

PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

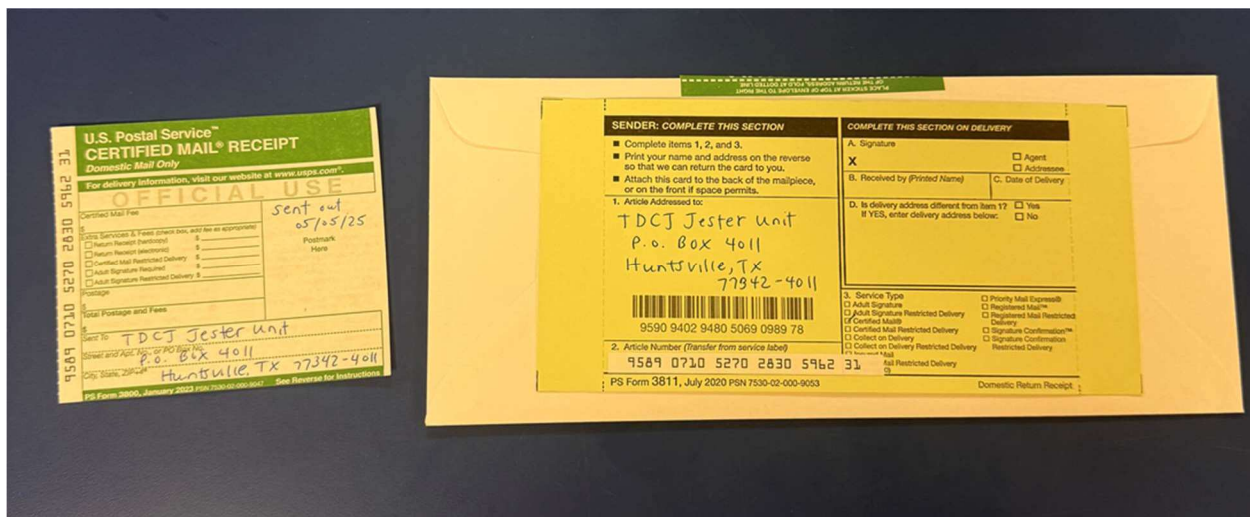
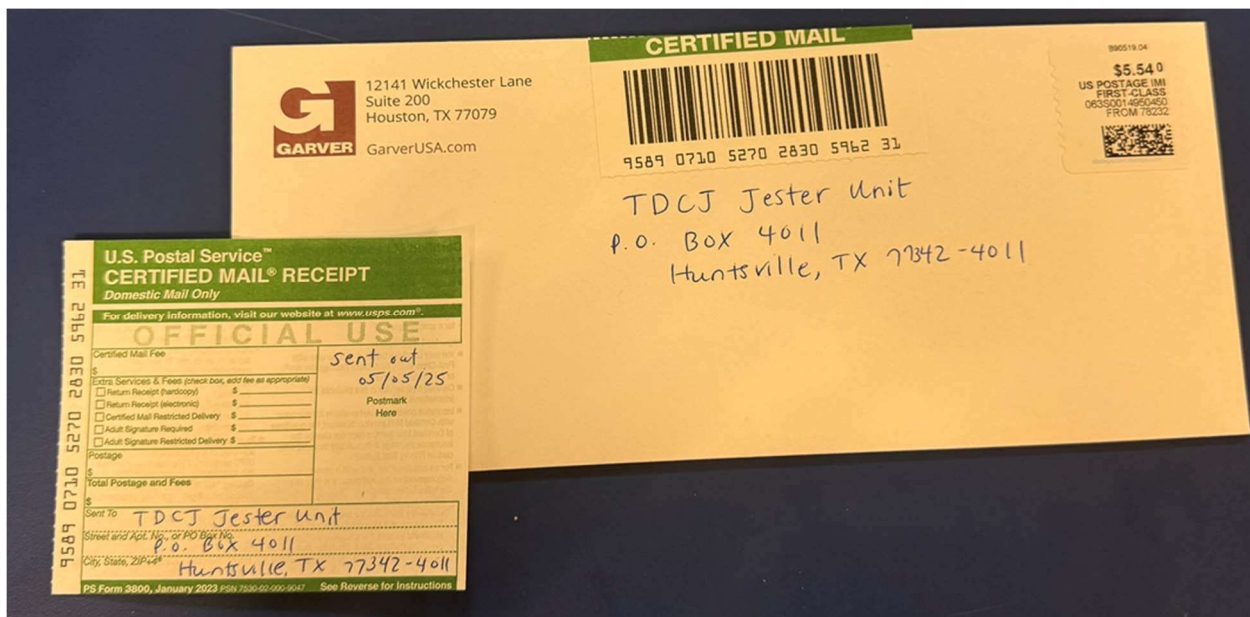
A. Signature X
☐ Agent
☐ Addressee

B. Received by (Printed Name) _____ C. Date of Delivery _____

D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Restricted Delivery

☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery





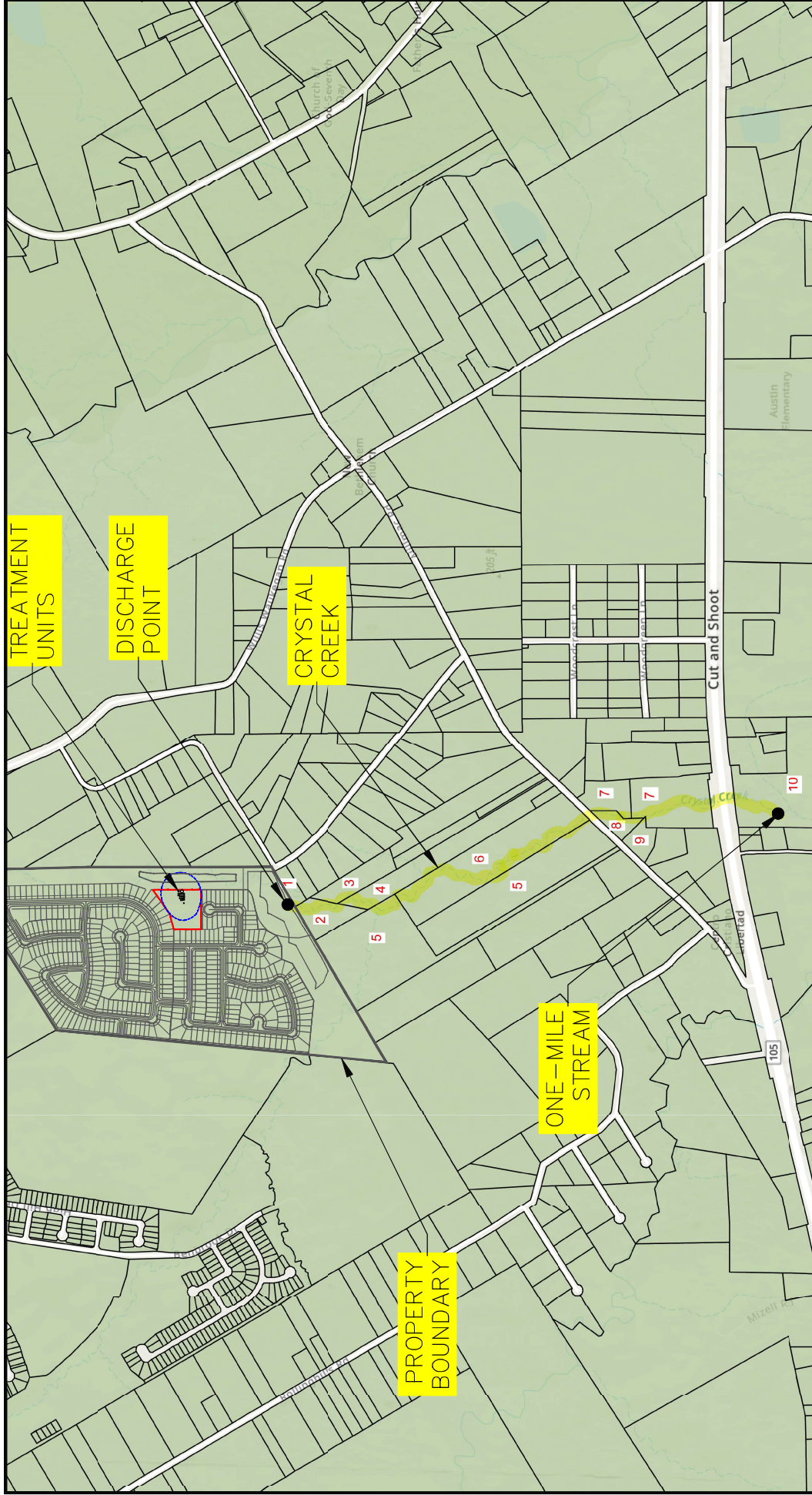
AFFECTED LANDOWNERS LIST

No.	PROPERTY ID	OWNER NAME	MAILING ADDRESS	CITY	STATE	ZIP CODE	LAND ACREAGE
1	R36236	Simi Investment Company Ltd	2330 Holmes RD	Houston	TX	77051-1014	6.59
2	R36242	Dacus Land and Cattle Company	PO Box 450862	Houston	TX	77245-0862	1.50
3	R36239	Cox Lois	11003 Needville Fairchilds RD	Needville	TX	77461-9225	6.28
4	R240030	GALVAN CLEMENTE C JR	1924 E HIGHWAY 90A	Richmond	TX	77406-2524	0.10
5	R36251	YAM Investment Inc	1912 E Highway 90A	Richmond	TX	77406-2500	5.52
6	R218095	Lone Goat # 2 LLC & Tres Hunt Family Holdings LLC	5528 Cranbrook RD	Houston	TX	77056-1611	147.35
7	R293760	Vasbinder David	2011 E HIGHWAY 90A	Richmond	TX	77469-2527	2.71
8	R36226	Robinson Callen Trust	605 Lincoln RD STE 320	Miami Beach	FL	33139-2934	12.17
9	R300097	Franks Nursery LLC	302 Fm 359 RD	Richmond	TX	77406-2406	6.50
10	R226305	SMITH JAMES C & SHERYL ANN	2123 Morton League RD	Richmond	TX	77406-1228	6.86
11	R247408	Franks Nursery LLC	302 Fm 359 RD	Richmond	TX	77406-2406	6.70
12	R36288	Zelaya Rosalio & Lucinda	103 Pitts RD	Richmond	TX	77406-2503	2.80
13	R35042	Lone Goat # 2 LLC & Tres Hunt Family Holdings LLC	5528 Cranbrook RD	Houston	TX	77056-1611	102.55
14	R34997	Henderson-Wessendorff Foundation	611 Morton ST	Richmond	TX	77469-3083	516.80
15	R36259	Oazis Sons Inc	1385 FM 359 RD	Richmond	TX	77406-2017	7.29
16	R218716	GALVAN RICHARD C & PAULA	1924 E HIGHWAY 90A REAR	Richmond	TX	77406-2524	1.00
17	R36241	All Star Storage INC	2122 E Highway 90A	Richmond	TX	77406-2528	6.98
18	R36287	Galvan Antonia	804 7th ST	Rosenberg	TX	77471-2516	3.15
19	R127809	Zelaya Rosalio & Lucinda	103 Pitts RD	Richmond	TX	77406-2503	2.10
20	R162590	Zelaya Rosalio & Lucinda	103 Pitts RD	Richmond	TX	77406-2503	1.80
21	R162591	Dalfrey Brady J & Penny P	115 Pitts RD	Richmond	TX	77406-2503	1.80
22	R36289	CA & H Inc	121 Pitts RD	Richmond	TX	77406-2503	0.51
23	R36253	Rubenstein Scott	2330 Holmes RD	Houston	TX	77051-1098	0.97
24	R219093	Brasseur Wilfred P & Judy E	401 Pitts RD	Richmond	TX	77406-2509	20.59
25	R245474	Shadow Grove Estates Homeowners Assoc	PO Box 1631	Richmond	TX	77406-1631	5.41
26	R36246	GARVER C	1901 LEXINGTON ST	Houston	TX	77098-4219	23.32
27	R36303	Lone Goat # 2 LLC & Tres Hunt Family Holdings LLC	5528 Cranbrook RD	Houston	TX	77056-1611	358.85
28	R351255	City of Richmond	402 MORTON ST	Richmond	TX	77469-3121	2.00
29	R162599	Zelaya Rosalio & Lucinda	103 Pitts RD	Richmond	TX	77406-2503	2.56
30	R36308	Res/Vls Real Est LTD Partnership	1900 West LOOP S STE 1050	Houston	TX	77021-3295	518.65
31	R36304	Lone Goat # 2 LLC & Tres Hunt Family Holdings LLC	5528 Cranbrook RD	Houston	TX	77056-1611	20.00

**MAJESTIC DEVELOPERS
NORTHWOOD WASTEWATER DISCHARGE APPLICATION**

3-MILE RADIUS WASTEWATER OUTFALLS

No.	Wastewater Outfall No.	NPDES No.	Permittee	Latitude	Longitude
1	12204-001	83216	Conroe ISD	30.332777	-95.332768
2	15296-001	135755	Montgomery County MUD No. 145	30.350903	-95.373069
3	15971-001	141127	Stone Hedge Utility Co. Inc.	30.338611	-95.39222
4	584-001	5592	Huntsman Petrochemical LLC	30.30951	-95.38249
5	584-002	5592	Huntsman Petrochemical LLC	30.310397	-95.386947
6	2475-002	87190	Chevron Philipps Chemical Company	30.314485	-95.390655
7	15261-001	135453	Crystal Springs Water Co. Inc.	30.309605	-95.332371
8	15857-001	139939	Quadvest LP	30.35500	-95.407001
9	15815-001	139505	Deer Trail Water District LLC	30.362453	-95.394492
10	16067-001	142000	Willis Waukegan Development LLC	30.380006	-95.367864



1:13,060
0 0.13 0.25 0.5 mi
0 0.2 0.4 0.8 km

Esri, NASA, NGA, USGS, FEMA, Esri, Community Maps
Contributors: DETCOG, Montgomery County, TX GIS Office, Texas
Parks & Wildlife, CONANP, Esri, TomTom, Garmin, SafeGraph,
GeoTechnologies, Inc. MET/NASA, USGS, EPA, NPS, US Census
Bureau, USDA, USFWS

AFFECTED LANDOWNER MAP 2 OF 2

ADMINISTRATIVE REPORT 1.1

NORTHWOOD WWTP



MAJESTIC DEVELOPERS

Francesca Findlay

From: Macmanus, Alec R. <ARMacmanus@GarverUSA.com>
Sent: Thursday, May 8, 2025 1:15 PM
To: Francesca Findlay
Cc: Hann,Tyson O.
Subject: RE: WQ0016767001 - City of Richmond Part 1
Attachments: Richmond East Final Permit Application_Rev2_Part 1.pdf

Good Afternoon,

See the attached documents. Due to the size, they are being sent in parts.

Regards,

Alec Macmanus, PE
Garver
979-321-7756

From: Francesca Findlay <Francesca.Findlay@tceq.texas.gov>
Sent: Tuesday, May 6, 2025 8:58 AM
To: Macmanus, Alec R. <ARMacmanus@GarverUSA.com>
Cc: Hann,Tyson O. <TOHann@GarverUSA.com>
Subject: RE: WQ0016767001 - City of Richmond

Good afternoon,

I am having trouble getting the documents that you send to ftp. The application has an error message. Please send me the individual documents that were requested to be updated to my email address.

The Core Data Form.

The Admin. Report that has been updated.

The Technical Report Pages that have been updated.

The landowners' labels are formatted incorrectly. On page 37 of the instructions shows the correct formatting. I have attached the instructions for your review.

The Landowner's map is incorrect. Please provide the property boundaries of the landowners surrounding the applicant's property have been clearly delineated on the map.

The Landowner's list also needs to be updated with all the property boundaries.

Please let me know if you have any questions.

Thank you,

Francesca Findlay
License & Permit Specialist

ARP Team | Water Quality Division
512-239-2441
Texas Commission on Environmental Quality



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

How is our customer service? Fill out our online customer satisfaction survey at <http://www.tceq.texas.gov/customersurvey>.

From: Macmanus, Alec R. <ARMacmanus@GarverUSA.com>
Sent: Friday, May 2, 2025 7:30 AM
To: Francesca Findlay <Francesca.Findlay@tceq.texas.gov>
Cc: Hann,Tyson O. <TOHann@GarverUSA.com>
Subject: RE: WQ0016767001 - Spanish NORI Questions

Ms. Findlay,

See the attached landowners mail labels.

Please let me know if we can provide any additional information.

Thanks,

Alec Macmanus, PE
Garver
979-321-7756

From: Francesca Findlay <Francesca.Findlay@tceq.texas.gov>
Sent: Thursday, May 1, 2025 4:32 PM
To: Macmanus, Alec R. <ARMacmanus@GarverUSA.com>
Cc: Hann,Tyson O. <TOHann@GarverUSA.com>
Subject: RE: WQ0016767001 - Spanish NORI Questions

Good afternoon,

I have received your documents. I do need the landowner's labels in a word document.

Thank you,

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



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

How is our customer service? Fill out our online customer satisfaction survey at <http://www.tceq.texas.gov/customersurvey>.

From: Macmanus, Alec R. <ARMacmanus@GarverUSA.com>
Sent: Thursday, May 1, 2025 12:30 PM
To: Francesca Findlay <Francesca.Findlay@tceq.texas.gov>
Cc: Hann,Tyson O. <TOHann@GarverUSA.com>
Subject: RE: WQ0016767001 - Spanish NORI Questions

Good Afternoon,

I just reshared it and included WQD copy. See screenshot below.

Notify Recipients

Files have been shared successfully and will be available until 05/09/2025.
A sample email text is provided that can be edited and sent to the selected recipients for notification.



☒ francesca.findlay@tceq.texas.gov
name: phone: --



☒ wqdecopy@tceq.texas.gov
name: service wqdecopy phone: 512--23-9-00

One or more files have been shared with you from armacmanus@garverusa.com.
Login to <https://ftps.tceq.texas.gov> to retrieve the files. Files will be available until 05/08/2025.

OK

Cancel

Is this what you meant by sending it to the WQED site?

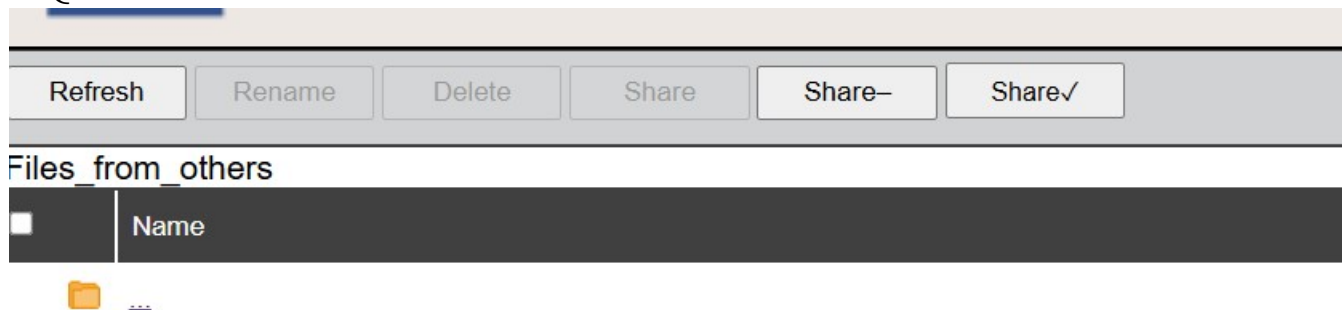
Thank you,

Alec Macmanus, PE
Garver
979-321-7756

From: Francesca Findlay <Francesca.Findlay@tceq.texas.gov>
Sent: Thursday, May 1, 2025 11:44 AM
To: Macmanus, Alec R. <ARMacmanus@GarverUSA.com>
Cc: Hann,Tyson O. <TOHann@GarverUSA.com>
Subject: RE: WQ0016767001 - Spanish NORI Questions

Good morning,

I have checked the FTP Site, and I have not received any documents. Did you send it to the WQED Site?



Thank you,

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



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

How is our customer service? Fill out our online customer satisfaction survey at <http://www.tceq.texas.gov/customersurvey>.

From: Macmanus, Alec R. <ARMacmanus@GarverUSA.com>
Sent: Thursday, May 1, 2025 10:43 AM
To: Francesca Findlay <Francesca.Findlay@tceq.texas.gov>
Cc: Hann, Tyson O. <TOHann@GarverUSA.com>
Subject: RE: WQ0016767001 - Spanish NORI Questions

Ms. Findlay,

I just reuploaded the file and shared it with your email again.

Notify Recipients

Files have been shared successfully and will be available until 05/09/2025.
A sample email text is provided that can be edited and sent to the selected recipients for notification.



☒ francesca.findlay@tceq.texas.gov

name: phone: --

One or more files have been shared with you from armacmanus@garverusa.com.
Login to <https://ftps.tceq.texas.gov> to retrieve the files. Files will be available until 05/08/2025.

OK

Cancel

Can you please confirm that you received it?

Regards,

Alec Macmanus, PE

Garver

979-321-7756

From: Francesca Findlay <Francesca.Findlay@tceq.texas.gov>

Sent: Thursday, May 1, 2025 9:56 AM

To: Macmanus, Alec R. <ARMacmanus@GarverUSA.com>

Cc: Hann,Tyson O. <TOHann@GarverUSA.com>

Subject: RE: WQ0016767001 - Spanish NORI Questions

Good morning,

I have checked with department that receives the ftp's, we are not seeing all the documents uploaded. Can you please resend the updated application to the ftp site.

Thank you,

Francesca Findlay

License & Permit Specialist

ARP Team | Water Quality Division

512-239-2441

Texas Commission on Environmental Quality



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

How is our customer service? Fill out our online customer satisfaction survey at <http://www.tceq.texas.gov/customersurvey>.

From: Macmanus, Alec R. <ARMacmanus@GarverUSA.com>
Sent: Thursday, April 24, 2025 10:13 AM
To: Francesca Findlay <Francesca.Findlay@tceq.texas.gov>
Cc: Hann,Tyson O. <TOHann@GarverUSA.com>
Subject: RE: WQ0016767001 - Spanish NORI Questions

Ms. Findley,

The file size is too large to be emailed. I shared them with you (your email) using the FTPS site because of that.

Thank you,

Alec Macmanus, PE
Garver
979-321-7756

From: Francesca Findlay <Francesca.Findlay@tceq.texas.gov>
Sent: Thursday, April 24, 2025 10:07 AM
To: Macmanus, Alec R. <ARMacmanus@GarverUSA.com>
Cc: Hann,Tyson O. <TOHann@GarverUSA.com>
Subject: RE: WQ0016767001 - Spanish NORI Questions

Good morning,

Please send the updated documents to my email address. I need to see them and update the file. Please let me know if you have any questions.

Thank you,

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



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

How is our customer service? Fill out our online customer satisfaction survey at <http://www.tceq.texas.gov/customersurvey>.

From: Macmanus, Alec R. <ARMacmanus@GarverUSA.com>
Sent: Wednesday, April 23, 2025 6:39 PM
To: Francesca Findlay <Francesca.Findlay@tceq.texas.gov>
Cc: Hann,Tyson O. <TOHann@GarverUSA.com>
Subject: RE: WQ0016767001 - Spanish NORI Questions

Ms. Findlay,

The revised permit application has been uploaded to the TCEQ's FTPS site . We addressed the items as follows:

1. The administrative and technical report were replaced with current application forms.
2. City and State were added to Administrative Report 1.0, Section 4, item A.
3. A distance was added in our description of the physical location in the Core Data Form, Section 3, item 25.
4. Core Data Form, Section 5 (Authorized Signature) is included.
5. Plain Language Summary in English and Spanish are included as Attachment N.
6. Spanish NORI as a word file is attached. Please revise the file as discussed below.
7. An updated Affected Landowner's Map is provided as Attachment C.
8. A full size USGS map in 8.5 by 11-inch portions is included as Attachment B.
9. Please revise the NORI with the changes shown in **red** below:

APPLICATION. City of Richmond, 600 Morton Street, Richmond, Texas 77469, has applied to the Texas Commission on Environmental Quality (TCEQ) for proposed Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0016767001 (EPA I.D. No. TX0147699)

to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 4,000,000 gallons per day. The domestic wastewater treatment facility will be located **600 feet** Northwest of the intersection of Pitts Road and U.S. 90, near the city of Richmond, in Fort Bend County, Texas 77406. The discharge route will be from the plant site to PENDING RWA TCEQ REVIEW. TCEQ received this application on April 2, 2025. The permit application will be available for viewing and copying at City Hall, 402 Morton Street, Richmond, in Fort Bend County, Texas prior to the date this notice is published in the newspaper. The application, including any updates, and associated notices are available electronically at the following webpage:

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

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

<https://gisweb.tceq.texas.gov/LocationMapper/?marker=-95.73592,29.599533&level=18>

10. Spanish NORI as a word file is attached. Please revise the file as discussed below.

Please reach out if you have any additional questions.

Regards,

Alec Macmanus, PE
Garver
979-321-7756

From: Francesca Findlay <Francesca.Findlay@tceq.texas.gov>
Sent: Monday, April 14, 2025 8:38 AM
To: Macmanus, Alec R. <ARMacmanus@GarverUSA.com>
Cc: Hann,Tyson O. <TOHann@GarverUSA.com>
Subject: RE: WQ0016767001 - Spanish NORI Questions

Good morning,

If everything else is correct with the Spanish nori, I can update the number and take the paragraph off. I know it is protected.
Please let me know if you have any questions.

Thank you,

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



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

How is our customer service? Fill out our online customer satisfaction survey at <http://www.tceq.texas.gov/customersurvey>.

From: Macmanus, Alec R. <ARMacmanus@GarverUSA.com>
Sent: Friday, April 11, 2025 4:27 PM
To: Francesca Findlay <Francesca.Findlay@tceq.texas.gov>
Cc: Hann,Tyson O. <TOHann@GarverUSA.com>
Subject: WQ0016767001 - Spanish NORI Questions

Ms. Findlay,

When attempting to revise the new Spanish NORI file you sent for the Richmond East WWTP (RN112187869, WQ0016767001), we are not able to edit the file due to file restrictions (except for the regions that editing is allowed.) This means we can not add the WQ number to the top of the form and we can't remove the sentence relating to the Coastal Management Program that is not applicable for this application. I know the previous versions of this document allowed for these revisions to be made. Are there instructions somewhere on how to revise these sections?

Regards,



Alec Macmanus, PE

Project Engineer

Water Team

📞 979-321-7756

📠 979-321-7756