

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



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

TCEQ

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 <u>Title 30, Texas Administrative Code (30 TAC)</u>, <u>Chapter 39</u>, <u>Subchapter H</u>. 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 Enter 'INDUSTRIAL' or 'DOMESTIC' here WASTEWATER/STORMWATER

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

Undine Texaws Environmental, LLC (CN604519330) proposes to operate Keenan Cutoff Wastewater Treatment Facility (RN_______), a activated sludge process plant operated in the complete mix mode. The facility will be located at The Facility will be located approximately 1.28 miles NW of the interesction of Keenan Cutoff Rd and FM 2854, in Montgomery, Montgomery County, Texas 77316. This application for a new discharge with a final phase of 0.125MGD. << For TLAP applications include the following sentence, otherwise delete:>> This permit will not authorize a discharge of pollutants into water in the state.

Discharges from the facility are expected to contain contain five-day carbonaceous biochemical oxygen demand (CBOD $_5$), total suspended solids (TSS), ammonia nitrogen (NH $_3$ -N), and *Escherichia coli*.. Domestic wastewater will be treated by an activated sludge process plant and the treatment units will include a bar screen, aeration basins, final clarifiers, sludge digesters, and chlorine contact chambers .

Undine Texas Environmental, LLC (CN604519330) propone operar la Planta de Tratamiento de Aguas Residuales (RN_______) de Keenan Cutoff, una planta de procesamiento de lodos activados que funciona en el modo de mezcla completa. La instalación estará ubicada aproximadamente a 1.28 millas al noroeste de la intersección de Keenan Cutoff Rd y FM 2854, en Montgomery, Condado de Montgomery, Texas 77316. Esta solicitud de una nueva descarga con una fase final de 0,125MGD. <<Para las solicitudes de TLAP, incluya la siguiente oración, de lo contrario, elimine:>> Este permiso no autorizará una descarga de contaminantes en el agua del estado. Se espera que las descargas de la instalación contengan una demanda bioquímica carbonosa de oxígeno (CBOD5) de cinco días, sólidos suspendidos totales (TSS), nitrógeno amoniacal (NH3-N) y Escherichia coli. Las aguas residuales domésticas serán tratadas por una planta de procesamiento de lodos activados y las unidades de tratamiento incluirán una pantalla de barras, cuencas de aireación, clarificadores finales, digestores de lodos y cámaras de contacto con cloro.

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY



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

PROPOSED PERMIT NO. WQ0016768001

APPLICATION. Undine Texas Environmental, LLC, 17681 Telge Road, Cypress, Texas 77429, has applied to the Texas Commission on Environmental Quality (TCEQ) for proposed Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0016768001 (EPA I.D. No. TXX0147702) to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 125,000 gallons per day. The domestic wastewater treatment facility will be located approximately 1.28 miles northwest of the intersection of Farm-to-Market Road 2854 and Keenan Cutoff Road, near the city of Montgomery, in Montgomery County, Texas 77316. The discharge route will be from the plant site to an unnamed tributary; thence to Mound Creek; thence to Lake Creek. TCEQ received this application on April 4, 2025. The permit application will be available for viewing and copying at Malcolm Purvis Library, 510 Melton Street, Magnolia, in Montgomery 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=-95.663611,30.336388&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 countywide 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 Undine Texas Environmental, LLC at the address stated above or by calling Mr. Jeff Goebel, Business Development, at 713-724-9321.

Issuance Date: July 1, 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. WQ0016768001

SOLICITUD. Undine Texas Environmental, LLC, 17681 Telge Road, Cypress, Texas 77429, ha solicitado a la Comisión de Calidad Ambiental del Estado de Texas (TCEQ) para el propuesto Permiso No. WQ0016768001 (EPA I.D. No. TXX0147702) 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 125,000 galones por día. La planta estará ubicada aproximadamente 1.28 millas al noroeste de la intersección de Farm-to-Market Road 2854 y Keenan Cutoff Road, cerca de la ciudad de Montgomery, en el condado de Montgomery, Texas 77316. La ruta de descarga estará del sitio de la planta a un afluente sin nombre; de allí a Mound Creek; de allí a Lake Creek. La TCEQ recibió esta solicitud el 4 de abril de 2025. La solicitud para el permiso estará disponible para leerla y copiarla en Malcolm Purvis Library, 510 Melton Street, Magnolia, in Montgomery County, 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=-95.663611,30.336388&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 agrega 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 TCEO.

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 Undine Texas Environmental, LLC a la dirección indicada arriba o llamando a Sr. Jeff Goebel, al 713-724-9321.

Fecha de emisión: 1 de julio de 2025



March 5, 2025

Executive Director
Texas Commission on Environmental Quality
Attn: Water Quality Division
Wastewater Permits Section/Application Team (MC 148)
P.O. Box 13087
Austin, Texas 78711-3087

To Whom It May Concern:

Please find enclosed application for a new Domestic Wastewater Discharge Permit application according to the following:

Type of Application: New Domestic Wastewater Discharge

Applicant:

Undine Texas Environmental, LLC

Permit Number:

Proposed

Name of the Facility: Keenan Cutoff

Jeff Goebel

Thank you

APPLICATION FOR RENEWAL OF A DOMESTIC WASTEWATER DISCHARGE PERMIT

Permit No.: Pending

Keenan Cutoff Wastewater Treatment Facility

Submitted to:

Executive Director
Texas Commission on Environmental Quality
Attn: Water Quality Division
Wastewater Permits Section/Application Team (MC 148)
12100 Park 35 Circle
Building F
Ausitn Texas 78753

Submitted by:

Undine Texas Environmental, LLC 17681 Telge Rd Cypress Texas 77429

COMMISSION PER PRINTED BY

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the application.

APPLICANT NAME: Undine Texas Environmental, LLC

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

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

	Y	IN		Y	N
Administrative Report 1.0	\boxtimes		Original USGS Map	X	
Administrative Report 1.1	×		Affected Landowners Map	×	
SPIF	\boxtimes		Landowner Disk or Labels	×	
Core Data Form	\boxtimes		Buffer Zone Map	X	
Public Involvement Plan Form	X	ā	Flow Diagram	X	
Technical Report 1.0	\boxtimes		Site Drawing	X	
Technical Report 1.1	77.6.	\boxtimes	Original Photographs	X	X 77 D
Worksheet 2.0	X		Design Calculations	X,	
Worksheet 2.1	M		Solids Management Plan	×	
Worksheet 3.0		Ø	Water Balance		×
Worksheet 3.1		×			
Worksheet 3.2		Ø			
Worksheet 3.3		Ø			
Worksheet 4.0	(A)	X			
Worksheet 5.0		X			
Worksheet 6.0		\boxtimes			
Worksheet 7.0		M			

For TCEQ Use Only			
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Expiration Date Permit Number		Region	
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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 E	\$1,615.00
≥1.0 MGD	\$2,050.00 🗓	\$1,615.00 \$2,015.00

Minor Amendment (for any flow) \$150.00

Payment	Inform	ation:
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Mailed Check/Money Order Number: Click to enter text. [220]

Check/Money Order Amount: Click to enter text. 85000

Name Printed on Check: Click to enter text. Unding Texas LLC

EPAY

Voucher Number: Click to enter text.

Copy of Payment Voucher enclosed?

Yes 🗐

Section 2. Type of Application (Instructions Page 26)

- a. Check the box next to the appropriate authorization type.
 - **Publicly-Owned Domestic Wastewater**
 - Privately-Owned Domestic Wastewater
 - **Conventional Wastewater Treatment**
- **b.** Check the box next to the appropriate facility status.
 - Ø 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 \boxtimes Major Amendment with Renewal Minor Amendment with Renewal Major Amendment without Renewal Minor Amendment without Renewal Renewal without changes 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 Expiration Date: Click to enter text. Facility Owner (Applicant) and Co-Applicant Information Section 3. (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? **Undine Texas Environmental, LLC** (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: 604519330

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

Prefix: Mr

Last Name, First Name: Tillman, Vance

Title: CFO

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. <u>A-1</u>

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: Jeff Goebel

Title: **Business Development**

Credential: Click to enter text

Organization Name: Undine Texas Environmental, LLC

Mailing Address: 17681 Telge Rd

City, State, Zip Code: Cypress Texas 77429

Phone No.: <u>713-724-9321</u>

E-mail Address: jgoebel@undinellc.com

Check one or both:

Administrative Contact

Technical Contact

B. 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.

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: Carey Thomas

Title: <u>VP</u>

Credential: Click to enter text,

Organization Name: <u>Undine Texas Environmental, LLC</u>

Mailing Address: <u>17681 Telge Rd</u>

City, State, Zip Code: Cypress Texas 77429

Phone No.: <u>713-554-7820</u>

E-mail Address: cthomas@undinellc.com

B. Prefix: Mr.

Last Name, First Name: Andy Thomas

Title: VP

Credential: Click to enter text.

Organization Name: <u>Undine Texas Environmental</u>, <u>LLC</u>

Mailing Address: 17681 Telge Rd

City, State, Zip Code: Cypress Texas 77429

Phone No.: <u>713-554-7820</u>

E-mail Address: athomas@undinellc.com

Section 6. Billing Contact Information (Instructions Page 27)

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

Prefix: Ms

Last Name, First Name: Carey Thomas

Title: VP

Credential: Click to enter text.

Organization Name: <u>Undine Texas Environmental</u>, <u>LLC</u>

Mailing Address: 17681 Telge Rd

City, State, Zip Code: Cypress Texas 77429

Phone No.: <u>713-554-7820</u>

E-mail Address: cthomas@undinellc.com

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

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

Prefix: Ms

Last Name, First Name: Carey Thomas

Title: <u>VP</u>

Credential: Click to enter text.

Organization Name: <u>Undine Texas Environmental, LLC</u>

Mailing Address: 17681 Telge Rd

City, State, Zip Code: Cypress Texas 77429

Phone No.: <u>713-554-7820</u>

E-mail Address: cthomas@undinellc.com

Section 8. Public Notice Information (Instructions Page 27)

A. Individual Publishing the Notices

Prefix: <u>Mr.</u>

Last Name, First Name: Jeff Goebel

Title: Business Development

Credential: Click to enter text!

Organization Name: <u>Undine Texas Environmental, LLC</u>

Mailing Address: 17681 Telge Rd

City, State, Zip Code: Cypress Texas 77429

Phone No.: <u>713-724-9321</u>

E-mail Address: jgoebel@undinellc.com

В.	Method for Receiving Notice of Package	Receipt and Intent to Obtain a Water Quality Permit
	Indicate by a check mark the pre	ferred method for receiving the first notice and instructions:
	🗵 E-mail Address	
	Fax	
	Regular Mail	
C.	Contact permit to be listed in th	e Notices
	Prefix: <u>Mr.</u>	Last Name, First Name: <u>Jeff Goebel</u>
	Title: Business Development	Credential: Click to enter text.
	Organization Name: <u>Undine Texas</u>	Environmental, LLC
	Mailing Address: <u>17681 Telge Rd</u>	City, State, Zip Code: Cypress Texas 77429
	Phone No.: <u>713-724-9321</u>	E-mail Address: jgoebel@undinellc.com
D.	Public Viewing Information	

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

Public building name: Malcolm Purvis Library

Location within the building: Click to enter text.

Physical Address of Building: 510 Melton Street

City: Magnolia

County: Montgomery

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

Phone No.: 936-442-7704 Ext.: Elick 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	e student on?	s at these	e schools attend a bilingual education program at another
			Yes	X	No
	4.	Would waived	l the scho d out of t	ool be req his requi	quired to provide a bilingual education program but the school has irement under 19 TAC §89.1205(g)?
		Ü	Yes	X	No
	5.	if the a	answer is ed. Whicl	yes to q o languag	question 1, 2, 3, or 4, public notices in an alternative language are ge is required by the bilingual program? <u>Spanish</u>
F.	Pla	in Lan	guage Su	mmary T	Template
	Co	mplete	the Plain	Language	ge Summary (TCEQ Form 20972) and include as an attachment.
		tachme			
G.	Pul	blic Inv	olvemen	t Plan Fo	orm
	Cor	mplete	the Publi	c I nvol vei	ement Plan Form (TCEQ Form 20960) for each application for a
	пел	w perm	ut or maj	or ameno	dment to a permit and include as an attachment.
	Att	achme	nt: <u>A-3</u>		
Ç.	cti	011 0	Dogg	late la la	
36		on 9.	Regu Page	atea E 29)	entity and Permitted Site Information (Instructions
A.	If th	1e site i s site. R	is current N Click t	ly regula 5 enter te	ated by TCEQ, provide the Regulated Entity Number (RN) issued to
	Sear the	rch the site is o	TCEQ's (currently	Central Re regulated	egistry at http://www15.tceq.texas.gov/crpub/ to determine if d by TCEQ.
В.	Nan	ne of pr	oject or	site (the r	name known by the community where located):
					atment Facility
C.	Owr	ier of ti	reatment	facility: <u>I</u>	<u>Undine Texas Environmental, LLC</u>
	Own	ıership	of Facilit	у: 🗒 Р	Public 🖾 Private 🖺 Both 🗐 Federal
D.	Own	er of la	and where	e treatme	ent facility is or will be:
	Prefi	ix: Clicl	k to enter	text;	Last Name, First Name: <u>Undine Texas Environmental, LLC</u>
	Title	: Click	to enter i	ext.	Credential: Click to enter text.
	Orga	nizatio	n Name:	<u>Undine '</u>	<u>Texas Environmental, LLC</u>
				<u>81 Telge R</u>	
]	Phon	ie No.: :	713-554-7	<u>820</u>	E-mail Address: cthomas@undinellc.com
]	f the	e lando ement o	wner is n or deed r	ot the sar	ame person as the facility owner or co-applicant, attach a lease easement. See instructions.
				c to enter	

	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 ent	
	Mailing Address: Click to enter t	ext. 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 agreement or deed recorded eas	e person as the facility owner or co-applicant, attach a lease ement. See instructions.
	Attachment: Click to enter to	ext.
F.	. Owner sewage sludge disposal s property owned or controlled by	ite (if authorization is requested for sludge disposal on the applicant)::
	Prefix: Click to enter text.	Last Name, First Name: Click to enter text.
	Title: Click to enter text;	Credential: Click to enfer text.
	Organization Name: Click to ente	er text
!	Mailing Address: Click to enter b	ext. 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 agreement or deed recorded ease	person as the facility owner or co-applicant, attach a lease
	Attachment: Click to enter te	
		AUS
S€	ection 10. TPDES Discharg	ge Information (Instructions Page 31)
		ge Information (Instructions Page 31) ity location in the existing permit accurate?
		ge Information (Instructions Page 31) ity location in the existing permit accurate?
	Is the wastewater treatment facil	ity location in the existing permit accurate?
	Is the wastewater treatment facility Yes No If no, or a new permit application The facility will be located approx.	
	Is the wastewater treatment facility Yes No If no, or a new permit application	ity location in the existing permit accurate? n, please give an accurate description:
A.	Is the wastewater treatment facility Yes No If no, or a new permit application The facility will be located approx. 12854	ity location in the existing permit accurate? n, please give an accurate description: 1.28 miles NW of the intersection of Keenan Cutoff Rd and FM
A.	Is the wastewater treatment facility Yes No If no, or a new permit application The facility will be located approx. 12854	ity location in the existing permit accurate? n, please give an accurate description:
A.	Is the wastewater treatment facility Yes No If no, or a new permit application The facility will be located approx. If 2854 Are the point(s) of discharge and No Yes No If no, or a new or amendment permits of the point of the point of the point of the permits of the permi	ity location in the existing permit accurate? n, please give an accurate description: 28 miles NW of the intersection of Keenan Cutoff Rd and FM the discharge route(s) in the existing permit correct?
A.	Is the wastewater treatment facility Yes No If no, or a new permit application The facility will be located approx. 12854 Are the point(s) of discharge and Yes No If no, or a new or amendment perpoint of discharge and the discharge	ity location in the existing permit accurate? n, please give an accurate description: 1.28 miles NW of the intersection of Keenan Cutoff Rd and FM
A.	Is the wastewater treatment facility Yes No If no, or a new permit application The facility will be located approx. If 2854 Are the point(s) of discharge and No Yes No If no, or a new or amendment permits of the point of the point of the point of the permits of the permi	ity location in the existing permit accurate? on, please give an accurate description: 1.28 miles NW of the intersection of Keenan Cutoff Rd and FM the discharge route(s) in the existing permit correct? ermit application, provide an accurate description of the arge route to the nearest classified segment as defined in 30
A.	Is the wastewater treatment facility Yes No If no, or a new permit application The facility will be located approx. It 2854 Are the point(s) of discharge and Yes No If no, or a new or amendment perpoint of discharge and the discharge TAC Chapter 307:	ity location in the existing permit accurate? on, please give an accurate description: 1.28 miles NW of the intersection of Keenan Cutoff Rd and FM the discharge route(s) in the existing permit correct? ermit application, provide an accurate description of the arge route to the nearest classified segment as defined in 30
А.	Is the wastewater treatment facility Yes No If no, or a new permit application The facility will be located approx. If 2854 Are the point(s) of discharge and No If no, or a new or amendment perpoint of discharge and the discharge and the discharge and the facility thence to Mound Company of the facility thence to Mound Company No.	ity location in the existing permit accurate? n, please give an accurate description: 1.28 miles NW of the intersection of Keenan Cutoff Rd and FM the discharge route(s) in the existing permit correct? ermit application, provide an accurate description of the rge route to the nearest classified segment as defined in 30 creek thence to Lake Creek
А.	Is the wastewater treatment facility Yes No If no, or a new permit application The facility will be located approx. If 2854 Are the point(s) of discharge and No If no, or a new or amendment perpoint of discharge and the discharge and the discharge and the facility thence to Mound Compared to Moun	ity location in the existing permit accurate? on, please give an accurate description: 1.28 miles NW of the intersection of Keenan Cutoff Rd and FM the discharge route(s) in the existing permit correct? ermit application, provide an accurate description of the rge route to the nearest classified segment as defined in 30 Creek thence to Lake Creek mery
А.	Is the wastewater treatment facility Yes No If no, or a new permit application The facility will be located approx. If 2854 Are the point(s) of discharge and No If no, or a new or amendment perpoint of discharge and the discharge and the discharge and the facility thence to Mound County in which the outfalls(s) is a county in which it is a c	ity location in the existing permit accurate? on, please give an accurate description: 1.28 miles NW of the intersection of Keenan Cutoff Rd and FM the discharge route(s) in the existing permit correct? ermit application, provide an accurate description of the arge route to the nearest classified segment as defined in 30 Creek thence to Lake Creek mery fare located: Montgomery
А . В.	Is the wastewater treatment facility Yes No If no, or a new permit application The facility will be located approx. If 2854 Are the point(s) of discharge and No If no, or a new or amendment perpoint of discharge and the discharge and the discharge and the facility thence to Mound County in which the outfalls(s) is a county in which it is a c	ity location in the existing permit accurate? In, please give an accurate description: 1.28 miles NW of the intersection of Keenan Cutoff Rd and FM the discharge route(s) in the existing permit correct? Permit application, provide an accurate description of the rige route to the nearest classified segment as defined in 30 Creek thence to Lake Creek Interpretation of the right of the rig
А . В.	Is the wastewater treatment facility Yes No If no, or a new permit application The facility will be located approx. If 2854 Are the point(s) of discharge and No If no, or a new or amendment perpoint of discharge and the discharge and the discharge and the facility thence to Mound County in which the outfall(s): Montgo County in which the outfalls(s) is sor will the treated wastewater of the county in which the outfalls(s) is sor will the treated wastewater of the county in which the outfalls(s) is sor will the treated wastewater of the county in which the outfalls(s) is sor will the treated wastewater of the county in which the outfalls(s) is sor will the treated wastewater of the county in which the outfalls(s) is sor will the treated wastewater of the county in which the outfalls(s) is sor will the treated wastewater of the county in which the outfalls(s) is sor will the treated wastewater of the county in which the outfalls(s) is so the county in which the outfalls(s) is sor will the treated wastewater of the county in which the outfalls(s) is sor will the treated wastewater of the county in which the outfalls(s) is sor will the treated wastewater of the county in which the outfalls(s) is sor will the treated wastewater of the county in which the outfalls(s) is so the county in which the outfalls(s) is so the county in which the outfalls(s) is so the county in which the county is so the county is so the county in which the county is so the county in which the county is so the county in which the county is so the county is so the county in which the county is so the county is so the county in which the county is so the county is so the county in which the county is so the co	ity location in the existing permit accurate? In, please give an accurate description: 1.28 miles NW of the intersection of Keenan Cutoff Rd and FM the discharge route(s) in the existing permit correct? Permit application, provide an accurate description of the rige route to the nearest classified segment as defined in 30 Creek thence to Lake Creek Interpretation of the right of the rig

E. Owner of effluent disposal site:

	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: NA
S	ection 11. TLAP Disposal Information (Instructions Page 32)
Α.	For TLAPs, is the location of the effluent disposal site in the existing permit accurate?
	Yes No
	If no, or a new or amendment permit application , provide an accurate description of the disposal site location:
	Click to enter text.
В.	City nearest the disposal site: Click to enter text.
C.	County in which the disposal site is located: Click to enter text.
D.	For TLAPs , describe the routing of effluent from the treatment facility to the disposal site:
	Click to enter text:
E.	For TLAPs , please identify the nearest watercourse to the disposal site to which rainfall runoff might flow if not contained: Click to enter text.
Se	ction 12. Miscellaneous Information (Instructions Page 32)
	Is the facility located on or does the treated effluent cross American Indian Land?
	☐ Yes ☒ No
В.	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 fext

B. C. D.

E.

B.

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 fext.
	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.
'n.	
	ection 13. Attachments (Instructions Page 33)
	licate 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.
X	Original full-size USGS Topographic Map with the following information:
āi.	 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.
1	Attachment 1 for Individuals as co-applicants
1	Other Attachments. Please specify: Click to enter text,

Section 14. Signature Page (Instructions Page 34)

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

Permit Number: Click to enter text,

Applicant: <u>Undine Texas Environmental, LLC</u>

Certification:

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

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

Signatory name (typed or printed): Vance Tillman	
Signatory title: Chief Financial Officer	
Signature: Mane Illum Date:	03/04/25
(Use blue ink)	
Subscribed and Sworn to before me by the said \(\sqrt{u} \)	Tillman
on this day of Warth	, 20 24 .
My commission expires on the 8511 day of JWW	20 89
Λ	, ~ <u>~ , , , </u> .
Imitinal hoss	TERIA LA TARILLE TOTARILLE
Notary Public	
	CR C
HARRIS	05.008918 65
olinty. Texas	11/1/0-5058

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	A. Indicate by a check mark that the landowners map or drawing, with scale, includes the following information, as applicable:				
	X	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 bo of the landowners located within the buffer zone					
	The property boundaries of all landowners surrounding the applicant's property (No 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).)				
	X	The point(s) of discharge and highlighted discharge route(s) clearly shown for one mile downstream			
	X	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			
В.	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.	India	cate by a check mark in which format the landowners list is submitted:			
	×	USB Drive Four sets of labels			
D.	Provi Appra	ide the source of the landowners' names and mailing addresses: Montgomery County			
E.	As re this a	equired by $Texas\ Water\ Code\ \S\ 5.115$, is any permanent school fund land affected by application?			
		Yes 🔯 No			

	If y eland	es, provi	ide the	e location and foreseeable impacts and effects this application has on the
		ck to en	ter tex	
ς	ectio	n 2.	Orio	inal Dhotographe (Instructions Born 20)
				inal Photographs (Instructions Page 38)
in	forma	ition is p	provid	nd level photographs. Indicate with checkmarks that the following ed.
	\boxtimes	At least	one o	riginal photograph of the new or expanded treatment unit location
		an oper edge of	ream (1 wate: each]	hotographs of the existing/proposed point of discharge and as much area photo 1) and upstream (photo 2) as can be captured. If the discharge is to r body (e.g., lake, bay), the point of discharge should be in the right or left photograph showing the open water and with as much area on each e of the discharge as can be captured.
		At least	one pl	notograph of the existing/proposed effluent disposal site
	Ø	A plot p	lan or	map showing the location and direction of each photograph
·C.	otio:	, ?	D E.C.	7
	• • • • • • • • • • • • • • • • • • • •			er Zone Map (Instructions Page 38)
A.	ппог	шацоп.	rne aj	rovide a buffer zone map on 8.5×11 -inch paper with all of the following oplicant's property line and the buffer zone line may be distinguished by nbols and appropriate labels.
	•	The re Each ti	quired reatme	it's property boundary; I buffer zone; and ent unit; and from each treatment unit to the property boundaries.
В.	Buffe Checl	r zone c k all that	omplia apply	ance method. Indicate how the buffer zone requirements will be met.
	Ø	Owner	rship	
		Restric	ctive e	asement
		Nuisan	ice od	or control
		Varian	ce	
C.	Unsui unsui	table sit table sit	e char e char	acteristics. Does the facility comply with the requirements regarding acteristic found in 30 TAC § 309.13(a) through (d)?
	X	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: A-8

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) (Required for all application types. Must be completed in its entirety Note: Form may be signed by applicant representative.)	and	signed.		Yes
Correct and Current Industrial Wastewater Permit Application For (TCEQ Form Nos. 10053 and 10054. Version dated 6/25/2018 or la	ms ter.)			Yes
Water Quality Permit Payment Submittal Form (Page 19) (Original payment sent to TCEQ Revenue Section. See instructions for	or ma	iling ad	□ ldres	Yes
7.5 Minute USGS Quadrangle Topographic Map Attached (Full-size map if seeking "New" permit. 8 ½ x 11 acceptable for Renewals and Amendments)				Yes
Current/Non-Expired, Executed Lease Agreement or Easement		N/A	Ø	Yes
Landowners Map (See instructions for landowner requirements)		N/A		Yes
 Things to Know: All the items shown on the map must be labeled. The applicant's complete property boundaries must be doundaries of contiguous property owned by the application. The applicant cannot be its own adjacent landowner. You landowners immediately adjacent to their property, regarding the actual facility. If the applicant's property is adjacent to a road, creek, or on the opposite side must be identified. Although the property boundary, they are considered potentified adjacent road is a divided highway as identified on map, the applicant does not have to identify the landown the highway. 	nt. I mus rdless strea perti Itially the U	t identi of how m, the es are i	fy the far land a land	they are owners djacent to ndowners.
Landowners Cross Reference List (See instructions for landowner requirements)	<u>N</u>	N/A		Yes
Landowners Labels or USB Drive attached (See instructions for landowner requirements)		N/A		Yes
Original signature per 30 TAC § 305.44 - Blue Ink Preferred (If signature page is not signed by an elected official or principle exe a copy of signature authority/delegation letter must be attached)	cutive	officer		Yes
Plain Language Summary				Yes

TCEQ-10053 (01/09/2024) Domestic Wastewater Permit Application Administrative Report

Page 17 of 17

Attachment A-1



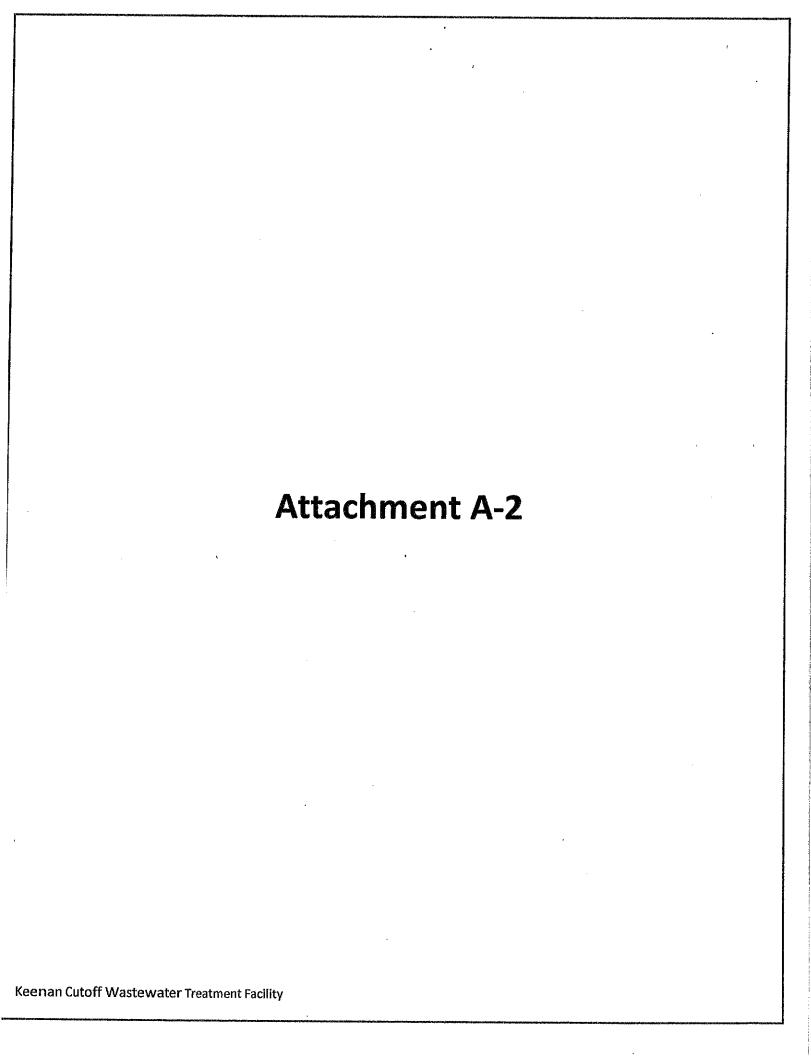
TCEQ Core Data Form

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TOTA HEX ONLY	· 通信 在某人的表示。
I CLW USE UIIIY	
行政 医乳腺管理检查检验 医皮肤管肠炎	· 後期間 2015年7月27日
· 1000年 1	
vervalue distance activities and	被影为他和\$P\$\$\$\$\$\$

For detailed instructions regarding completion of this form, please read the Core Data Form Instructions or call 512-239-5175. **SECTION I: General Information**

		71102 THE 21110 C. I.	144.011						
		ilssion (<i>If other is cl</i>							
		gistration or Authoriz Data Form should be		~			rith the program application	on.)	
		nce Number <i>(if iss</i> :		***************************************			Other gulated Entity Referenc	Mumber	Die 122an
	4519330		1	for CN or R	s link to search RN numbers In I Registry**		1	6 Nulliber	(IT ISSUECI)
SECTIO	N II: C	ustomer Info	rmation						
I'm and the second seco		Information	Militar y and reserve estate that has no	ate for C	ustomer Info	ormation	Updates (mm/dd/yyyy)	9000 2	
☐ New Cu ☐Change	in Legal Na	ame (Verifiable with	n the Texas Sec	cretary of S	Customer Infor State or Texa	as Comptr	roller of Public Accounts))	Entity Ownership
Texas Se	cretary c	of State (SOS) o	or Texas Cor	mptrolle	er of Public	ically b c Accoi	pased on what is cul unts (CPA).	rrent and	active with the
6. Custome	r Legal Na	ame (If an Individual,	print last name fi	rst; eg; Do	e, John)	<u> </u>	new Customer, enter previ	ious Custon	ner below:
Undine T	'exas Er	ivironmental, L	LLC						
7. TX SOS/0 8017680	mainte antice de Liberti.	COMMENSATION OF THE PARTY OF TH	8. TX State Ta 320507172		gits)	1.51	Federal Tax ID (9 digits) 5-316881	10. DÜN N/A	NS Number (if applicable)
11. Type of	Customer	r: Corporation	'n		Individual		Partnership: 🔲 Geлera	ral 🔲 Limited	1
		County 🔲 Federal 🔲	State Other		Sole Proprie	ətorship	Other: LLC		
12. Number ⊠ 0-20	of Employ 21-100	many management of the second of the second	□ 251-500	☐ 501 ¢	and higher		Independently Owned Yes No	and Oper	ated?
	ovs Pritter sam	Street dispose dispose con part] Yes	following	
□Owner □Occupatio		☐ Operator		⊠ o	Owner & Oper Voluntary Clea	rator	and the second of the second o	Unorma	
	T	Telge Road	-	-					
15. Mailing Address:					-				
	City	Cypress		State	TX	ZIP	77429	ZIP + 4	· · · · · · · · · · · · · · · · · · ·
16. Country	Mailing in	formation (if outside	USA)		17.	rate (Ethan Prans)	ddress (if applicable)		
					ethe	omas@	Jundinelle.com	<u> 85 (1864 - 12</u>	<u> 1886. jugastani – tronostania sastania sa</u>
18. Telephor (713) 57			19	. Extension	ion or Code		20. Fax Number (713) 647-0		ole)
ECTION	— Ш: Re	egulated Enti	itv Inform	etion					
21. General F	Regulated		n (If 'New Regul	lated Entit			his form should be accomulated Entity Information	npanied by	a permit application)
The Regula of organiza	ated Enti ational ei	ity Name submi ndings such as	itted may be inc, LP, or l	e update LLC).	ed in order	r to mee	et TCEQ Agency Da	ita Stand	lards (removal
		ame (Entername of th			action is takin	g place.)			
Keenan Cu	itott Wa	astewater Treat	ment Facili	ty					

23. Street Address of the Regulated Entity:							
(No PO Boxes)	City	State	 	ZIP		ZIP+4	
24. Gounty	Montgomery						
Extracted the system substituting the system of the	Enter Physical I	Location Description	n if no sf	treet address	is provided.		
25. Description to Physical Location:	The Facility will be Cutoff Rd and FM 2	2854	imately	/ 1.28 mile	s NW of the	interesctic	on of Keenan
26. Nearest City					State	Ner	arest ZIP Code
Montgomery			 .	,	TX	77	316
27. Latitude (N) In Decir	mat: 30°20'11.0	07"N	28. [Longitude (W	/) in Decimal:	95°39'49	9.94"W
Degrees	Minutes	Seconds	Degre	80 8	Minutes		Seconds
					į	1	
29. Primary SIC Code (4	4 digits) 30. Secondary SIC	s Cocce la nigitat	31. Prima (5 or 6 digit	ary NAICS Co ts)	32. Se (5 or 6	econdary NA digits)	ICS Code
4952							
		(Do not repeat the SIC or	NAICS des	scription.)	1144		
Wastewater Utilitie	2 8			****	7877272		
34. Malling Address:	4. v.		17681	l Telge Road			
Audress	City Cypress	State	TX	ZIP	77429	ZIP+4	
35. E-Mail Address:	21 32 193 1	<u> </u>		as@undinell		The state of the s	:
The Total Mark that the contact the same as	one Number	37. Extension	7	建二氯甲基甲基酚 化二氯甲基甲基基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲	STOP TOWNS A SERVICE TO SERVICE	nber <i>(if appli</i>	icable)
	574-5953		age to all and	26 - 1 (1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		3) 647-277	Vanity
39. TCEQ Programs and ID	Numbers Check all Programs instructions for additional guidan	s and write in the permince.	its/registra	tion numbers th	· · · · · · · · · · · · · · · · · · ·		submitted on this
☐ Dam Safety	Districts	Edwards Aquifer		☐ Emission	s Inventory Air	Industrial	Hazardous Waste
☐ Municipal Solid Waste	☐ New Source Review Air	OSSF		Petroleur	n Storage Tank	☐ PWS	BANKALANA PLANA PLANA
Sludge	Storm Water	☐ Title V Air		Tires		Used Oll	
☐ Voluntary Cleanup	☐ Waste Water	☐ Wastewater Agric	culture	☐ Water Rig	ghts	Other:	
SECTION IV: Pre	name Information						
40. Jeff Goebel	parci imormanon		11. Title:	Mgr. E	Business Deve	elonment	
42. Telephone Number 4	19 Eut Made AA Eav	298-08-1981-1981-1981-1-7-7-7-8-8-8-8-8-8-8-8-8-8-8-8-8-8-8		. (44.) (44.) (4.) (4.) (4.) (4.) (4.) (4.)			The Control of the Co
(713) 574-5953	***************************************			all Address el@undine	llc.com	<u> </u>	<u> Arabana eta Busha</u>
ECTION V: Autl	horized Signature			_			
6. By my signature below, I ignature authority to submit lentified in field 39.	I certify, to the best of my kn this form on behalf of the ent	lowledge, that the inf tity specified in Secti	formation ion II, Fie	provided in to ald 6 and/or as	his form is true as required for the	nd complete, updates to the	and that I have e ID numbers
Company: Undine	Texas Environmental, LLC		Job Title:	CFO			
	Tillman	Pare 1	<u> </u>	<u> </u>	Phone: ((713) 574- 5	953
Signature: ///	me smor	——————————————————————————————————————			Date:	03/04	1/25



Undine Texas Environmental, LLC (CN604519330) propone operar la Planta de Tratamiento de Aguas Residuales (RN_______) de Keenan Cutoff, una planta de procesamiento de lodos activados que funciona en el modo de mezcla completa. La instalación estará ubicada aproximadamente a 1.28 millas al noroeste de la intersección de Keenan Cutoff Rd y FM 2854, en Montgomery, Condado de Montgomery, Texas 77316. Esta solicitud de una nueva descarga con una fase final de 0,125MGD. << Para las solicitudes de TLAP, incluya la siguiente oración, de lo contrario, elimine: >> Este permiso no autorizará una descarga de contaminantes en el agua del estado. Se espera que las descargas de la instalación contengan una demanda bioquímica carbonosa de oxígeno (CBOD5) de cinco días, sólidos suspendidos totales (TSS), nitrógeno amoniacal (NH3-N) y Escherichia coli. Las aguas residuales domésticas serán tratadas por una planta de procesamiento de lodos activados y las unidades de tratamiento incluirán una pantalla de barras, cuencas de aireación, clarificadores finales, digestores de lodos y cámaras de contacto con cloro.

TCEQ

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 <u>Title 30, Texas Administrative Code (30 TAC)</u>, <u>Chapter 39, Subchapter H.</u> 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.

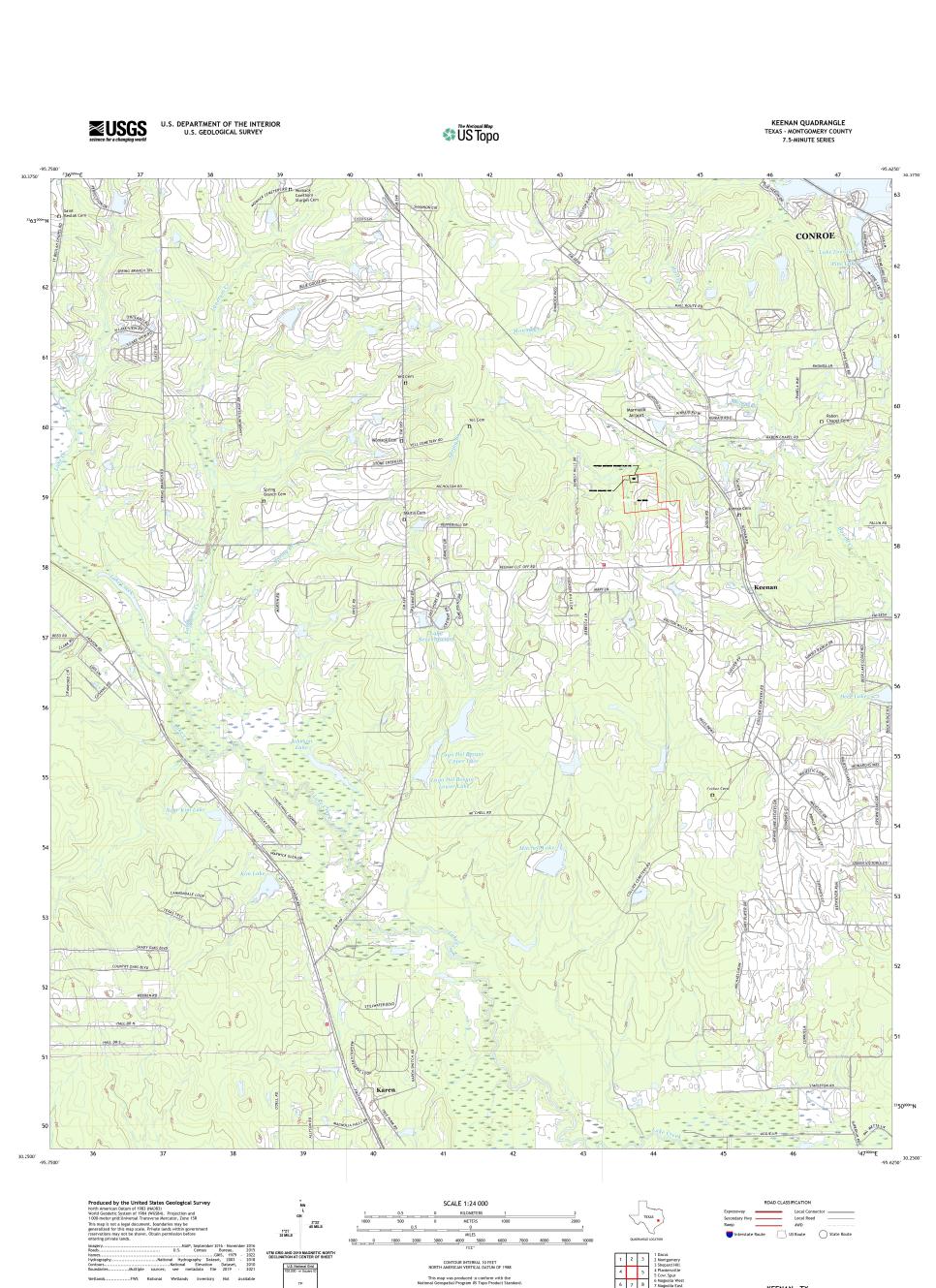
If you are subject to the alternative language notice requirements in <u>30 TAC Section 39.426</u>, you must provide a translated copy of the completed plain language summary in the appropriate alternative language as part of your application package. For your convenience, a Spanish template has been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

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

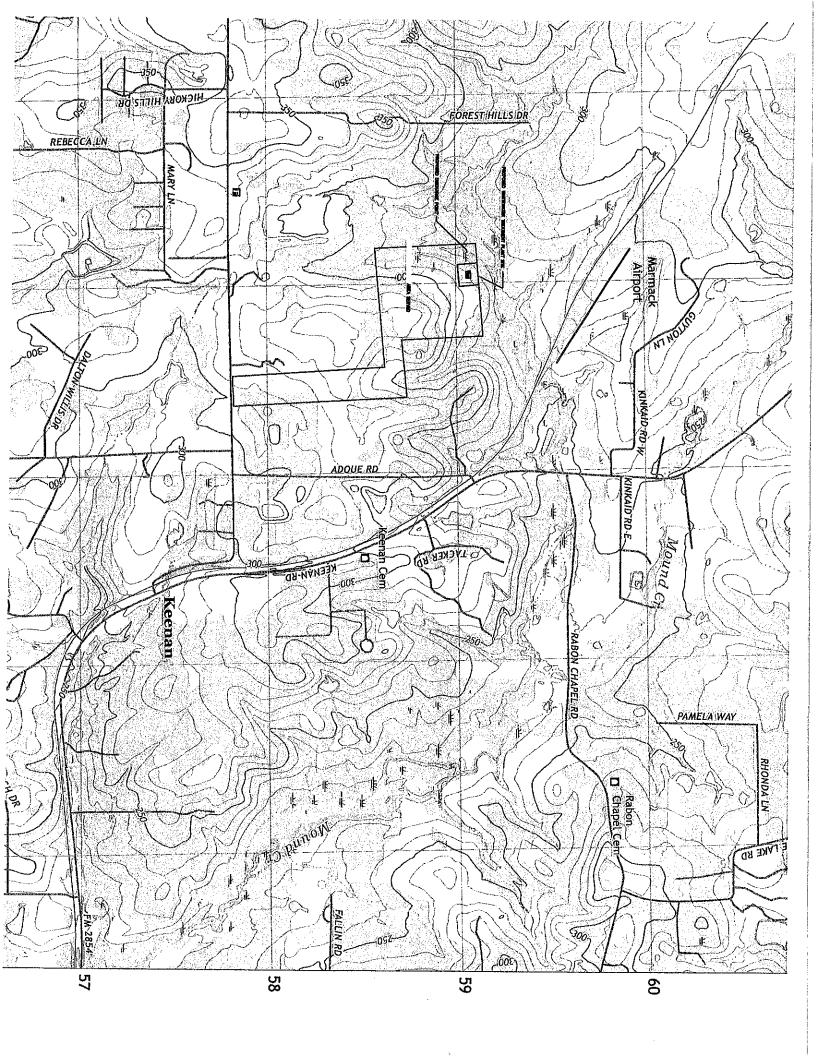
The following summary is provided for this pending water quality permit application being reviewed by the Texas Commission on Environmental Quality as required by 30 TAC Chapter 39. The information provided in this summary may change during the technical review of the application and is not a federal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

Undine Texaws Environmental, LLC (CN604519330) proposes to operate Keenan Cutoff Wastewater Treatment Facility (RN______), a activated sludge process plant operated in the complete mix mode. The facility will be located at The Facility will be located approximately 1.28 miles NW of the interesction of Keenan Cutoff Rd and FM 2854, in Montgomery, Montgomery County, Texas 77316. This application for a new discharge with a final phase of 0.125MGD. << For TLAP applications include the following sentence, otherwise delete:>> This permit will not authorize a discharge of pollutants into water in the state.

Discharges from the facility are expected to contain contain five-day carbonaceous biochemical oxygen demand (CBOD $_5$), total suspended solids (TSS), ammonia nitrogen (NH $_3$ -N), and *Escherichia coli*. Domestic wastewater will be treated by an activated sludge process plant and the treatment units will include a bar screen, aeration basins, final clarifiers, sludge digesters, and chlorine contact chambers .



Zone Designat 15R KEENAN, TX 2022



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TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION TECHNICAL REPORT 1.0

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

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

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

A. Existing/Interim I Phase

Design Flow (MGD): 0.0625

2-Hr Peak Flow (MGD): 0.25

Estimated construction start date: 7/2025

Estimated waste disposal start date: 1/2026

B. Interim II Phase

Design Flow (MGD): Click to enter text.

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

Estimated construction start date: Click to enter text.

Estimated waste disposal start date: Click to enter text.

C. Final Phase

Design Flow (MGD): 0.125

2-Hr Peak Flow (MGD): 0.5

Estimated construction start date: 7/2027

Estimated waste disposal start date: 1/2028

D. Current Operating Phase

Provide the startup date of the facility: Click to enter text.

Section 2. Treatment Process (Instructions Page 43)

A. Current Operating Phase

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

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

Attachment T-1		 	
	•		

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)
Attachment T-1		
	•	1107744

C. Process Flow Diagram

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

Attachment: <u>T-2</u>

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

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

Latitude: 30° 0'42.94"N

Longitude: 95°54'26.66"w

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

Latitude: <u>Click to enter text</u>;

• Longitude: Click to enter text.

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

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

Attachment: T-3

Collection System Informat each uniquely owned colle satellite collection systems. examples. Collection System Informatio	ction system, existin Please see the instr	g and new, served by th	us facility, including
Collection System Name	Owner Name	Owner Type	Population Serve
Keenan Cutoff	Undine Texas Environmental, LLC	Privately Owned	0
		Choose an item.	
The state of the s		Choose an item.	
		Choose an item.	
Yes No f yes, does the existing per years of being authorized by Yes No f yes, provide a detailed dis ailure to provide sufficien ecommending denial of the	y the TCEQ? scussion regarding tl t justification may 1	ne continued need for t	he unbuilt phase.
Click to enter text.			

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 submitte	ed to the TCEQ?
Yes 🔯 No	
If yes, provide a brief description	of the closure and the date of plan approval.
Click to enter text,	
)
Section 6. Permit Specific	Requirements (Instructions Page 45)
For applicants with an existing per	rmit, check the Other Requirements or Special
Provisions of the permit.	
A. Summary transmittal	
Have plans and specifications be phase?	een approved for the existing facilities and each proposed
Yes 🔯 No	
If yes, provide the date(s) of app	proval for each phase: <u>Unknown</u>
Provide information, including d provision pertaining to the subm an approval letter from the TCI	lates, on any actions taken to meet a <i>requirement or</i> a summary transmittal letter. Provide a copy of EQ, if applicable.
Click to enter text	
	·
B. Buffer zones	
Have the buffer zone requiremen	its been met?
Yes No	
Provide information below, include the buffer zone. If available, provided buffer zones.	ding dates, on any actions taken to meet the conditions of vide any new documentation relevant to maintaining the
Click to enter lext.	

C.	Other actions required by the current permit
,	Does the <i>Other Requirements</i> or <i>Special Provisions</i> 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 <i>Other Requirement</i> or <i>Special Provision</i> .
	Click to enter text,

Click to enter text,	 19-11-1-11-11-11-11-11-11-11-11-11-11-11	
	,	
	•	

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.

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.	St	ormwater management
	1.	Applicability
		Does the facility have a design flow of 1.0 MGD or greater in any phase?
		Tes 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	Zavo stavovujatav disakavaa
.,	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

TCEQ-10054 (04/02/2024) Domestic Wastewater Permit Application Technical Report

6.

	it to water in the state.	
	Energy entergexis	
	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 w	ill
	require compliance with all individual permit requirements including 2-hour peak flo	W
	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	
	f yes, attach a Sewage Sludge Solids Management Plan. See Example 5 in the instructions	•
G.	Other wastes received including sludge from other WWTPs and septic waste	
	1. Acceptance of sludge from other WWTPs	
	1. Acceptance of sludge from other WWTPs	
	1. Acceptance of sludge from other WWTPs Does or will the facility accept sludge from other treatment plants at the facility site?	
	 Acceptance of sludge from other WWTPs Does or will the facility accept sludge from other treatment plants at the facility site? Yes No 	
	 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 instruction In addition, provide the date the plant started or is anticipated to start accepting 	S.
	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 instruction In addition, provide the date the plant started or is anticipated to start accepting sludge, an estimate of monthly sludge acceptance (gallons or millions of gallons), an estimate of the BOD ₅ concentration of the sludge, and the design BOD ₅ concentration of the influent from the collection system. Also note if this information has or has no	S.
	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 instruction 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 no changed since the last permit action.	S.
	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 instruction 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 no changed since the last permit action.	S.
	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 instruction 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 no changed since the last permit action.	S.
	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 instruction 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 no changed since the last permit action. Click to enter text	S.
	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 instruction 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 no changed since the last permit action. Click to entertext. Note: Permits that accept sludge from other wastewater treatment plants may be required to have influent flow and organic loading monitoring.	S.

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

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

Yes 🕱

No

	Yes	Ø	No
SVCA	103	(الجيمار	TAO

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

Click to enter text.			
		,	
	•		

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

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

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

Yes 🗵 No

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

Click to enter tex	t,		

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

Is the facility in operation?

Yes No

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

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

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

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

Pollutant	Average Conc.	Max Conc.	No. of Samples	Sample Type	Sample Date/Time
CBOD ₅ , mg/l					
Total Suspended Solids, mg/l					
Ammonia Nitrogen, mg/l					
Nitrate Nitrogen, mg/l					
Total Kjeldahl Nitrogen, mg/l					
Sulfate, mg/l	-				
Chloride, mg/l					
Total Phosphorus, mg/l	,				
pH, standard units					
Dissolved Oxygen*, mg/l		,			<u>, </u>
Chlorine Residual, mg/l					
E.coli (CFU/100ml) freshwater					
Entercocci (CFU/100ml) saltwater					
Total Dissolved Solids, mg/l					1-1-1-
Electrical Conductivity, µmohs/cm, †			-		114
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 (CaCO3), mg/l					

Section 8. Facility Operator (Instructions Page 50)

Facility Operator Name: **Contract operations**

Facility Operator's License Classification and Level: **Contract operations**

Facility Operator's License Number: Contract operations

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

A. WWTP's Biosolids Management Facility Type

Check all that apply. See instructions for guidance

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

B. WWTP's Biosolids Treatment Process

Check all that apply. See instructions for guidance.

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

C. Biosolids Management

Provide information on the *intended* biosolids management practice. Do not enter every management practice that you want authorized in the permit, as the permit will authorize

all biosolids management practices listed in the instructions. Rather indicate the management practice the facility plans to use.

Biosolids Management

Management Practice	Handler or Preparer Type	Bulk or Bag Container	Amount (dry metric tons)	Pathogen Reduction Options	Vector Attraction Reduction Option
Agricultural Land Application	Off-site Third-Party Handler or Preparer	Bulk	• .	Class B: PSRP Aerobic Digestion	Choose an item.
Choose an Item.	Choose an item.	Choose an item.		Choose an item.	Choose an item.
Choose an item.	Choose an item.	Choose an Item.		Choose an item.	Choose an item.

If "Other" is selected for Management Practice, please explain (e.g. monofill or transport to another WWTP): $\underline{\text{Attachment T-4}}$

D. Disposal site

Disposal site name: Attachment T-4

TCEQ permit or registration number: <u>Attachment T-4</u>

County where disposal site is located: Attachment T-4

E. Transportation method

Method of transportation (truck, train, pipe, other): Attachment T-4

Name of the hauler: Attachment T-4

Hauler registration number: Attachment T-4

Sludge is transported as a:

Liquid 🗓 🥴

semi-liquid

semi-solid

solid 🗒

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

A. Beneficial use authorization

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

Yes 🛭 No

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

Yes 🛮 No

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

	Yes 🔯 No				
B. Slud	ge processing authorization				
Does	s the existing permit include authorization f age or disposal options?	or an	y of the	follov	ving sludge processing,
S	ludge Composting		Yes		No
M	farketing and Distribution of sludge		Yes		No
S	ludge Surface Disposal or Sludge Monofill		Yes		No
Т	emporary storage in sludge lagoons		Yes		No
autho	s to any of the above sludge options and the orization, is the completed Domestic Waste mical Report (TCEQ Form No. 10056) attack	wate	r Permi	t App	lication: Sewage Sludge
Section	n 11. Sewage Sludge Lagoons (Ins	stru	ctions	Page	e 53)
	s facility include sewage sludge lagoons?				
M	Yes 🛮 No				
If yes, co	mplete the remainder of this section. If no,	proc	eed to S	ection	12.
A. Locat	ion information				,
The f	ollowing maps are required to be submitted de the Attachment Number.	as p	art of tl	пе арр	lication. For each map,
•	Original General Highway (County) Map:				
	Attachment: Click to enter text				
•	USDA Natural Resources Conservation Ser	vice S	oil Mar):	
	Attachment: <u>Click to enter text.</u>				
•	Federal Emergency Management Map:				
	Attachment: Click to enter text.				
•	Site map:				
	Attachment: Click to enter text.				
Discus apply.	ss in a description if any of the following ex	ist w	ithin th	e lago	on area. Check all that
	Overlap a designated 100-year frequency	flood	l plain		
	Soils with flooding classification				
, and the second	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.			
to the second of	1		

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: <u>Click to enter text</u>

Chromium: Click to enter text.

Copper: Click to enter text.

Lead: <u>Click to enter text.</u>

Mercury: <u>Click to enter text</u>

Molybdenum: Click to enter text.

Nickel: Click to enter text

Selenium: Click to enter text.

Zinc: Click to enter text.

Total PCBs: <u>Glick to enter text</u>,

Provide the following information:

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

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

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

C. Liner information

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

Yes No

If yes, describe the liner below. Please note that a liner is required.				
	Clic	k to enter text.		
n	. Site	development plan		
_		de a detailed description of the methods used to deposit sludge in the lagoon(s):		
		k to enter text.		
	Attac	h 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: <u>Click to enter text</u> .		
	•	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.		
Ε.	Groun	ndwater monitoring		
		undwater monitoring currently conducted at this site, or are any wells available for		
	groun	dwater monitoring, or are groundwater monitoring data otherwise available for the		
		e lagoon(s)?		
		Yes No		
	If grou	andwater monitoring data are available, provide a copy. Provide a profile of soil encountered down to the groundwater table and the depth to the shallowest		
		dwater as a separate attachment.		

Attachment: Click to enter text

E.

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

A. Additional authorizations

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

Yes 🛛 No

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

"A THE RESERVE OF THE PROPERTY		7-1-1	
Click to enter text			
TOWNSHIP THE TOTAL STATE OF			
	1		· ·
1			i
<u> </u>			
		····	

B. Permittee enforcement status

Is the permittee currently under enforcement for this facility?

Yes No

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

Yes No

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

Click to enter	text	_	 	

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

A. RCRA hazardous wastes

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

☐ Yes ☑ No

B. Remediation activity wastewater

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

Yes No

C. Details about wastes received

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

Attachment: Click to enter text

Section 14. Laboratory Accreditation (Instructions Page 56)

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

- The laboratory is an in-house laboratory and is:
 - o periodically inspected by the TCEQ; or
 - o 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
 - o 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: Click to enter text.

Title: Click to enter text.

Signature:	
Date:	

DOMESTIC WASTEWATER PERMIT APPLICATION TECHNICAL REPORT 1.1

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

Section 1. Justification for Permit (Instructions Page 57)

A. Justification of permit need

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

ne area served is proposed to have 405 single family connections. The applicant is requesting a 25,000gpd permit to serve this development. The anticipated time frame for buildout is within 5 ears.	

B. Regionalization of facilities

For additional guidance, please review <u>TCEQ's Regionalization Policy for Wastewater Treatment</u>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: <u>Elick to enter text</u>

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: <u>Click to enter text!</u>

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 T-5

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: Attachment T-5

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: Attachment T-5

Section 2. Proposed Organic Loading (Instructions Page 59)

Is this facility in operation?

Yes 🛭 No

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

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

A. Current organic loading

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

Average Influent Organic Strength or 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	0.125	300
Subdivision		
Trailer park - transient		
Mobile home park		
School with cafeteria and showers		
School with cafeteria, no showers		
Recreational park, overnight use		
Recreational park, day use		
Office building or factory		1000
Motel		- WANTES ELL
Restaurant	,	and the plant of t
Hospital		***************************************
Nursing home		
Other		
TOTAL FLOW from all sources	0.125	
AVERAGE BOD₅ from all sources		300

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

A. Existing/Interim I Phase Design Effluent Quality

Biochemical Oxygen Demand (5-day), mg/l: $\underline{10}$

Total Suspended Solids, mg/l: 15

Ammonia Nitrogen, mg/l: Click to enter text

Total Phosphorus, mg/1: Click to enter text.

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

Other: <u>Click to enter text.</u>

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: 10

Total Suspended Solids, mg/l: 15

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.

D. Disinfection Method

Identify the proposed method of disinfection.

Chlorine: 2 mg/l after 20 minutes detention time at peak flow

Dechlorination process: None

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

Other: Click to enter text

Section 4. Design Calculations (Instructions Page 59)

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

Attachment: Attachment T-6

Section 5. Facility Site (Instructions Page 60)

A. 100-year floodplain

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

Yes 🖪 No

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

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

Engineering

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 T-7

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

A. Beneficial use authorization

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

Yes No

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

B. Sludge processing authorization

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

Sludge Composting

Marketing and Distribution of sludge

Sludge Surface Disposal or Sludge Monofill

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

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

Attach a solids management plan to the application.

Attachment: <u>T-8</u>

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

Erwin Madrid

From: Erwin Madrid

Sent: Thursday, April 24, 2025 12:15 PM

To: Jeff Goebel Candice Calhoun

Subject: Application for Proposed Permit No. WQ0016768001 – Notice of Deficiency 30-Day Will

Return Letter

Attachments: WQ0016768001_Will Return Ltr.pdf

Importance: High

Dear applicant,

The attached Notice of Deficiency 30-Day Will Return Letter was mailed on <u>April 24, 2025</u>, requesting additional information needed to declare the application administratively complete. Please mail an original and two copies (with a cover letter) of the complete response by <u>May 24, 2025</u>.

Regards,

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



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

Candice Calhoun

From: Jeff Goebel <jgoebel@undinellc.com>
Sent: Thursday, May 22, 2025 2:24 PM

To: Candice Calhoun Cc: Erwin Madrid

Subject: RE: Application for Proposed Permit No. WQ0016768001 - Notice of Deficiency wq0016768001-nod1.pdf; A-3 PIP.pdf; A-8 SPIF.docx; Keenan Cut Off landowner

map.pdf; Keenan Cutoff Landowner Map.docx; Municipal Discharge New Spanish

NORI.docx

Please see revised 10053

Please see PIP Please see SPIF

A USGS map is being mailed to your attention

Please see landowner information

Please see Spanish NORI – However please not the following

- 1. The discharge route is not listed
- 2. The following does not seem to appear in the Spanish notice. 'Further information may also be obtained from Undine Texas Environmental, LLC at the address stated above or by calling Mr. Jeff Goebel, Business Development, at 713-724-9321.'

Please let me know if anything else is needed.

Thank you

Jeff Goebel

From: Candice Calhoun < Candice. Calhoun@tceq.texas.gov>

Sent: Wednesday, April 9, 2025 11:32 AM **To:** Jeff Goebel <jgoebel@undinellc.com>

Subject: Application for Proposed Permit No. WQ0016768001 - Notice of Deficiency

Importance: High

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Good morning, Mr. Goebel,

The attached Notice of Deficiency (NOD) letter dated <u>April 9, 2025</u>, requests additional information needed to declare the application administratively complete. Please send complete response no later than <u>April 23, 2025</u>.

Please let me know if you have any questions.

Regards,



Candice Courville

License & Permit Specialist ARP Team | Water Quality Division Texas Commission on Environmental Quality 512-239-4312

candice.calhoun@tceq.texas.gov

How is our customer service? Fill out our online customer satisfaction survey at www.tceq.texas.gov/customersurvey

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Candice Calhoun

From: Jeff Goebel <jgoebel@undinellc.com>
Sent: Friday, May 23, 2025 11:19 AM

To: Candice Calhoun Cc: Erwin Madrid

Subject: RE: Application for Proposed Permit No. WQ0016768001 - Notice of Deficiency

Attachments: Keenan Cutoff Revised Admin Report.docx; Keenan Cut Off landowner map.pdf; Keenan

Cutoff Landowner list.docx; Keenan Cutoff Landowner lables.docx

• Item 1 of NOD – Your email had stated "please see revised 10053" however, I did not see this attachment within your email. Can you please send that over to me?

o Not sure why it was not attached. Please see attached

- USGS map thank you, I will keep an eye out for when this comes in. Once I receive and review it, I will let you know if more information is needed for this item or not.
 - o Being mailed
- Landowner Map the map seemed to not have the applicant's property boundary delineated and labeled. Can you confirm if the applicant and facility boundaries are one in the same? If so, please label it as both on the map. If not, please show and label the applicant's property boundary on the map.
 - o The applicant and the facilities boundaries are the same
- Landowner List the landowner list was not provided. This is to be separate from the labels. Please provide the affected landowner list.
 - Please see attached list and lables

From: Candice Calhoun < Candice. Calhoun@tceq.texas.gov>

Sent: Friday, May 23, 2025 10:27 AM **To:** Jeff Goebel <jgoebel@undinellc.com>

Cc: Erwin Madrid < Erwin. Madrid@tceq.texas.gov>

Subject: RE: Application for Proposed Permit No. WQ0016768001 - Notice of Deficiency

Importance: High

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Good morning, Mr. Goebel,

Thank you for your response. Your response to items 2, 3, 6, and 7 are sufficient. However, more information is needed for items 1, 4, and 5. Please see below:

- Item 1 of NOD Your email had stated "please see revised 10053" however, I did not see this attachment within your email. Can you please send that over to me?
- USGS map thank you, I will keep an eye out for when this comes in. Once I receive and review it, I will let you know if more information is needed for this item or not.
- Landowner Map the map seemed to not have the applicant's property boundary delineated and labeled. Can you confirm if the applicant and facility boundaries are one in the same? If so, please label it as both on the map. If not, please show and label the applicant's property boundary on the map.
- Landowner List the landowner list was not provided. This is to be separate from the labels. Please provide the affected landowner list.
- Spanish NORI No worries, that was not provided to you in the English NORI draft portions, as I was awaiting RWA's review and approval of the discharge route, so I can add that in for you. Regarding the paragraph you are not seeing in the Spanish NORI template, it is the last paragraph of the NORI, as shown below. I went ahead and added it into the Spanish NORI that you provided, so this item is sufficient.

También se puede obtener información adicional del [n indicada arriba o llamando a [name of applicant's repre

También se puede obtener información adicional del <u>Unc</u> dirección indicada arriba o llamando a Sr. Jeff Goebel, al

I look forward to receiving the remaining items from you. Please let me know if you have any additional questions.

Regards,



Candice Courville

License & Permit Specialist ARP Team | Water Quality Division Texas Commission on Environmental Quality 512-239-4312

candice.calhoun@tceq.texas.gov

Candice Calhoun

From: Jeff Goebel <jgoebel@undinellc.com>
Sent: Wednesday, June 25, 2025 4:00 PM
To: Candice Calhoun; Michelle Labrie
Subject: RE: WQ0016768001 - Keenan Cutoff

Attachments: Revised USGS Map.pdf

Please see attached

From: Candice Calhoun < Candice. Calhoun@tceq.texas.gov>

Sent: Wednesday, June 25, 2025 3:35 PM

To: Jeff Goebel <jgoebel@undinellc.com>; Michelle Labrie <Michelle.Labrie@tceq.texas.gov>

Subject: RE: WQ0016768001 - Keenan Cutoff

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Jeff.

I have yet to receive the updated USGS map that has the one-mile radius and is clearly labeled. I believe everything else on the previous map looked good; it was just those two things I was needed.

Regards,



Candice Courville

License & Permit Specialist ARP Team | Water Quality Division Texas Commission on Environmental Quality 512-239-4312

candice.calhoun@tceq.texas.gov

How is our customer service? Fill out our online customer satisfaction survey at www.tceq.texas.gov/customersurvey

From: Jeff Goebel < jgoebel@undinellc.com > Sent: Wednesday, June 25, 2025 3:31 PM

To: Candice Calhoun < Candice.Calhoun@tceq.texas.gov >; Michelle Labrie < Michelle.Labrie@tceq.texas.gov >

Subject: RE: WQ0016768001 - Keenan Cutoff

Candice.

Please let me know when this might be admin complete.

Thank you

Jg

From: Jeff Goebel

Sent: Wednesday, June 25, 2025 10:20 AM

To: Candice Calhoun < Candice.Calhoun@tceq.texas.gov >; Michelle Labrie < Michelle.Labrie@tceq.texas.gov >

Subject: WQ0016768001 - Keenan Cutoff

Michelle,

Thank you for the call today, please see attached revisions as discussed.

Thank you

Jeff Goebel

Manager of Business Development

(m) 713-724-9321

jgoebel@undinellc.com



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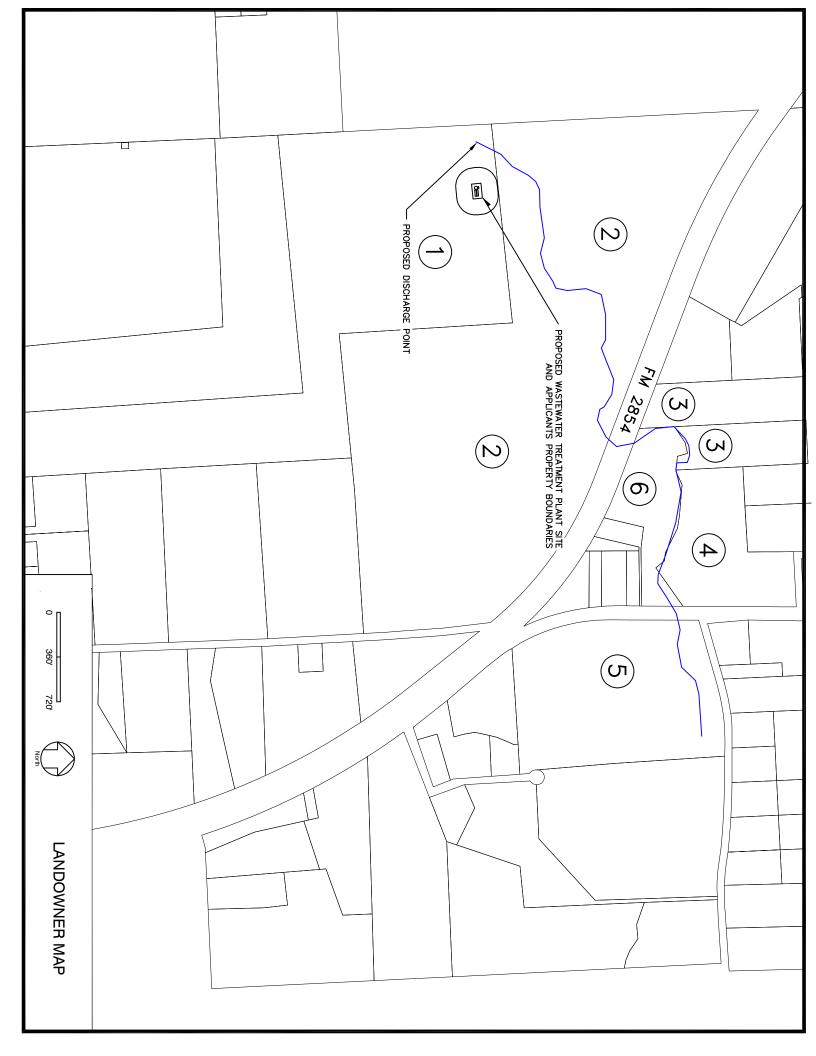
Public Involvement Plan Form for Permit and Registration Applications

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

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

Section 1. Preliminary Screening					
New Permit or Registration Application New Activity - modification, registration, amendment, facility, etc. (see instructions)					
If neither of the above boxes are checked, completion of the form is not required and does not need to be submitted.					
Section 2. Secondary Screening					
Requires public notice,					
Considered to have significant public interest, <u>and</u>					
Located within any of the following geographical locations:					
 Austin Dallas Fort Worth Houston San Antonio West Texas Texas Panhandle Along the Texas/Mexico Border Other geographical locations should be decided on a case-by-case basis 					
If all the above boxes are not checked, a Public Involvement Plan is not necessary. Stop after Section 2 and submit the form.					
Public Involvement Plan not applicable to this application. Provide brief explanation.					
This application is not for an industry which typically has significant public interest					

TCEQ-20960 (02-09-2023)



- 1. LABELLA INTERESTS LP 333 SIMONTON ST STE 200 CONROE TX 77301-2667
- 2. ADOUE, NORMAN D 7 SENDERO WOODS BOERNE TX 78015-8367
- LAMBARD, WILLIAM &
 CANDACE
 19053 KINKAID RD W # W
 MONTGOMERY TX 77316-4096

- 4. MCDOWELL, EDWARD &
 MARGARET
 PO BOX 873
 MONTGOMERY TX 77356-0873
- 5. BUCK, JOHN & BRIDGET 19550 FM 2854 RD MONTGOMERY TX 77316-3148
- 6. ROBBINS, MICHAEL STEPHEN 19577 FM 2854 RD MONTGOMERY TX 77316-3150

THE TONMENTAL OUR

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the application.

APPLICANT NAME: <u>Undine Texas Environmental, LLC</u>
PERMIT NUMBER (If new, leave blank): WQ00<u>16768001</u>

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

	Y	N		Y	N
Administrative Report 1.0	\boxtimes		Original USGS Map	\boxtimes	
Administrative Report 1.1	\boxtimes		Affected Landowners Map	\boxtimes	
SPIF	\boxtimes		Landowner Disk or Labels	\boxtimes	
Core Data Form	\boxtimes		Buffer Zone Map	\boxtimes	
Summary of Application (PLS)	\boxtimes		Flow Diagram	\boxtimes	
Public Involvement Plan Form	\boxtimes		Site Drawing	\boxtimes	
Technical Report 1.0	\boxtimes		Original Photographs	\boxtimes	
Technical Report 1.1			Design Calculations	\boxtimes	
Worksheet 2.0	\boxtimes		Solids Management Plan	\boxtimes	
Worksheet 2.1	\boxtimes		Water Balance		\boxtimes
Worksheet 3.0		\boxtimes			
Worksheet 3.1					
Worksheet 3.2		\boxtimes			
Worksheet 3.3		\boxtimes			
Worksheet 4.0		\boxtimes			
Worksheet 5.0		\boxtimes			
Worksheet 6.0		\boxtimes			
Worksheet 7.0					
For TCEQ Use Only					
Segment Number Expiration Date Permit Number			County Region		

THE TONMENTAL OURS

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
\geq 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 □

Mailed Check/Money Order Number: 12261
Check/Money Order Amount: 580
Name Printed on Check: Undine Texas LLC
EPAY Voucher Number: Click to enter text.
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					
	\boxtimes	Privately-Owned Domestic Wastewater					
		Conventional Water Treatment					
b.	Check the box next to the appropriate facility status.						
		Active Inactive					

c.	c. Check the box next to the appropriate permit type.						
	\square TLAP						
		TPDES Permit with TLAP component					
	☐ Subsurface Area Drip Dispersal System (SADDS)						
d.	d. Check the box next to the appropriate application type						
	\boxtimes	New					
		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			
e.	For	amendments or modifications, describe the p	ropo	osed changes: Click to enter text.			
f.	F. For existing permits:						
	Permit Number: WQ00 16768001 PROPOSED						
	EPA I.D. (TPDES only): TX <u>0147702 PROPOSED</u>						
Expiration Date: Click to enter text.							
Se	cti	on 3. Facility Owner (Applicant) a	nd	Co-Applicant Information			
		(Instructions Page 26)					
A.	The	e owner of the facility must apply for the per	rmit.				
	Wh	at is the Legal Name of the entity (applicant) a	pply	ing for this permit?			
	Und	line Texas Environmental, LLC					
		e legal name must be spelled exactly as filed w legal documents forming the entity.)	ith tì	he Texas Secretary of State, County, or in			
	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: 604510330					

CN: <u>604519330</u>
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: <u>Mr</u> Last Name, First Name: <u>Tillman, Vance</u>

Title: <u>CFO</u> 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. A-1

Section 4. Application Contact Information (Instructions Page 27)

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

A. Prefix: Mr Last Name, First Name: Goebel, Jeff

Title: <u>Business Development</u> Credential: Click to enter text.

Organization Name: Undine Texas Environmental, LLC

Mailing Address: <u>17681 Telge Rd</u> City, State, Zip Code: <u>Cypress Texas 77429</u>

Phone No.: <u>713-724-9321</u> E-mail Address: <u>jgoebel@undinellc.com</u>

Check one or both: \square Administrative Contact \square Technical Contact

B. 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.

Check one or both: \square Administrative Contact \square 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: Thomas, Carev

Title: VP Credential: Click to enter text.

Organization Name: Undine Texas Environmental, LLC

Mailing Address: <u>17681 Telge Rd</u> City, State, Zip Code: <u>Cypress Texas 77429</u>

Phone No.: 713-554-7820 E-mail Address: cthomas@undinellc.com

B. Prefix: Mr Last Name, First Name: Thomas Andy

Title: <u>VP</u> Credential: Click to enter text.

Organization Name: <u>Undine Texas Environmental, LLC</u>

Mailing Address: <u>17681 Telge Rd</u> City, State, Zip Code: <u>Cypress Texas 77429</u>

Phone No.: <u>713-554-7820</u> E-mail Address: <u>athomas@undinellc.com</u>

Section 6. Billing Contact Information (Instructions Page 27)

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

Prefix: Ms Last Name, First Name: Thomas, Carev

Title: VP Credential: Click to enter text.

Organization Name: <u>Undine Texas Environmental, LLC</u>

Mailing Address: <u>17681 Telge Rd</u> City, State, Zip Code: <u>Cypress Texas 77429</u>

Phone No.: <u>713-554-7820</u> E-mail Address: <u>cthomas@undinellc.com</u>

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

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

Prefix: Click to enter text. Last Name, First Name: <u>Thomas, Carey</u>

Title: <u>VP</u> Credential: Click to enter text.

Organization Name: Undine Texas Environmental. LLC

Mailing Address: 17681 Telge Rd City, State, Zip Code: Cypress Texas 77429

Phone No.: 713-554-7820 E-mail Address: cthomas@undinellc

Section 8. Public Notice Information (Instructions Page 27)

A. Individual Publishing the Notices

Prefix: Mr Last Name, First Name: Goebel, Jeff

Title: Business Development Credential: Click to enter text.

Organization Name: Undine Texas Environmental, LLC

Mailing Address: <u>1768 Telge Rd</u> City, State, Zip Code: <u>Cypress Texas 77429</u>

Phone No.: 713724-9321 E-mail Address: jgoebel@undinellc.com

B.		thod for ckage	Receiving	Notic	e of Receipt and Intent to Obtain a Water Quality Permit		
	Ind	licate by a	a check ma	rk the	preferred method for receiving the first notice and instructions:		
		E-mail A	Address				
		Fax					
		Regular	Mail				
C.	Co	ntact per	mit to be l	isted	in the Notices		
	Pre	efix: <u>Mr</u>			Last Name, First Name: <u>Goebel, Jeff</u>		
	Tit	le: <u>Busine</u>	ss Developm	<u>nent</u>	Credential: Click to enter text.		
	Org	ganizatio	n Name: <u>Ur</u>	ndine T	Cexas Environmental, LLC		
	Ma	iling Add	ress: <u>17681</u>	<u>Telge</u>	<u>Rd</u> City, State, Zip Code: <u>Cypress Texas 77249</u>		
	Pho	one No.: 7	713-724-932	<u>1</u>	E-mail Address: jgoebel@undinellc.com		
D.	Pu	blic View	ing Inform	ation			
			y or outfall t be provide		ited in more than one county, a public viewing place for each		
	Pul	blic build	ing name: <u>1</u>	Malcol	m Purvis Library		
	Location within the building: Click to enter text.						
	Phy	Physical Address of Building: <u>510 Melton Street</u>					
	Cit	y: <u>Magnol</u>	<u>ia</u>		County: <u>Montgomery</u>		
	Co	ntact (Las	st Name, Fii	rst Na	me): Click to enter text.		
	Pho	one No.: <u>c</u>)36-442-770	<u>4</u> Ext.	Click to enter text.		
E.	Bil	Bilingual Notice Requirements					
				-	for new, major amendment, minor amendment or minor pplications.		
be		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.					
	obt	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.				rogram required by the Texas Education Code at the elementary to the facility or proposed facility?		
			Yes		No		
		If no , pubelow.	blication of	f an al	ternative language notice is not required; skip to Section 9		
	2.				end either the elementary school or the middle school enrolled in gram at that school?		
		\boxtimes	Yes		No		

	3.	Do the locatio		at these s	schools attend a bilingual education program at another
			Yes		No
	4.				ired to provide a bilingual education program but the school has ement under 19 TAC §89.1205(g)?
			Yes		No
	5.				estion 1, 2, 3, or 4 , public notices in an alternative language are is required by the bilingual program? <u>Spanish</u>
F.	Su	mmary	of Applic	ation in	Plain Language Template
		_		•	Application in Plain Language Template (TCEQ Form 20972), uage summary or PLS, and include as an attachment.
	At	tachme	nt: <u>A-2</u>		
G.	Pu	blic Inv	olvement	Plan Fo	rm
					nent Plan Form (TCEQ Form 20960) for each application for a lment to a permit and include as an attachment.
	At	tachme	nt: <u>A-3</u>		
Se	cti	on 9.	Regul Page		ntity and Permitted Site Information (Instructions
Α.			is current RN <u>1121895</u>	, .	ted by TCEQ, provide the Regulated Entity Number (RN) issued to
					egistry at http://www15.tceq.texas.gov/crpub/ to determine if d by TCEQ.
B.	Na	me of p	roject or	site (the r	name known by the community where located):
	<u>Ke</u>	enan Cu	toff Wastev	<u>vater Trea</u>	tment Facility
C.	Ov	vner of	treatment	facility: 1	<u>Undine Texas Environmental, LLC</u>
	Ov	vnership	of Facilit	y: 🗆 F	Public □ Private □ Both □ Federal
D.	Ov	vner of l	land wher	e treatme	ent facility is or will be:
	Pre	efix: Clic	ck to ente	r text.	Last Name, First Name: <u>Undine Texas Environmental, LLC</u>
	Tit	le: Clicl	k to enter	text.	Credential: Click to enter text.
	Or	ganizat	ion Name:	Click to	enter text.
	Ma	iling Ac	ddress: <u>176</u>	81 Telge 1	<u>Rd</u> City, State, Zip Code: <u>Cypress Texas 77429</u>
	Ph	one No.	: <u>713-5554</u> -	<u>-7820</u>	E-mail Address: cthomas@undinellc.com
					ame person as the facility owner or co-applicant, attach a lease easement. See instructions.
		Attach	ment: Clic	ck to ente	er text.

F.

	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 ente	er text.
	Mailing Address: Click to enter to	ext. 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 agreement or deed recorded ease	person as the facility owner or co-applicant, attach a lease ement. See instructions.
	Attachment: Click to enter te	xt.
F.	Owner sewage sludge disposal si property owned or controlled by	ite (if authorization is requested for sludge disposal on 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 ente	er text.
	Mailing Address: Click to enter to	ext. 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 agreement or deed recorded ease	person as the facility owner or co-applicant, attach a lease ement. See instructions.
	Attachment: Click to enter te	xt.
		ge Information (Instructions Page 31)
		ge Information (Instructions Page 31) lity location in the existing permit accurate?
	Is the wastewater treatment facil	lity location in the existing permit accurate?
	Is the wastewater treatment facil ☐ Yes ☐ No If no, or a new permit application	bn, please give an accurate description:
	Is the wastewater treatment facil ☐ Yes ☐ No If no, or a new permit application	lity location in the existing permit accurate?
A.	Is the wastewater treatment facil Yes No If no, or a new permit application approximately 1.28 miles northwest Cutoff Road	bity location in the existing permit accurate? on, please give an accurate description: st of the intersection of Farm-to-Market Road2854 and Keenan
A.	Is the wastewater treatment facil Yes No If no, or a new permit application approximately 1.28 miles northwest Cutoff Road Are the point(s) of discharge and	bn, please give an accurate description:
A.	Is the wastewater treatment facil ☐ Yes ☐ No If no, or a new permit application approximately 1.28 miles northwest Cutoff Road Are the point(s) of discharge and Yes ☐ No	bn, please give an accurate description: st of the intersection of Farm-to-Market Road2854 and Keenan I the discharge route(s) in the existing permit correct?
A.	Is the wastewater treatment facil ☐ Yes ☐ No If no, or a new permit application approximately 1.28 miles northwest Cutoff Road Are the point(s) of discharge and ☐ Yes ☐ No If no, or a new or amendment p	by location in the existing permit accurate? on, please give an accurate description: st of the intersection of Farm-to-Market Road2854 and Keenan I the discharge route(s) in the existing permit correct? ermit application, provide an accurate description of the
A.	Is the wastewater treatment facil ☐ Yes ☐ No If no, or a new permit application approximately 1.28 miles northwest Cutoff Road Are the point(s) of discharge and ☐ Yes ☒ No If no, or a new or amendment point of discharge and the discharge and the discharge 307:	by location in the existing permit accurate? on, please give an accurate description: ot of the intersection of Farm-to-Market Road2854 and Keenan I the discharge route(s) in the existing permit correct? ermit application, provide an accurate description of the arge route to the nearest classified segment as defined in 30
A.	Is the wastewater treatment facil ☐ Yes ☐ No If no, or a new permit application approximately 1.28 miles northwest Cutoff Road Are the point(s) of discharge and ☐ Yes ☒ No If no, or a new or amendment point of discharge and the discharge and the discharge 307:	by location in the existing permit accurate? on, please give an accurate description: st of the intersection of Farm-to-Market Road2854 and Keenan I the discharge route(s) in the existing permit correct? ermit application, provide an accurate description of the
A.	Is the wastewater treatment facil ☐ Yes ☐ No If no, or a new permit application approximately 1.28 miles northwest Cutoff Road Are the point(s) of discharge and ☐ Yes ☒ No If no, or a new or amendment point of discharge and the discharge and the discharge 307:	by location in the existing permit accurate? on, please give an accurate description: ot of the intersection of Farm-to-Market Road2854 and Keenan I the discharge route(s) in the existing permit correct? ermit application, provide an accurate description of the arge route to the nearest classified segment as defined in 30
A.	Is the wastewater treatment facil ☐ Yes ☐ No If no, or a new permit application approximately 1.28 miles northwest Cutoff Road Are the point(s) of discharge and ☐ Yes ☒ No If no, or a new or amendment point of discharge and the discharge and the discharge 307:	bity location in the existing permit accurate? bity location in the existing permit accurate? bit of, please give an accurate description: bit of the intersection of Farm-to-Market Road2854 and Keenan lithe discharge route(s) in the existing permit correct? bermit application, provide an accurate description of the arge route to the nearest classified segment as defined in 30 bund Creek thence to Lake Creek
A.	Is the wastewater treatment facil ☐ Yes ☐ No If no, or a new permit application approximately 1.28 miles northwest Cutoff Road Are the point(s) of discharge and ☐ Yes ☒ No If no, or a new or amendment perpoint of discharge and the discharge and the discharge and the facility thence to Mo	bity location in the existing permit accurate? on, please give an accurate description: st of the intersection of Farm-to-Market Road2854 and Keenan I the discharge route(s) in the existing permit correct? ermit application, provide an accurate description of the arge route to the nearest classified segment as defined in 30 ound Creek thence to Lake Creek omery
А.	Is the wastewater treatment facil ☐ Yes ☐ No If no, or a new permit application approximately 1.28 miles northwest Cutoff Road Are the point(s) of discharge and ☐ Yes ☒ No If no, or a new or amendment point of discharge and the discharge and the discharge and the discharge and the facility thence to Mo City nearest the outfall(s): Montg County in which the outfalls(s) is	bity location in the existing permit accurate? on, please give an accurate description: st of the intersection of Farm-to-Market Road2854 and Keenan I the discharge route(s) in the existing permit correct? ermit application, provide an accurate description of the arge route to the nearest classified segment as defined in 30 ound Creek thence to Lake Creek omery s/are located: Montgomery discharge to a city, county, or state highway right-of-way, or

E. Owner of effluent disposal site:

	If yes , indicate by a check mark if:
	\square Authorization granted \square Authorization pending
	For new and amendment applications, provide copies of letters that show proof of contact and the approval letter upon receipt.
	Attachment: Click to enter text.
D.	For all applications involving an average daily discharge of 5 MGD or more, provide the names of all counties located within 100 statute miles downstream of the point(s) of discharge: Click to enter text.
Se	ection 11. TLAP Disposal Information (Instructions Page 32)
Α.	For TLAPs, is the location of the effluent disposal site in the existing permit accurate?
	□ Yes ⊠ No
	If no, or a new or amendment permit application , provide an accurate description of the disposal site location:
	Click to enter text.
B.	City nearest the disposal site: Click to enter text.
C.	County in which the disposal site is located: Click to enter text.
D.	For TLAPs , describe the routing of effluent from the treatment facility to the disposal site:
	Click to enter text.
E.	For TLAPs , please identify the nearest watercourse to the disposal site to which rainfall runoff might flow if not contained: Click to enter text.
Se	ection 12. Miscellaneous Information (Instructions Page 32)
A.	Is the facility located on or does the treated effluent cross American Indian Land?
	□ Yes ⊠ No
В.	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.
Se	ction 13. Attachments (Instructions Page 33)
	ction 13. Attachments (Instructions Page 33) icate which attachments are included with the Administrative Report. Check all that apply:
Inc	icate 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
Inc	icate 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.
Inc	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)
Inc	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.

Section 14. Signature Page (Instructions Page 34)

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

Permit Number: WQ0016768001

Applicant: Undine Texas Environmental, LLC

Certification:

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

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

Signatory name (typed or printed	l): <u>Vance Tillman</u>			
Signatory title: Chief Financial C	<u>)fficer</u>			
Signature:		Date:		
(Use blue ink)				
Subscribed and Sworn to before	me by the said			
on this	day of		, 20	
My commission expires on the	day of		20	
Notary Public			[SEAL]	
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)

Α.		cate by a check mark that the landowners map or drawing, with scale, includes the owing information, as applicable:			
	\boxtimes	The applicant's property boundaries			
	\boxtimes	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			
В.	⊠ addı	Indicate by a check mark that a separate list with the landowners' names and mailing resses cross-referenced to the landowner's map has been provided.			
C.	⊠ labe	Indicate by a check mark that the landowners list has also been provided as mailing ls in electronic format (Avery 5160).			
D.	. Provide the source of the landowners' names and mailing addresses: <u>Montgomery County</u> <u>Appraisal District</u>				
Е.		equired by $Texas\ Water\ Code\ \S\ 5.115$, is any permanent school fund land affected by application?			
		□ Yes ⊠ No			

	If ye land	s, provide the location and foreseeable impacts and effects this application has on the (s):
	Nor	ne known
Se	ctio	n 2. Original Photographs (Instructions Page 38)
Pro	ovide	original ground level photographs. Indicate with checkmarks that the following tion is provided.
1111		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
Se	ctio	n 3. Buffer Zone Map (Instructions Page 38)
Α.	info	er zone map. Provide a buffer zone map on 8.5×11 -inch paper with all of the following rmation. The applicant's property line and the buffer zone line may be distinguished by g dashes or symbols and appropriate labels.
	•	The required buffer zone; and Each treatment unit; and
В.		er zone compliance method. Indicate how the buffer zone requirements will be met. ck all that apply.
		Ownership
		Restrictive easement
		Nuisance odor control
		1 Variance
C.		uitable site characteristics. Does the facility comply with the requirements regarding uitable 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: Click to enter text.

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

BY OVERNIGHT/EXPRESS MAIL

Texas Commission on Environmental Quality Texas Commission on Environmental Quality

Financial Administration Division Financial Administration Division

Cashier's Office, MC-214
P.O. Box 13088
12100 Park 35 Circle
Austin, Texas 78711-3088
Austin, Texas 78753

Fee Code: WQP Waste Permit No: Click to enter text.

1. Check or Money Order Number: 12261

2. Check or Money Order Amount: 850.00

3. Date of Check or Money Order: 3/4/25

4. Name on Check or Money Order: <u>Undine Texas, LLC</u>

5. APPLICATION INFORMATION

Name of Project or Site: Keenan Cutoff WWTP

Physical Address of Project or Site: <u>The facility will be located approx. 1.28 miles NW of the</u> intersection of Keenan Cutoff Rd and FM 2854

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:

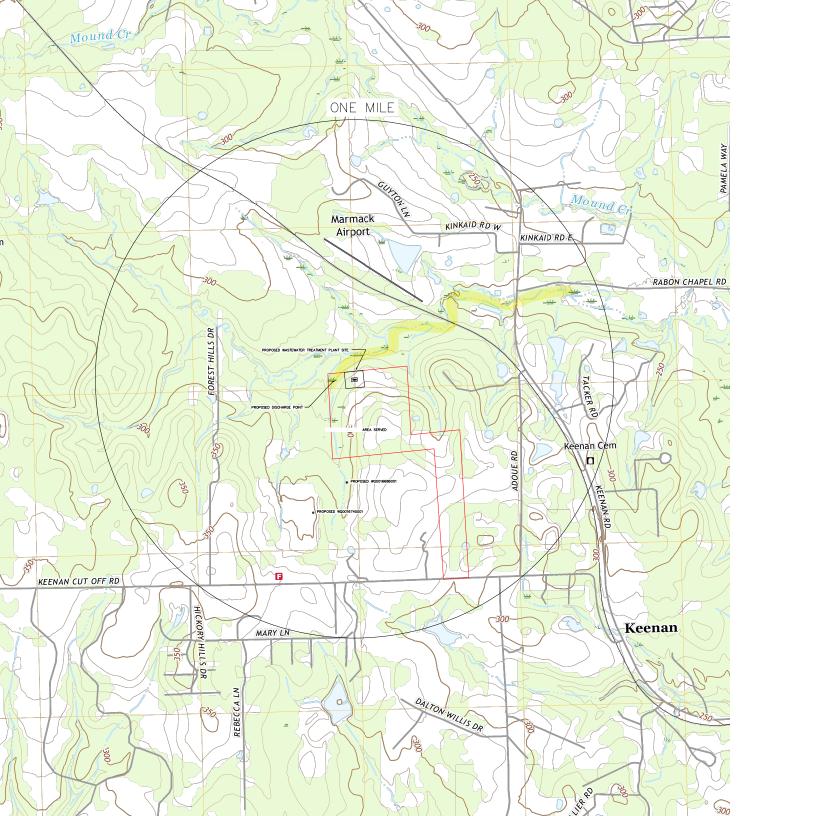
Permit Number:

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 (Required for all applic Note: Form may be sign		Yes			
	dustrial Wastewater Permit Application Fo. 3 and 10054. Version dated 6/25/2018 or l				Yes
-	ayment Submittal Form (Page 19) to TCEQ Revenue Section. See instructions	for ma	iling aa	□ ldress	Yes s.)
(Full-size map if seeking	rangle Topographic Map Attached g "New" permit. r Renewals and Amendments)				Yes
Current/Non-Expired, l	Executed Lease Agreement or Easement		N/A		Yes
Landowners Map (See instructions for lar	ndowner requirements)		N/A		Yes
 The applicant boundaries of the applicant landowners if from the action on the opposition applicant's pure landowners. If the adjacent the adja	shown on the map must be labeled. It's complete property boundaries must be of contiguous property owned by the applicate cannot be its own adjacent landowner. You mediately adjacent to their property, regual facility. Int's property is adjacent to a road, creek, site side must be identified. Although the property boundary, they are considered potent road is a divided highway as identified oblicant does not have to identify the landow	cant. ou mus gardless or strea propert entially	st ident s of hov am, the ies are / affect JSGS to	ify th v far land not a ed la pogr	e they are owners djacent to ndowners. aphic
Landowners Labels and (See instructions for lar			N/A		Yes
Electronic Application (See application submit	Submittal tal requirements on page 23 of the instruct	ions.)			Yes
(If signature page is no	30 TAC § 305.44 - Blue Ink Preferred t signed by an elected official or principle e hority/delegation letter must be attached)	xecutiv	e office	r,	Yes
Summary of Application	n (in Plain Language)				Yes

Ε.	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 ente	er text.
	Mailing Address: Click to enter t	ext. 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 agreement or deed recorded eas	person as the facility owner or co-applicant, attach a lease ement. See instructions.
	Attachment: Click to enter to	ext.
F.	Owner sewage sludge disposal si property owned or controlled by	ite (if authorization is requested for sludge disposal on 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	er text.
	Mailing Address: Click to enter t	ext. 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 agreement or deed recorded eas	person as the facility owner or co-applicant, attach a lease ement. See instructions.
	Attachment: Click to enter to	ext.
Se	ction 10. TPDES Dischar	ge Information (Instructions Page 31)
Α.	Is the wastewater treatment facil	lity location in the existing permit accurate?
		, 9-
	□ Yes □ No	,
	If no, or a new permit application	on, please give an accurate description:
	If no , or a new permit application The facility will be located approx.	on, please give an accurate description: 1.28 miles NW of the intersection of Keenan Cutoff Rd and FM
	If no, or a new permit application	
	If no , or a new permit application The facility will be located approx. 2854	
	If no , or a new permit application The facility will be located approx. 2854	1.28 miles NW of the intersection of Keenan Cutoff Rd and FM
	If no , or a new permit application The facility will be located approx. 2854 Are the point(s) of discharge and Indianated Ind	1.28 miles NW of the intersection of Keenan Cutoff Rd and FM d the discharge route(s) in the existing permit correct? Dermit application, provide an accurate description of the arge route to the nearest classified segment as defined in 30
	If no , or a new permit application The facility will be located approx. 2854 Are the point(s) of discharge and Indianated Ind	1.28 miles NW of the intersection of Keenan Cutoff Rd and FM d the discharge route(s) in the existing permit correct? permit application, provide an accurate description of the
	If no, or a new permit application The facility will be located approx. 2854 Are the point(s) of discharge and the discharge and the discharge and the discharge and the facility thence to an unnatation.	1.28 miles NW of the intersection of Keenan Cutoff Rd and FM d the discharge route(s) in the existing permit correct? Dermit application, provide an accurate description of the arge route to the nearest classified segment as defined in 30 amed trib of mound creek; thence to Mound Creek thence to
	If no , or a new permit application The facility will be located approx. 2854 Are the point(s) of discharge and Indianated Ind	1.28 miles NW of the intersection of Keenan Cutoff Rd and FM d the discharge route(s) in the existing permit correct? Dermit application, provide an accurate description of the arge route to the nearest classified segment as defined in 30 amed trib of mound creek; thence to Mound Creek thence to somery
В.	If no, or a new permit application. The facility will be located approx. 2854 Are the point(s) of discharge and the point of discharge and the discharge and the discharge and the facility thence to an unnumber of the facility thence to an unnumber of the facility theorem of the facility theor	1.28 miles NW of the intersection of Keenan Cutoff Rd and FM If the discharge route(s) in the existing permit correct? Dermit application, provide an accurate description of the arge route to the nearest classified segment as defined in 30 amed trib of mound creek; thence to Mound Creek thence to Somery Solare located: Montgomery discharge to a city, county, or state highway right-of-way, or



Attachment T-1		
B. Treatment Units		
In Table 1.0(1), provide	, <u> </u>	e number of units, and dimensions ounting for <i>all</i> phases of operation.
Table 1.0(1) – Treatment Un	its	
Treatment Unit Type	Number of Units	Dimensions (L x W x D)
Attachment T-1		
Provide the TPDES discharg	ge outfall latitude and longi	g (Instructions Page 44) itude. Enter N/A if not applicable.
	Longitude: 95°39'49.94"W	Enter NI/A if not applicable
 Latitude: Click to en 		Enter N/A if not applicable.
 Lantude: <u>Click to en</u> Longitude: <u>Click to en</u> 		
	the facility that shows the f	ollowing:
9	he treatment facility;	
	he area served by the treatn	nent facility;
 If land disposal of e ponds; and 	ffluent, the boundaries of t	he disposal site and all storage/holding
 If sludge disposal is disposal site. 	authorized in the permit, t	he boundaries of the land application of
Attachment: <u>T-3</u>		
Provide the name and a de	scription of the area served	by the treatment facility.
Keenan Cutoff Subdivision		

LABELLA INTERESTS LP 333 SIMONTON ST STE 200 CONROE TX 77301-2667 ADOUE, NORMAN D 7 SENDERO WOODS BOERNE TX 78015-8367 LAMBARD, WILLIAM &
CANDACE
19053 KINKAID RD W # W
MONTGOMERY TX 77316-4096

MCDOWELL, EDWARD &
MARGARET
PO BOX 873
MONTGOMERY TX 77356-0873

BUCK, JOHN & BRIDGET 19550 FM 2854 RD MONTGOMERY TX 77316-3148 ROBBINS, MICHAEL STEPHEN 19577 FM 2854 RD MONTGOMERY TX 77316-3150

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

FOR AGENCIES REVIEWING DOMESTIC OR INDUSTRIAL TPDES WASTEWATER PERMIT APPLICATIONS

TCEQ USE ONLY:	
	jor AmendmentNewNew
	Segment Number:
Admin Complete Date:	
Agency Receiving SPIF:	
Texas Historical Commission	
Texas Parks and Wildlife Departr	ment U.S. Army Corps of Engineers
This form applies to TPDES permit appli	ications only. (Instructions, Page 53)
our agreement with EPA. If any of the iter	ent. TCEQ will mail a copy to each agency as required by ns are not completely addressed or further information the information before issuing the permit. Address
attachment for this form separately from application will not be declared administr completed in its entirety including all atta	Im in the permit application form. Provide each the Administrative Report of the application. The ratively complete without this SPIF form being achments. Questions or comments concerning this form sion's Application Review and Processing Team by by phone at (512) 239-4671.
The following applies to all applications:	
1. Permittee: Undine Texas Environmental,	LLC
Permit No. WQ00 <u>16768001</u>	EPA ID No. TX 0147702
and county):	lescription that includes street/highway, city/vicinity,
The Facility will be located approximately in High Island Texas	y 1000' West of the intersection of Texas 124 and 3rd Street

Provide the name, address, phone and fax number of an individual that can be contacted to

2.3.

4.

5.

	☐ 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):
	None
2.	Describe existing disturbances, vegetation, and land use:
	Trees
ΑN	HE FOLLOWING ITEMS APPLY ONLY TO APPLICATIONS FOR NEW TPDES PERMITS AND MAJOR MENDMENTS TO TPDES PERMITS
3.	List construction dates of all buildings and structures on the property: Not known
4.	Provide a brief history of the property, and name of the architect/builder, if known.
	Not Known