



Administrative Package Cover Page

This file contains the following documents:

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



Portada de Paquete Administrativo

Este archivo contiene los siguientes documentos:

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

DOMESTIC WASTEWATER

The following summary is provided for this pending water quality permit application being reviewed by the Texas Commission on Environmental Quality as required by 30 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.

Melissa 413 LLC (CN606389310) and Tommy Doak Robbins (CN606392181) proposes to operate the Vibe WWTP (RN112218979), a conventional activated sludge process plant operated in the complete mix mode. The facility will be located at approximately 1.5 miles southeast of the East Melissa Road and Military Lane intersection in Melissa, Collin County, Texas 75454. The application is for a new application to dispose a daily flow not to exceed 65,000 gallons per day in Phase I and 125,000 gallons per day in the Final Phase of treated domestic wastewater.

Discharges from the facility are expected to contain five-day biochemical oxygen demand (BOD₅) and total suspended solids (TSS). Domestic wastewater will be treated by an activated sludge process plant and the treatment units will include an influent lift station, bar screen(s), aeration basin(s), secondary clarifier (s), aerobic sludge digester(s), tertiary filter(s) and chlorine contact chamber(s).

AGUAS RESIDUALES DOMÉSTICAS

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

Melissa 413 LLC (CN606389310) y Tommy Doak Robbins (CN606392181) propone operar la Vibe WWTP (RN112218979), una planta de proceso de lodos activados convencional operada en modo de mezcla completa. La instalación estará ubicada aproximadamente a 1.5 millas al sudeste de la intersección East Melissa Road y Military Lane en Melissa, condado de Collin, Texas 75126. La solicitud es para una nueva solicitud para disponer de un flujo diario que no exceda los 65,000 galones por día en la Fase I y 125,000 galones diarios en la Fase Final de aguas residuales domésticas tratadas.

Se espera que las descargas de la instalación contengan la demanda bioquímica de oxígeno de cinco días (BOD₅) y los sólidos suspendidos totales (TSS). Las aguas residuales domésticas serán tratadas mediante una planta de proceso de lodos activados y las unidades de tratamiento incluirán una estación de bombeo del afluente, rejillas de barras, cuencas de aireación, clarificadores secundarios, digestores aeróbicos de lodos y filtros terciarios y cámara de contacto con cloro.

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY



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

PROPOSED PERMIT NO. WQ0016817001

APPLICATION. Melissa 413 LLC and Tommy Doak Robbins, 3555 Timmons Lane, Suite 1440, Houston, Texas 77027, has applied to the Texas Commission on Environmental Quality (TCEQ) for proposed Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0016817001 (EPA I.D. No. TX0147907) 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 1.5 miles southeast of the intersection of East Melissa Road and Military Lane, near the city of Melissa, in Collin County, Texas 75454. The discharge route will be from the plant site to an unnamed tributary, thence to Stiff Creek, thence to Soil Conservation Service (SCS) Site 12 Reservoir, thence to Stiff Creek, thence to Sister Grove Creek, thence to Lavon Lake. TCEQ received this application on May 23, 2025. The permit application will be available for viewing and copying at Melissa Public Library, Main Desk, 3411 Barker Avenue, Melissa, in Collin County, Texas prior to the date this notice is published in the newspaper. The application, including any updates, and associated notices are available electronically at the following webpage:

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

<https://gisweb.tceq.texas.gov/LocationMapper/?marker=-96.52265,33.278481&level=18>

ALTERNATIVE LANGUAGE NOTICE. Alternative language notice in Spanish is available at:

<https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications>.

El aviso de idioma alternativo en español está disponible en

<https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications>.

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

PUBLIC COMMENT / PUBLIC MEETING. You may submit public comments or request a public meeting on this application. The purpose of a public meeting is to provide the opportunity to submit comments or to ask questions about the application. TCEQ will hold a

public meeting if the Executive Director determines that there is a significant degree of public interest in the application or if requested by a local legislator. A public meeting is not a contested case hearing.

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

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

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

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

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

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

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

Further information may also be obtained from Melissa 413 LLC and Tommy Doak Robbins at the address stated above or by calling Mr. Anzer Husain, Director at 347-433-4544.

Issuance Date: June 17, 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. WQ0016817001

SOLICITUD. Melissa 413 LLC y Tommy Doak Robbins, 3555 Timmons Lane, Suite 1440, Houston, Texas 77027, ha solicitado a la Comisión de Calidad Ambiental del Estado de Texas (TCEQ) para el propuesto Permiso No. WQ0016817001 (EPA I.D. No. TX147907) 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 1.5 millas al sudeste de la intersección East Melissa Road y Military Lane en el Condado de Collin, Texas 75126. La ruta de descarga estará del sitio de la planta a un afluente sin nombre, de allí a Stiff Creek, de allí al embalse del Sitio 12 del Servicio de Conservación de Suelos (SCS), de allí a Stiff Creek, de allí a Sister Grove Creek, de allí al lago Lavon. La TCEQ recibió esta solicitud el 23 de mayo de 2025. La solicitud para el permiso estará disponible para leerla y copiarla en Biblioteca Pública Melissa, Mostrador principal, 3411 Barker Avenue, Melissa, en el condado de Collin, 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=-96.52265,33.27848&level=18>

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

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

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

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

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

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

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

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

LISTA DE CORREO. Si somete comentarios públicos, un pedido para una audiencia administrativa de lo contencioso o una reconsideración de la decisión del Director Ejecutivo, la Oficina del Secretario Principal enviará por correo los avisos públicos en relación con la solicitud. Además, puede pedir que la TCEQ ponga su nombre en una o más de las listas

correos siguientes (1) la lista de correo permanente para recibir los avisos del solicitante indicado por nombre y número del permiso específico y/o (2) la lista de correo de todas las solicitudes en un condado específico. Si desea que se agregue su nombre en una de las listas designe cual lista(s) y envía por correo su pedido a la Oficina del Secretario Principal de la TCEQ.

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

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

También se puede obtener información adicional del Melissa 413 LLC y Tommy Doak Robbins a la dirección indicada arriba o llamando a Anzer Husain al 347-433-4544.

Fecha de emisión: el 17 de junio de 2025

TEXAS POLLUTION DISCHARGE ELIMINATION SYSTEM (TPDES) APPLICATION

VIBE (MELISSA) WASTEWATER TREATMENT PLANT

Prepared for:

Octa Homes
4265 San Felipe St, Suite 1050
Houston, TX 77027

Prepared by:



2000 West Sam Houston Parkway South
Suite 1400
Houston, TX 77042

May 23rd, 2025

DOMESTIC WASTEWATER PERMIT APPLICATION
ADMINISTRATIVE REPORT



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the application.

APPLICANT NAME: Octa Homes

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

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

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

For TCEQ Use Only

Segment Number _____ County _____
Expiration Date _____ Region _____
Permit Number _____



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

**DOMESTIC WASTEWATER PERMIT APPLICATION
ADMINISTRATIVE REPORT 1.0**

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

Section 1. Application Fees (Instructions Page 26)

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

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

Minor Amendment (for any flow) \$150.00 ☐

Payment Information:

Mailed Check/Money Order Number:

Check/Money Order Amount:

Name Printed on Check:

EPAY Voucher Number: 764118 and 764119

Copy of Payment Voucher enclosed? Yes ☒

Section 2. Type of Application (Instructions Page 26)

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

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

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

- ☒ Active ☐ Inactive

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

Transaction Information
Voucher Number: 764118
Trace Number: 582EA000665524
Date: 04/25/2025 04:24 PM
Payment Method: CC - Authorization 000002805G
Voucher Amount: \$800.00
Fee Type: WW PERMIT - FACILITY WITH FLOW >= .10 & < .25 MGD - NEW AND MAJOR AMENDMENTS
ePay Actor: CINDY DONG
Actor Email: cdong@civitasengr.com
IP: 216.201.236.130

Payment Contact Information
Name: CINDY DONG
Company: CIVITAS ENGINEERING GROUP INC
Address: 2000 W SAM HOUSTON PARKWAY S, HOUSTON, TX 77042
Phone: 713-972-6640

Site Information
Site Name: VIBE AT MELISSA WWTP
Site Location: APPROXIMATELY 2.4 MILES EAST OF E MELISSA RD AND TX STATE HWY 121 INTERSECTION

Customer Information
Customer Name: OCTA HOMES
Customer Address: 4265 SAN FELIPE STREET, HOUSTON, TX 77027

Close

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

Transaction Information

Voucher Number: 764119
Trace Number: 582EA000665524
Date: 04/25/2025 04:24 PM
Payment Method: CC - Authorization 000002805G
Voucher Amount: \$50.00
Fee Type: 30 TAC 305.53B WQ NOTIFICATION FEE
ePay Actor: CINDY DONG
Actor Email: cdong@civitasengr.com
IP: 216.201.236.130

Payment Contact Information

Name: CINDY DONG
Company: CIVITAS ENGINEERING GROUP INC
Address: 2000 W SAM HOUSTON PARKWAY S, HOUSTON, TX 77042
Phone: 713-972-6640

[Close](#)

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

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

d. Check the box next to the appropriate application type

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

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

f. For existing permits:

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

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

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

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

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

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

Melissa 413 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: [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: Mr.

Last Name, First Name: Husain, Anzer

Title: Director

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?

Tommy Doak Robbins

(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: Mr.

Last Name, First Name: Robbins, Tommy

Title: Land Owner

Credential: Click to enter text.

Provide a brief description of the need for a co-permittee: Tommy Doak Robbins currently owns the land where the treatment plant is proposed to be located on but Octa Homes is in process of purchasing land

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. See Attachment A1 – Core Data Form

Section 4. Application Contact Information (Instructions Page 27)

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

A. Prefix: Miss

Last Name, First Name: Dong, Cindy

Title: Project Engineer

Credential: P.E.

Organization Name: Civitas Engineering Group, Inc.

Mailing Address: 2000 W Sam Houston Pkwy S, #1400
77042

City, State, Zip Code: Houston, TX

Phone No.: 713-972-6640

E-mail Address: cdong@civitasengr.com

Check one or both: ☒ Administrative Contact ☒ Technical Contact

B. Prefix: Mr.

Last Name, First Name: O'Connor, Keith

Title: Senior Project Manager

Credential: P.E.

Organization Name: Civitas Engineering Group, Inc.

Mailing Address: 2000 W Sam Houston Pkwy S, #1400
77042

City, State, Zip Code: Houston, TX

Phone No.: 713-972-6642

E-mail Address: koconnor@civitasengr.com

Check one or both: ☒ Administrative Contact ☒ Technical Contact

Section 5. Permit Contact Information (Instructions Page 27)

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

A. Prefix: Mr.

Last Name, First Name: Husain, Anzer

Title: Director

Credential: Click to enter text.

Organization Name: Octa Homes

Mailing Address: 4265 San Felipe St, Ste 1050 City, State, Zip Code: Houston, TX 77027

Phone No.: 346-444-9660

E-mail Address: anzer@octahomes.com

B. Prefix: Mr.

Last Name, First Name: Husain, Danial

Title: President

Credential: Click to enter text.

Organization Name: Octa Homes

Mailing Address: 4265 San Felipe St, Ste 1050 City, State, Zip Code: Houston, TX 77027

Phone No.: 346-444-9660

E-mail Address: danial@octahomes.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: Mr.

Last Name, First Name: Husain, Anzer

Title: Director

Credential: Click to enter text.

Organization Name: Octa Homes

Mailing Address: 4265 San Felipe St, Ste 1050 City, State, Zip Code: Houston, TX 77027

Phone No.: Click to enter text.

E-mail Address: anzer@octahomes.com

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

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

Prefix: Mr.

Last Name, First Name: Husain, Anzer

Title: Director

Credential: Click to enter text.

Organization Name: Octa Homes

Mailing Address: 4265 San Felipe St, Ste 1050 City, State, Zip Code: Houston, TX 77027

Phone No.: Click to enter text.

E-mail Address: anzer@octahomes.com

Section 8. Public Notice Information (Instructions Page 27)

A. Individual Publishing the Notices

Prefix: Miss

Last Name, First Name: Dong, Cindy

Title: Project Engineer

Credential: P.E.

Organization Name: Civitas Engineering Group, Inc.

Mailing Address: 2000 W Sam Houston Pkwy S, #1400
77042

City, State, Zip Code: Houston, TX

Phone No.: 713-972-6640

E-mail Address: cdong@civitasengr.com

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

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

☒ E-mail Address

☐ Fax

☒ Regular Mail

C. Contact permit to be listed in the Notices

Prefix: Mr.

Last Name, First Name: Husain, Anzer

Title: Director

Credential: Click to enter text.

Organization Name: Octa Homes

Mailing Address: 4265 San Felipe St, Ste 1050 City, State, Zip Code: Houston, TX 77027

Phone No.: 346-444-9660

E-mail Address: anzer@octahomes.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: City Hall of Melissa Public Library

Location within the building: City Hall Lobby or Melissa Public Library Main Desk

Physical Address of Building: 3411 Barker Avenue, Melissa, TX 75454

City: Melissa

County: Collin

Contact (Last Name, First Name): Hope Baskin

Phone No.: 972-838-2520 Ext.: Click to enter text.

E. Bilingual Notice Requirements

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

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

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

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

☒ Yes

☐ No

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

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

☐ Yes

☒ No

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

☒ Yes ☐ No

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

☐ Yes ☒ No

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

F. Summary of Application in Plain Language Template

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

Attachment: See Attachment A2 – Plain Language Summary

G. Public Involvement Plan Form

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

Attachment: See Attachment A3 – Public Involvement Plan Form

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

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

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

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

Vibe WWTP

C. Owner of treatment facility: Octa Homes

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

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

Prefix: Mr.

Last Name, First Name: Robbins, Tommy

Title: Land Owner

Credential: Click to enter text.

Organization Name: Individual

Mailing Address: 6448 Dunstan Ln

City, State, Zip Code: Dallas, TX 75214

Phone No.: 469-901-1998

E-mail Address: tdoakrobbins@yahoo.com

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

Attachment: Click to enter text.

E. Owner of effluent disposal site:

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Section 10. TPDES Discharge Information (Instructions Page 31)

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

☐

Yes

☐

No

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

New Permit Application – the Vibe WWTP is proposed to be located approximately 1.5 miles southeast of the East Melissa Road and Military Lane intersection in Collin County, Texas.

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

☐

Yes

☐

No

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

New Permit Application – the point of discharge is to be in a drainage ditch located on the southwest end of the property. The flow will continue south through Stiff Creek and into unclassified Stream Segment No. 0821B, Sister Grove Creek. The flow then exits into the Classified Segment 0821 Lake Lavon

City nearest the outfall(s): Melissa

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

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

☐ Yes ☒ No

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

☐ Authorization granted ☐ Authorization pending

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

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

- D. For all applications involving an average daily discharge of 5 MGD or more, provide the names of all counties located within 100 statute miles downstream of the point(s) of discharge: [Click to enter text.](#)

Section 11. TLAP Disposal Information (Instructions Page 32)

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

☐ Yes ☐ No

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

[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.](#)

Section 12. Miscellaneous Information (Instructions Page 32)

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

☐ Yes ☒ No

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

☐ Yes ☐ No ☒ Not Applicable

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

[Click to enter text.](#)

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

☐ Yes ☒ No

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

D. Do you owe any fees to the TCEQ?

☐ Yes ☒ No

If yes, provide the following information:

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

Amount past due: [Click to enter text.](#)

E. Do you owe any penalties to the TCEQ?

☐ Yes ☒ No

If yes, please provide the following information:

Enforcement order number: [Click to enter text.](#)

Amount past due: [Click to enter text.](#)

Section 13. Attachments (Instructions Page 33)

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

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

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

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

☒ Attachment 1 for Individuals as co-applicants

☐ Other Attachments. Please specify: [Click to enter text.](#)

Section 14. Signature Page (Instructions Page 34)

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

Permit Number: New Application

Applicant: Octa Homes


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): Anzer Husain

Signatory title: Director

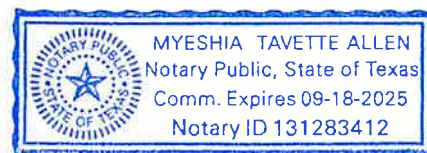
Signature:  Date: 04/24/2025 Spec
(Use blue ink)

Subscribed and Sworn to before me by the said Anzer Husain
on this 24th day of April, 20 25.
My commission expires on the 18th day of September, 20 25.


Notary Public

[SEAL]

Harris
County, Texas



Section 14. Signature Page (Instructions Page 34)

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

Permit Number: New Application

Applicant: Tommy Doak Robbins (Individual)

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): Tommy Doak Robbins

Signatory title: Individual (Tract Owner)

Signature: Tommy Doak Robbins  Date: 03/14/25
(Use blue ink)

Subscribed and Sworn to before me by the said Tommy Doak Robbins
on this 14th day of March, 2025.
My commission expires on the 22nd day of October, 2028.


Notary Public



Dallas
County, Texas

DOMESTIC WASTEWATER PERMIT APPLICATION ADMINISTRATIVE REPORT 1.0

The following information is required for new and amendment applications.

Section 1. Affected Landowner Information (Instructions Page 36)

- A. Indicate by a check mark that the landowners map or drawing, with scale, includes the following information, as applicable:
- ☒ The applicant's property boundaries
 - ☒ The facility site boundaries within the applicant's property boundaries
 - ☒ The distance the buffer zone falls into adjacent properties and the property boundaries of the landowners located within the buffer zone
 - ☒ The property boundaries of all landowners surrounding the applicant's property (Note: if the application is a major amendment for a lignite mine, the map must include the property boundaries of all landowners adjacent to the new facility (ponds).)
 - ☒ The point(s) of discharge and highlighted discharge route(s) clearly shown for one mile downstream
 - ☒ The property boundaries of the landowners located on both sides of the discharge route for one full stream mile downstream of the point of discharge
 - ☐ The property boundaries of the landowners along the watercourse for a one-half mile radius from the point of discharge if the point of discharge is into a lake, bay, estuary, or affected by tides
 - ☐ The boundaries of the effluent disposal site (for example, irrigation area or subsurface drainfield site) and all evaporation/holding ponds within the applicant's property
 - ☐ The property boundaries of all landowners surrounding the effluent disposal site
 - ☐ The boundaries of the sludge land application site (for land application of sewage sludge for beneficial use) and the property boundaries of landowners surrounding the applicant's property boundaries where the sewage sludge land application site is located
 - ☐ The property boundaries of landowners within one-half mile in all directions from the applicant's property boundaries where the sewage sludge disposal site (for example, sludge surface disposal site or sludge monofill) is located
- B. ☒ Indicate by a check mark that a separate list with the landowners' names and mailing addresses cross-referenced to the landowner's map has been provided.
- C. ☒ Indicate by a check mark that the landowners list has also been provided as mailing labels in electronic format (Avery 5160).
- D. Provide the source of the landowners' names and mailing addresses: Collins CAD
- E. As required by *Texas Water Code § 5.115*, is any permanent school fund land affected by this application?
- ☐ Yes ☒ No

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

Click to enter text.

Section 2. Original Photographs (Instructions Page 38)

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

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

Section 3. Buffer Zone Map (Instructions Page 38)

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

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

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

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

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

- ☒ Yes ☐ No

DOMESTIC WASTEWATER PERMIT APPLICATION

SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

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

Attachment: Attachment A6 - SPIF

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): Mr.

Full legal name (Last Name, First Name, Middle Initial): Robbins, Tommy Doak

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

Date of Birth: Click to enter text.

Mailing Address: 6448 Dunstan Lane

City, State, and Zip Code: Dallas, TX 75214

Phone Number: 469-901-1998 Fax Number: Click to enter text.

E-mail Address: tdoakrobbins@yahoo.com

CN: New Applicant

For Commission Use Only:

Customer Number:

Regulated Entity Number:

Permit Number:

DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST OF COMMON DEFICIENCIES

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

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

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

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

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

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

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

Things to Know:

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

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

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

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

Summary of Application (in Plain Language) ☒ Yes

ATTACHMENT A1
CORE DATA FORM(S)



TCEQ Core Data Form

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

SECTION I: General Information

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

SECTION II: Customer Information

4. General Customer Information		5. Effective Date for Customer Information Updates (mm/dd/yyyy)							
<input checked="" type="checkbox"/> New Customer <input type="checkbox"/> Update to Customer Information <input type="checkbox"/> Change in Regulated Entity Ownership <input type="checkbox"/> Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)									
<i>The Customer Name submitted here may be updated automatically based on what is current and active with the Texas Secretary of State (SOS) or Texas Comptroller of Public Accounts (CPA).</i>									
6. Customer Legal Name (If an individual, print last name first: eg: Doe, John)				<i>If new Customer, enter previous Customer below:</i>					
Melissa 413 LLC									
7. TX SOS/CPA Filing Number		8. TX State Tax ID (11 digits)		9. Federal Tax ID (9 digits)	10. DUNS Number (if applicable)				
0805911926		32098915302							
11. Type of Customer:		<input checked="" type="checkbox"/> Corporation		<input type="checkbox"/> Individual	Partnership: <input type="checkbox"/> General <input type="checkbox"/> Limited				
Government: <input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Federal <input type="checkbox"/> Local <input type="checkbox"/> State <input type="checkbox"/> Other		<input type="checkbox"/> Sole Proprietorship		<input type="checkbox"/> Other:					
12. Number of Employees				13. Independently Owned and Operated?					
<input checked="" type="checkbox"/> 0-20 <input type="checkbox"/> 21-100 <input type="checkbox"/> 101-250 <input type="checkbox"/> 251-500 <input type="checkbox"/> 501 and higher				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
14. Customer Role (Proposed or Actual) – as it relates to the Regulated Entity listed on this form. Please check one of the following									
<input type="checkbox"/> Owner <input type="checkbox"/> Operator <input checked="" type="checkbox"/> Owner & Operator <input type="checkbox"/> Other: <input type="checkbox"/> Occupational Licensee <input type="checkbox"/> Responsible Party <input type="checkbox"/> VCP/BSA Applicant									
15. Mailing Address:		4265 San Felipe St. Ste 1050							
City		Houston		State	TX	ZIP	77027	ZIP + 4	
16. Country Mailing Information (if outside USA)						17. E-Mail Address (if applicable)			

18. Telephone Number	19. Extension or Code	20. Fax Number (if applicable)
(346) 444-9660		() -

SECTION III: Regulated Entity Information

21. General Regulated Entity Information (If 'New Regulated Entity' is selected, a new permit application is also required.)								
<input checked="" type="checkbox"/> New Regulated Entity <input type="checkbox"/> Update to Regulated Entity Name <input type="checkbox"/> Update to Regulated Entity Information								
<i>The Regulated Entity Name submitted may be updated, in order to meet TCEQ Core Data Standards (removal of organizational endings such as Inc, LP, or LLC).</i>								
22. Regulated Entity Name (Enter name of the site where the regulated action is taking place.)								
Vibe WWTP								
23. Street Address of the Regulated Entity: (No PO Boxes)	TBD							
	City	Melissa	State	TX	ZIP	75454	ZIP + 4	
24. County	Collin							

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

25. Description to Physical Location:	Approximately 1.5 miles southeast of the East Melissa Road and Military Lane interesection							
26. Nearest City					State	Nearest ZIP Code		
Melissa					TX	75454		
<i>Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).</i>								
27. Latitude (N) In Decimal:		33.278481			28. Longitude (W) In Decimal:		-96.522654	
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds			
33	16	42.5316	96	31	21.5544			
29. Primary SIC Code (4 digits)	30. Secondary SIC Code (4 digits)		31. Primary NAICS Code (5 or 6 digits)		32. Secondary NAICS Code (5 or 6 digits)			
4952								
33. What is the Primary Business of this entity? (Do not repeat the SIC or NAICS description.)								
Wastewater Treatment								
34. Mailing Address:	TBD							
	City		State		ZIP		ZIP + 4	
35. E-Mail Address:								
36. Telephone Number			37. Extension or Code			38. Fax Number (if applicable)		
() -						() -		

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

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

SECTION IV: Preparer Information

40. Name:	Cindy Dong, P.E.	41. Title:	Project Engineer
42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Mail Address
(713) 972-6640		() -	cdong@civitasengr.com

SECTION V: Authorized Signature

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

Company:	Octa Homes	Job Title:	Director
Name (In Print):	Anzer Husain	Phone:	(616) 777- 7778
Signature:		Date:	



TCEQ Core Data Form

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

SECTION I: General Information

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

SECTION II: Customer Information

4. General Customer Information		5. Effective Date for Customer Information Updates (mm/dd/yyyy)			
<input checked="" type="checkbox"/> New Customer <input type="checkbox"/> Update to Customer Information <input type="checkbox"/> Change in Regulated Entity Ownership					
<input type="checkbox"/> Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)					
<i>The Customer Name submitted here may be updated automatically based on what is current and active with the Texas Secretary of State (SOS) or Texas Comptroller of Public Accounts (CPA).</i>					
6. Customer Legal Name (If an individual, print last name first: eg: Doe, John)				<i>If new Customer, enter previous Customer below:</i>	
Robbins, Tommy					
7. TX SOS/CPA Filing Number		8. TX State Tax ID (11 digits)		9. Federal Tax ID (9 digits)	10. DUNS Number (if applicable)
11. Type of Customer:		<input type="checkbox"/> Corporation		<input checked="" type="checkbox"/> Individual	Partnership: <input type="checkbox"/> General <input type="checkbox"/> Limited
Government: <input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Federal <input type="checkbox"/> Local <input type="checkbox"/> State <input type="checkbox"/> Other		<input type="checkbox"/> Sole Proprietorship		<input type="checkbox"/> Other:	
12. Number of Employees				13. Independently Owned and Operated?	
<input type="checkbox"/> 0-20 <input type="checkbox"/> 21-100 <input type="checkbox"/> 101-250 <input type="checkbox"/> 251-500 <input type="checkbox"/> 501 and higher				<input type="checkbox"/> Yes <input type="checkbox"/> No	
14. Customer Role (Proposed or Actual) – as it relates to the Regulated Entity listed on this form. Please check one of the following					
<input type="checkbox"/> Owner <input type="checkbox"/> Operator <input type="checkbox"/> Owner & Operator <input checked="" type="checkbox"/> Other: Current Owner of Land Tract					
<input type="checkbox"/> Occupational Licensee <input type="checkbox"/> Responsible Party <input type="checkbox"/> VCP/BSA Applicant					
15. Mailing Address:	6448 Dunstan Lane				
	City	Dallas	State	TX	ZIP 75214 ZIP + 4
16. Country Mailing Information (if outside USA)				17. E-Mail Address (if applicable)	
				tdoakrobbins@yahoo.com	

18. Telephone Number	19. Extension or Code	20. Fax Number (if applicable)
() -		() -

SECTION III: Regulated Entity Information

21. General Regulated Entity Information (If 'New Regulated Entity' is selected, a new permit application is also required.)								
<input checked="" type="checkbox"/> New Regulated Entity <input type="checkbox"/> Update to Regulated Entity Name <input type="checkbox"/> Update to Regulated Entity Information								
<i>The Regulated Entity Name submitted may be updated, in order to meet TCEQ Core Data Standards (removal of organizational endings such as Inc, LP, or LLC).</i>								
22. Regulated Entity Name (Enter name of the site where the regulated action is taking place.)								
Vibe WWTP								
23. Street Address of the Regulated Entity: (No PO Boxes)	TBD							
	City	Melissa	State	TX	ZIP	75454	ZIP + 4	
24. County	Collin							

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

25. Description to Physical Location:	Approximately 1.5 miles southeast of the East Melissa Road and Military Lane intersection							
26. Nearest City					State	Nearest ZIP Code		
Melissa					TX	75454		
<i>Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).</i>								
27. Latitude (N) In Decimal:		33.278481			28. Longitude (W) In Decimal:		-96.522654	
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds			
33	16	42.5316	96	31	21.5544			
29. Primary SIC Code (4 digits)	30. Secondary SIC Code (4 digits)		31. Primary NAICS Code (5 or 6 digits)		32. Secondary NAICS Code (5 or 6 digits)			
4952								
33. What is the Primary Business of this entity? (Do not repeat the SIC or NAICS description.)								
Wastewater Treatment								
34. Mailing Address:	TBD							
	City		State		ZIP		ZIP + 4	
35. E-Mail Address:								
36. Telephone Number			37. Extension or Code			38. Fax Number (if applicable)		
() -						() -		

	City		State		ZIP		ZIP + 4	
35. E-Mail Address:								
36. Telephone Number		37. Extension or Code		38. Fax Number (if applicable)				
() -				() -				

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


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

SECTION IV: Preparer Information

40. Name:	Cindy Dong, P.E.	41. Title:	Project Engineer
42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Mail Address
(713) 972-6640		() -	cdong@civitasengr.com

SECTION V: Authorized Signature

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

Company:	N/A	Job Title:	Tract Owner
Name (In Print):	Tommy Doak Robbins	Phone:	(469) 901- 1998
Signature:		Date:	03/12/25

ATTACHMENT A2
PLAIN LANGUAGE SUMMARY (PLS)

DOMESTIC WASTEWATER

The following summary is provided for this pending water quality permit application being reviewed by the Texas Commission on Environmental Quality as required by 30 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.

Octa Homes and (CN TBD) and Tommy Doak Robbins (CN TBD) proposes to operate the Vibe WWTP (RN TBD), a conventional activated sludge process plant operated in the complete mix mode. The facility will be located at approximately 1.5 miles southeast of the East Melissa Road and Military Lane intersection in Melissa, Collin County, Texas 75454. The application is for a new application to dispose a daily flow not to exceed 60,000 gallons per day in Phase I and 100,000 gallons per day in the Final Phase of treated domestic wastewater.

Discharges from the facility are expected to contain five-day biochemical oxygen demand (BOD₅) and total suspended solids (TSS). Domestic wastewater will be treated by an activated sludge process plant and the treatment units will include an influent lift station, bar screen(s), aeration basin(s), secondary clarifier (s), aerobic sludge digester(s), tertiary filter(s) and chlorine contact chamber(s).

AGUAS RESIDUALES DOMÉSTICAS

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

Octa Homes (CN TBD) y Tommy Doak Robbins (CN TBD) propone operar la Vibe WWTP (RN TBD), una planta de proceso de lodos activados convencional operada en modo de mezcla completa. La instalación estará ubicada aproximadamente a 1.5 millas al sudeste de la intersección East Melissa Road y Military Lane en Melissa, condado de Collin, Texas 75126. La solicitud es para una nueva solicitud para disponer de un flujo diario que no exceda los 60,000 galones por día en la Fase Final y 100,000 galones diarios en la Fase II de aguas residuales domésticas tratadas.

Se espera que las descargas de la instalación contengan la demanda bioquímica de oxígeno de cinco días (BOD₅) y los sólidos suspendidos totales (TSS). Las aguas residuales domésticas serán tratadas mediante una planta de proceso de lodos activados y las unidades de tratamiento incluirán una estación de bombeo del afluente, rejillas de barras, cuencas de aireación, clarificadores secundarios, digestores aeróbicos de lodos y filtros terciarios y cámara de contacto con cloro.

ATTACHMENT A3
PUBLIC INVOLVEMENT PLAN (PIP) FORM



Texas Commission on Environmental Quality

Public Involvement Plan Form for Permit and Registration Applications

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

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

Section 1. Preliminary Screening

New Permit or Registration Application

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

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

Section 2. Secondary Screening

Requires public notice,

Considered to have significant public interest, and

Located within any of the following geographical locations:

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

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

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

Section 3. Application Information

Type of Application (check all that apply):

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

Water Quality

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

Water Rights New Permit

New Appropriation of Water
New or existing reservoir

Amendment to an Existing Water Right

Add a New Appropriation of Water

Add a New or Existing Reservoir

Major Amendment that could affect other water rights or the environment

Section 4. Plain Language Summary

Provide a brief description of planned activities.

Section 5. Community and Demographic Information

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

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

(City)

(County)

(Census Tract)

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

City

County

Census Tract

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

Section 6. Planned Public Outreach Activities

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

Yes No

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

Yes No

If Yes, please describe.

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

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

Yes No

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

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

Publish in alternative language newspaper

Posted on Commissioner's Integrated Database Website

Mailed by TCEQ's Office of the Chief Clerk

Other (specify)

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

Yes No

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

Yes No

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

TCEQ Regional Office

TCEQ Central Office

Public Place (specify)

Section 7. Voluntary Submittal

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

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

Yes No

What types of notice will be provided?

Publish in alternative language newspaper

Posted on Commissioner's Integrated Database Website

Mailed by TCEQ's Office of the Chief Clerk

Other (specify)

ATTACHMENT A4
7.5 TOPOGRAPHIC USGS MAP

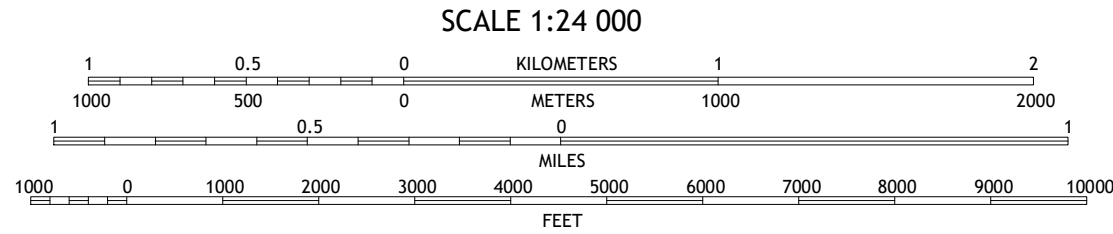
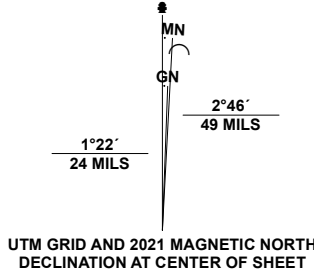


Produced by the United States Geological Survey

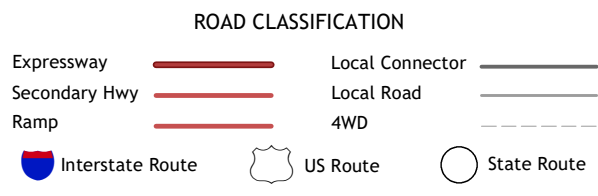
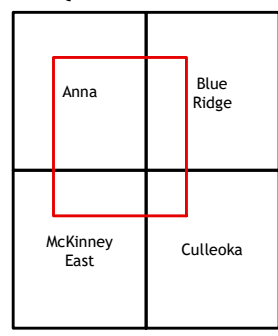
North American Datum of 1983 (NAD83)
World Geodetic System of 1984 (WGS84). Projection and
1 000 meter grid/Universal Transverse Mercator, Zone 14S.
Data is provided by The National Map (TNM), is the best available at the time of map
generation, and includes data content from supporting themes of Elevation,
Hydrography, Geographic Names, Boundaries, Transportation, Structures, Land Cover,
and Orthimagery. Refer to associated Federal Geographic Data Committee (FGDC)
Metadata for additional source data information.

This map is not a legal document. Boundaries may be generalized for this map scale.
Private lands within government reservations may not be shown. Obtain permission
before entering private lands. Temporal changes may have occurred since these data
were collected and some data may no longer represent actual surface conditions.

Learn About The National Map: <https://nationalmap.gov>



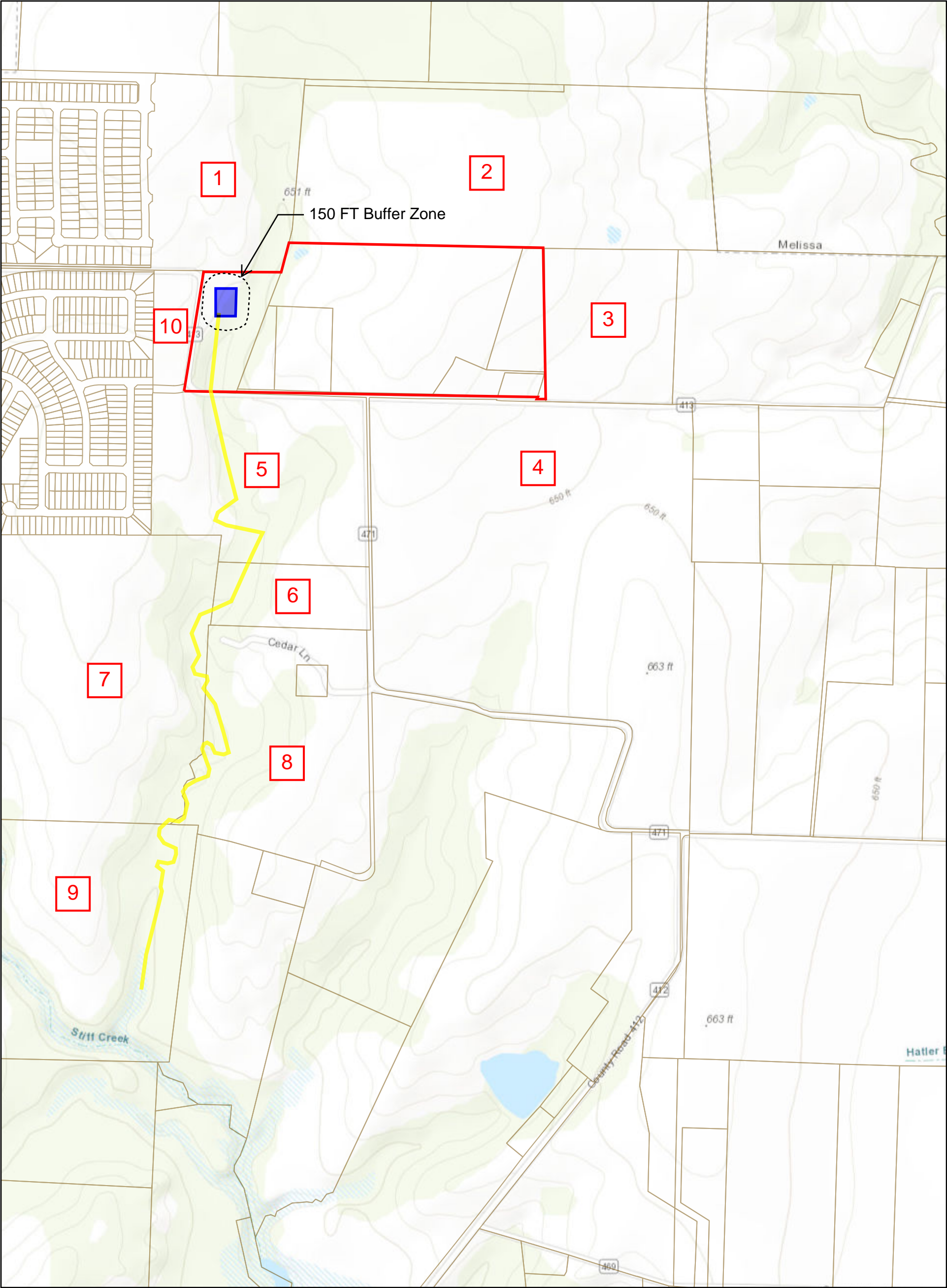
CONTOUR INTERVAL 10 FEET
NORTH AMERICAN VERTICAL DATUM OF 1988
CONTOUR SMOOTHNESS = Medium



7.5-MINUTE TOPO, TX
2025

ATTACHMENT A5
AFFECTED LANDOWNER'S INFORMATION

Vibe WWTP, Melissa, TX Affected Landowners Map



5/2/2025, 4:40:43 PM

Parcels

1:9,028
0 0.07 0.15 0.3 mi
0 0.13 0.25 0.5 km
Texas Parks & Wildlife, Esri, HERE, Garmin, INCREMENT P, Intermap, USGS, METI/NASA, EPA, USDA

Affected Landowner's List

1. Collin Co. Property ID: 462519
Owner: FIRST TEXAS HOMES INC.
2. Collin Co. Property ID: 2575051
Owner: MELISSA ISD
3. Collin Co. Property ID: 2744527
Owner: JAMINDARS INVESTMENT LLC
4. Collin Co. Property ID: 462617
Owner: LONG PRISCILLA
5. Collin Co. Property ID: 2648897
Owner: TYNAS TEXAS LP
6. Collin Co. Property ID: 2850248
Owner: AMMONS GASTON & SKYLER
7. Collin Co. Property ID: 2673882
Owner: NORTH PONDEROSA LLC
8. Collin Co. Property ID: 2013548
Owner: FUSSELMAN GREG M & DEBORAH
9. Collin Co. Property ID: 462733
Owner: BARBOUR JOSEPH
10. Collin Co. Property ID: 2648897
Owner: TYNAS TEXAS LP (Duplicate Owner)

SET 1

FIRST TEXAS HOMES INC
1504 DEVOTION ROW
WYLIE, TX 75098-1999

MELISSA ISD
2230 MCKINNEY ST
MELISSA, TX 75454-9734

JAMINDARS INVESTMENT LLC
PO BOX 940724
PLANO, TX 75094-0724

LONG PRISCILLA
PO BOX 830366
RICHARDSON, TX 75083-0366

TYNAS TEXAS LP
1 FOX HOLLOW LN
MELISSA, TX 75454-7901

AMMONS GASTON & SKYLER
4460 FM 471
MELISSA, TX 75454

NORTH PONDEROSA LLC
10455 N CENTRAL EXPY
STE 109 PMB 376
DALLAS, TX 75231-2215

FUSSELMAN GREG M & DEBORAH
4823 CEDAR LN
MELISSA, TX 75454-3301

BARBOUR JOSEPH &
3628 COUNTY ROAD 413
MELISSA, TX 75454-3014

SET 2

FIRST TEXAS HOMES INC
1504 DEVOTION ROW
WYLIE, TX 75098-1999

MELISSA ISD
2230 MCKINNEY ST
MELISSA, TX 75454-9734

JAMINDARS INVESTMENT LLC
PO BOX 940724
PLANO, TX 75094-0724

LONG PRISCILLA
PO BOX 830366
RICHARDSON, TX 75083-0366

TYNAS TEXAS LP
1 FOX HOLLOW LN
MELISSA, TX 75454-7901

AMMONS GASTON & SKYLER
4460 FM 471
MELISSA, TX 75454

NORTH PONDEROSA LLC
10455 N CENTRAL EXPY
STE 109 PMB 376
DALLAS, TX 75231-2215

FUSSELMAN GREG M & DEBORAH
4823 CEDAR LN
MELISSA, TX 75454-3301

BARBOUR JOSEPH &
3628 COUNTY ROAD 413
MELISSA, TX 75454-3014

SET 3

FIRST TEXAS HOMES INC
1504 DEVOTION ROW
WYLIE, TX 75098-1999

MELISSA ISD
2230 MCKINNEY ST
MELISSA, TX 75454-9734

JAMINDARS INVESTMENT LLC
PO BOX 940724
PLANO, TX 75094-0724

LONG PRISCILLA
PO BOX 830366
RICHARDSON, TX 75083-0366

TYNAS TEXAS LP
1 FOX HOLLOW LN
MELISSA, TX 75454-7901

AMMONS GASTON & SKYLER
4460 FM 471
MELISSA, TX 75454

NORTH PONDEROSA LLC
10455 N CENTRAL EXPY
STE 109 PMB 376
DALLAS, TX 75231-2215

FUSSELMAN GREG M & DEBORAH
4823 CEDAR LN
MELISSA, TX 75454-3301

BARBOUR JOSEPH &
3628 COUNTY ROAD 413
MELISSA, TX 75454-3014

SET 4

FIRST TEXAS HOMES INC
1504 DEVOTION ROW
WYLIE, TX 75098-1999

MELISSA ISD
2230 MCKINNEY ST
MELISSA, TX 75454-9734

JAMINDARS INVESTMENT LLC
PO BOX 940724
PLANO, TX 75094-0724

LONG PRISCILLA
PO BOX 830366
RICHARDSON, TX 75083-0366

TYNAS TEXAS LP
1 FOX HOLLOW LN
MELISSA, TX 75454-7901

AMMONS GASTON & SKYLER
4460 FM 471
MELISSA, TX 75454

NORTH PONDEROSA LLC
10455 N CENTRAL EXPY
STE 109 PMB 376
DALLAS, TX 75231-2215

FUSSELMAN GREG M & DEBORAH
4823 CEDAR LN
MELISSA, TX 75454-3301

BARBOUR JOSEPH &
3628 COUNTY ROAD 413
MELISSA, TX 75454-3014

ATTACHMENT A6
SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

FOR AGENCIES REVIEWING DOMESTIC OR INDUSTRIAL TPDES WASTEWATER PERMIT APPLICATIONS

TCEQ USE ONLY:

Application type: ____Renewal ____Major Amendment ____Minor Amendment ____New

County: _____ Segment Number: _____

Admin Complete Date: _____

Agency Receiving SPIF:

____ Texas Historical Commission

____ U.S. Fish and Wildlife

____ Texas Parks and Wildlife Department

____ U.S. Army Corps of Engineers

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

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

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

The following applies to all applications:

1. Permittee: Octa Homes, Tommy Doak Robbins

Permit No. WQ00 TBD

EPA ID No. TX

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

Approximately 1.5 miles southeast of the East Melissa Road and Military Lane intersection in Collins County, Texas

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

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

First and Last Name: Anzer Husain

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

Title: Acquisitions Director

Mailing Address: 4265 San Felipe St, Suite 1050

City, State, Zip Code: Houston, TX 77024

Phone No.: 347-433-4544 Ext.: Fax No.:

E-mail Address: anzer@octahomes.com

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

Property is privately owned by Tommy Doak Robbins and is in process of being transferred to Octa Homes ownership

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

The treatment plant outfall will be in a drainage ditch located on the southwest end of the property. The property will continue south through the ditch, then to Stiff Creek, then into unclassified Stream Segment No. 0821B - Sister Grove Creek and then finally flow into the Classified Segment 0821 - Lake Lavon.

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

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

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

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

☒ Disturbance of vegetation or wetlands

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

N/A

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

Current land use is for livestock

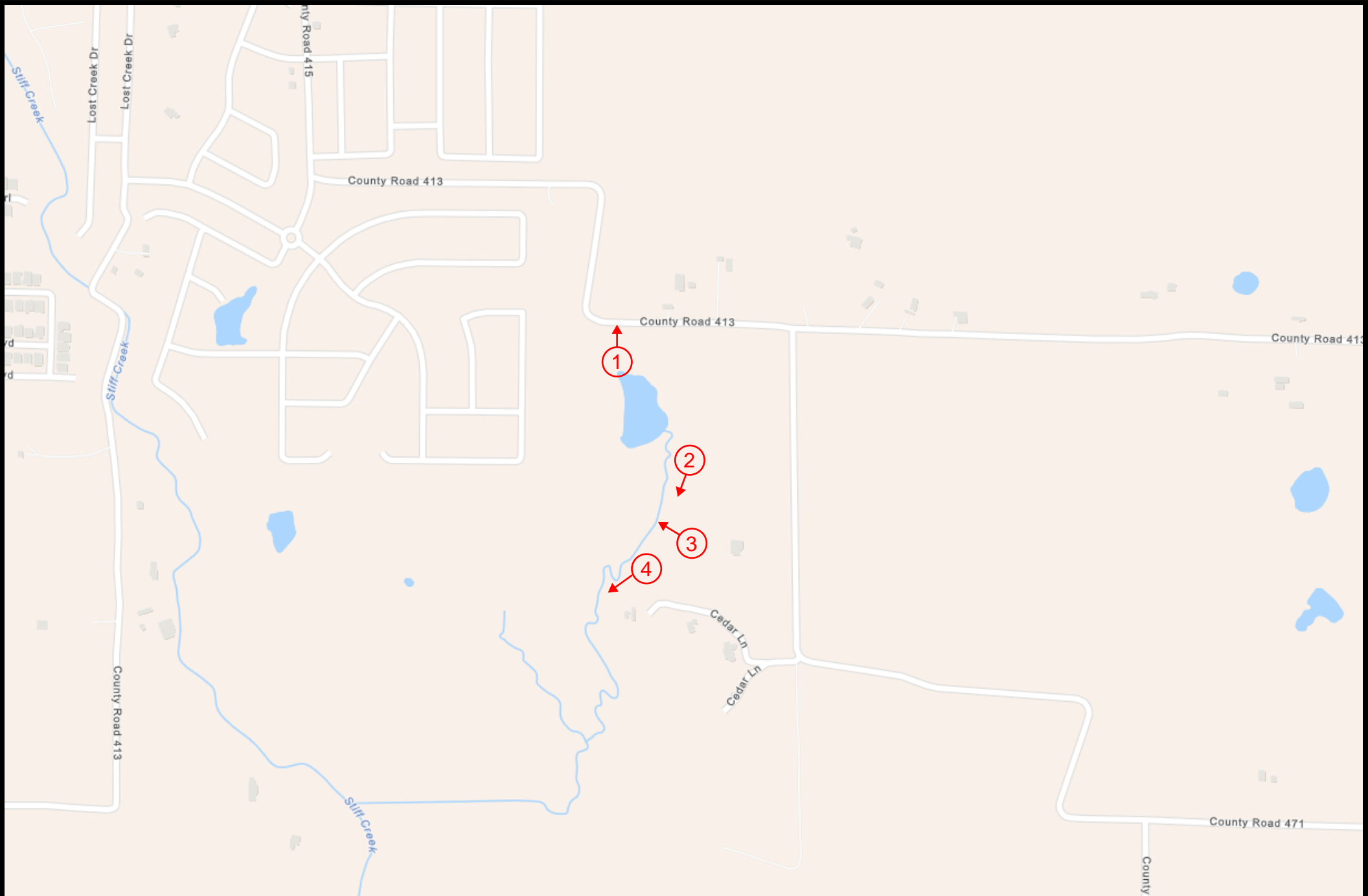
THE FOLLOWING ITEMS APPLY ONLY TO APPLICATIONS FOR NEW TPDES PERMITS AND MAJOR AMENDMENTS TO TPDES PERMITS

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

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

Unknown

ATTACHMENT A7
ORIGINAL PHOTOGRAPHS



OVERALL MAP OF PHOTO LOCATIONS
VIBE WWTP
CITY OF MELISSA, TEXAS



Photo 1 - At Proposed Discharge

Date: April 1st, 2025
Description: Plant is proposed to discharge into this roadside ditch on the north side of County Road 413. Culvert was full of storm water runoff from previous week at the time of photo.



Photo 2 - Stream Bend 1

Date: April 1st, 2025
Description: Stream is usually dry but was influenced by storm water runoff at time of photo.



Photo 3 - Stream bed Downstream

Date: April 1st, 2025
Description: Stream bed is dry under normal conditions but was influenced by storm runoff during time of photo.



Photo 4 - Stream Bend 2

Date: April 1st, 2025
Description: More debris piles up as stream flows downstream.

DOMESTIC WASTEWATER PERMIT APPLICATION
TECHNICAL REPORT



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION TECHNICAL REPORT 1.0

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

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

Section 1. Permitted or Proposed Flows (Instructions Page 42)

A. Existing/Interim I Phase

Design Flow (MGD): 0.06

2-Hr Peak Flow (MGD): 0.24

Estimated construction start date: 6/1/2026

Estimated waste disposal start date: 9/1/2026

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): 0.10

2-Hr Peak Flow (MGD): 0.40

Estimated construction start date: 1/1/2028

Estimated waste disposal start date: 4/1/2028

D. Current Operating Phase

Provide the startup date of the facility: N/A

Section 2. Treatment Process (Instructions Page 42)

A. Current Operating Phase

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

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

The Vibe WWTP will consist of an influent lift station, then headworks, then single-stage nitrification complete mix activated sludge with aeration basin(s) and clarifier(s). Plant will also have digester basin(s), tertiary filters, and chlorine contact basin for disinfection. Effluent will be outfall into a drainage ditch on the southwest section of the tract and into the Stiff Creek stream segment. These treatment units will apply to all treatment plant phases.

B. Treatment Units

In Table 1.0(1), provide the treatment unit type, the number of units, and dimensions (length, width, depth) of **each treatment unit, accounting for *all* phases of operation.**

Table 1.0(1) - Treatment Units

Treatment Unit Type	Number of Units	Dimensions (L x W x D)
See Attachments T1 and T2		

C. Process Flow Diagram

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

Attachment: See Attachment T1 – Process Flow Diagram

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

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

- Latitude: 33.27683
- Longitude: -96.52304

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

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

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

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

Attachment: See Attachment T2 – Preliminary Site Plan

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

The treatment facility will serve the Vibe subdivision area located near Melissa, Texas. The subdivision will contain residential lots as well as an amenity center. The treatment plant will be phased into two phases like the subdivision development. Phase I will service about 232 LUEs and the final phase, will service 364 LUEs. The tract is located approximately 1.5 miles southeast of the East Melissa Road and Military Lane intersection in Collin County, Texas.

Collection System Information for **wastewater TPDES permits only**: Provide information for each **uniquely owned** collection system, existing and new, served by this facility, including satellite collection systems. **Please see the instructions for a detailed explanation and examples.**

Collection System Information

Collection System Name	Owner Name	Owner Type	Population Served
Vibe Subdivision	Octa Homes	Privately Owned	364 LUES

Section 4. Unbuilt Phases (Instructions Page 44)

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

☐ Yes ☒ No

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

☐ Yes ☐ No

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

Click to enter text.

Section 5. Closure Plans (Instructions Page 44)

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

☐ Yes ☒ No

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

☐ Yes ☐ No

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

Click to enter text.

Section 6. Permit Specific Requirements (Instructions Page 44)

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

A. Summary transmittal

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

☐ Yes ☐ No

If yes, provide the date(s) of approval for each phase: [Click to enter text.](#)

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

[Click to enter text.](#)

B. Buffer zones

Have the buffer zone requirements been met?

☐ Yes ☐ No

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

[Click to enter text.](#)

C. Other actions required by the current permit

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

☐ Yes ☐ No

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

D. Grit and grease treatment

1. *Acceptance of grit and grease waste*

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

☐ Yes ☐ No

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

2. *Grit and grease processing*

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

Click to enter text.

3. *Grit disposal*

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

☐ Yes ☐ No

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

Describe the method of grit disposal.

Click to enter text.

4. *Grease and decanted liquid disposal*

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

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

Click to enter text.

E. Stormwater management

1. Applicability

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

☐ Yes ☐ No

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

☐ Yes ☐ No

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

2. MSGP coverage

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

☐ Yes ☐ No

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

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

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

☐ Yes ☐ No

3. Conditional exclusion

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

☐ Yes ☐ No

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

[Click to enter text.](#)

4. Existing coverage in individual permit

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

☐ Yes ☐ No

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

[Click to enter text.](#)

5. *Zero stormwater discharge*

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

☐ Yes ☐ No

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

[Click to enter text.](#)

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

6. *Request for coverage in individual permit*

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

☐ Yes ☐ No

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

[Click to enter text.](#)

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

F. *Discharges to the Lake Houston Watershed*

Does the facility discharge in the Lake Houston watershed?

☐ Yes ☐ No

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

[Click to enter text.](#)

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

1. *Acceptance of sludge from other WWTPs*

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

☐ Yes ☐ No

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

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

Click to enter text.

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

2. Acceptance of septic waste

Is the facility accepting or will it accept septic waste?

☐ Yes ☐ No

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

☐ Yes ☐ No

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

☐ Yes ☐ No

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

Click to enter text.

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

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

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

☐ Yes ☐ No

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

Click to enter text.

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

Is the facility in operation?

☐ Yes ☒ No

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

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

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

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

Pollutant	Average Conc.	Max Conc.	No. of Samples	Sample Type	Sample Date/Time
CBOD ₅ , mg/l					
Total Suspended Solids, mg/l					
Ammonia Nitrogen, mg/l					
Nitrate Nitrogen, mg/l					
Total Kjeldahl Nitrogen, mg/l					
Sulfate, mg/l					
Chloride, mg/l					
Total Phosphorus, mg/l					
pH, standard units					
Dissolved Oxygen*, mg/l					
Chlorine Residual, mg/l					
<i>E.coli</i> (CFU/100ml) freshwater					
Enterococci (CFU/100ml) saltwater					
Total Dissolved Solids, mg/l					
Electrical Conductivity, μ mohs/cm, †					
Oil & Grease, mg/l					
Alkalinity (CaCO ₃)*, mg/l					

*TPDES permits only

†TLAP permits only

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

Pollutant	Average Conc.	Max Conc.	No. of Samples	Sample Type	Sample Date/Time
Total Suspended Solids, mg/l					
Total Dissolved Solids, mg/l					

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

Section 8. Facility Operator (Instructions Page 49)

Facility Operator Name: TBD

Facility Operator's License Classification and Level: TBD

Facility Operator's License Number: TBD

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

A. WWTP's Sewage Sludge or Biosolids Management Facility Type

Check all that apply. See instructions for guidance

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

B. WWTP's Sewage Sludge or Biosolids Treatment Process

Check all that apply. See instructions for guidance.

- ☐ Aerobic Digestion
- ☐ Air Drying (or sludge drying beds)
- ☐ Lower Temperature Composting
- ☐ Lime Stabilization
- ☐ Higher Temperature Composting
- ☐ Heat Drying
- ☐ Thermophilic Aerobic Digestion
- ☐ Beta Ray Irradiation
- ☐ Gamma Ray Irradiation
- ☐ Pasteurization
- ☐ Preliminary Operation (e.g. grinding, de-gritting, blending)

- ☐ Thickening (e.g. gravity thickening, centrifugation, filter press, vacuum filter)
- ☐ Sludge Lagoon
- ☐ Temporary Storage (< 2 years)
- ☐ Long Term Storage (>= 2 years)
- ☐ Methane or Biogas Recovery
- ☐ Other Treatment Process: [Click to enter text.](#)

C. Sewage Sludge or Biosolids Management

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

Biosolids Management

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

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

D. Disposal site

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

TCEQ permit or registration number: [Click to enter text.](#)

County where disposal site is located: [Click to enter text.](#)

E. Transportation method

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

Name of the hauler: TBD

Hauler registration number: TBD

Sludge is transported as a:

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

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

A. Beneficial use authorization

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

☐ Yes ☒ No

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

☐ Yes ☐ No

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

☐ Yes ☐ No

B. Sludge processing authorization

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

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

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

☐ Yes ☐ No

Section 11. Sewage Sludge Lagoons (Instructions Page 53)

Does this facility include sewage sludge lagoons?

☐ Yes ☒ No

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

A. Location information

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

- Original General Highway (County) Map:
Attachment: [Click to enter text.](#)
- USDA Natural Resources Conservation Service Soil Map:
Attachment: [Click to enter text.](#)
- Federal Emergency Management Map:
Attachment: [Click to enter text.](#)
- Site map:
Attachment: [Click to enter text.](#)

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

- ☐ Overlap a designated 100-year frequency flood plain
- ☐ Soils with flooding classification

- ☐ Overlap an unstable area
- ☐ Wetlands
- ☐ Located less than 60 meters from a fault
- ☐ None of the above

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

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

[Click to enter text.](#)

B. Temporary storage information

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Provide the following information:

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

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

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

C. Liner information

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

☐ Yes ☐ No

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

[Click to enter text.](#)

D. Site development plan

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

[Click to enter text.](#)

Attach the following documents to the application.

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

E. Groundwater monitoring

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

☐ Yes ☐ No

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

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

Section 12. Authorizations/Compliance/Enforcement (Instructions)

A. Additional authorizations

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

☐ Yes ☒ No

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

[Click to enter text.](#)

B. Permittee enforcement status

Is the permittee currently under enforcement for this facility?

☐ Yes ☒ No

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

☐ Yes ☒ No

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

[Click to enter text.](#)

Section 13. RCRA/CERCLA Wastes (Instructions Page 55)**A. RCRA hazardous wastes**

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

☐ Yes ☒ No

B. Remediation activity wastewater

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

☐ Yes ☒ No

C. Details about wastes received

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

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

Section 14. Laboratory Accreditation (Instructions Page 55)

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

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

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

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

CERTIFICATION:

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

Printed Name: Anzer Husain

Title: Director

Signature: _____

Date: 04/24/2024

DOMESTIC WASTEWATER PERMIT APPLICATION

TECHNICAL REPORT 1.1

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

Section 1. Justification for Permit (Instructions Page 56)

A. Justification of permit need

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

Octa Homes will need to construct the Vibe WWTP to serve the Vibe Subdivision located near Melissa, Texas in Collins County. The subdivision and treatment plant will be built in two phases with a total of 364 LUEs in the final phase. The treatment plant is required to service 60,000 GPD in Phase I and 100,000 GPD in Phase II (Final Phase). This has been calculated using an average flow of 250 GPD/LUE.

B. Regionalization of facilities

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

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

1. *Municipally incorporated areas*

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

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

☐ Yes ☒ No ☐ Not Applicable

If yes, within the city limits of: [Click to enter text.](#)

If yes, attach correspondence from the city.

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

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

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

2. *Utility CCN areas*

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

☐ Yes ☒ No

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.

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

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: [Click to enter text.](#)

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

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

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

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

Section 2. Proposed Organic Loading (Instructions Page 58)

Is this facility in operation?

☐ Yes ☒ No

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

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

A. Current organic loading

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

Average Influent Organic Strength or BOD₅ Concentration in mg/l: [Click to enter text.](#)

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

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

[Click to enter text.](#)

B. Proposed organic loading

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

Table 1.1(1) – Design Organic Loading

Source	Total Average Flow (MGD)	Influent BOD ₅ Concentration (mg/l)
Municipality	Phase 1 = 0.06 Phase 2 = 0.1	325 mg/l
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		
Motel		
Restaurant		
Hospital		
Nursing home		
Other		
TOTAL FLOW from all sources	Phase 1 = 0.06 Phase 2 = 0.1	
AVERAGE BOD ₅ from all sources		325 mg/l

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

A. Existing/Interim I Phase Design Effluent Quality

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

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

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

☐ Ultraviolet Light: [Click to enter text.](#) seconds contact time at peak flow

☐ Other: [Click to enter text.](#)

Section 4. Design Calculations (Instructions Page 58)

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

Attachment: [See Attachment T3 – Design Calculations](#)

Section 5. Facility Site (Instructions Page 59)

A. 100-year floodplain

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

☒ Yes ☐ No

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

[Click to enter text.](#)

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

FEMA Flood Maps

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: [See Attachment T4 – Wind Rose Map](#)

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

A. Beneficial use authorization

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

☐ Yes ☒ No

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

B. Sludge processing authorization

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

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

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

Section 7. Sewage Sludge Solids Management Plan (Instructions Page

Attach a solids management plan to the application.

Attachment: See Attachment T5 – Solids Management Plan

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

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

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

DOMESTIC WASTEWATER PERMIT APPLICATION

WORKSHEET 2.0: RECEIVING WATERS

The following information is required for all TPDES permit applications.

Section 1. Domestic Drinking Water Supply (Instructions Page 63)

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

☐ Yes ☒ No

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

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

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

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

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

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

Does the facility discharge into tidally affected waters?

☐ Yes ☒ No

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

A. Receiving water outfall

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

B. Oyster waters

Are there oyster waters in the vicinity of the discharge?

☐ Yes ☐ No

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

[Click to enter text.](#)

C. Sea grasses

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

☐ Yes ☐ No

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

[Click to enter text.](#)

Section 3. Classified Segments (Instructions Page 63)

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

☐ Yes ☒ No

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

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

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

Name of the immediate receiving waters: County Road 413 Ditch

A. Receiving water type

Identify the appropriate description of the receiving waters.

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

Surface area, in acres: Click to enter text.

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

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

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

B. Flow characteristics

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

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

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

- ☐ USGS flow records
- ☐ Historical observation by adjacent landowners
- ☒ Personal observation
- ☒ Other, specify: Google Earth Historical imagery

C. Downstream perennial confluences

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

Stiff Creek

D. Downstream characteristics

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

☒ Yes ☐ No

If yes, discuss how.

Man-made ditch outflows into a pond before continuing in a man-made channel. The channel then outflows into the intermittent portion of the Stiff Creek stream and then into a man-made Reservoir. The Reservoir water then flows into the perennial portion of Stiff Creek stream which then flows into Unclassified Stream Segment 0821B – Sister Grove Creek

E. Normal dry weather characteristics

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

Outfall culvert is in bad shape and water in ditch is high and flowing backwards. Large pond south of discharge is filled from storm run-off from previous week. Channel is flowing south and is very shallow (a few inches tall in most locations – influenced by run-off from previous week's rain). Channel banks are much higher than channel flowline (10 feet higher). There was rain 5 days before time of this observation.

Date and time of observation: April 1st, 2025 11:10 AM

Was the water body influenced by stormwater runoff during observations?

☒ Yes ☐ No

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

A. Upstream influences

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

- | | |
|---|--|
| <input type="checkbox"/> Oil field activities | <input type="checkbox"/> Urban runoff |
| <input type="checkbox"/> Upstream discharges | <input checked="" type="checkbox"/> Agricultural runoff |
| <input type="checkbox"/> Septic tanks | <input type="checkbox"/> Other(s), specify: Click to enter text. |

B. Waterbody uses

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

- | | |
|--|---|
| <input type="checkbox"/> Livestock watering | <input type="checkbox"/> Contact recreation |
| <input type="checkbox"/> Irrigation withdrawal | <input type="checkbox"/> Non-contact recreation |
| <input type="checkbox"/> Fishing | <input type="checkbox"/> Navigation |

☐ Domestic water supply

☐ Industrial water supply

☐ Park activities

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

C. Waterbody aesthetics

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

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

DOMESTIC WASTEWATER PERMIT APPLICATION

WORKSHEET 2.1: STREAM PHYSICAL CHARACTERISTICS

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

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

Section 1. General Information (Instructions Page 65)

Date of study: April 1st, 2025 Time of study: 11:10 AM

Stream name: Stiff Creek

Location: Near Melissa, Texas in Collin County

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

☐ Perennial ☒ Intermittent with perennial pools

Section 2. Data Collection (Instructions Page 65)

Number of stream bends that are well defined: 7

Number of stream bends that are moderately defined: 1

Number of stream bends that are poorly defined: 1

Number of riffles: 3

Evidence of flow fluctuations (check one):

☐ Minor ☒ moderate ☐ severe

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

Top of bank of channel is significantly higher than the water depth that was present. There are numerous obstructions along the channel, both man-made and natural. Natural obstructions include beaver dams and tree logs. Man-made obstructions include wire fencing (assumed to catch solid debris in channel way) and abandoned culvert piping.

Stream transects

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

Table 2.1(1) - Stream Transect Records

Stream type at transect Select riffle, run, glide, or pool. See Instructions, Definitions section.	Transect location	Water surface width (ft)	Stream depths (ft) at 4 to 10 points along each transect from the channel bed to the water surface. Separate the measurements with commas.
Glide	1 - Ditch at Outfall	15	2.9, 2.9, 2.8
Run	2 - Ditch Before Pond	19	2.5, 2.6, 2.9
Riffle	3 - Stream Bend 1	18	0.5
Riffle	4 - Stream Bend 2	33	0.1, 0.8, 0.1

Section 3. Summarize Measurements (Instructions Page 65)

Streambed slope of entire reach, from USGS map in feet/feet: 30

Approximate drainage area above the most downstream transect (from USGS map or county highway map, in square miles): 0.36

Length of stream evaluated, in feet: 2,670

Number of lateral transects made: 5

Average stream width, in feet: 21

Average stream depth, in feet: 10

Average stream velocity, in feet/second: 0.16 ft/s

Instantaneous stream flow, in cubic feet/second: Click to enter text.

Indicate flow measurement method (type of meter, floating chip timed over a fixed distance, etc.): floating chip method

Size of pools (large, small, moderate, none): None

Maximum pool depth, in feet: 1.6

ATTACHMENT T1
PROCESS FLOW DIAGRAM

DWG: R:\526 Octahomes\2401 Melissa WWTP TPDIES Permitting\PROD\3.2 CAD\3.2.3 Civil\Preliminary.dwg USER: CDong
DATE: May 21, 2025 6:32pm XREFS:title-block-8.5 x 11



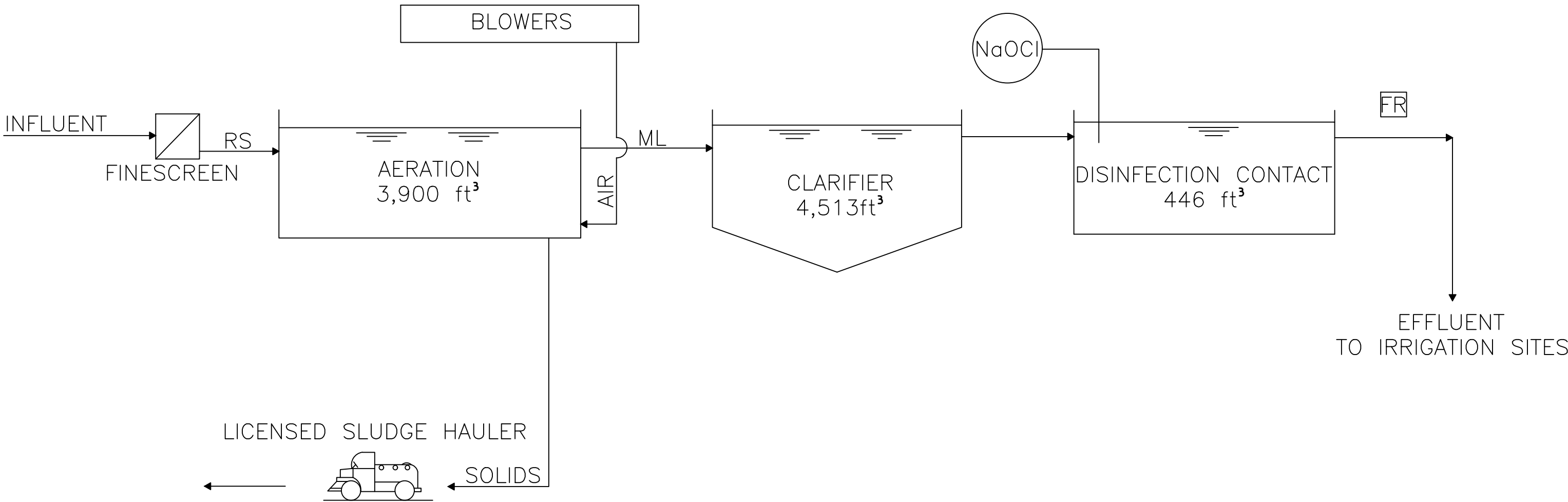
2000 W. Sam Houston Pkwy S., Suite 1400
Houston, Texas 77042
Phone: (713) 783-8700; Fax: (713) 783-8747
TBPE Firm Registration No. F-4991

OCTA HOMES
VIBE WASTEWATER TREATMENT
FACILITY CONSTRUCTION
PROCESS FLOW DIAGRAM
INTERIM I PHASE

DRAWING SCALE	
EXHIBIT NO:	
SHEET NO.	OF

FILE PATH: R:\526 Octahomes\2401 Melissa WWTP TPDIES Permitting\PROD\3.2 CAD\3.2.3 Civil\Preliminary.dwg

LEGEND	
RS	RAW SEWAGE
ML	MIXED LIQUOR
FR	FLOW RECORDER TOTALIZER
NaOCl	SODIUM HYPOCHLORITE



DWG: R:\526 Octahomes\2401 Melissa WWTP TPDIES Permitting\PROD\3.2 CAD\3.2.3 Civil\Preliminary.dwg USER: CDong
DATE: May 21, 2025 6:32pm XREFS:title-block-8.5 x 11



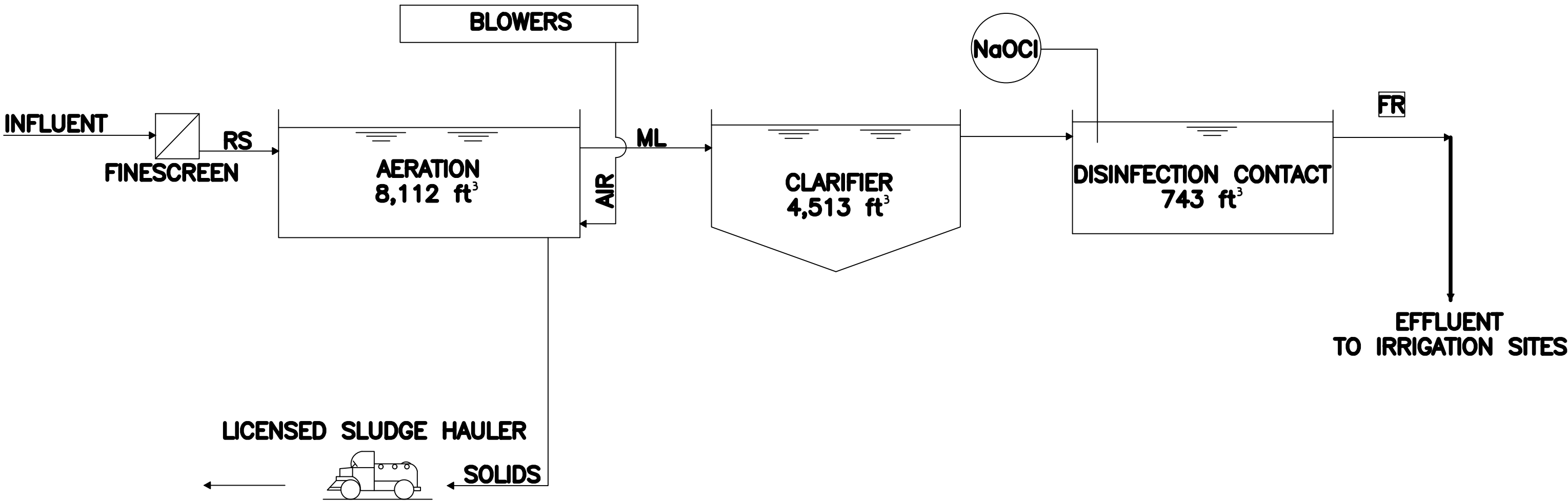
2000 W. Sam Houston Pkwy S., Suite 1400
Houston, Texas 77042
Phone: (713) 783-8700; Fax: (713) 783-8747
TBPE Firm Registration No. F-4991

OCTA HOMES
VIBE WASTEWATER TREATMENT
FACILITY CONSTRUCTION
PROCESS FLOW DIAGRAM
INTERIM II PHASE

DRAWING SCALE	
EXHIBIT NO:	
SHEET NO.	OF

FILE PATH: R:\526 Octahomes\2401 Melissa WWTP TPDIES Permitting\PROD\3.2 CAD\3.2.3 Civil\Preliminary.dwg

LEGEND	
RS	RAW SEWAGE
ML	MIXED LIQUOR
FR	FLOW RECORDER TOTALIZER
NaOCl	SODIUM HYPOCHLORITE



ATTACHMENT T2
PRELIMINARY SITE PLAN

DWG: R:\526 Octahomes\2401 Melissa WWTP TPDES Permitting\PROD\3.1 Exhibits\Preliminary Site Plan.dwg
DATE: May 21, 2025 6:40pm XREFS:title-block-8.5 x 11 USER: CDong



2000 W. Sam Houston Pkwy S., Suite 1400
Houston, Texas 77042
Phone: (713) 783-8700; Fax: (713) 783-8747
TBPE Firm Registration No. F-4991

OCTA HOMES
VIBE WASTEWATER TREATMENT
FACILITY CONSTRUCTION
PRELIMINARY SITE PLAN EXHIBIT

DRAWING SCALE
1" = 200'
EXHIBIT NO: 1
SHEET NO. 1 OF 1

FILE PATH: R:\526 Octahomes\2401 Melissa WWTP TPDES Permitting\PROD\3.1 Exhibits\Preliminary Site Plan.dwg

ATTACHMENT T3
DESIGN CALCULATIONS

Vibe WWTP Design Calculations

DESIGN CALCULATIONS

Influent Flow Characteristics – The hydraulic design of the facility must ensure that the plant will operate under the most extreme conditions anticipated. The plant process and hydraulic design for this facility are based on an average rated capacity of 250 gal/day/LUE and are as follows:

Flow	Phase 1 Gallons per Day	Phase 2 Gallons Per Day
Average Daily Flow (Qave)	60,000	100,000
Peak 2-Hour Flow (Qpk)	240,000	400,000

Loading	Concentration
TCEQ Req. BOD ₅ Conc.	325 mg/L
TCEQ Req. TSS Conc.	260 mg

	Phase 1 Pounds Per Day	Phase 2 Pounds Per Day
Design BOD ₅	163	272
Max Day BOD ₅	653	1088
Design TSS	131	218
Max Day TSS	522	870

Process Design – The treatment plant has been designed to produce an effluent quality in compliance with the proposed parameters of: BOD₅ = 15 mg/l; TSS = 10 mg/l; Cl₂ residual of 1 to 4 mg/L after 20 minutes detention time at peak flow.

In order to achieve the required removal efficiencies, activated sludge process operated in the conventional mode has been chosen. The 7-day low reactor temperature is 15°. The anticipated operating ranges for MLSS and RAS in mg/l are 3,000 and 6,000, respectively.

Treatment Units**Aeration Basins Sizing using Traditional Design**

<u>Parameter</u>	<u>Value</u>	<u>Comment</u>
Temperature (°C)	15	
Organic Loading Rate (lbs/day/1000 ft ³)	45	Based on Figure 30 TAC 217.154 (b) (2)
Req. Aeration Basin Volume (ft ³)	3,627 (Ph1) 6,045 (Ph2)	

<u>Design</u>	<u>Phase 1</u>	<u>Phase 2</u>
Number of Aeration Basin	1	1
Aeration Basin Width (ft)	12	12
Aeration Basin Length (ft)	25	52
Side Depth (ft)	13	13
Total Volume	3,900	8,112

1. Freeboard of 18 inches is factored in equation

Air Requirements

TCEQ minimum oxygen requirement	2.2 lb O ₂ /lb BOD ₅
TCEQ Airflow/BOD ₅ Load	3,200 ft ³ /day/pound
TCEQ mixing requirements	20 SCFM/1000 cubic feet

Total Air Requirement (Ph1):	124 scfm X 150% correction factor = 185 scfm
Total Air Requirement (Ph2):	206 scfm X 150% correction factor = 309 scfm

Clarifier Sizing using Traditional Design

<u>Parameter</u>	<u>Value</u>	<u>Comment</u>
Max. Surface Loading Rate (gpd/ft ²)	1200	Based on Figure 1, 30 TAC 217.154(c)(1)
Min. Detention Time (hr)	1.8	Based on Figure 1, 30 TAC 217.154(c)(1)
Max. Effluent Weir Loading (gpd/ft)	20,000	Minimum based on 30 TAC 217.129
Req. Surface Area at Peak Flow (ft ²)	283 (Ph1) 471 (Ph2)	

<u>Design</u>	<u>Phase 1</u>	<u>Phase 2</u>
Number of Clarifiers	1	1
Clarifier Diameter (ft)	26	26
Total Surface Area (ft ²)	531	531
Total Volume (ft ³)	4,513	4,513
Side Depth (ft)	8.5	8.5
Weir Loading Rate per Clarifier (gpd/ft)	2,938	4,897

1. Freeboard of 12 inches is factored in equation

Chlorine Contact Basins

Required Contact Time at Peak Flow (Final)	20 mins	Based on 30 TAC 217.281
Req. Basin Volume at Peak Flow (ft ³)	446 (Ph1)	
	743 (Ph2)	

Facility design features

A. Emergency Power Requirements

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

1. Influent Lift Station
2. Aeration Blowers
3. Final Clarifier Sludge Scrapers
4. Return Activated Sludge Pump
5. Chlorination System
6. Effluent Metering Station
7. Lighting Panels and Control Equipment

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

B. Alarm Features

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

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

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

C. Overflow prevention

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

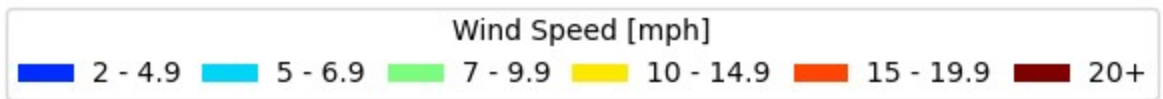
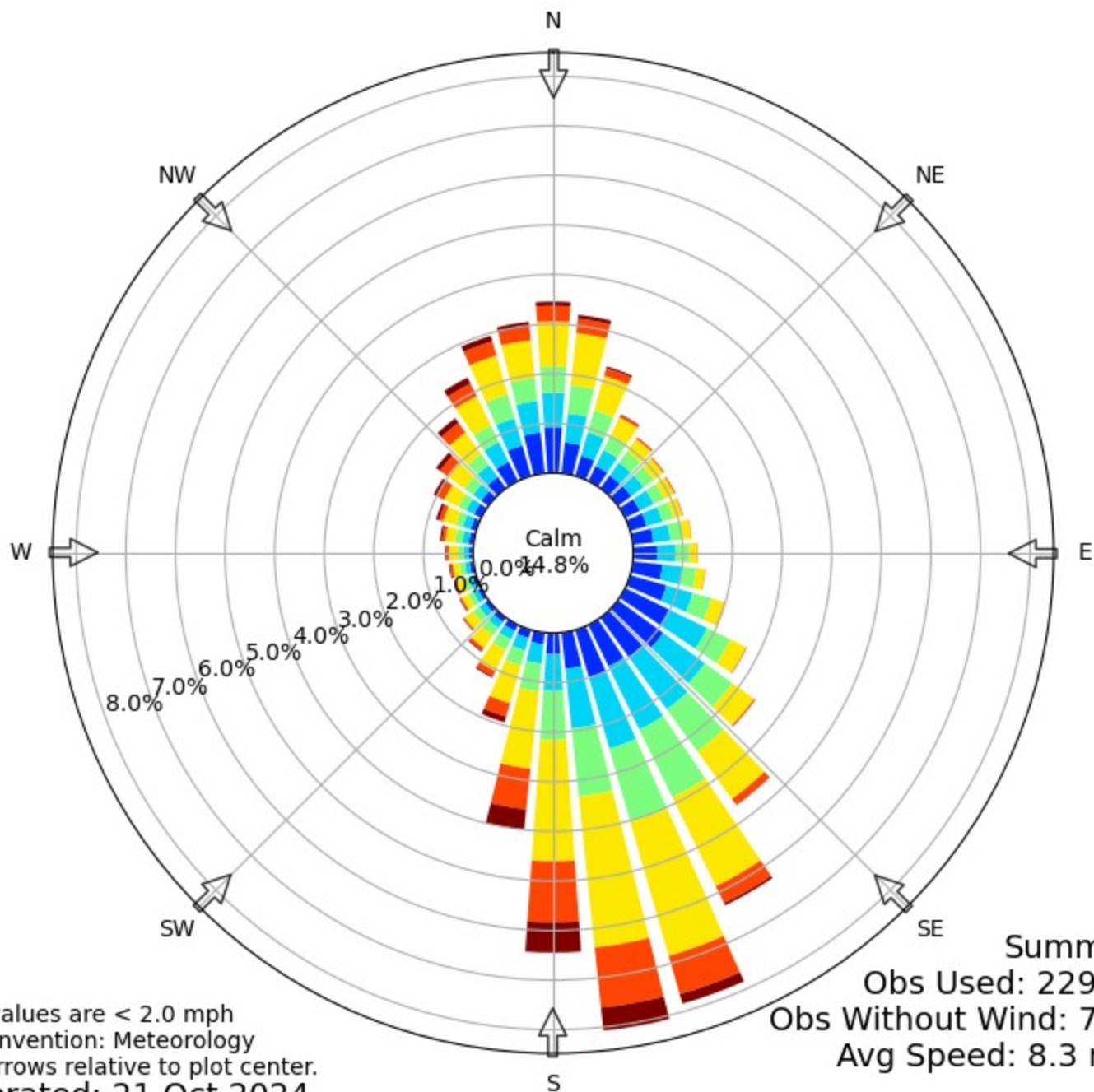
1. Based on 5 years of historical flow data, the facility design includes a peaking factor of 3.5 to insure adequate hydraulic capacity.
2. The influent lift station will be designed with the capacity to pump peak flow with the largest single pump out of service.
3. The facility hydraulic design, including piping, channels, weirs, troughs and other features, will be sized to allow the 2-hour peak flow to pass through the facility without exceeding minimum freeboard requirements with any single treatment unit out of service.

ATTACHMENT T4
WIND ROSE MAP



Windrose Plot for [TKI] MC KINNEY

Obs Between: 10 Feb 1997 10:53 AM - 21 Oct 2024 03:53 AM America/Chicago



ATTACHMENT T5
SOLIDS MANAGEMENT PLAN

Sewage Sludge Solids Management Plan (Phase 1)

Influent Design Flow = 0.060000 MGD

Influent BOD Concentration = 325 mg/L

Aeration Basin Average MLSS: 3,000 mg/L

Table 1 - Sludge Production

Solids Generated	100% flow	75% flow	50% flow	25% flow
Pounds Influent BOD ₅ per day	152.59	114.44	76.29	38.15
Pounds of pressed and stabilized dry sludge produced per day*	45.78	34.33	17.17	4.29
Gallons of wet sludge produced**	274.43	205.83	102.91	25.73

*Assuming 0.3 lbs of dry sludge produced per pound of BOD₅ removed.

** Assuming 2.0% solids.

Sludge will be wasted from the RAS flow stream to a stabilization tank. Sludge solids will be stabilized with a lime slurry concentration at 15%. Sludge solids will be pressed in a volute screw press.

Table 2 - Sludge Removal Schedule

Removal Schedule (days)	100% flow	75% flow	50% flow	25% flow
Days between Sludge Removal	7	10	21	85

Leachate slurry from the volute screw press will be returned to the headworks for treatment. The pressed sludge, with a consistency between 75 – 85% will be transported by registered hauler.

Sewage Sludge Solids Management Plan (Phase 2)

Influent Design Flow = 0.100000 MGD

Influent BOD Concentration = 325 mg/L

Aeration Basin Average MLSS: 3,000 mg/L

Table 1 - Sludge Production

Solids Generated	100% flow	75% flow	50% flow	25% flow
Pounds Influent BOD ₅ per day	254.31	190.73	127.15	63.58
Pounds of pressed and stabilized dry sludge produced per day*	76.29	57.22	28.61	7.15
Gallons of wet sludge produced**	457.39	343.04	171.52	42.88

*Assuming 0.3 lbs of dry sludge produced per pound of BOD₅ removed.

** Assuming 2.0% solids.

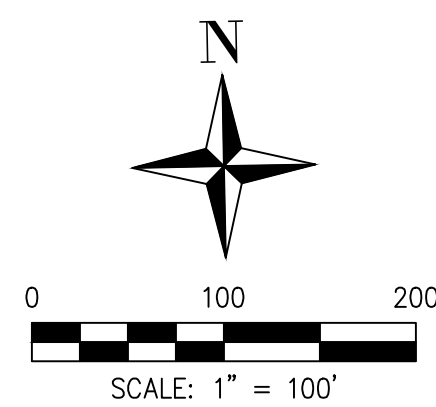
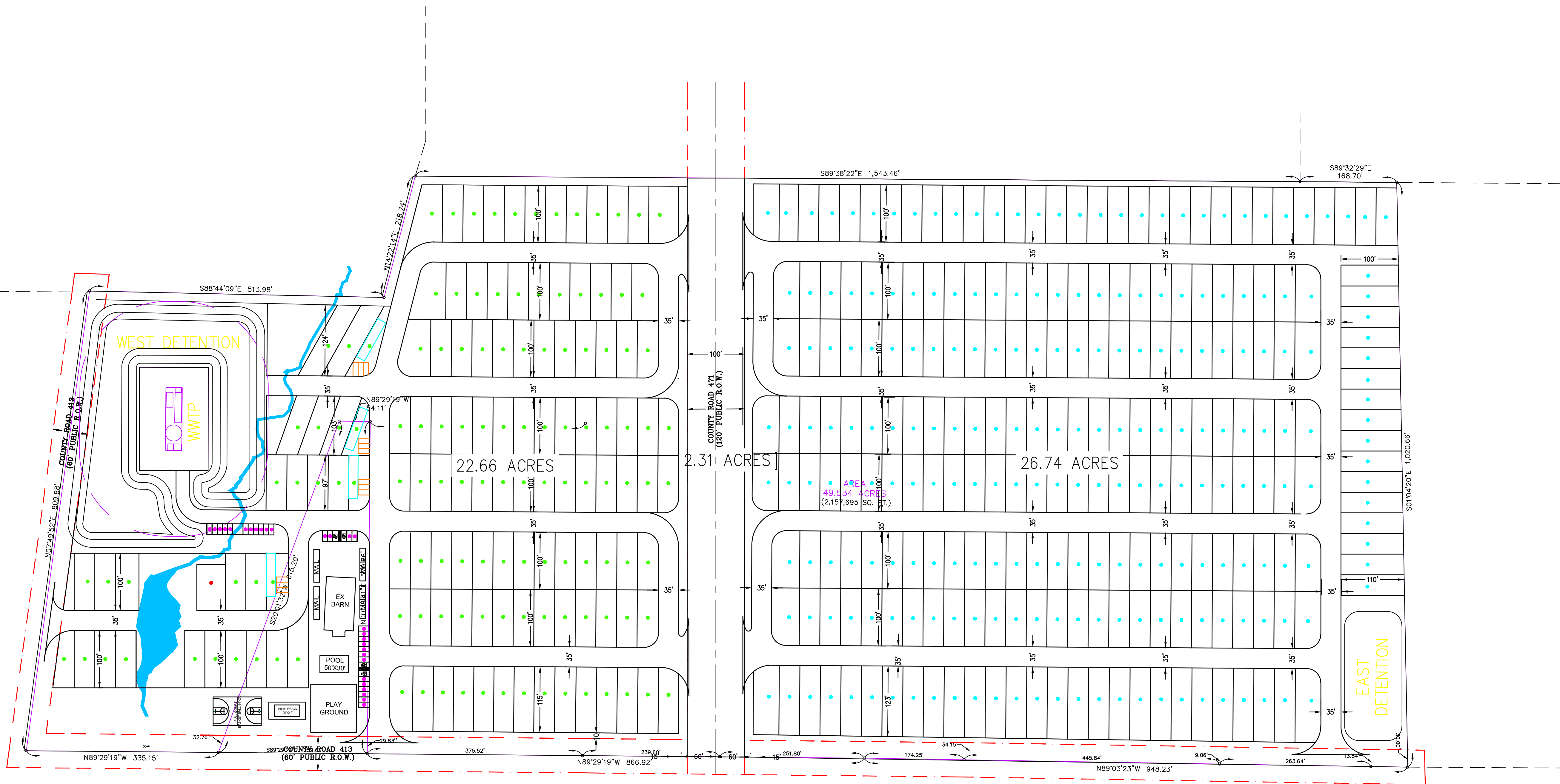
Sludge will be wasted from the RAS flow stream to a stabilization tank. Sludge solids will be stabilized with a lime slurry concentration at 15%. Sludge solids will be pressed in a volute screw press.

Table 2 - Sludge Removal Schedule


Removal Schedule (days)	100% flow	75% flow	50% flow	25% flow
Days between Sludge Removal	7	10	21	85

Leachate slurry from the volute screw press will be returned to the headworks for treatment. The pressed sludge, with a consistency between 75 – 85% will be transported by registered hauler.

ATTACHMENT T6
SUBDIVISION SITE PLAN



- WEST SIDE ASSUMPTIONS
- 131 SINGLE WIDE LOTS (100'X36' MIN)
 - 1 DOUBLE WIDE LOTS (80'X50' MIN)
 - 28 OFF STREET PARKING (19'X9' MIN)
- TOTAL LOT COUNT
364 TOTAL LOT COUNT
- EAST SIDE ASSUMPTIONS
- 232 SINGLE WIDE LOTS (100'X36' MIN)

OCTA HOMES - VIBE AT MELISSA		
COLLIN COUNTY, TEXAS		
PRELIMINARY SITE PLAN		
 TETRA LAND SERVICES <small>Engineers • Surveyors • Planners • Appraisers</small> www.TLSTX.com <small>Texas Registered Engineering Firm F-22195</small>	DATE	05/20/25
	SCALE	AS NOTED
	SHEET NO.	SP-10
PROJECT #	FILE NO.	

Rainee Trevino

From: Cindy Dong <CDong@civitasengr.com>
Sent: Tuesday, June 10, 2025 4:47 PM
To: Rainee Trevino
Cc: Keith O'Connor; Anzer Husain
Subject: RE: Application for Proposed Permit No. WQ0016817001- Notice of Deficiency Letter
Attachments: WQ0016817001 Melissa 413 LLC Notice of Deficiency (nod1) Response.pdf;
WQ0016817001 Melissa 413 LLC Updated Permit Application Sheets.pdf;
WQ0016817001 Spanish NORI.docx

Categories: NOD Response Review

Good Afternoon Rainee,

Please see attached for the NOD1 Responses and revised sheets for permit application WQ0016817001 - Melissa 413 LLC. A hard copy will be mailed in to you.

Best,



Cindy Dong, PE, ENV SP
Project Engineer

O: 713.972.6640 2000 W Sam Houston Pkwy S Ste #1400
Houston, TX 77042
civitasengr.com

From: Rainee Trevino <Rainee.Trevino@tceq.texas.gov>
Sent: Monday, June 2, 2025 1:58 PM
To: Cindy Dong <CDong@civitasengr.com>
Cc: Keith O'Connor <KOConnor@civitasengr.com>
Subject: Application for Proposed Permit No. WQ0016817001- Notice of Deficiency Letter

Good afternoon,

The attached Notice of Deficiency letter sent on June 2, 2025, requests additional information needed to declare the application administratively complete. Please send the complete response to my attention by June 16, 2025.

Thank you,

Rainee Trevino
Water Quality Division | ARP Team
Texas Commission on Environmental Quality
512-239-4324



June 13th, 2025

TCEQ – Water Quality Division
Applications Review and Process Team (MC 148)

Attn: Raine Trevino

P.O. Box 13087

Austin, Texas 78711-3087

Re: Application for Proposed Permit No. WQ0016817001 (EPA I.D. No. TX147907)

Permittee: Melissa 413 LLC (CN606389310) / Tommy Robbins (CN606392181)

Site Name: Vibe Wastewater Treatment Plant (RN112218979)

County: Kaufman

SENT VIA EMAIL

Dear Ms. Trevino,

The purpose of this letter includes the following:

- To provide a response to the Notice of Deficiency (NOD) letter sent to Cindy Dong of Civitas Engineering Group, Inc. on June 2nd, 2025 regarding a new application for a Texas Pollutant Discharge Elimination System (TPDES) permit for Permit No. WQ0016817001 (Melissa 413 LLC).
- To provide updated permit application sheets due to the addition of land area and increased flow rates from the original submitted permit application. These sheets have been provided in the attachment.

Please see below for Civitas' responses to the NOD written in red:

1. Please clarify if Octa Homes should also be an applicant. **All sheets have been updated from Octa Homes to Melissa 413 LLC as the applicant.**
2. Attachment 1, Individual Form: Please submit an updated form with the driver's license number and date of birth for Mr. Tommy Robbins. **See attached for updated Individual Form.**
3. Core Data Form (Melissa 413 LLC), Section II, Item 17: Please provide an updated Core Data Form for Melissa 413 LLC with an email address. **See attached for updated Core Data Form.**
4. Core Data Form (Tommy Robbins), Section II, Item 18: Please provide an updated Core Data Form for Tommy Robbins with a telephone number. **See attached for updated Core Data Form.**

5. Core Data Form, Section V, Authorized Signature: Please provide an updated Core Data Form for Melissa 413 LLC with an authorized signature. **See attached for updated Core Data Form.**
6. Administrative Report 1.0, Section 8, Item D: Please clarify where the public viewing location will be. The Melissa Public Library currently shows temporarily closed. **Melissa City Hall and Melissa Public Library are in the same building. The library section is currently closed for construction but will re-open again soon. I discussed with the City Secretary (Hope Baskins) who will move the binder to the library when its re-opens. For now, it is in the City Hall Lobby and Ms. Baskins directed on-site library staff members to direct any citizens to the location if they inquire about the binder.**
7. Public Involvement Plan, Section 4: This section has Octa Homes as the applicant. Please submit this section of the Public Involvement Plan updated with the correct applicants. **See attached for updated PIP.**
8. Administrative Report 1.0, Section 14: Please submit a notarized signature page for Melissa 413 LLC. **See attached for signature sheet. The original hard copy will be mailed to you.**
9. Plain Language Summary and Supplemental Permit Information Form: Please correct both only if Octa Homes should not be listed as an applicant. **See attached for updated PLS and SPIF.**
10. The following is a portion of the NORI which contains information relevant to your application. Please read it carefully and indicate if it contains any errors or omissions. **Some information needs to be updated on the NORI:**
 - a. **The address should be updated from 4265 San Felipe Street, Suite 1050 to 3555 Timmons Lane, Suite 1440, Houston, TX 77027**
 - b. **The flow should be updated to 125,000 gallons per day**
11. The application indicates that public notices in Spanish are required. **See attached for the translated Spanish NORI.**

If you have any questions or require additional information regarding this project, please me at (713) 972-6640 or cdong@civitasengr.com.

Sincerely,



Cindy Dong, P.E., ENV SP
Civitas Engineering Group, Inc.
2000 West Sam Houston Parkway Sam, Suite 1400
Houston, Texas 77042

RT

Enclosure(s)

Cc: Mr. Keith O'Connor, P.E., Senior Project Manager
2000 West Sam Houston Parkway South, Suite 1400
Houston, Texas 77042

Mr. Anzer Husain, Acquisitions Director
3555 Timmons Lane, Suite 1440
Houston, TX 77027

Attachment(s)

WQ0016817001 Melissa 413 LLC Updated Permit Application Sheets.pdf

WQ0016817001 Spanish NORI.docx



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the application.

APPLICANT NAME: Melissa 413 LLC

PERMIT NUMBER (If new, leave blank): WQ0016817001

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

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

For TCEQ Use Only

Segment Number _____ County _____
Expiration Date _____ Region _____
Permit Number _____

Organization Name: Melissa 413 LLC

Mailing Address: 3555 Timmons Ln, Ste 1440 City, State, Zip Code: Houston, TX 77027

Phone No.: 347-433-4544

E-mail Address: anzer@octahomes.com

B. Prefix: Mr.

Last Name, First Name: Husain, Danial

Title: President

Credential: Click to enter text.

Organization Name: Melissa 413 LLC

Mailing Address: 3555 Timmons Ln, Ste 1440 City, State, Zip Code: Houston, TX 77027

Phone No.: 346-444-9660

E-mail Address: danial@octahomes.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: Mr.

Last Name, First Name: Husain, Anzer

Title: Director

Credential: Click to enter text.

Organization Name: Melissa 413 LLC

Mailing Address: 3555 Timmons Ln, Ste 1440 City, State, Zip Code: Houston, TX 77027

Phone No.: 347-433-4544

E-mail Address: anzer@octahomes.com

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

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

Prefix: Mr.

Last Name, First Name: Husain, Anzer

Title: Director

Credential: Click to enter text.

Organization Name: Melissa 413 LLC

Mailing Address: 3555 Timmons Ln, Ste 1440 City, State, Zip Code: Houston, TX 77027

Phone No.: 347-433-4544

E-mail Address: anzer@octahomes.com

Section 8. Public Notice Information (Instructions Page 27)

A. Individual Publishing the Notices

Prefix: Miss

Last Name, First Name: Dong, Cindy

Title: Project Engineer

Credential: P.E.

Organization Name: Civitas Engineering Group, Inc.

Mailing Address: 2000 W Sam Houston Pkwy S, #1400
77042

City, State, Zip Code: Houston, TX

Phone No.: 713-972-6640

E-mail Address: cdong@civitasengr.com

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

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

☒ E-mail Address

☐ Fax

☒ Regular Mail

C. Contact permit to be listed in the Notices

Prefix: Mr.

Last Name, First Name: Husain, Anzer

Title: Director

Credential: Click to enter text.

Organization Name: Melissa 413 LLC

Mailing Address: 3555 Timmons Ln, Ste 1440 City, State, Zip Code: Houston, TX 77027

Phone No.: 347-433-4544

E-mail Address: anzer@octahomes.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: Melissa Public Library

Location within the building: City Hall Lobby or Melissa Public Library Main Desk

Physical Address of Building: 3411 Barker Avenue, Melissa, TX 75454

City: Melissa

County: Collin

Contact (Last Name, First Name): Hope Baskin

Phone No.: 972-838-2520 Ext.: Click to enter text.

E. Bilingual Notice Requirements

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

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

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

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

☒ Yes

☐ No

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

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

☐ Yes

☒ No

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

☒ Yes ☐ No

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

☐ Yes ☒ No

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

F. Summary of Application in Plain Language Template

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

Attachment: See Attachment A2 – Plain Language Summary

G. Public Involvement Plan Form

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

Attachment: See Attachment A3 – Public Involvement Plan Form

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

A. If the site is currently regulated by TCEQ, provide the Regulated Entity Number (RN) issued to this site. RN 112218979

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

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

Vibe WWTP

C. Owner of treatment facility: Melissa 413 LLC

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

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

Prefix: Mr.

Last Name, First Name: Robbins, Tommy

Title: Land Owner

Credential: Click to enter text.

Organization Name: Individual

Mailing Address: 6448 Dunstan Ln

City, State, Zip Code: Dallas, TX 75214

Phone No.: 469-901-1998

E-mail Address: tdoakrobbins@yahoo.com

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

Attachment: Click to enter text.

Section 14. Signature Page (Instructions Page 34)

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

Permit Number: New Application – WQ0016817001

Applicant: Melissa 413 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): Anzer Husain

Signatory title: Director

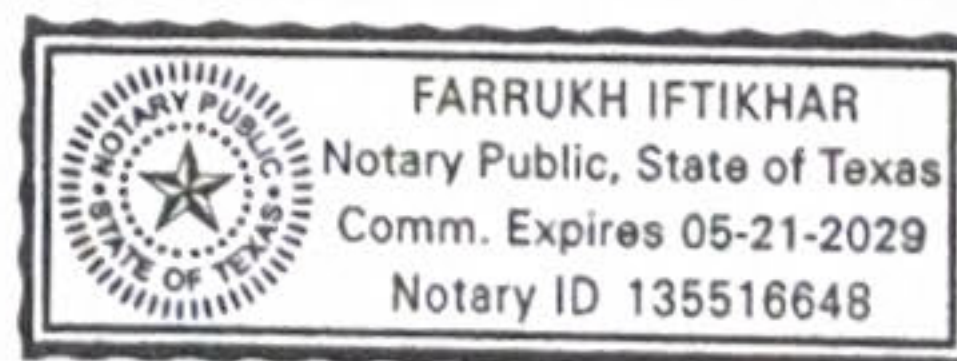
Signature:  Date: June 10, 2025
(Use blue ink)

Subscribed and Sworn to before me by the said Anzer Husain
on this 10th day of June, 2025.
My commission expires on the 22nd day of May, 2029.
21st F.I.


Notary Public

[SEAL]

HARRIS
County, Texas



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): Mr.

Full legal name (Last Name, First Name, Middle Initial): Robbins, Tommy Doak

Driver's License or State Identification Number: XXXXXXXXXX

Date of Birth: XXXXXXXXXX

Mailing Address: 6448 Dunstan Lane

City, State, and Zip Code: Dallas, TX 75214

Phone Number: 469-901-1998 Fax Number: Click to enter text.

E-mail Address: tdoakrobbins@yahoo.com

CN: New Applicant

For Commission Use Only:

Customer Number:

Regulated Entity Number:

Permit Number:



TCEQ Core Data Form

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

SECTION I: General Information

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

SECTION II: Customer Information

4. General Customer Information		5. Effective Date for Customer Information Updates (mm/dd/yyyy)			
<input checked="" type="checkbox"/> New Customer <input type="checkbox"/> Update to Customer Information <input type="checkbox"/> Change in Regulated Entity Ownership <input type="checkbox"/> Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)					
<i>The Customer Name submitted here may be updated automatically based on what is current and active with the Texas Secretary of State (SOS) or Texas Comptroller of Public Accounts (CPA).</i>					
6. Customer Legal Name (If an individual, print last name first: eg: Doe, John)				<i>If new Customer, enter previous Customer below:</i>	
Melissa 413 LLC					
7. TX SOS/CPA Filing Number		8. TX State Tax ID (11 digits)		9. Federal Tax ID (9 digits)	10. DUNS Number (if applicable)
0805911926		32098915302			
11. Type of Customer:		<input checked="" type="checkbox"/> Corporation		<input type="checkbox"/> Individual	Partnership: <input type="checkbox"/> General <input type="checkbox"/> Limited
Government: <input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Federal <input type="checkbox"/> Local <input type="checkbox"/> State <input type="checkbox"/> Other		<input type="checkbox"/> Sole Proprietorship		<input type="checkbox"/> Other:	
12. Number of Employees				13. Independently Owned and Operated?	
<input checked="" type="checkbox"/> 0-20 <input type="checkbox"/> 21-100 <input type="checkbox"/> 101-250 <input type="checkbox"/> 251-500 <input type="checkbox"/> 501 and higher				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
14. Customer Role (Proposed or Actual) – as it relates to the Regulated Entity listed on this form. Please check one of the following					
<input type="checkbox"/> Owner <input type="checkbox"/> Operator <input checked="" type="checkbox"/> Owner & Operator <input type="checkbox"/> Other: <input type="checkbox"/> Occupational Licensee <input type="checkbox"/> Responsible Party <input type="checkbox"/> VCP/BSA Applicant					
15. Mailing Address:	3555 Timmons Ln. Ste 1440				
	City	Houston	State	TX	ZIP 77027 ZIP + 4
16. Country Mailing Information (if outside USA)				17. E-Mail Address (if applicable)	
				mayer@octahomes.com	

18. Telephone Number	19. Extension or Code	20. Fax Number (if applicable)
(346) 444-9660		() -

SECTION III: Regulated Entity Information

21. General Regulated Entity Information (If 'New Regulated Entity' is selected, a new permit application is also required.)								
<input checked="" type="checkbox"/> New Regulated Entity <input type="checkbox"/> Update to Regulated Entity Name <input type="checkbox"/> Update to Regulated Entity Information								
<i>The Regulated Entity Name submitted may be updated, in order to meet TCEQ Core Data Standards (removal of organizational endings such as Inc, LP, or LLC).</i>								
22. Regulated Entity Name (Enter name of the site where the regulated action is taking place.)								
Vibe WWTP								
23. Street Address of the Regulated Entity: (No PO Boxes)	TBD							
	City	Melissa	State	TX	ZIP	75454	ZIP + 4	
24. County	Collin							

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

25. Description to Physical Location:	Approximately 1.5 miles southeast of the East Melissa Road and Military Lane interesection							
26. Nearest City					State	Nearest ZIP Code		
Melissa					TX	75454		
<i>Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).</i>								
27. Latitude (N) In Decimal:		33.278481			28. Longitude (W) In Decimal:		-96.522654	
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds			
33	16	42.5316	96	31	21.5544			
29. Primary SIC Code (4 digits)	30. Secondary SIC Code (4 digits)		31. Primary NAICS Code (5 or 6 digits)		32. Secondary NAICS Code (5 or 6 digits)			
4952								
33. What is the Primary Business of this entity? (Do not repeat the SIC or NAICS description.)								
Wastewater Treatment								
34. Mailing Address:	TBD							
	City	Melissa	State	TX	ZIP	75454	ZIP + 4	
35. E-Mail Address:								
36. Telephone Number			37. Extension or Code			38. Fax Number (if applicable)		
() -						() -		

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

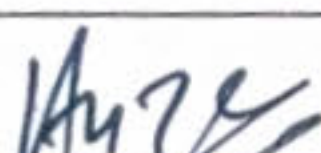
<input type="checkbox"/> Dam Safety	<input type="checkbox"/> Districts	<input type="checkbox"/> Edwards Aquifer	<input type="checkbox"/> Emissions Inventory Air	<input type="checkbox"/> Industrial Hazardous Waste
<input type="checkbox"/> Municipal Solid Waste	<input type="checkbox"/> New Source Review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

SECTION IV: Preparer Information

40. Name:	Cindy Dong, P.E.	41. Title:	Project Engineer
42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Mail Address
(713) 972-6640		() -	cdong@civitasengr.com

SECTION V: Authorized Signature

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

Company:	Melissa 413 LLC	Job Title:	Director
Name (In Print):	Anzer Husain	Phone:	(616) 777- 7778
Signature:		Date:	06/10/2025



TCEQ Core Data Form

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

SECTION I: General Information

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

SECTION II: Customer Information

4. General Customer Information		5. Effective Date for Customer Information Updates (mm/dd/yyyy)						
<input checked="" type="checkbox"/> New Customer <input type="checkbox"/> Update to Customer Information <input type="checkbox"/> Change in Regulated Entity Ownership <input type="checkbox"/> Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)								
<i>The Customer Name submitted here may be updated automatically based on what is current and active with the Texas Secretary of State (SOS) or Texas Comptroller of Public Accounts (CPA).</i>								
6. Customer Legal Name (If an individual, print last name first: eg: Doe, John)				<i>If new Customer, enter previous Customer below:</i>				
Robbins, Tommy								
7. TX SOS/CPA Filing Number		8. TX State Tax ID (11 digits)		9. Federal Tax ID (9 digits)	10. DUNS Number (if applicable)			
11. Type of Customer:		<input type="checkbox"/> Corporation		<input checked="" type="checkbox"/> Individual	Partnership: <input type="checkbox"/> General <input type="checkbox"/> Limited			
Government: <input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Federal <input type="checkbox"/> Local <input type="checkbox"/> State <input type="checkbox"/> Other		<input type="checkbox"/> Sole Proprietorship		<input type="checkbox"/> Other:				
12. Number of Employees				13. Independently Owned and Operated?				
<input type="checkbox"/> 0-20 <input type="checkbox"/> 21-100 <input type="checkbox"/> 101-250 <input type="checkbox"/> 251-500 <input type="checkbox"/> 501 and higher				<input type="checkbox"/> Yes <input type="checkbox"/> No				
14. Customer Role (Proposed or Actual) – as it relates to the Regulated Entity listed on this form. Please check one of the following								
<input type="checkbox"/> Owner <input type="checkbox"/> Operator <input type="checkbox"/> Owner & Operator <input checked="" type="checkbox"/> Other: Current Owner of Land Tract <input type="checkbox"/> Occupational Licensee <input type="checkbox"/> Responsible Party <input type="checkbox"/> VCP/BSA Applicant								
15. Mailing Address:	6448 Dunstan Lane							
	City	Dallas	State	TX	ZIP	75214	ZIP + 4	
16. Country Mailing Information (if outside USA)					17. E-Mail Address (if applicable)			
					tdoakrobbins@yahoo.com			

18. Telephone Number	19. Extension or Code	20. Fax Number (if applicable)
(469) 901-1998		() -

SECTION III: Regulated Entity Information

21. General Regulated Entity Information (If 'New Regulated Entity' is selected, a new permit application is also required.)								
<input checked="" type="checkbox"/> New Regulated Entity <input type="checkbox"/> Update to Regulated Entity Name <input type="checkbox"/> Update to Regulated Entity Information								
<i>The Regulated Entity Name submitted may be updated, in order to meet TCEQ Core Data Standards (removal of organizational endings such as Inc, LP, or LLC).</i>								
22. Regulated Entity Name (Enter name of the site where the regulated action is taking place.)								
Vibe WWTP								
23. Street Address of the Regulated Entity: (No PO Boxes)	TBD							
	City	Melissa	State	TX	ZIP	75454	ZIP + 4	
24. County	Collin							

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

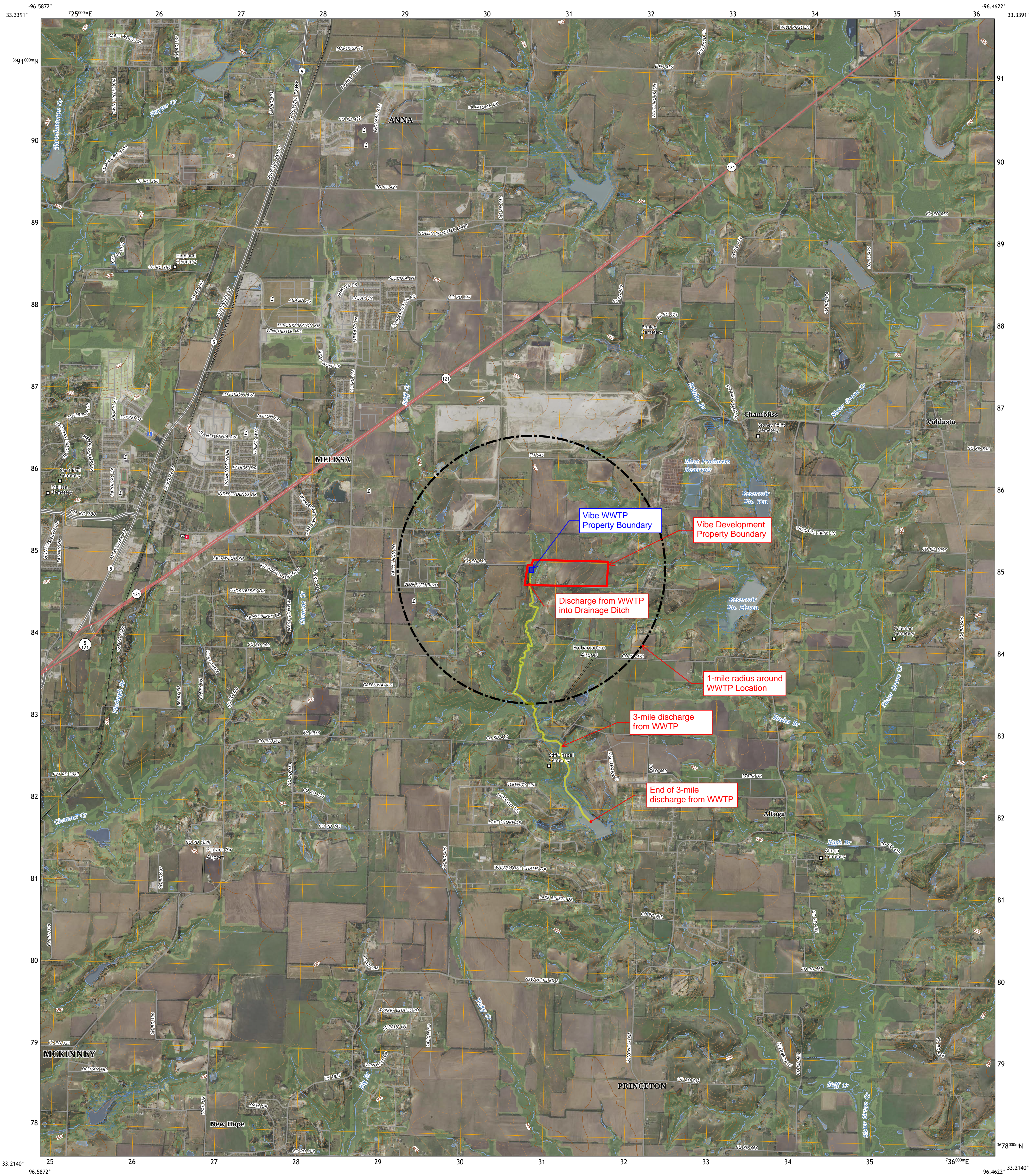
25. Description to Physical Location:	Approximately 1.5 miles southeast of the East Melissa Road and Military Lane intersection							
26. Nearest City					State	Nearest ZIP Code		
Melissa					TX	75454		
<i>Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).</i>								
27. Latitude (N) In Decimal:		33.278481			28. Longitude (W) In Decimal:		-96.522654	
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds			
33	16	42.5316	96	31	21.5544			
29. Primary SIC Code (4 digits)	30. Secondary SIC Code (4 digits)		31. Primary NAICS Code (5 or 6 digits)		32. Secondary NAICS Code (5 or 6 digits)			
4952								
33. What is the Primary Business of this entity? (Do not repeat the SIC or NAICS description.)								
Wastewater Treatment								
34. Mailing Address:	TBD							
	City		State		ZIP		ZIP + 4	
35. E-Mail Address:								
36. Telephone Number			37. Extension or Code			38. Fax Number (if applicable)		
() -						() -		

DOMESTIC WASTEWATER

The following summary is provided for this pending water quality permit application being reviewed by the Texas Commission on Environmental Quality as required by 30 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.

Melissa 413 LLC (CN606389310) and Tommy Doak Robbins (CN606392181) proposes to operate the Vibe WWTP (RN112218979), a conventional activated sludge process plant operated in the complete mix mode. The facility will be located at approximately 1.5 miles southeast of the East Melissa Road and Military Lane intersection in Melissa, Collin County, Texas 75454. The application is for a new application to dispose a daily flow not to exceed 65,000 gallons per day in Phase I and 125,000 gallons per day in the Final Phase of treated domestic wastewater.

Discharges from the facility are expected to contain five-day biochemical oxygen demand (BOD₅) and total suspended solids (TSS). Domestic wastewater will be treated by an activated sludge process plant and the treatment units will include an influent lift station, bar screen(s), aeration basin(s), secondary clarifier (s), aerobic sludge digester(s), tertiary filter(s) and chlorine contact chamber(s).

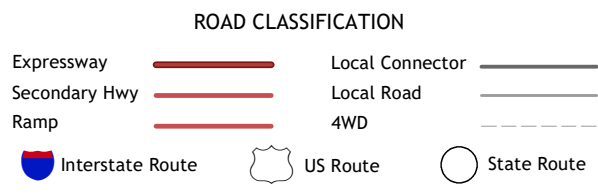
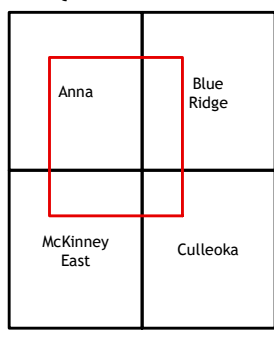
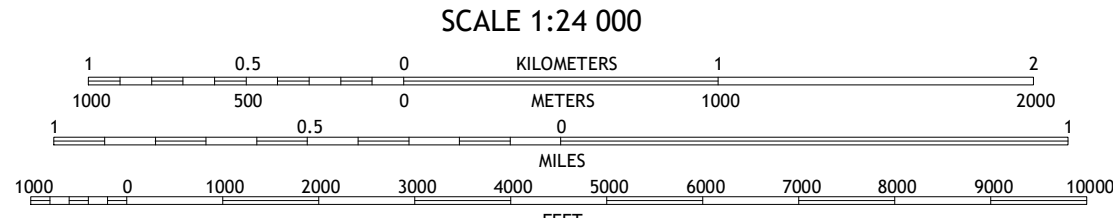
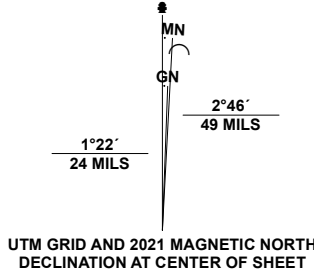


Produced by the United States Geological Survey

North American Datum of 1983 (NAD83)
World Geodetic System of 1984 (WGS84). Projection and
1 000-meter grid/Universal Transverse Mercator, Zone 14S.
Data is provided by The National Map (TNM), is the best available at the time of map
generation, and includes data content from supporting themes of Elevation,
Hydrography, Geographic Names, Boundaries, Transportation, Structures, Land Cover,
and Orthimagery. Refer to associated Federal Geographic Data Committee (FGDC)
Metadata for additional source data information.

This map is not a legal document. Boundaries may be generalized for this map scale.
Private lands within government reservations may not be shown. Obtain permission
before entering private lands. Temporal changes may have occurred since these data
were collected and some data may no longer represent actual surface conditions.

Learn About The National Map: <https://nationalmap.gov>



7.5-MINUTE TOPO, TX
2025

[illegible]

Affected Landowner's List

1. Collin Co. Property ID: 462519
Owner: FIRST TEXAS HOMES INC.
2. Collin Co. Property ID: 2575051
Owner: MELISSA ISD
3. Collin Co. Property ID: 2511007
Owner: PARKS RONALD DUSTIN
4. Collin Co. Property ID: 462617
Owner: LONG PRISCILLA
5. Collin Co. Property ID: 2648897
Owner: TYNAS TEXAS LP
6. Collin Co. Property ID: 2850248
Owner: AMMONS GASTON & SKYLER
7. Collin Co. Property ID: 2673882
Owner: NORTH PONDEROSA LLC
8. Collin Co. Property ID: 2013548
Owner: FUSSELMAN GREG M & DEBORAH
9. Collin Co. Property ID: 462733
Owner: BARBOUR JOSEPH
10. Collin Co. Property ID: 2648897
Owner: TYNAS TEXAS LP (Duplicate Owner)

SET 1

FIRST TEXAS HOMES INC
1504 DEVOTION ROW
WYLIE, TX 75098-1999

MELISSA ISD
2230 MCKINNEY ST
MELISSA, TX 75454-9734

PARKS RONALD DUSTIN
5577 COUNTY ROAD 413
MELISSA, TX 75454-2805

LONG PRISCILLA
PO BOX 830366
RICHARDSON, TX 75083-0366

TYNAS TEXAS LP
1 FOX HOLLOW LN
MELISSA, TX 75454-7901

AMMONS GASTON & SKYLER
4460 FM 471
MELISSA, TX 75454

NORTH PONDEROSA LLC
10455 N CENTRAL EXPY
STE 109 PMB 376
DALLAS, TX 75231-2215

FUSSELMAN GREG M & DEBORAH
4823 CEDAR LN
MELISSA, TX 75454-3301

BARBOUR JOSEPH &
3628 COUNTY ROAD 413
MELISSA, TX 75454-3014

SET 2

FIRST TEXAS HOMES INC
1504 DEVOTION ROW
WYLIE, TX 75098-1999

MELISSA ISD
2230 MCKINNEY ST
MELISSA, TX 75454-9734

PARKS RONALD DUSTIN
5577 COUNTY ROAD 413
MELISSA, TX 75454-2805

LONG PRISCILLA
PO BOX 830366
RICHARDSON, TX 75083-0366

TYNAS TEXAS LP
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3628 COUNTY ROAD 413
MELISSA, TX 75454-3014

SET 3

FIRST TEXAS HOMES INC
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WYLIE, TX 75098-1999

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3628 COUNTY ROAD 413
MELISSA, TX 75454-3014

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

FOR AGENCIES REVIEWING DOMESTIC OR INDUSTRIAL TPDES WASTEWATER PERMIT APPLICATIONS

TCEQ USE ONLY:

Application type: ____Renewal ____Major Amendment ____Minor Amendment ____New

County: _____ Segment Number: _____

Admin Complete Date: _____

Agency Receiving SPIF:

____ Texas Historical Commission

____ U.S. Fish and Wildlife

____ Texas Parks and Wildlife Department

____ U.S. Army Corps of Engineers

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

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

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

The following applies to all applications:

1. Permittee: Melissa 413 LLC, Tommy Doak Robbins

Permit No. WQ00 16817001

EPA ID No. TX 147907

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

Approximately 1.5 miles southeast of the East Melissa Road and Military Lane intersection in Collins County, Texas

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

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

First and Last Name: Anzer Husain

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

Title: Acquisitions Director

Mailing Address: 3555 Timmons Lane, Suite 1440

City, State, Zip Code: Houston, TX 77027

Phone No.: 347-433-4544 Ext.: Fax No.:

E-mail Address: anzer@octahomes.com

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

Property is currently privately owned by Tommy Doak Robbins and is in process of being transferred to Melissa 413 LLC ownership

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

The treatment plant outfall will be in a drainage ditch located on the southwest end of the property. The property will continue south through the ditch, then to Stiff Creek, then into unclassified Stream Segment No. 0821B - Sister Grove Creek and then flow into the Classified Segment 0821 - Lake Lavon.

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

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

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

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

☒ Disturbance of vegetation or wetlands

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

N/A

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

Current land use is for livestock

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

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

Single Family Structures built in: 1964, 2017, 2018, 2019

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

Unknown



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION TECHNICAL REPORT 1.0

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

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

Section 1. Permitted or Proposed Flows (Instructions Page 42)

A. Existing/Interim I Phase

Design Flow (MGD): 0.065

2-Hr Peak Flow (MGD): 0.24

Estimated construction start date: 8/1/2026

Estimated waste disposal start date: 11/1/2026

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): 0.40

Estimated construction start date: 1/1/2028

Estimated waste disposal start date: 4/1/2028

D. Current Operating Phase

Provide the startup date of the facility: TBD

Section 2. Treatment Process (Instructions Page 42)

A. Current Operating Phase

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

DOMESTIC WASTEWATER PERMIT APPLICATION

TECHNICAL REPORT 1.1

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

Section 1. Justification for Permit (Instructions Page 56)

A. Justification of permit need

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

Melissa 413 LLC will need to construct the Vibe WWTP to serve the Vibe Subdivision located near Melissa, Texas in Collins County. The subdivision and treatment plant will be built in two phases with a total of 492 LUEs in the final phase. The treatment plant is required to service 65,000 GPD in Phase I and 125,000 GPD in Phase II (Final Phase). This has been calculated using an average flow of 250 GPD/LUE.

B. Regionalization of facilities

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

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

1. *Municipally incorporated areas*

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

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

☐ Yes ☒ No ☐ Not Applicable

If yes, within the city limits of: [Click to enter text.](#)

If yes, attach correspondence from the city.

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

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

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

2. *Utility CCN areas*

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

☐ Yes ☒ No

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.

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

B. Proposed organic loading

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

Table 1.1(1) – Design Organic Loading

Source	Total Average Flow (MGD)	Influent BOD ₅ Concentration (mg/l)
Municipality	Phase 1 = 0.065 Phase 2 = 0.125	325 mg/l
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		
Motel		
Restaurant		
Hospital		
Nursing home		
Other		
TOTAL FLOW from all sources	Phase 1 = 0.065 Phase 2 = 0.125	
AVERAGE BOD ₅ from all sources		325 mg/l

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

A. Existing/Interim I Phase Design Effluent Quality

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

DWG: R:\526 Octahomes\2401 Melissa WWTP TPDES Permitting\PROD\3.2 CAD\3.2.3 Civil\Preliminary.dwg USER: CDong
DATE: Jun 10, 2025 2:03pm XREFS:title=block-8.5 x 11



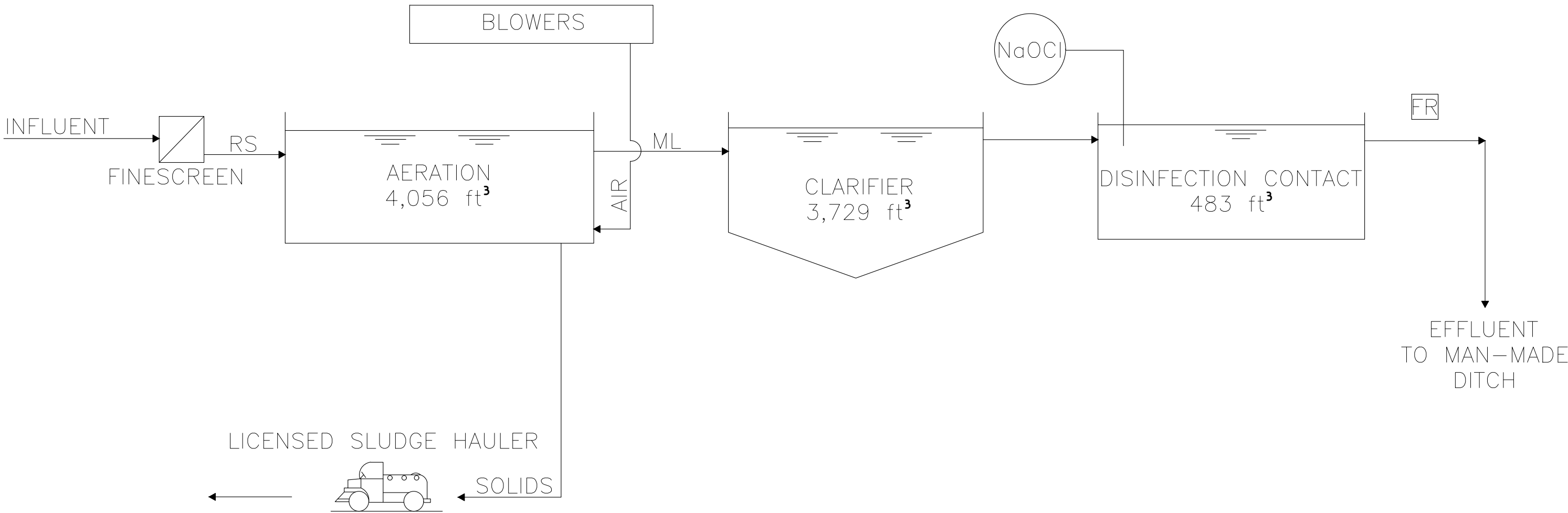
2000 W. Sam Houston Pkwy S., Suite 1400
Houston, Texas 77042
Phone: (713) 783-8700; Fax: (713) 783-8747
TBPE Firm Registration No. F-4991

OCTA HOMES
VIBE WASTEWATER TREATMENT
FACILITY CONSTRUCTION
PROCESS FLOW DIAGRAM
INTERIM I PHASE

DRAWING SCALE	
EXHIBIT NO:	
SHEET NO.	OF

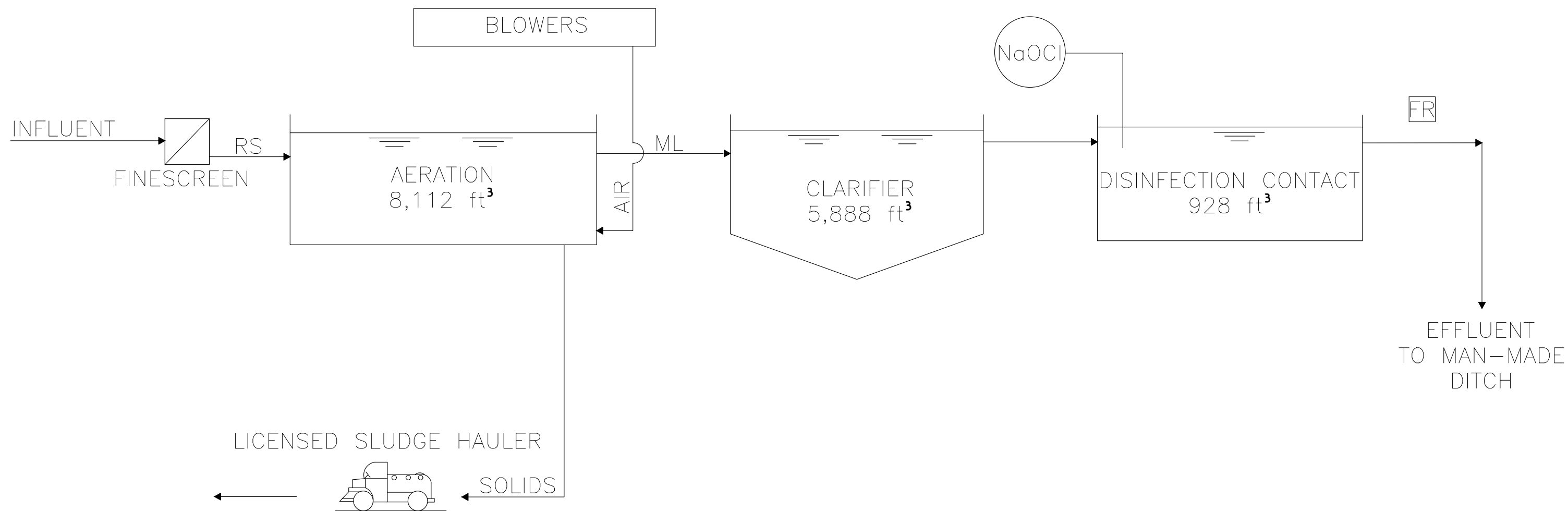
FILE PATH: R:\526 Octahomes\2401 Melissa WWTP TPDES Permitting\PROD\3.2 CAD\3.2.3 Civil\Preliminary.dwg

LEGEND	
RS	RAW SEWAGE
ML	MIXED LIQUOR
FR	FLOW RECORDER TOTALIZER
NaOCl	SODIUM HYPOCHLORITE



DWG: R:\526 Octahomes\2401 Melissa WWTP TPDES Permitting\PROD\3.2 CAD\3.2.3 Civil\Preliminary.dwg USER: CDong
DATE: Jun 10, 2025 2:03pm XREFS:title-block-8.5 x 11

LEGEND	
RS	RAW SEWAGE
ML	MIXED LIQUOR
FR	FLOW RECORDER TOTALIZER
NaOCl	SODIUM HYPOCHLORITE



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Houston, Texas 77042
Phone: (713) 783-8700; Fax: (713) 783-8747
TBPE Firm Registration No. F-4991

OCTA HOMES
VIBE WASTEWATER TREATMENT
FACILITY CONSTRUCTION
PROCESS FLOW DIAGRAM
INTERIM II PHASE

DRAWING SCALE	
EXHIBIT NO:	
SHEET NO. OF	

FILE PATH: R:\526 Octahomes\2401 Melissa WWTP TPDES Permitting\PROD\3.2 CAD\3.2.3 Civil\Preliminary.dwg

DWG: R:\526 Octahomes\2401 Melissa WWTP TPDES Permitting\PROD\3.1 Exhibits\Preliminary Site Plan.dwg
DATE: Jun 10, 2025 2:09pm XREFS:title-block-8.5 x 11 USER: cDong



2000 W. Sam Houston Pkwy S., Suite 1400
Houston, Texas 77042
Phone: (713) 783-8700; Fax: (713) 783-8747
TBPE Firm Registration No. F-4991

OCTA HOMES
VIBE WASTEWATER TREATMENT
FACILITY CONSTRUCTION
PRELIMINARY SITE PLAN EXHIBIT

DRAWING SCALE
1" = 200'
EXHIBIT NO: 1
SHEET NO. 1 OF 1

FILE PATH: R:\526 Octahomes\2401 Melissa WWTP TPDES Permitting\PROD\3.1 Exhibits\Preliminary Site Plan.dwg

Vibe WWTP Design Calculations

DESIGN CALCULATIONS

Influent Flow Characteristics – The hydraulic design of the facility must ensure that the plant will operate under the most extreme conditions anticipated. The plant process and hydraulic design for this facility are based on an average rated capacity of 250 gal/day/LUE and are as follows:

Flow	Phase 1 Gallons per Day	Phase 2 Gallons Per Day
Average Daily Flow (Qave)	65,000	125,000
Peak 2-Hour Flow (Qpk)	260,000	500,000

Loading	Concentration
TCEQ Req. BOD ₅ Conc.	325 mg/L
TCEQ Req. TSS Conc.	260 mg

	Phase 1 Pounds Per Day	Phase 2 Pounds Per Day
Design BOD ₅	177	340
Max Day BOD ₅	707	1360
Design TSS	141	272
Max Day TSS	566	1088

Process Design – The treatment plant has been designed to produce an effluent quality in compliance with the proposed parameters of: BOD₅ = 15 mg/l; TSS = 10 mg/l; Cl₂ residual of 1 to 4 mg/L after 20 minutes detention time at peak flow.

In order to achieve the required removal efficiencies, activated sludge process operated in the conventional mode has been chosen. The 7-day low reactor temperature is 15°. The anticipated operating ranges for MLSS and RAS in mg/l are 3,000 and 6,000, respectively.

Treatment Units**Aeration Basins Sizing using Traditional Design**

<u>Parameter</u>	<u>Value</u>	<u>Comment</u>
Temperature (°C)	15	
Organic Loading Rate (lbs/day/1000 ft ³)	45	Based on Figure 30 TAC 217.154 (b) (2)
Req. Aeration Basin Volume (ft ³)	3,627 (Ph1) 6,045 (Ph2)	

<u>Design</u>	<u>Phase 1</u>	<u>Phase 2</u>
Number of Aeration Basin	1	1
Aeration Basin Width (ft)	12	12
Aeration Basin Length (ft)	26	52
Side Depth (ft)	13	13
Total Volume	4,056	8,112

1. Freeboard of 18 inches is factored in equation

Air Requirements

TCEQ minimum oxygen requirement	2.2 lb O ₂ /lb BOD ₅
TCEQ Airflow/BOD ₅ Load	3,200 ft ³ /day/pound
TCEQ mixing requirements	20 SCFM/1000 cubic feet

Total Air Requirement (Ph1):	134 scfm X 150% correction factor = 201 scfm
Total Air Requirement (Ph2):	257 scfm X 150% correction factor = 386 scfm

Clarifier Sizing using Traditional Design

<u>Parameter</u>	<u>Value</u>	<u>Comment</u>
Max. Surface Loading Rate (gpd/ft ²)	1200	Based on Figure 1, 30 TAC 217.154(c)(1)
Min. Detention Time (hr)	1.8	Based on Figure 1, 30 TAC 217.154(c)(1)
Max. Effluent Weir Loading (gpd/ft)	20,000	Minimum based on 30 TAC 217.129
Req. Surface Area at Peak Flow (ft ²)	290 (Ph1) 580 (Ph2)	

<u>Design</u>	<u>Phase 1</u>	<u>Phase 2</u>
Number of Clarifiers	1	2
Clarifier Diameter (ft)	21	21
Total Surface Area (ft ²)	346	693
Total Volume (ft ³)	2,944	5,888
Side Depth (ft)	8.5	8.5
Weir Loading Rate per Clarifier (gpd/ft)	3,729	3,729

1. Freeboard of 12 inches is factored in equation

Chlorine Contact Basins

Required Contact Time at Peak Flow (Final)	20 mins	Based on 30 TAC 217.281
Req. Basin Volume at Peak Flow (ft ³)	483 (Ph1)	
	928 (Ph2)	

Facility design features

A. Emergency Power Requirements

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

1. Influent Lift Station
2. Aeration Blowers
3. Final Clarifier Sludge Scrapers
4. Return Activated Sludge Pump
5. Chlorination System
6. Effluent Metering Station
7. Lighting Panels and Control Equipment

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

B. Alarm Features

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

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

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

Sewage Sludge Solids Management Plan (Phase 1)

Influent Design Flow = 0.065000 MGD

Influent BOD Concentration = 325 mg/L

Aeration Basin Average MLSS: 3,000 mg/L

Table 1 - Sludge Production

Solids Generated	100% flow	75% flow	50% flow	25% flow
Pounds Influent BOD ₅ per day	165.30	123.98	82.65	41.33
Pounds of pressed and stabilized dry sludge produced per day*	49.59	37.19	18.60	4.65
Gallons of wet sludge produced**	297.30	222.98	111.49	27.87

*Assuming 0.3 lbs of dry sludge produced per pound of BOD₅ removed.

** Assuming 2.0% solids.

Sludge will be wasted from the RAS flow stream to a stabilization tank. Sludge solids will be stabilized with a lime slurry concentration at 15%. Sludge solids will be pressed in a volute screw press.

Table 2 - Sludge Removal Schedule

Removal Schedule (days)	100% flow	75% flow	50% flow	25% flow
Days between Sludge Removal	7	10	21	85

Leachate slurry from the volute screw press will be returned to the headworks for treatment. The pressed sludge, with a consistency between 75 – 85% will be transported by registered hauler.

Sewage Sludge Solids Management Plan (Phase 2)

Influent Design Flow = 0.125000 MGD

Influent BOD Concentration = 325 mg/L

Aeration Basin Average MLSS: 3,000 mg/L

Table 1 - Sludge Production

Solids Generated	100% flow	75% flow	50% flow	25% flow
Pounds Influent BOD ₅ per day	317.89	238.41	158.94	79.47
Pounds of pressed and stabilized dry sludge produced per day*	95.37	71.52	35.76	8.94
Gallons of wet sludge produced**	571.74	428.80	214.40	53.60

*Assuming 0.3 lbs of dry sludge produced per pound of BOD₅ removed.

** Assuming 2.0% solids.

Sludge will be wasted from the RAS flow stream to a stabilization tank. Sludge solids will be stabilized with a lime slurry concentration at 15%. Sludge solids will be pressed in a volute screw press.

Table 2 - Sludge Removal Schedule

Removal Schedule (days)	100% flow	75% flow	50% flow	25% flow
Days between Sludge Removal	7	10	21	85

Leachate slurry from the volute screw press will be returned to the headworks for treatment. The pressed sludge, with a consistency between 75 – 85% will be transported by registered hauler.

Comisión de Calidad Ambiental del Estado de Texas



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

PERMISO PROPUESTO NO. WQ00

SOLICITUD. Melissa 413 LLC y Tommy Robbins, 3555 Timmons Lane, Suite 1440, Houston, Texas 77027, ha solicitado a la Comisión de Calidad Ambiental del Estado de Texas (TCEQ) para el propuesto Permiso No. WQ0016817001 (EPA I.D. No. TX147907) 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 1.5 millas al sudeste de la intersección East Melissa Road y Military Lane en el Condado de Collin, Texas 75126. La ruta de descarga estará del sitio de la planta a "pendiente de revisión de RWA" La TCEQ recibió esta solicitud el 23 de Mayo de 2025. La solicitud para el permiso estará disponible para leerla y copiarla en "pendiente de respuesta del solicitante" 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=-96.52265,33.27848&level=18>

[Include the following non-italicized sentence if the facility is located in the Coastal Management Program boundary. The Coastal Management Program boundary is the area along the Texas Coast of the Gulf of México as depicted on the map in 31 TAC §503.1 and includes part or all of the following counties: Cameron, Willacy, Kenedy, Kleberg, Nueces, San Patricio, Aransas, Refugio, Calhoun, Victoria, Jackson, Matagorda, Brazoria, Galveston, Harris, Chambers, Jefferson y Orange.] El Director Ejecutivo de la TCEQ ha revisado esta medida para ver si está de acuerdo con los objetivos y las regulaciones del Programa de Administración Costero de Texas (CMP) de acuerdo con las regulaciones del Consejo Coordinador de la Costa (CCC) y ha determinado que la acción es conforme con las metas y regulaciones pertinentes del CMP.

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

AVISO ADICIONAL. El Director Ejecutivo de la TCEQ ha determinado que la solicitud es administrativamente completa y conducirá una revisión técnica de la solicitud. Después de

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

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

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

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

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

La Comisión sólo puede conceder una solicitud de una audiencia de caso impugnado sobre

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

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

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

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

También se puede obtener información adicional del Melissa 413 LLC a la dirección indicada arriba o llamando a Anzer Husain al 347-433-4544.

Fecha de emisión: *[Date notice issued]*

Rainee Trevino

From: Cindy Dong <CDong@civitasengr.com>
Sent: Thursday, June 12, 2025 4:30 PM
To: Rainee Trevino
Cc: Keith O'Connor; Anzer Husain
Subject: RE: Application for Proposed Permit No. WQ0016817001- Notice of Deficiency Letter
Attachments: WQ0016817001 Melissa 413 LLC Updated PLS PIP.pdf

Good Afternoon Rainee,

Please see attached for the revised sheets as requested.

For the affected landowner map, that is correct. We added more service area to the property tract on the east side so landowner 3 was replaced by the tract further east.

Best,



Cindy Dong, PE, ENV SP
Project Engineer

O: 713.972.6640 2000 W Sam Houston Pkwy S Ste #1400
Houston, TX 77042
civitasengr.com

From: Rainee Trevino <Rainee.Trevino@tceq.texas.gov>
Sent: Thursday, June 12, 2025 3:27 PM
To: Cindy Dong <CDong@civitasengr.com>
Cc: Keith O'Connor <KOConnor@civitasengr.com>; Anzer Husain <anzer@octahomes.com>
Subject: RE: Application for Proposed Permit No. WQ0016817001- Notice of Deficiency Letter

Good afternoon, Cindy,

I have reviewed the response and there are a couple of items to be corrected.

The Spanish Plain Language Summary has a “phase II” listed as final phase flow. Please correct the summary to state “final phase”. The PIP summary does not include the co-applicant, Tommy Dobbins. Please update the summary to include the co-applicant.

I wanted to confirm the changes to the affected landowner map. It appears the only change was the owner information for landowner number 3, is this correct?

Regards,

Rainee Trevino

From: Rainee Trevino
Sent: Wednesday, June 11, 2025 8:03 AM
To: Cindy Dong <CDong@civitasengr.com>
Cc: Keith O'Connor <KOConnor@civitasengr.com>; Anzer Husain <anzer@octahomes.com>
Subject: RE: Application for Proposed Permit No. WQ0016817001- Notice of Deficiency Letter

Good morning,

Received,

Regards,
Rainee Trevino

From: Cindy Dong <CDong@civitasengr.com>
Sent: Tuesday, June 10, 2025 4:47 PM
To: Rainee Trevino <Rainee.Trevino@tceq.texas.gov>
Cc: Keith O'Connor <KOConnor@civitasengr.com>; Anzer Husain <anzer@octahomes.com>
Subject: RE: Application for Proposed Permit No. WQ0016817001- Notice of Deficiency Letter

Good Afternoon Rainee,

Please see attached for the NOD1 Responses and revised sheets for permit application WQ0016817001 - Melissa 413 LLC. A hard copy will be mailed in to you.

Best,



Cindy Dong, PE, ENV SP
Project Engineer

O: 713.972.6640 2000 W Sam Houston Pkwy S Ste #1400
Houston, TX 77042
civitasengr.com

From: Rainee Trevino <Rainee.Trevino@tceq.texas.gov>
Sent: Monday, June 2, 2025 1:58 PM
To: Cindy Dong <CDong@civitasengr.com>
Cc: Keith O'Connor <KOConnor@civitasengr.com>
Subject: Application for Proposed Permit No. WQ0016817001- Notice of Deficiency Letter

Good afternoon,

The attached Notice of Deficiency letter sent on June 2, 2025, requests additional information needed to declare the application administratively complete. Please send the complete response to my attention by June 16, 2025.

Thank you,

Rainee Trevino

Water Quality Division | ARP Team

Texas Commission on Environmental Quality

512-239-4324



AGUAS RESIDUALES DOMÉSTICAS

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

Melissa 413 LLC (CN606389310) y Tommy Doak Robbins (CN606392181) propone operar la Vibe WWTP (RN112218979), una planta de proceso de lodos activados convencional operada en modo de mezcla completa. La instalación estará ubicada aproximadamente a 1.5 millas al sudeste de la intersección East Melissa Road y Military Lane en Melissa, condado de Collin, Texas 75126. La solicitud es para una nueva solicitud para disponer de un flujo diario que no exceda los 65,000 galones por día en la Fase I y 125,000 galones diarios en la Fase Final de aguas residuales domésticas tratadas.

Se espera que las descargas de la instalación contengan la demanda bioquímica de oxígeno de cinco días (BOD₅) y los sólidos suspendidos totales (TSS). Las aguas residuales domésticas serán tratadas mediante una planta de proceso de lodos activados y las unidades de tratamiento incluirán una estación de bombeo del afluente, rejillas de barras, cuencas de aireación, clarificadores secundarios, digestores aeróbicos de lodos y filtros terciarios y cámara de contacto con cloro.



Texas Commission on Environmental Quality

Public Involvement Plan Form for Permit and Registration Applications

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

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

Section 1. Preliminary Screening

- ☒ New Permit or Registration Application
☐ New Activity - modification, registration, amendment, facility, etc. (see instructions)

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

Section 2. Secondary Screening

- ☒ Requires public notice,
☒ Considered to have significant public interest, **and**
☒ Located within any of the following geographical locations:

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

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

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

Section 3. Application Information

Type of Application (check all that apply):

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

Water Quality

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

Water Rights New Permit

- ☐ New Appropriation of Water
☐ New or existing reservoir

Amendment to an Existing Water Right

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

Section 4. Plain Language Summary

Provide a brief description of planned activities.

Melissa 413 LLC and Tommy Robbins proposes to operate the Vibe WWTP, a conventional activated sludge process plant operated in the complete mix mode. The facility will be located at approximately 1.5 miles southeast of the East Melissa Road and Military Lane intersection in Melissa, Collin County, Texas 75454. The application is for a new application to dispose a daily flow not to exceed 65,000 gallons per day in Phase I and 125,000 gallons per day in the Final Phase of treated domestic wastewater.

Discharges from the facility are expected to contain five-day biochemical oxygen demand (BOD5) and total suspended solids (TSS). Domestic wastewater will be treated by an activated sludge process plant and the treatment units will include an influent lift station, bar screen(s), aeration basin(s), secondary clarifier (s), aerobic sludge digester(s), tertiary filter(s) and chlorine contact chamber(s).

Section 5. Community and Demographic Information

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

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

Melissa

(City)

Collin

(County)

U.S Census Bureau

(Census Tract)

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

☒

City

☐

County

☒

Census Tract

(a) Percent of people over 25 years of age who at least graduated from high school

94.6% (as of 2023)

(b) Per capita income for population near the specified location

\$46,119 (as of 2023)

(c) Percent of minority population and percent of population by race within the specified location

17.7% Black, 0.1% American Indian/Native Alaskan, 4.7% Asian, 13.6% Hispanic/Latino (as of 2023)

(d) Percent of Linguistically Isolated Households by language within the specified location

19.5% Languages other than English spoken at home (as of 2023)

(e) Languages commonly spoken in area by percentage

Unknown - not provided on U.S. Census

(f) Community and/or Stakeholder Groups

Melissa Community and Economic Development Corporation, Melissa Industrial and Economic Development Corporation, Melissa Independent School District, Melissa Rotary Club, Melissa Area Chamber of Commerce

(g) Historic public interest or involvement

Downtown District Development, Parks and Recreation Plan

Section 6. Planned Public Outreach Activities

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

☒ Yes ☐ No

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

☐ Yes ☒ No

If Yes, please describe.

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

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

☐ Yes ☐ No

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

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

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

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

☐ Yes ☐ No

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

☐ Yes ☐ No

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

- ☐ TCEQ Regional Office ☐ TCEQ Central Office
- ☐ Public Place (specify)

Section 7. Voluntary Submittal

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

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

☐ Yes ☐ No

What types of notice will be provided?

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

Rainee Trevino

From: Cindy Dong <CDong@civitasengr.com>
Sent: Friday, June 13, 2025 11:42 AM
To: Rainee Trevino
Cc: Keith O'Connor; Anzer Husain
Subject: RE: Application for Proposed Permit No. WQ0016817001- Notice of Deficiency Letter
Attachments: WQ0016817001 - Public Notice Location.pdf

Categories: NOD Response Review

Hi Rainee,

I have confirmed with the City that the Public Library re-opened this past weekend. See attached for updated Public Notice Viewing Location sheet.

Best,



Cindy Dong, PE, ENV SP
Project Engineer

O: 713.972.6640 2000 W Sam Houston Pkwy S Ste #1400
Houston, TX 77042
civitasengr.com

From: Rainee Trevino <Rainee.Trevino@tceq.texas.gov>
Sent: Friday, June 13, 2025 11:16 AM
To: Cindy Dong <CDong@civitasengr.com>
Cc: Keith O'Connor <KOConnor@civitasengr.com>; Anzer Husain <anzer@octahomes.com>
Subject: RE: Application for Proposed Permit No. WQ0016817001- Notice of Deficiency Letter

Hi Cindy,

Upon further review of the notices, only one public viewing location can be used, and it must be currently open to the public. If the applicant wants to change the viewing location to the library once it is open, then an amended notice will need to be submitted to make that change. Please submit section 8 updated with the only one viewing location currently open to the public.

Regards,
Rainee Trevino

From: Rainee Trevino
Sent: Thursday, June 12, 2025 4:32 PM

To: Cindy Dong <CDong@civitasengr.com>
Cc: Keith O'Connor <KOConnor@civitasengr.com>; Anzer Husain <anzer@octahomes.com>
Subject: RE: Application for Proposed Permit No. WQ0016817001- Notice of Deficiency Letter

Got it, thanks Cindy!

Regards,
Rainee Trevino

From: Cindy Dong <CDong@civitasengr.com>
Sent: Thursday, June 12, 2025 4:30 PM
To: Rainee Trevino <Rainee.Trevino@tceq.texas.gov>
Cc: Keith O'Connor <KOConnor@civitasengr.com>; Anzer Husain <anzer@octahomes.com>
Subject: RE: Application for Proposed Permit No. WQ0016817001- Notice of Deficiency Letter

Good Afternoon Rainee,

Please see attached for the revised sheets as requested.

For the affected landowner map, that is correct. We added more service area to the property tract on the east side so landowner 3 was replaced by the tract further east.

Best,



Cindy Dong, PE, ENV SP
Project Engineer

O: 713.972.6640 2000 W Sam Houston Pkwy S Ste #1400
Houston, TX 77042
civitasengr.com

From: Rainee Trevino <Rainee.Trevino@tceq.texas.gov>
Sent: Thursday, June 12, 2025 3:27 PM
To: Cindy Dong <CDong@civitasengr.com>
Cc: Keith O'Connor <KOConnor@civitasengr.com>; Anzer Husain <anzer@octahomes.com>
Subject: RE: Application for Proposed Permit No. WQ0016817001- Notice of Deficiency Letter

Good afternoon, Cindy,

I have reviewed the response and there are a couple of items to be corrected.

The Spanish Plain Language Summary has a “phase II” listed as final phase flow. Please correct the summary to state “final phase”. The PIP summary does not include the co-applicant, Tommy Dobbins. Please update the summary to include the co-applicant.

Phone No.: 713-972-6640

E-mail Address: cdong@civitasengr.com

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

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

☒ E-mail Address

☐ Fax

☒ Regular Mail

C. Contact permit to be listed in the Notices

Prefix: Mr.

Last Name, First Name: Husain, Anzer

Title: Director

Credential: Click to enter text.

Organization Name: Melissa 413 LLC

Mailing Address: 3555 Timmons Ln, Ste 1440 City, State, Zip Code: Houston, TX 77027

Phone No.: 347-433-4544

E-mail Address: anzer@octahomes.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: Melissa Public Library

Location within the building: Main Desk

Physical Address of Building: 3411 Barker Avenue, Melissa, TX 75454

City: Melissa

County: Collin

Contact (Last Name, First Name): Hope Baskin

Phone No.: 972-838-2520 Ext.: Click to enter text.

E. Bilingual Notice Requirements

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

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

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

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

☒ Yes

☐ No

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

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

☐ Yes

☒ No

Rainee Trevino

From: Cindy Dong <CDong@civitasengr.com>
Sent: Tuesday, June 17, 2025 8:54 AM
To: Rainee Trevino
Subject: RE: Application for Proposed Permit No. WQ0016817001- Notice of Deficiency Letter
Attachments: T6 - Subdivision Site Plan.pdf

Good Morning Rainee,

I realized I forgot to include an updated T6 – Subdivision Site Plan in the NOD responses. Please see attached for the updated T6 attachment for WQ016817001.

Best,



Cindy Dong, PE, ENV SP
Project Engineer

O: 713.972.6640 2000 W Sam Houston Pkwy S Ste #1400
Houston, TX 77042
civitasengr.com

From: Rainee Trevino <Rainee.Trevino@tceq.texas.gov>
Sent: Friday, June 13, 2025 11:46 AM
To: Cindy Dong <CDong@civitasengr.com>
Cc: Keith O'Connor <KOConnor@civitasengr.com>; Anzer Husain <anzer@octahomes.com>
Subject: RE: Application for Proposed Permit No. WQ0016817001- Notice of Deficiency Letter

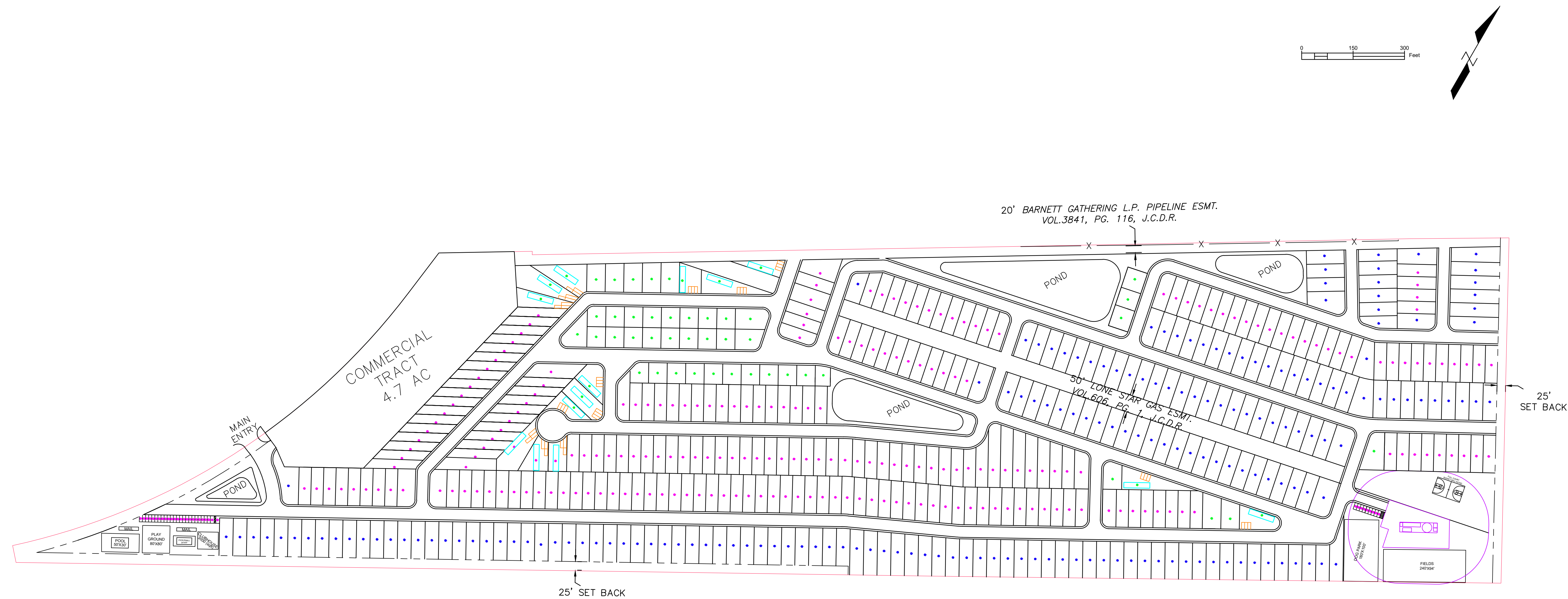
Perfect, thanks Cindy.

Regards,
Rainee Trevino

From: Cindy Dong <CDong@civitasengr.com>
Sent: Friday, June 13, 2025 11:42 AM
To: Rainee Trevino <Rainee.Trevino@tceq.texas.gov>
Cc: Keith O'Connor <KOConnor@civitasengr.com>; Anzer Husain <anzer@octahomes.com>
Subject: RE: Application for Proposed Permit No. WQ0016817001- Notice of Deficiency Letter

Hi Rainee,

I have confirmed with the City that the Public Library re-opened this past weekend. See attached for updated Public Notice Viewing Location sheet.



- ASSUMPTIONS
- 180 SINGLE WIDE LOT (110X40 MIN)
 - 53 DOUBLE WIDE LOT (60X54 MIN)
 - 231 SINGLE WIDE LOT (110X36 MIN)
 - 464 TOTAL LOT COUNT
 - 34 OFF STREET PARKING (19'X9' MIN)
 - ROAD SIZE 32' (MIN) WITH 5' SETBACK FOR UTILITIES
 - 25' SETBACK AROUND EX. STREETS
 - 50' SETBACK FROM FM ROADS
 - DETENTION 10' DEEP AT LOW POINT IN GRADING

OCTA HOMES - VIBE AT MANSFIELD 4225 CR 613, ALVERADO, TX 76009 JOHNSON COUNTY, TEXAS		
PRELIMINARY SITE PLAN		
 TETRA LAND SERVICES <small>Engineers • Surveyors • Planners • Appraisers</small> www.TLSITX.com <small>Texas Registered Engineering Firm F-22195</small>	DATE	5/29/25
	SCALE	AS NOTED
	SHEET NO.	SP-12
PROJECT #	FILE NO:	