



# 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

**Plain Language Summary (English)**  
**Texas Pollutant Discharge Elimination System (TPDES)**  
**Permit Application**

Denton Cross Timbers Partners LLC is applying for a permit to construct a wastewater treatment facility to be located on a parcel approximately 4,000 feet South of the Southeast corner of FM 1171/Cross Timbers Blvd and IH35W in Northlake, Texas. This application is a new application to discharge up to 20,000 gallons per day of treated domestic wastewater.

Discharges from the facility are expected to contain five-day carbonaceous biochemical oxygen demand (CBOD<sub>5</sub>), total suspended solids (TSS), ammonia nitrogen (NH<sub>3</sub>-N), and *Escherichia coli*. Additional potential pollutants are included in the Domestic Technical Report 1.0, Section 7. Pollutant Analysis of Treated Effluent in the permit application package. All phases of the domestic wastewater treatment plant will consist of a complete mix activated sludge treatment plant. Treatment units consist of a bar screen, aeration tank, clarifier, sludge holding tank, and chlorine contact chamber.

## **Resumen En Language Sencillo (Spanish)**

### **Sistema de Eliminacion de Descargas Contaminantes de Texas (TPDES) Solicitud de Permiso**

Denton Cross Timbers Partner, LLC esta solicitando un permiso para construir una planta de tratamiento de aguas residuales, en complejo comercial/industrial propuesto que se ubicara aproximadamente a 6,000' al suroeste de la interseccion de Cleveland Gibbs Rd and FM 1171, cerca de la ciudad de Northlake in Denton County, Texas 76262. Esta aplicacion es una nueva aplicacion para descargar hasta 20,000 galones por dia de agua domestica tratada.

Se espera que las descargas de la instalacion contengan una demanda bioquimica de oxigeno carbonoso de cinco dias (CBOD<sub>5</sub>), solidos suspendidos totales (TSS), nitrogeno amoniacal (NH<sub>3</sub>-N), y Escherichia coli. Se incluyen contaminantes potenciales adicionales en el Informe Tecnico Nacional 1.0, Section 7. Analisis de contaminantes del efluente tratado en el paquete de solicitud de permiso. Todas las fases de la planta de tratamiento de aguas residuales domesticas consistiran en una planta completa de tratamiento de lodos activados de mezcla. Las unidades de tratamiento constan de una rejilla de barras, un tanque de aireacion, un clarificador, un tanque de retencion de lodos y una camara de contacto con cloro.

# TEXAS COMMISSION ON ENVIRONMENTAL QUALITY



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

**PROPOSED PERMIT NO. WQ0016820001**

**APPLICATION.** Denton Cross Timbers Partners, LLC, 2100 McKinney Avenue, Suite 800, Dallas, Texas 75201, has applied to the Texas Commission on Environmental Quality (TCEQ) for proposed Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0016820001 (EPA I.D. No. TX0147923) to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 20,000 gallons per day. The domestic wastewater treatment facility will be located approximately 6000 feet southwest of the intersection of Cleveland Gibbs Road and Farm-to-Market Road 1171, near the city of Northlake, in Denton County, Texas 76262. The discharge route will be from the plant site to an unnamed tributary; thence to Denton Creek; thence to Grapevine Lake. TCEQ received this application on June 2, 2025. The permit application will be available for viewing and copying at Northlake Town Hall, front desk, 1500 Commons Circle, Suite 300, Northlake, in Denton 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=-97.24673,33.053397&level=18>

**ALTERNATIVE LANGUAGE NOTICE.** Alternative language notice in Spanish is available at: <https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications>.

El aviso de idioma alternativo en español está disponible en

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

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

**PUBLIC COMMENT / PUBLIC MEETING.** You may submit public comments or request a public meeting on this application. The purpose of a public meeting is to provide the opportunity to submit comments or to ask questions about the application. TCEQ will hold a public meeting if the Executive Director determines that there is a significant degree of public

interest in the application or if requested by a local legislator. A public meeting is not a contested case hearing.

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

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

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

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

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

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

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

Further information may also be obtained from Denton Cross Timbers Partners, LLC at the address stated above or by calling Mr. Raymond Kieffer, Trammell Crow Company, at 214-863-4280.

Issuance Date: July 24, 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 RENOVACION

**PERMISO NO. WQ0016820001**

**SOLICITUD.** Denton Cross Timbers Partners, LLC, 2100 McKinney Avenue, Suite 800, Dallas, Texas 75201, ha solicitado a la Comisión de Calidad Ambiental del Estado de Texas (TCEQ) para renovar el Permiso No. WQ0016820001 (EPA I.D. No. TX0147923) 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 20,000 galones por día. La planta está ubicada 6,000 al suroeste de la intersección de Cleveland Gibbs Road y Farm-to-Market Road 1171, cerca de la ciudad de Northlake, en el Condado de Denton, Texas 76262. La ruta de descarga será desde el sitio de la planta hasta un afluente sin nombre; de allí a Denton Creek; de allí a Grapevine Lake. La TCEQ recibió esta solicitud el 2 de junio de 2025. La solicitud para el permiso estará disponible para leerla y copiarla en Northlake Town Hall, Front desk, 1500 Commons Circle, Suite 300, Northlake, in Denton County, Texas, antes de la fecha de publicación de este aviso en el periódico. La solicitud (cualquier actualización y aviso inclusive) está disponible electrónicamente en la siguiente página web: <https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications>.

Este enlace a un mapa electrónico de la ubicación general del sitio o de la instalación es proporcionado como una cortesía y no es parte de la solicitud o del aviso. Para la ubicación exacta, consulte la solicitud.

<https://gisweb.tceq.texas.gov/LocationMapper/?marker=-97.24673,33.053397&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.** Si ciertos criterios se cumplen, la TCEQ puede actuar sobre una solicitud para renovar un permiso sin proveer una oportunidad de una audiencia administrativa de lo contencioso.

**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](http://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 Denton Cross Timbers Partners, LLC a la dirección indicada arriba o llamando a Mr. Raymond Kieffer, Trammell Crow Company, al 214-863-4280.

Fecha de emisión: 24 de julio de 2025



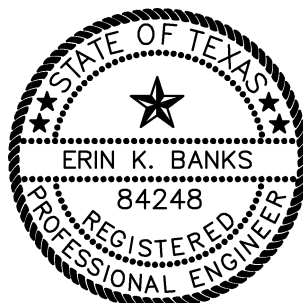
**MUNICIPAL WASTEWATER  
TPDES PERMIT APPLICATION  
CROSS TIMBERS DC**

**DENTON COUNTY, TEXAS**

**SUBMITTED TO:  
TEXAS COMMISSION ON  
ENVIRONMENTAL QUALITY  
WATER QUALITY DIVISION**

**May 2025**

**PREPARED BY:  
WWD Engineering  
*Firm F-12009*  
9217 W. Hwy 290, Suite 110  
Austin, Texas 78736  
(512) 288-2111**



*Erin K Banks*

5/31/25

**TPDES Municipal Wastewater Permit Application  
Cross Timbers, Denton County, Texas**

**TABLE OF CONTENTS**

- I      Application Administrative Report
  - Submission Checklist
  - Domestic Administrative Report 1.0
  - Domestic Administrative Report 1.1
  - SPIF
  
- II     Application Technical Report
  - Domestic Technical Report Worksheet 1.0
  - Domestic Technical Report Worksheet 1.1
  - Domestic Technical Report Worksheet 2.0

**LIST OF ATTACHMENTS**

<u>Attachment No.</u>	<u>Title</u>	<u>Permit Reference</u>
1	Permit Justification	
2	Core Data Form	Admin Report 1.0, 3C
3	USGS Map	Admin Report 1.0, 13
4	Site Plan	Admin Report 1.0, 13
5	Adjacent Landowner Map	Admin Report 1.1, 1
6	Adjacent Landowner List and Labels	Admin Report 1.1, 1
7	Photographs	Admin Report 1.1, 2
8	Photograph Location Map	Admin Report 1.1, 2
9	Buffer Zone Map	Admin Report 1.1, 3
10	Treatment Process Description	Tech Report 1.0, 2A
11	Treatment Unit Sizing	Tech Report 1.0, 2B
12	Treatment Process Flow Diagram	Tech Report 1.0, 2C
13	Site Drawing	Tech Report 1.0, 3
14	Justification for Proposed Facility	Tech Report 1.1, 1B2
15	WWTP within 3 miles	Tech Report 1.1, 1B3
16	Letters to WWTP within 3 miles	Tech Report 1.1, 1B3
17	Design Calculations	Tech Report 1.1, 4
18	Wind Rose	Tech Report 1.1, 5
19	Sewage Sludge Solids Management Plan	Tech Report 1.1, 7
20	PIP Form	Admin Report 1.0, 8F

SPIF Attachment

SPIF1	USGS Map (8.5x11 or 11x17)
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# TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

## DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the application.

APPLICANT NAME: Denton Cross Timbers Partners, LLC

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

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

	Y	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"/>
Public Involvement Plan Form	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Flow Diagram	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Technical Report 1.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Site Drawing	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Technical Report 1.1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Original Photographs	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Worksheet 2.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Design Calculations	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Worksheet 2.1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Solids Management Plan	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Worksheet 3.0	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Water Balance	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Worksheet 3.1	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
Worksheet 3.2	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
Worksheet 3.3	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
Worksheet 4.0	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
Worksheet 5.0	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
Worksheet 6.0	<input 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 checked="" type="checkbox"/>	\$315.00 <input type="checkbox"/>
≥0.05 but <0.10 MGD	\$550.00 <input type="checkbox"/>	\$515.00 <input type="checkbox"/>
≥0.10 but <0.25 MGD	\$850.00 <input type="checkbox"/>	\$815.00 <input type="checkbox"/>
≥0.25 but <0.50 MGD	\$1,250.00 <input type="checkbox"/>	\$1,215.00 <input type="checkbox"/>
≥0.50 but <1.0 MGD	\$1,650.00 <input type="checkbox"/>	\$1,615.00 <input type="checkbox"/>
≥1.0 MGD	\$2,050.00 <input type="checkbox"/>	\$2,015.00 <input type="checkbox"/>

Minor Amendment (for any flow) \$150.00 ☐

**Payment Information:**

Mailed      Check/Money Order Number: Click to enter text.  
Check/Money Order Amount: \$350.00  
Name Printed on Check: WWD Engineering

EPAY      Voucher Number: Click to enter text.

Copy of Payment Voucher enclosed?      Yes ☐

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

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

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

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

- ☐ Active      ☒ Inactive

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

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

d. Check the box next to the appropriate application type

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

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

f. For existing permits:

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

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

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

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

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

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

Denton Cross Timbers Partners 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: N/A

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

Prefix: Mr

Last Name, First Name: Marks, Jake

Title: Principal

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

B. Co-applcant 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-applcant applying for this permit?

[Click to enter text.](#)

*(The legal name must be spelled exactly as filed with the TX SOS, with the County, or in the*

legal documents forming the entity.)

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

CN: Click to enter text.

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

Prefix: Click to enter text.

Last Name, First Name: Click to enter text.

Title: Click to enter text.

Credential: Click to enter text.

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

### C. Core Data Form

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

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

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

A. Prefix: Ms

Last Name, First Name: Banks, Erin

Title: President

Credential: PE

Organization Name: WWD Engineering

Mailing Address: 9217 Hwy 290W; Suite 110 City, State, Zip Code: Austin, TX 78736

Phone No.: 512-801-9049

E-mail Address: erin.banks@wwdengineering.net

Check one or both: ☒ Administrative Contact ☒ Technical Contact

B. Prefix: Click to enter text.

Last Name, First Name: Click to enter text.

Title: Click to enter text.

Credential: Click to enter text.

Organization Name: Click to enter text.

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

Phone No.: Click to enter text.

E-mail Address: Click to enter text.

Check one or both: ☐ Administrative Contact ☐ Technical Contact

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

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

A. Prefix: Mr

Last Name, First Name: Kieffer, Raymond

Title: Vice President

Credential: PE

Organization Name: Trammell Crow Co.

Mailing Address: 2100 McKinney Ave; Ste 800 City, State, Zip Code: Dallas, TX 75201

Phone No.: 469-203-2614 E-mail Address: rkieffer@trammellcrow.com

B. Prefix: Mr

Last Name, First Name: Calloway, Russell

Title: Development Manager

Credential: PE

Organization Name: Trammell Crow Company

Mailing Address: 2100 McKinney Ave; Ste 800

City, State, Zip Code: Dallas, TX 75201

Phone No.: 404-277-8356

E-mail Address: rcalloway@trammellcrow.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: Calloway, Russell

Title: CEO

Credential: PE

Organization Name: Trammell Crow Company

Mailing Address: 2100 McKinney Ave; Ste 800

City, State, Zip Code: Dallas, TX 75201

Phone No.: 404-277-8356

E-mail Address: rcalloway@trammellcrow.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: Calloway, Russell

Title: Development Manager

Credential: PE

Organization Name: Trammell Crow Company

Mailing Address: 2100 McKinney Ave; Ste 800

City, State, Zip Code: Dallas, TX 75201

Phone No.: 404-277-8356

E-mail Address: rcalloway@trammellcrow.com

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

### A. Individual Publishing the Notices

Prefix: Ms

Last Name, First Name: Banks, Erin

Title: President

Credential: PE

Organization Name: WWD Engineering

Mailing Address: 9217 Hwy 290W; Suite 110

City, State, Zip Code: Ausitn, TX 78736

Phone No.: 512-801-9049

E-mail Address: erin.banks@wwdengineering.net

**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: Kieffer, Raymond

Title: Vice President

Credential: PE

Organization Name: Trammell Crow Co.

Mailing Address: 2100 McKinney Ave; Ste 800

City, State, Zip Code: Dallas, TX 75201

Phone No.: 214-863-4280

E-mail Address: rkieffer@trammellcrow.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: Northlake Town Hall

Location within the building: Front Desk

Physical Address of Building: 1500 Commerce Circle, Suite 300

City: Northlake

County: Denton

Contact (Last Name, First Name): Reddin, Nathan

Phone No.: 940-648-3290 Ext.: Click to enter text.

**E. Bilingual Notice Requirements**

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

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

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

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

☒ Yes

☐ No

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

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

☐ Yes

☒ No

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

☒ Yes ☐ No

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

☐ Yes ☒ No

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

**F. Plain Language Summary Template**

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

**Attachment:** A

**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:** 20

**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):

Denton Cross Timbers

**C.** Owner of treatment facility: Denton Cross Timbers Partners, 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: Marks, Jake

Title: Authorized Signatory

Credential: Click to enter text.

Organization Name: Denton Cross Timbers Partners, LLC

Mailing Address: 2100 McKinney Ave; Ste 800

City, State, Zip Code: Dallas TX 75201

Phone No.: 214-562-5471

E-mail Address: jmarks@trammellcrow.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: Mr

Last Name, First Name: Marks, Jake

Title: Authorized Signatory

Credential: Click to enter text.

Organization Name: Trammell Crow

Mailing Address: 2100 McKinney Ave; Ste 800

City, State, Zip Code: Dallas, TX 75201

Phone No.: 214-562-5471

E-mail Address: jmarks@trammellcrow.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.

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 TPDES

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 TPDES - Into dry/intermittent creek/swale, thence into Denton Creek, thence into Catherine Creek

City nearest the outfall(s): Denton

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

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

☐ Yes ☒ No

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

☐ Authorization granted ☐ Authorization pending

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

**Attachment:** Click to enter text.

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

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

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

☐ Yes ☐ No

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

N/A

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

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

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

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: See table of contents

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

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

Permit Number: **Denton Cross Timbers Partners, LLC**

Applicant: Click to enter text.

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): Jake Marks

Signatory title: Authorized Signatory

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

*(Use blue ink)*

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

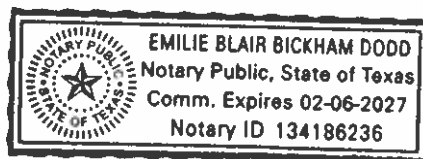
2-14-25

Subscribed and Sworn to before me by the said Jake Marks

on this 14<sup>th</sup> day of February, 20 25.

My commission expires on the 6<sup>th</sup> day of February, 20 27.

Emilie Blair Bickham Dodd  
Notary Public



[SEAL]

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 in which format the landowners list is submitted:
- ☐ USB Drive
  - ☒ Four sets of labels
- D. Provide the source of the landowners' names and mailing addresses: Denton County
- 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: SPIF 1**

# WATER QUALITY PERMIT

## PAYMENT SUBMITTAL FORM

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

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

**Mail this form and the check or money order to:**

***BY REGULAR U.S. MAIL***

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

***BY OVERNIGHT/EXPRESS MAIL***

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

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

1. Check or Money Order Number: [Click to enter text.](#)
2. Check or Money Order Amount: \$350.00
3. Date of Check or Money Order: [Click to enter text.](#)
4. Name on Check or Money Order: WWD Engineering
5. APPLICATION INFORMATION

Name of Project or Site: Denton Cross Timbers

Physical Address of Project or Site: [Click to enter text.](#)

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

**Staple Check or Money Order in This Space**

# DOMESTIC WASTEWATER PERMIT APPLICATION

## CHECKLIST OF COMMON DEFICIENCIES

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

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

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

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

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

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

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

### Things to Know:

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

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

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

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

Plain Language Summary

☒ Yes





# TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

## DOMESTIC WASTEWATER PERMIT APPLICATION TECHNICAL REPORT 1.0

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

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

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

#### A. Existing/Interim I 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.](#)

#### 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): 0.02

2-Hr Peak Flow (MGD): 0.08

Estimated construction start date: 3/1/2026

Estimated waste disposal start date: 5/1/2026

#### 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.**

Attachment 10

## B. Treatment Units

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

**Table 1.0(1) - Treatment Units**

Treatment Unit Type	Number of Units	Dimensions (L x W x D)
Attachment 11		

## C. Process Flow Diagram

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

**Attachment:** Attachment 12

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

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

- Latitude: 33.049358
- Longitude: -97.240907

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

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

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

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

**Attachment:** Attachment 13

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

Cross Timbers Industrial Park

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
		Choose an item.	
		Choose an item.	
		Choose an item.	
		Choose an item.	

Section 4. Unbuilt Phases (Instructions Page 44)

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

☐ Yes    ☒ No

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

☐ Yes    ☐ No

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

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.

Ownership

### C. Other actions required by the current permit

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

☐ Yes    ☒ No

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

Click to enter text.

### D. Grit and grease treatment

#### 1. Acceptance of grit and grease waste

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

☐ Yes    ☒ No

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

#### 2. Grit and grease processing

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

Click to enter text.

#### 3. Grit disposal

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

☐ Yes    ☒ No

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

Describe the method of grit disposal.

Click to enter text.

#### 4. *Grease and decanted liquid disposal*

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

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

Click to enter text.

### E. Stormwater management

#### 1. *Applicability*

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

☐ Yes ☒ No

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

☐ Yes ☒ No

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

#### 2. *MSGP coverage*

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

☐ Yes ☒ No

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

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

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

☐ Yes ☒ No

#### 3. *Conditional exclusion*

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

☐ Yes ☐ No

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

Click to enter text.

**4. Existing coverage in individual permit**

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

☐ Yes ☒ No

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

Click to enter text.

**5. Zero stormwater discharge**

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

☐ Yes ☒ No

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

Click to enter text.

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

**6. Request for coverage in individual permit**

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

☐ Yes ☒ No

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

intend to divert stormwater to the treatment plant headworks and indirectly discharge it to water in the state.

[Click to enter text.](#)

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

#### F. Discharges to the Lake Houston Watershed

Does the facility discharge in the Lake Houston watershed?

☐ Yes ☒ No

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

[Click to enter text.](#)

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

##### 1. Acceptance of sludge from other WWTPs

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

☐ Yes ☒ No

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

In addition, provide the date the plant started or is anticipated to start accepting sludge, an estimate of monthly sludge acceptance (gallons or millions of gallons), an estimate of the BOD<sub>5</sub> concentration of the sludge, and the design BOD<sub>5</sub> concentration of the influent from the collection system. Also note if this information has or has not changed since the last permit action.

[Click to enter text.](#)

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

##### 2. Acceptance of septic waste

Is the facility accepting or will it accept septic waste?

☐ Yes ☒ No

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

☐ Yes ☒ No

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

☐ Yes    ☒ No

If **yes to any of the above**, provide the date the plant started or is anticipated to start accepting septic waste, an estimate of monthly septic waste acceptance (gallons or millions of gallons), an estimate of the BOD<sub>5</sub> concentration of the septic waste, and the design BOD<sub>5</sub> concentration of the influent from the collection system. Also note if this information has or has not changed since the last permit action.

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 <sub>5</sub> , 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, $\mu$ mohs/cm, †					
Oil & Grease, mg/l					
Alkalinity (CaCO <sub>3</sub> )*, mg/l					

\*TPDES permits only

†TLAP permits only

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

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

## Section 8. Facility Operator (Instructions Page 49)

Facility Operator Name: TBD

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

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

## Section 9. Sludge and Biosolids Management and Disposal (Instructions Page 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 ( $\geq 2$  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.
Choose an item.	Choose an item.	Choose an item.		Choose an item.	Choose an item.
Choose an item.	Choose an item.	Choose an item.		Choose an item.	Choose an item.

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

#### D. Disposal site

Disposal site name: [Catherine Branch WWTP](#)

TCEQ permit or registration number: [WQ0015980001](#)

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

#### E. Transportation method

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

Name of the hauler: [TBD](#)

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

Sludge is transported as a:

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

## Section 10. Permit Authorization for Sewage Sludge Disposal (Instructions Page 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 checked="" type="checkbox"/> No |
| Temporary storage in sludge lagoons        | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

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

☐ Yes ☐ No

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

Does this facility include sewage sludge lagoons?

☐ Yes ☒ No

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

### A. Location information

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

- Original General Highway (County) Map:  
**Attachment:** [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  $1 \times 10^{-7}$  cm/sec?

☐ Yes ☐ No

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

[Click to enter text.](#)

#### D. Site development plan

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

[Click to enter text.](#)

Attach the following documents to the application.

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

#### E. Groundwater monitoring

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

☐ Yes ☐ No

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

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

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

### A. Additional authorizations

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

☐ Yes ☒ No

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

Click to enter text.

### B. Permittee enforcement status

Is the permittee currently under enforcement for this facility?

☐ Yes ☒ No

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

☐ Yes ☐ No

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

Click to enter text.

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

### A. RCRA hazardous wastes

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

☐ Yes ☒ No

**B. Remediation activity wastewater**

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

☐ Yes ☒ No

**C. Details about wastes received**

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

**Attachment:** [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: Erin K Banks

Title: President, WWD Engineering

Signature: Erin K Banks\_\_\_\_\_

Date: 4/30/25\_\_\_\_\_

# 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.

See Attachment 1

#### B. Regionalization of facilities

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

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

##### 1. *Municipally incorporated areas*

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

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

☐ Yes ☒ No ☐ Not Applicable

If yes, within the city limits of: [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

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

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

**Attachment:** [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:** 15

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

**Attachment:** 16

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

**Attachment:** N/A

## Section 2. Proposed Organic Loading (Instructions Page 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 BOD<sub>5</sub> Concentration in mg/l: [Click to enter text.](#)

Average Influent Loading (lbs/day = total average flow X average BOD<sub>5</sub> conc. X 8.34): [Click to enter text.](#)

Provide the source of the average organic strength or BOD<sub>5</sub> 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 <sub>5</sub> Concentration (mg/l)
Municipality		
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	0.02	350
Motel		
Restaurant		
Hospital		
Nursing home		
Other		
TOTAL FLOW from all sources		
AVERAGE BOD <sub>5</sub> from all sources		

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

### A. Existing/Interim I 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.](#)

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

Ammonia Nitrogen, mg/l: 3

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

Dissolved Oxygen, mg/l: 4

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

## D. Disinfection Method

Identify the proposed method of disinfection.

☒ Chlorine: 1.0 mg/l after 2.0 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: 17

## 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.

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: 18

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

#### A. Beneficial use authorization

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

☐ Yes ☒ No

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

#### B. Sludge processing authorization

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

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

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

### Section 7. Sewage Sludge Solids Management Plan (Instructions Page 60)

Attach a solids management plan to the application.

**Attachment:** 19

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: [Click to enter text.](#)

#### A. Receiving water type

Identify the appropriate description of the receiving waters.

☒ Stream

☐ Freshwater Swamp or Marsh

☐ Lake or Pond

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

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

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

☐ Man-made Channel or Ditch

☐ Open Bay

☐ Tidal Stream, Bayou, or Marsh

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

#### B. Flow characteristics

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

☒ Intermittent - dry for at least one week during most years

☐ Intermittent with Perennial Pools - enduring pools with sufficient habitat to maintain significant aquatic life uses

☐ Perennial - normally flowing

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

☐ USGS flow records

☐ Historical observation by adjacent landowners

☒ Personal observation

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

### C. Downstream perennial confluences

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

Denton Creek, Catherine Creek Segment 0826A

### 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.

Enter perennial streams

### E. Normal dry weather characteristics

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

Dry

Date and time of observation: 9/3/2024

Was the water body influenced by stormwater runoff during observations?

☐ Yes ☒ No

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

### A. Upstream influences

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

☐ Oil field activities

☐ Urban runoff

☐ Upstream discharges

☒ Agricultural runoff

☐ Septic tanks

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

## B. Waterbody uses

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

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

## C. Waterbody aesthetics

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

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

***ATTACHMENT 1***  
***PERMIT JUSTIFICATION***

The owner is intending to develop this site as a commercial/industrial facility. There is currently no wastewater service available to the site. The owner requested wastewater service from several area wastewater treatment plants (WWTPs), however, they either declined to provide service to the site or did not respond to the request. The site is not located within any municipality or sewer provider's CCN. The owner has elected to construct a privately owned wastewater treatment plant (WWTP) to process 20,000 gallons per day and discharge into an unnamed intermittent stream (swale) on site.

***ATTACHMENT 2***  
***CORE DATA FORM***



# TCEQ Core Data Form

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

## SECTION I: General Information

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

## SECTION II: Customer Information

<b>4. General Customer Information</b>		<b>5. Effective Date for Customer Information Updates</b> (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>					
<b>6. Customer Legal Name</b> (If an individual, print last name first: eg: Doe, John)				<i>If new Customer, enter previous Customer below:</i>	
Denton Cross Timbers Partners, LLC					
<b>7. TX SOS/CPA Filing Number</b>		<b>8. TX State Tax ID</b> (11 digits)		<b>9. Federal Tax ID</b> (9 digits)	<b>10. DUNS Number</b> (if applicable)
20240102543				99-0738910	
<b>11. Type of Customer:</b>		<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:	
<b>12. Number of Employees</b>				<b>13. Independently Owned and Operated?</b>	
<input checked="" type="checkbox"/> 0-20 <input type="checkbox"/> 21-100 <input type="checkbox"/> 101-250 <input type="checkbox"/> 251-500 <input type="checkbox"/> 501 and higher				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>14. Customer Role</b> (Proposed or Actual) – as it relates to the Regulated Entity listed on this form. Please check one of the following					
<input checked="" type="checkbox"/> Owner <input type="checkbox"/> Operator <input type="checkbox"/> Owner & Operator <input type="checkbox"/> Other:					
<input type="checkbox"/> Occupational Licensee <input type="checkbox"/> Responsible Party <input type="checkbox"/> VCP/BSA Applicant					
<b>15. Mailing Address:</b>					
2100 McKinney Avenue, Suite 800					
City	Dallas	State	TX	ZIP	75201
				ZIP + 4	
<b>16. Country Mailing Information</b> (if outside USA)				<b>17. E-Mail Address</b> (if applicable)	
				DFreisner@trammellcrow.com	
<b>18. Telephone Number</b>		<b>19. Extension or Code</b>		<b>20. Fax Number</b> (if applicable)	

### SECTION III: Regulated Entity Information

<b>21. General Regulated Entity Information</b> <i>(If 'New Regulated Entity' is selected, a new permit application is also required.)</i>							
<input checked="" type="checkbox"/> New Regulated Entity <input type="checkbox"/> Update to Regulated Entity Name <input type="checkbox"/> Update to Regulated Entity Information							
<i>The Regulated Entity Name submitted may be updated, in order to meet TCEQ Core Data Standards (removal of organizational endings such as Inc, LP, or LLC).</i>							
<b>22. Regulated Entity Name</b> <i>(Enter name of the site where the regulated action is taking place.)</i>							
Denton Cross Timbers Partners, LLC							
<b>23. Street Address of the Regulated Entity:</b>  <i>(No PO Boxes)</i>	2100 McKinney Avenue, Suite 800						
	City	Dallas	State	TX	ZIP	75214	ZIP + 4
<b>24. County</b>							

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

<b>25. Description to Physical Location:</b>	Southeast corner of FM 1171 & IH35W						
<b>26. Nearest City</b>					<b>State</b>	<b>Nearest ZIP Code</b>	
Northlake					TX	76262	
<i>Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).</i>							
<b>27. Latitude (N) In Decimal:</b>		33.053397			<b>28. Longitude (W) In Decimal:</b>		-97.246732
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds		
<b>29. Primary SIC Code</b> (4 digits)	<b>30. Secondary SIC Code</b> (4 digits)		<b>31. Primary NAICS Code</b> (5 or 6 digits)		<b>32. Secondary NAICS Code</b> (5 or 6 digits)		
4225			493110				
<b>33. What is the Primary Business of this entity?</b> <i>(Do not repeat the SIC or NAICS description.)</i>							
Warehousing & Distribution							
<b>34. Mailing Address:</b>	2100 McKinney Avenue, Suite 800						
	City	Dallas	State	TX	ZIP	75201	ZIP + 4
<b>35. E-Mail Address:</b>	DFreisner@trammellcrow.com						
<b>36. Telephone Number</b>	<b>37. Extension or Code</b>		<b>38. Fax Number</b> <i>(if applicable)</i>				
( 903 ) 268-1010			( ) -				

**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:
	TPDES			

## SECTION IV: Preparer Information

<b>40. Name:</b>	David Freisner			<b>41. Title:</b>	Vice President
<b>42. Telephone Number</b>	<b>43. Ext./Code</b>	<b>44. Fax Number</b>	<b>45. E-Mail Address</b>		
( 903 ) 268-1010		(   ) -	DFreisner@trammellcrow.com		

## SECTION V: Authorized Signature

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

<b>Company:</b>	Denton Cross Timbers Partners, LLC		<b>Job Title:</b>	Authorized Signatory	
<b>Name (In Print):</b>	Jake Marks			<b>Phone:</b>	( 214 ) 562- 5471
<b>Signature:</b>				<b>Date:</b>	

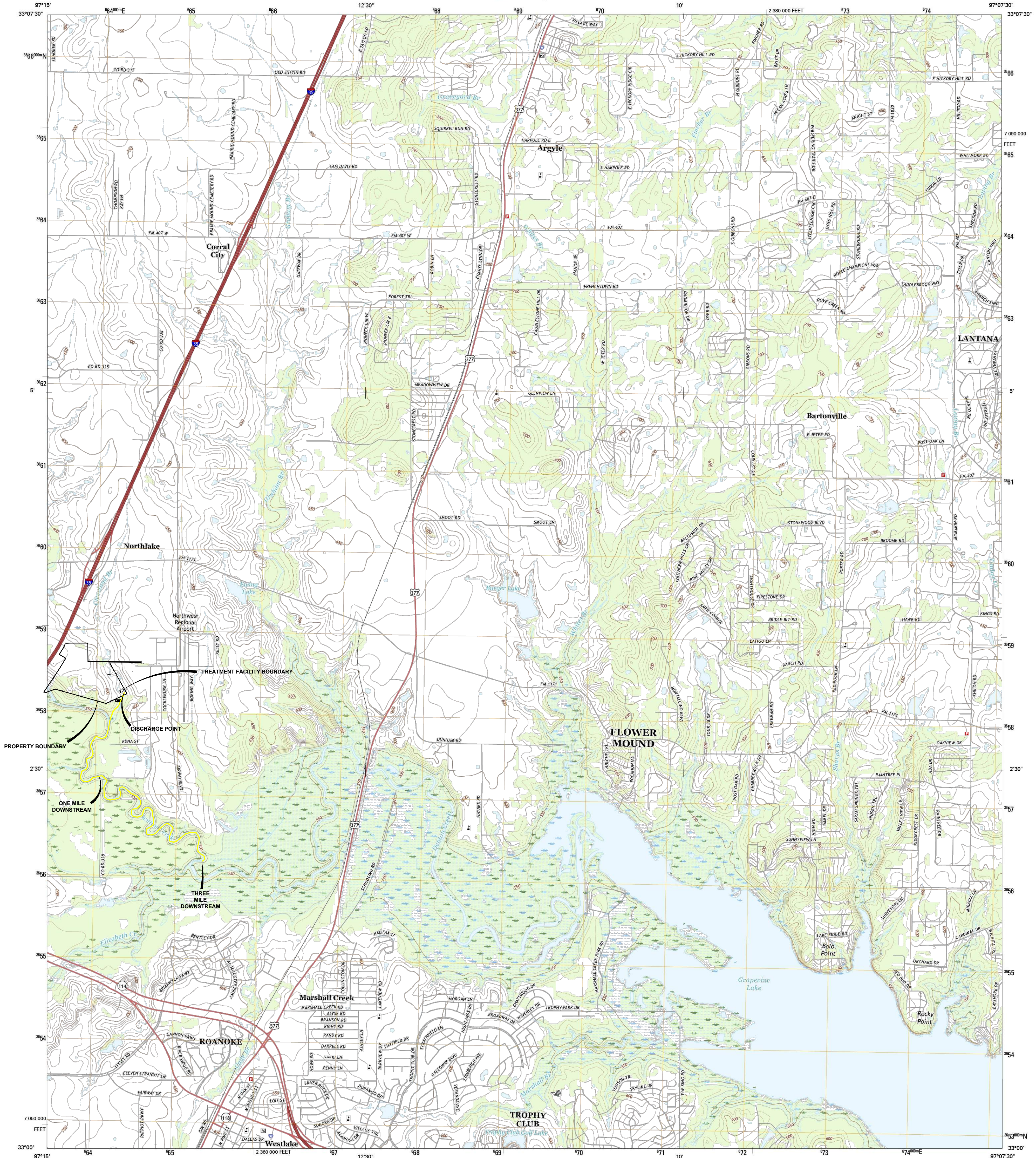
***ATTACHMENT 3***  
***USGS MAP***



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



ARGYLE QUADRANGLE  
TEXAS-DENTON CO.  
7.5-MINUTE SERIES



Produced by the United States Geological Survey

North American Datum of 1983 (NAD83)  
World Geodetic System of 1984 (WGS84). Projection and  
1000-foot grid: Universal Transverse Mercator, Zone 14S  
10 000-foot ticks: Texas Coordinate System of 1983 (north  
central zone)

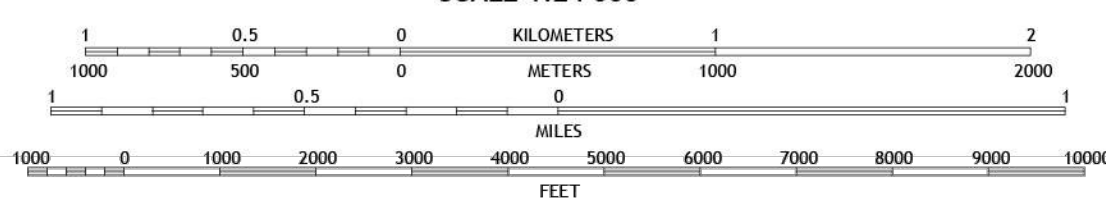
This map is not a legal document. Boundaries may be  
generalized for this map scale. Private lands within government  
reservations may not be shown. Obtain permission before  
entering private lands.

Imagery.....NAP, July 2014  
Roads.....U.S. Census Bureau, 2014 - 2015  
Names.....GNIS, 2015  
Hydrography.....National Hydrography Dataset, 2014  
Contours.....National Elevation Dataset, 2005  
Boundaries.....Multiple sources; see metadata file 1972 - 2015  
Wetlands.....FWS National Wetlands Inventory 1977 - 2014

UTM GRID AND 2016 MAGNETIC NORTH  
DECLINATION AT CENTER OF SHEET

U.S. National Grid  
100,000-m Square ID  
798  
Grid Zone Designation  
14S

SCALE 1:24 000



CONTOUR INTERVAL 10 FEET  
NORTH AMERICAN VERTICAL DATUM OF 1988

This map was produced to conform with the  
National Geospatial Program US Topo Product Standard, 2011.  
A metadata file associated with this product is draft version 0.6.19



QUADRANGLE LOCATION

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

1	2	3	1 Ponder
4		5	2 Denton West
6	7	8	3 Denton East
			4 Justin
			5 Lewisville West
			6 Keller
			7 Colleyville
			8 Grapevine

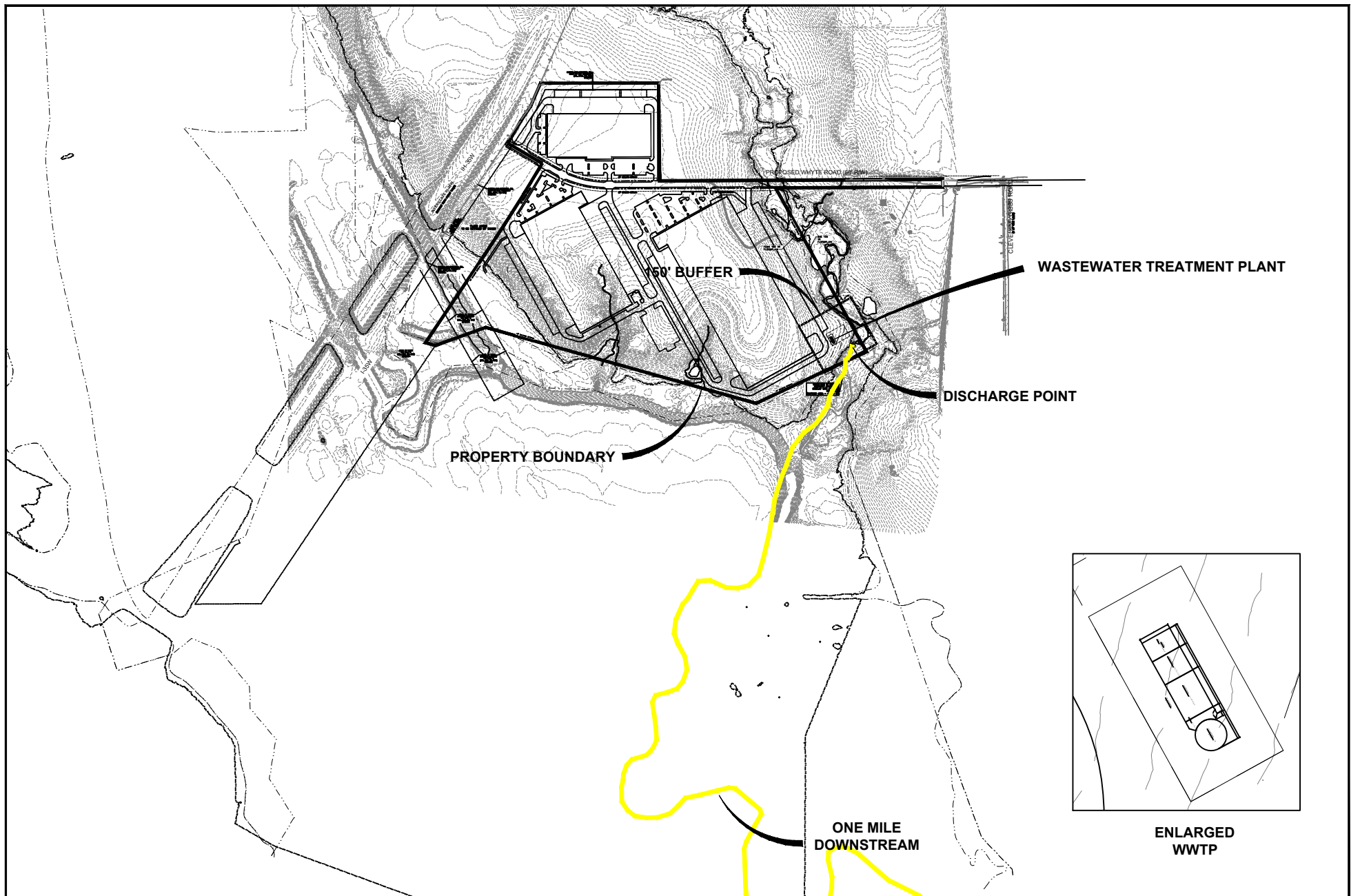
ADJOINING QUADRANGLES

ADJOINING QUADRANGLES

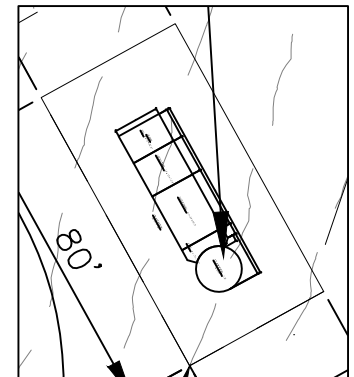
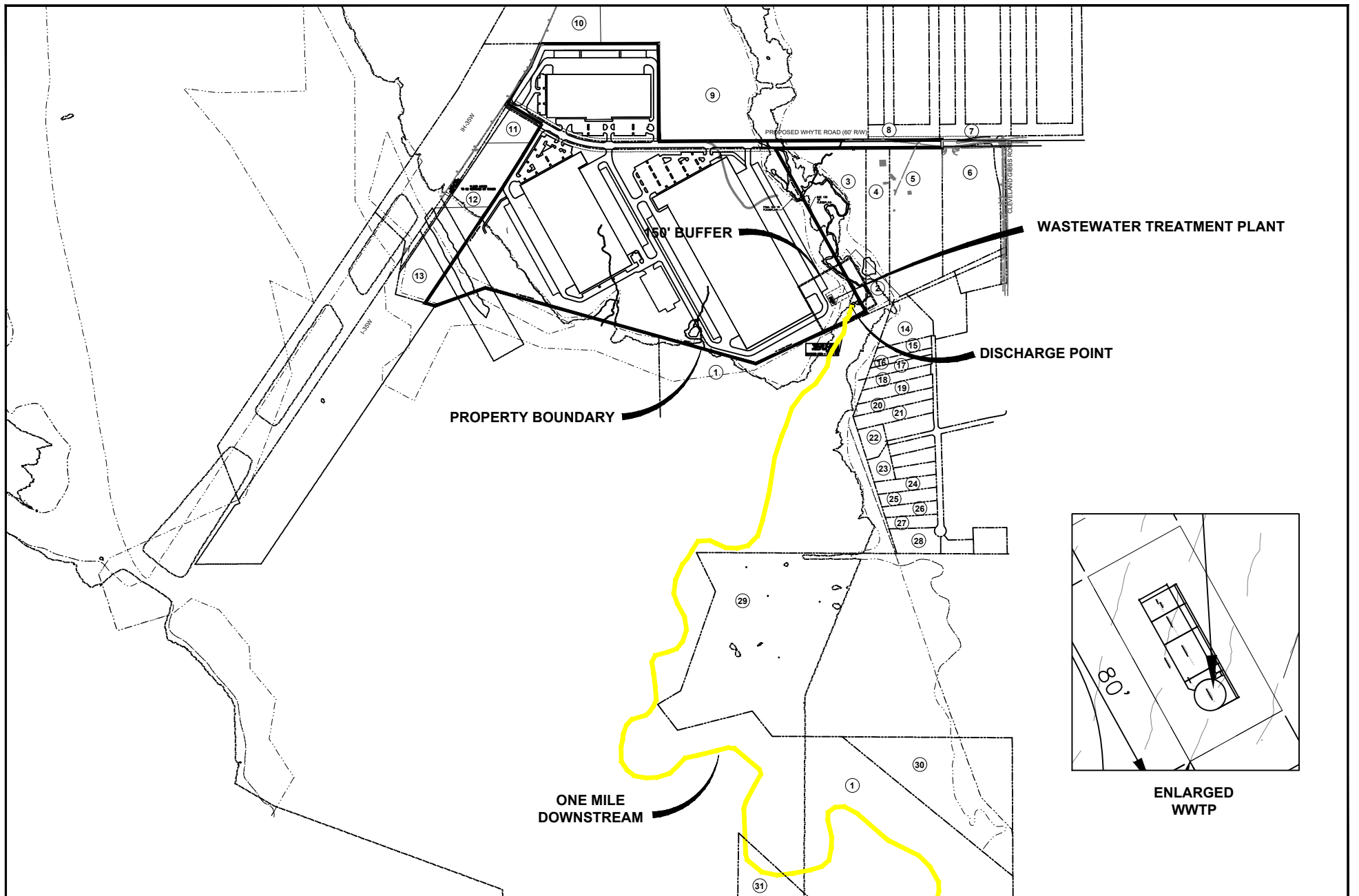
ARGYLE, TX  
2016

\* 7643016394884  
NSN 764-301-6394-884  
NSA REF NO. USGS XZ N1400

***ATTACHMENT 4***  
***SITE PLAN***



***ATTACHMENT 5***  
***ADJACENT LANDOWNER MAP***



**ENLARGED  
WWTP**

***ATTACHMENT 6***  
***ADJACENT LANDOWNER LIST AND LABELS***

#	NAME	ADDRESS	CITY	STATE	ZIP
1	Property not Found (DCCAD)				
2	Henry Northlake Development LLC	900 Parker Square Ste 250	Flower Mound	TX	75028-7440
3	Henry Northlake Development LLC	900 Parker Square Ste 250	Flower Mound	TX	75028-7440
4	Henry Northlake Development LLC	900 Parker Square Ste 250	Flower Mound	TX	75028-7440
5	Henry Northlake Development LLC	900 Parker Square Ste 250	Flower Mound	TX	75028-7440
6	Henry Northlake Development LLC	900 Parker Square Ste 250	Flower Mound	TX	75028-7440
7	Texas Air Classics Inc.	PO Box 1542	Roanoke	TX	76262-1542
8	Texas Air Classics Inc.	PO Box 1542	Roanoke	TX	76262-1542
9	RO Properties LLC	170 W Main Street Ste 200	Lewisville	TX	75057
10	Xiangtao Li	3109 Elizabeth Lane	Copper Canyon	TX	75077-8463
11	Henry Northlake Development LLC	900 Parker Square Ste 250	Flower Mound	TX	75028-7440
12	Henry Northlake Development LLC	900 Parker Square Ste 250	Flower Mound	TX	75028-7440
13	Henry Northlake Development LLC	900 Parker Square Ste 250	Flower Mound	TX	75028-7440
14	Edna Schulz LLC	12005 Cleveland Gibbs Road	Roanoke	TX	76262-5769
15	McMarty Family Partnership LP	1972 Casa Loma Court	Grapevine	TX	76051-2805
16	McMarty Family Partnership LP	1972 Casa Loma Court	Grapevine	TX	76051-2805
17	Andres Venegas	177 Lakeview Drive	Roanoke	TX	76262-5279
18	Andres Venegas	177 Lakeview Drive	Roanoke	TX	76262-5279
19	Andres Venegas	177 Lakeview Drive	Roanoke	TX	76262-5279
20	Charles E. and Deborah L. Cook	P.O. Box 34	Roanoke	TX	76262-0034
21	Charles E. and Deborah L. Cook	P.O. Box 34	Roanoke	TX	76262-0034
22	Cesar and Cano Isabel Venzor	6194 Edna Street	Roanoke	TX	76262-5775
23	Yvonne Berkner	6195 Edna Street	Roanoke	TX	76262-5775
24	Brenda Darlene Beaty	P.O. Box 957	Glen Rose	TX	76043-0957
25	Sam Edwin and Shannon Keli Berube	1003 Texas Trail	Kellar	TX	76262-6829
26	Emmit Woods	11929 Joyce Lane	Roanoke	TX	76262
27	Huey A. Thomas	11917 Joyce Lane	Roanoke	TX	76262-5779
28	W Parnell II LLC	8440 Steeplechase Circle	Argyle	TX	76226-6377
29	D E Way Ranch Corporation	9562 FM 740	Forney	TX	75126-8114
30	JHGS Investments LTD PS & BLW FLP Real Property LLC	6440 N Central Expressway Ste 815	Dallas	Tx	75206-4938
31	JHGS Investments LTD PS & BLW FLP Real Property LLC	6440 N Central Expressway Ste 815	Dallas	Tx	75206-4938

***ATTACHMENT 7***  
***PHOTOS***



**PHOTO 1 – Discharge Point Looking Upstream**



**PHOTO 2 – Discharge Point Looking Downstream**

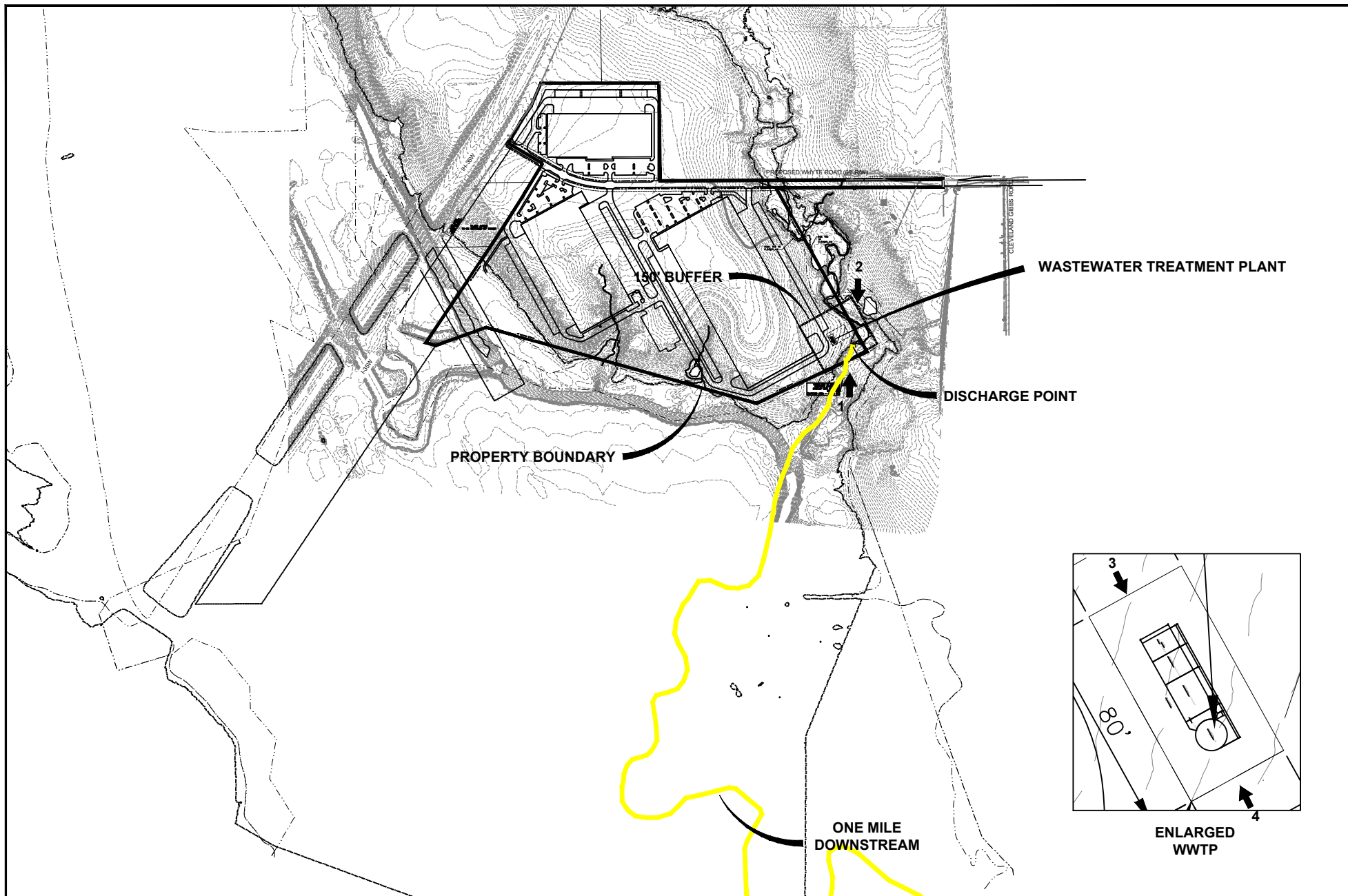


**PHOTO 3 – WWTP Site from North**

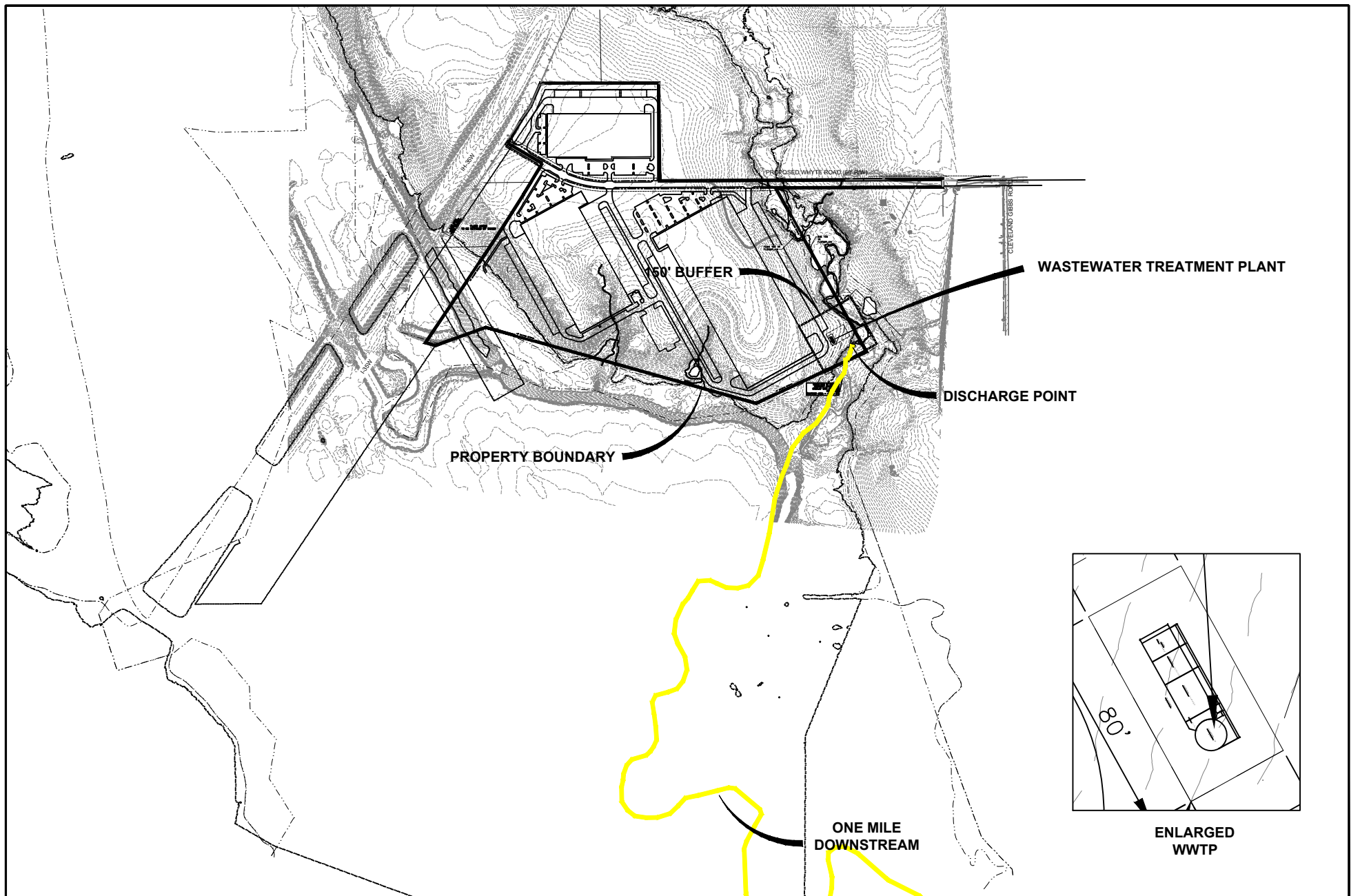


**PHOTO 4 – WWTP Site from South**

***ATTACHMENT 8***  
***PHOTOGRAPH LOCATION MAP***



***ATTACHMENT 9***  
***BUFFER ZONE MAP***



***ATTACHMENT 10***  
***TREATMENT PROCESS DESCRIPTION***

**PROCESS DESCRIPTION:**

The proposed WWTP will be designed as an activated sludge package plant that operates in the single stage nitrification mode and will be able to treat an unattenuated peak hourly flow rate of 56 gpm. The package plant process units will include preliminary screening with flow splitting, (1) aeration basin, (1) secondary clarifier, (1) chlorine contact basin, (1) aerobic digester, and (1) influent flow equalization basin. The influent equalization basin will attenuate the peak hourly flows to 28 gpm. A chlorine feed system will be provided for chemical disinfection. The aeration basins and digesters will be sized to provide the treatment volume required to treat the attenuated peak flow rate of 28 gpm.

The settled sludge from the clarifier is conveyed back to the aerobic reactor as return activated sludge, as well as conveyed to an aerobic digester as waste activated sludge. Digested sludge is wet hauled for disposal.

***ATTACHMENT 11***  
***TREATMENT UNIT SIZES***

## **WWTP**

### **Unit Descriptions and Dimensions**

Major Components and sizes for the proposed Phases as follows:

Treatment Capacity: 20,000 GPD ADF

Unit Dimensions Number of units Dimensions (L x W x SWD)

Aeration 1 16'-0"x 12'-0" x 10.50'

Digester 1 10'-0"x 12'-0" x 10.67'

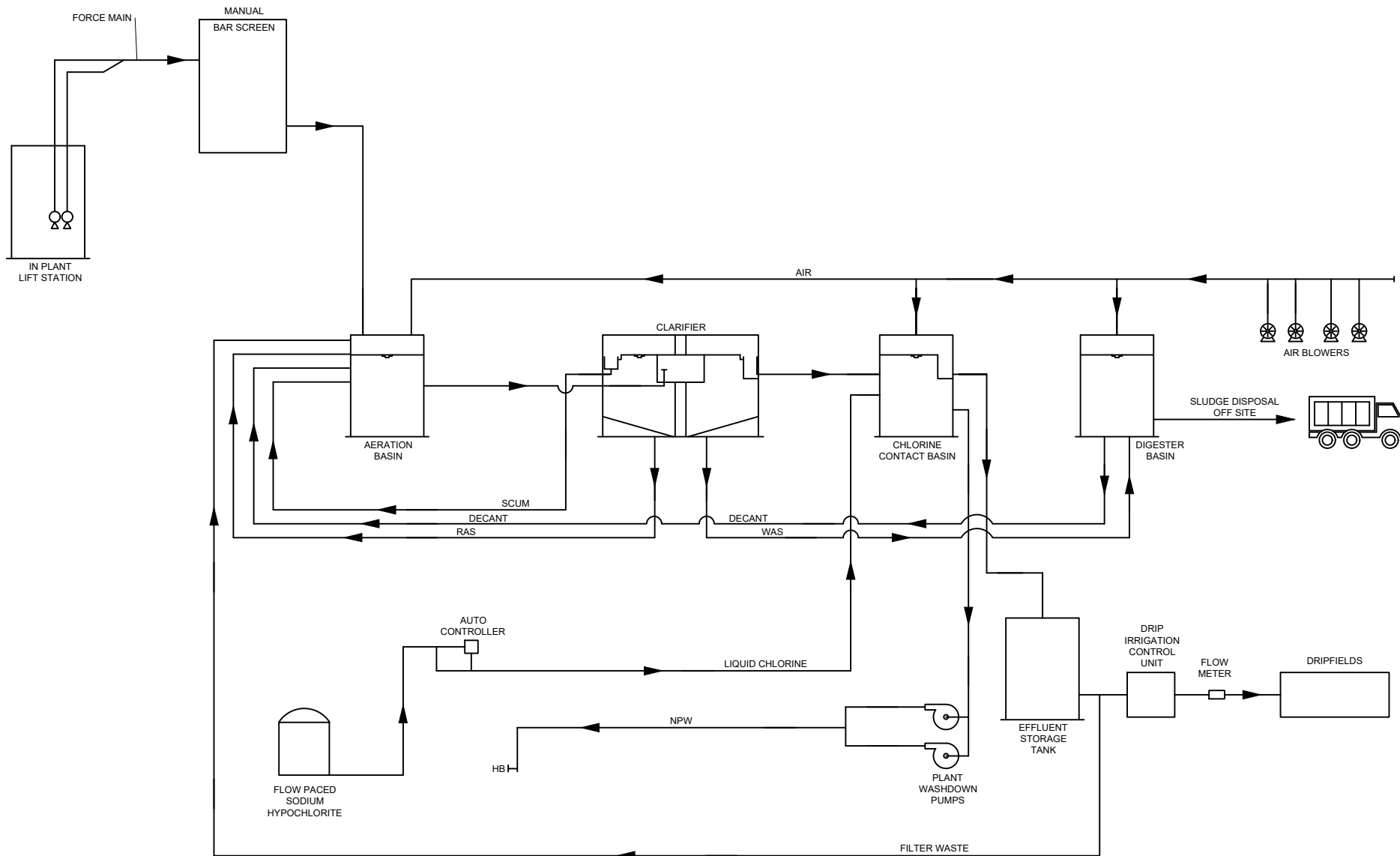
Clarifier 1 12'-0" Dia. x 9.00' SWD

Disinfection 1 3'-0" x 12'-0" x 8'-0"

EQ Basin 1 8'-0"x 12'-0" x 10.67'

SWD – side-water depth, W – width, L – length

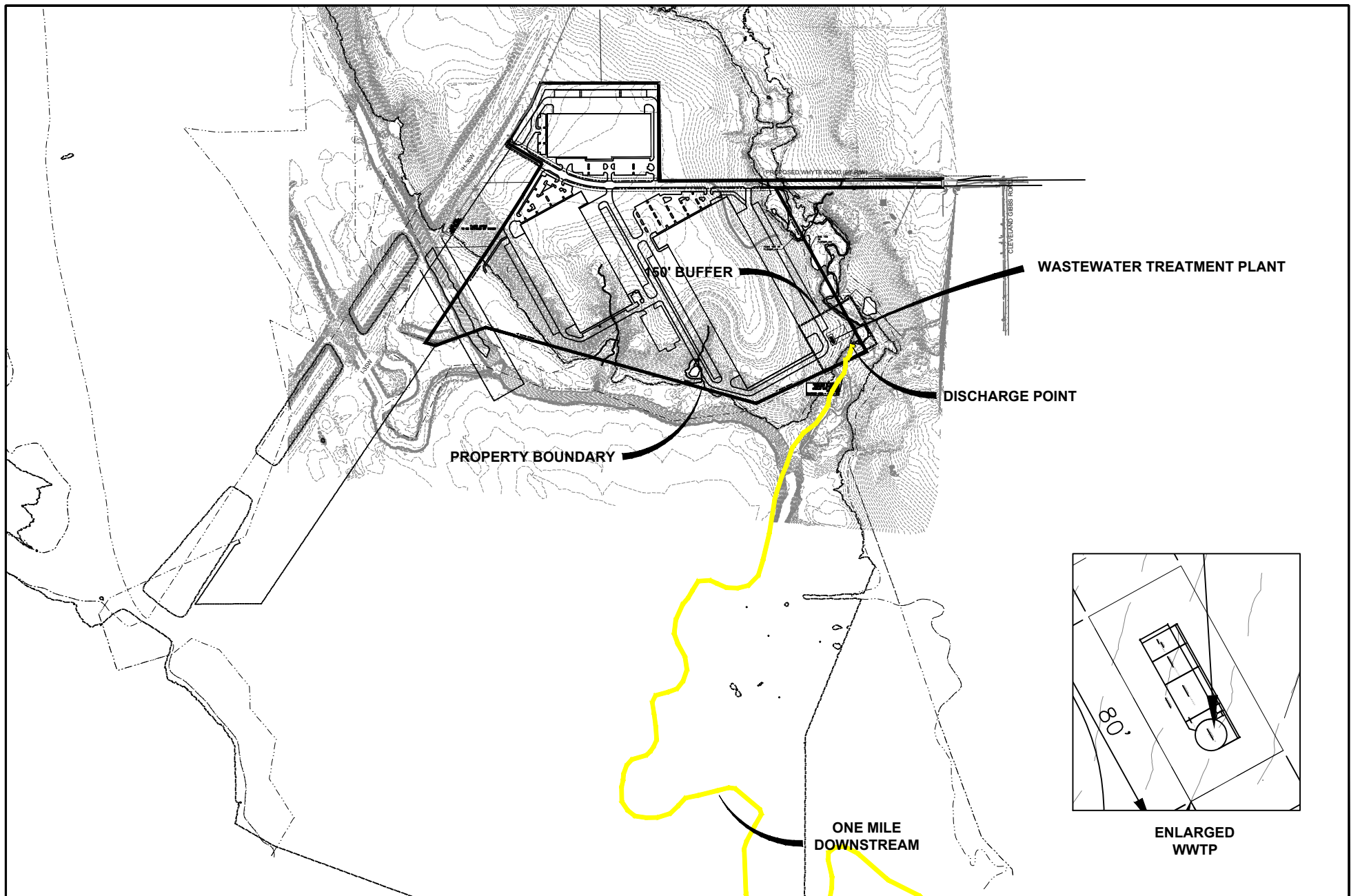
***ATTACHMENT 12***  
***TREATMENT PROCESS FLOW DIAGRAM***



PHASE 1 & 2 PROCESS FLOW  
DIAGRAM

ATTACHMENT-12  
TREATMENT PROCESS FLOW DIAGRAM  
CROSS TIMBERS (3 BUILDINGS)  
TPDES APPLICATION  
NORTHLAKE, TEXAS

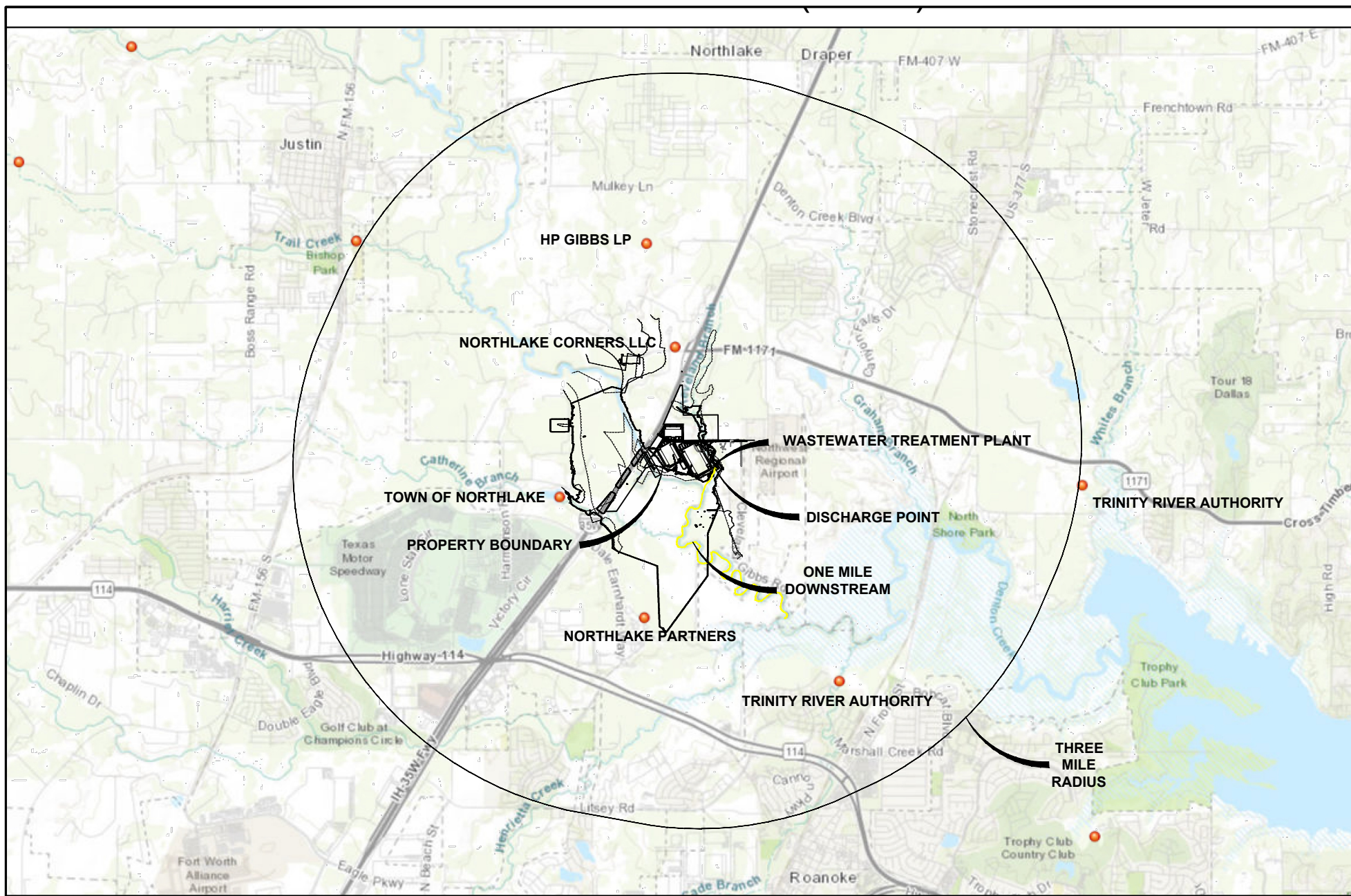
***ATTACHEMNT 13***  
***SITE DRAWING***



***ATTACHMENT 14***  
***JUSTIFICATION FOR PROPOSED FACILITY***

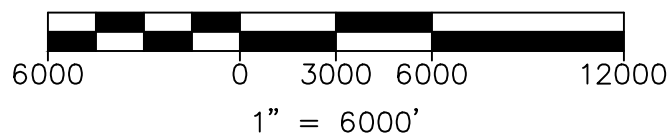
The owner is intending to develop this site as a commercial/industrial facility. There is currently no wastewater service available to the site. The owner requested wastewater service from several area wastewater treatment plants (WWTPs), however, they either declined to provide service to the site or did not respond to the request. The site is not located within any municipality or sewer provider's CCN. The owner has elected to construct a privately owned wastewater treatment plant (WWTP) to process 20,000 gallons per day and discharge into an unnamed intermittent stream (swale) on site.

***ATTACHEMNT 15***  
***WWTP WITHIN 3 MILES***



**wwdengineering**  
engineered wastewater solutions  
F-12009

9217 Hwy 290 W., Ste 110  
Austin, Texas 78736  
(512) 288-2111



ATTACHMENT - 15  
LOCAL WASTEWATER FACILITIES MAP  
CROSS TIMBERS (3 BUILDINGS)  
TPDES APPLICATION  
NORTHLAKE, TEXAS

***ATTACHMENT 14***  
***LETTERS TO LOCAL WWTPs***

***ATTACHMENT 17***  
***DESIGN CALCULATIONS***

Project:	Cross Timbers WWTP	Description:	Process Calculations
Job Number:	W0000		
Design By:			
Checked By:			
Date:	2/11/2025		

### Preliminary Process Calculations (Based on TCEQ Criteria Only)

#### Design Parameters

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 as follows:

Average Design Flow	0.02 MGD	Influent BOD <sub>5</sub>	350 mg / l
Peaking Factor	4.0		58 lbs / day
Unattenuated Peak Flow	0.08 MGD	Influent TSS	300 mg/L
	56 gpm		50 lbs / day
Attenuated Peak Flow	0.04 MGD		
	28 gpm		
Effluent Characteristics		Influent NH <sub>3</sub> -N	50 mg/L
BOD <sub>5</sub> S <sub>e</sub>	10 mg/L		8 lbs / day
TSS TSS <sub>e</sub>	15 mg/L	Reactor temp	20 °C
NH <sub>3</sub> -N N <sub>e</sub>	3 mg/L	Elevation	640 feet ASL
TN TN <sub>e</sub>	10 mg/L		68 °F

Process Design - In order to achieve the required removal efficiencies, activated sludge process operated in the single stage nitrification mode has been chosen. Tertiary filtration and coagulant addition will also be employed to meet the effluent requirements post secondary treatment.

#### Aeration Basin

	Value	Regulation
TCEQ Maximum Organic Loading	35 lbs BOD / day / 1000 cu. ft.	217.154(b)(Table F.1)
Aeration Volume Required	1,668 cu. ft.	
MLSS	3,000 mg/L	
MLVSS/MLSS	0.7	
MLVSS	2,100 mg/L	
<u>Tanks</u>		
Length	16 ft	
Width	12 ft	
Height	12.17	
SWD	10.50 ft	
# Tanks	1	
Volume	2,016 cu. ft.	
Capacity	0.024 MGD Average Flow	
Total Volume	2,016 cu. ft.	
Volume greater than required	YES	
Organic Loading	28.96 lbs BOD5/day	
Hydraulic Retention time, $\tau$	18.10 hours	
Solids Retention Time, SRT	9.0 days	
f:m	0.22 lbs BOD5/lbs MLVSS/day	

Project: Cross Timbers WWTP  
 Job Number: W0000  
 Design By:  
 Checked By:  
 Date: 2/11/2025

Description: Process Calculations

### **Preliminary Process Calculations (Based on TCEQ Criteria Only)**

<b>Clarifier</b>	<b>Value</b>	<b>Regulation</b>
TCEQ Maximum surface Loading (Qpk)	1200 gal / day / sq. ft. at peak flow	217.154(c)(Table F.2)
TCEQ Minimum detention time (Qpk)	1.8 hours at peak flow	217.154(c)(Table F.2)
TCEQ Maximum weir Loading (Qpk)	20,000 gal/day/ft	217.152(c)(4)
TCEQ Minimum Side Water Depth (SWD)	8 feet	217.152(g)(2)(A)/(B)
TCEQ Maximum Stilling Well Velocity	0.15 feet/second	217.152(a)(4)
Surface area required	33 sq. ft.	6.5 ft. min. dia. for one clarifier
Volume required	401 cu. ft.	4.6 ft. min. dia. for two clarifiers
Stilling Well Diameter	3.0 feet	Typ. value is 15-20% of total tank diameter (M&E, p.401)
Stilling Well Velocity at Qpk	0.02 fps	Meets Requirement? YES
Clarifier(s) Provided:	1 tank(s)	
Diameter	12 ft	
Height	12.17 ft	
Static WL	11.00 ft	
SWD	9.00 ft	
Surface area	113 sq. ft.	
Volume	1,018 cu. ft.	
Capacity	0.025 MGD Average Flow 0.10152 MGD Peak Flow	
Total Surface Area	113 sq. ft.	Greater than required? YES
Total Volume	1,018 cu. ft.	Greater than required? YES
Clarifier Surface Loading	<u>Qaverage</u> 177 GPD/SF	<u>Qpeak</u> 354 GPD/SF
Clarifier Detention Time	9.14 Hours	4.57 Hours
Solids Loading Rate	0.60 lb/ft <sup>2</sup> /hr	0.79 lb/ft <sup>2</sup> /hr
Clarifier Wall to Weir Length	12 inches	
Weir Length	31.4 Ft.	
Weir Loading	1,273 GPD/LF	

### **RAS/WAS Pumping & Piping**

	<b>Value</b>	<b>Regulation</b>
TCEQ Minimum Sludge Pipe Diameter	4 inches	217.152(e)(2), 217.158(e)(3)
Clarifier Surface Area	113 sq. ft.	
TCEQ Min. RAS Pumping Capacity @200 g	16 gpm	Qr/Q = 1.13 217.152(j)(3)
TCEQ Max. RAS Pumping Capacity @ 400	31 gpm	Qr/Q = 2.26 217.152(j)(3)
RAS/WAS Pipe Diameter	4 inches	
Velocity in RAS/WAS Pipe @ Min. Rate	0.40 fps	
Velocity in RAS/WAS Pipe @ Max. Rate	0.80 fps	
WAS Volume to Digester	570 gpd	
Number of WAS Cycles Per Day	1	
Duration of WAS Cycles	7 minutes	
WAS Flow Rate During Each Cycle	81 gpm	
WAS Pipe Diameter	4 inches	
Velocity in WAS Pipe	2.073 fps	

### **Scum Flow Rate**

Launder Width	6 inches
Scum Flow Rate	17.13 gpm
Scum Collector Pipe Diameter	6 inches
Scum Airlift Diameter	3 inches
Water Height in Launder	1.14 inches

Project: Cross Timbers WWTP  
 Job Number: W0000  
 Design By:  
 Checked By:  
 Date: 2/11/2025

Description: Process Calculations

**Preliminary Process Calculations (Based on TCEQ Criteria Only)**

**Digesters**

	Value	Regulation
TCEQ Minimum Sludge Retention Time	40 days	217.249(t)(4)(B)(Table J.2)
TCEQ Min. Volatile Solids Loading Rate	100 lb / day / 1,000 cu. ft.	217.249(t)(7)(D)
TCEQ Max. Volatile Solids Loading Rate	200 lb / day / 1,000 cu. ft.	217.249(t)(7)(D)

Influent BOD <sub>5</sub>	58 lb/ day
Effluent BOD <sub>5</sub>	2 lb/ day
BOD <sub>5</sub> to Digester	57 lb/ day

Hydraulic Detention Time of Aeration Basins	18.10 Hours
BOD <sub>5</sub> utilized	57 lb BOD <sub>5</sub> / day
NH <sub>3</sub> utilized	8 lb NH <sub>3</sub> -N / day

S	BOD <sub>5</sub> Concentration	
N	NH <sub>3</sub> -N Concentration	
i	Influent (subscript)	
e	Effluent (subscript)	
Q	Average Design Flow	
Q <sub>design</sub>	Peak Flow	
Q <sub>W</sub>	Waste Sludge Flow to Digester	
X <sub>W</sub>	Waste Sludge Concentration	8,500 mg/L
Y	Yield Coefficient	0.6 VSS/lb BOD <sub>5</sub>
Y <sub>n</sub>	Yield Coefficient (nitrification)	0.15 VSS/lb NH <sub>3</sub> -N
k <sub>d</sub>	Endogenous Decay Coefficient	0.06 /day
k <sub>dn</sub>	Endogenous Decay Coeff. (nitrification)	0.30 /day
P <sub>n</sub>	Volatile Fraction of X	0.70
	MLVSS/MLSS Ratio	0.70
S <sub>sl</sub>	Specific Gravity of Sludge	1.005
X	Sludge Concentration in Digester	15,000 mg/L
P <sub>s</sub>	Percent Solids in Digester	1.5 %
TSS <sub>%</sub>	% of TSS that is inert	50 %
ρ <sub>w</sub>	Specific Weight of Water	8.34 lbs / gallon

Typical Values			
Variable	Range		Source
X <sub>W</sub>	0.8	2.5	M&E, 4th ed., pg. 1457
Y	0.4	0.8	M&E, 4th ed., pg. 585
Y <sub>n</sub>	0.04	0.29	WEF MoP 8, Vol I, p. 53
k <sub>d</sub>	0.06	0.15	M&E, 4th ed., pg. 585
k <sub>dn</sub>	0.3	3.0	WEF MoP 8, Vol I, p. 53
P <sub>n</sub>	0.59	0.88	M&E, 4th ed., pg. 1454
S <sub>sl</sub>	1.005	1.005	M&E, 4th ed., pg. 1456
X	15,000	40,000	M&E, 4th ed., pg. 1457
P <sub>s</sub>	1.5	4	M&E, 4th ed., pg. 1457

Project:	Cross Timbers WWTP	Description:	Process Calculations
Job Number:	W0000		
Design By:			
Checked By:			
Date:	2/11/2025		

---

**Preliminary Process Calculations (Based on TCEQ Criteria Only)**

---

$Y_{c,obs}$	Carbonaceous Yield Coefficient	0.57
$P_{x,c}$	Carbonaceous Sludge Production	33 lb / day (MLVSS) 47 lb / day (MLSS)
$Y_{n,obs}$	Nitrogenous Yield Coefficient	0.12
$P_{x,n}$	Nitrogenous Sludge Production	0.96 lb / day (MLVSS) 1.37 lb / day (MLSS)
Inert Sludge Production (TSS), Dry Solids		24 lb / day
Total Sudge Production, Volatile Solids		34 lb / day
Volatile Solids Loading Rate		26 lb / day / 1,000 cu. ft.
Total Sudge Production, Dry Solids		72 lb / day
$Q_w$	Waste Sludge Flow to Digester	570 gallons / day
Digester Volume Required		4,939 gallons <b>660</b> cu. ft.

Digester Sizing (Alternate Method)

Assume sludge production =	<b>20</b> cu. ft. per lb of BOD5
Required Volume =	<b>1,168</b> cu. ft.

<u>Tank</u>	
Length	<b>10</b> ft
Width	<b>12</b> ft
Height	<b>12.17</b> ft
SWD	<b>10.67</b> ft
# Tanks	<b>1</b>
Volume	1,280 cu. ft.

Total Digester Vol. available	1,280 cu. ft.
Volume greater than required	YES

Project:	Cross Timbers WWTP	Description:	Process Calculations
Job Number:	W0000		
Design By:			
Checked By:			
Date:	2/11/2025		

---

**Preliminary Process Calculations (Based on TCEQ Criteria Only)**

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**Chlorine Contact Chamber**

	<i>Value</i>	<i>Regulation</i>
TCEQ Minimum detention time (Qpk)	20 min	217.281(b)(1)

Volume required 74 cu. ft.

Proposed Tank

Length	3.00 ft
Width	12.00 ft
Height	12.17 ft
Static WL	4.75 ft
SWD	8.00 ft
# Tanks	1
Volume	288 cu. ft.
Capacity	0.039 MGD Average Flow

Total Capacity	288 cu. ft.	
Detention Time	77.55 Minutes	Meets Capacity
Volume greater than required		YES

Project: Cross Timbers WWTP Description: Process Calculations  
 Job Number: W0000  
 Design By:  
 Checked By:  
 Date: 2/11/2025

**Preliminary Process Calculations (Based on TCEQ Criteria Only)**

**Air Requirements**

	Value	Regulation
Air requirements for Aeration basins	1.81 lb oxygen per lb BOD	217.155(a)(3)(Equation F.2)
Use	2.20 lb oxygen per lb BOD	
Air Requirements for Digesters	20 SCFM /1000 cu. ft.	217.249 (t)(7)(G)
Use	30 SCFM /1000 cu. ft.	
Minimum Mixing Requirements for Aeration	20 SCFM / 1000 cu. ft.	217.155 (b)(3)(B)
Diffuser Transfer Efficiency	6.6% (In wastewater)	217.155 (b)(2)(B)
Design Submergence	9.00 feet	

**Table F.5 Diffuser Submergence Correction Factors**

Diffuser Submergence Depth	Airflow Rate Correction Factor
feet	
8	1.82
10	1.56
12	1
15	0.91
18	0.73
20	0.64

Diffuser Submergence Correction Factor 1.69 @ design flow depth 217.155 (b)(2)(D)(Table F.5)

Aeration Basins: Corrected Air Flowrate @ Design Submergence 132 SCFM  

$$= \frac{\{(\text{lb BOD}) * (\text{lb Oxygen} / \text{lb BOD})\} * \text{Correction Factor}}{(\text{T.E.}) (\text{lb Oxygen} / \text{lb air}) (\text{lb air} / \text{cu. ft.}) (\text{min} / \text{day})}$$
 217.155 (b)(2)(C)

Verify Mixing Requirements for Aeration Basins: 65 OK

Air Required for Digesters: 38 SCFM

Air Required for Post Aeration - Chlorine Basin 6 SCFM 20 scfm/1000cf  
 Air Required for Air Lifts 9 SCFM  
 Air for Initial Mixing 10 SCFM

Total Air Required 195 SCFM

Maximum Water Depth Over Diffuser 9.00 feet  
 Pressure Loss in Piping 1.1 psi \*  
 Pressure @ Blowers 5.0 psi

Air Flow per Blower @ Required Pressure 200 SCFM  
 Blowers Required w/o Standby 1.0

Total Blowers Required 2.0

## CROSS TIMBERS

### 20,000 GPD ADF WWTP

Data	Quantity		
Permitted Average Daily Flow	20,000 gpd	14 gpm	0.031 cfs
Unattenuated Peak 2-hour Flow	80,000 gpd	56 gpm	0.124 cfs
Equalized Peak 2-hour Flow	40,000 gpd	28 gpm	0.062 cfs
BOD <sub>5</sub> Loading	350 mg/l		
Equalization HRT	8 hours at ADF		
Maximum Aeration Zone Loading	35 lbs of BOD <sub>5</sub> / 1,000 cf		
Minimum Aerobic Digester Loading	20 cf/lbs of BOD <sub>5</sub> /day		
Minimum SRT for Digester	40 days @ 1.5 % Concentration		
Maximum Clarifier Surface Loading	1,200 gpd/sf (@ peak flow)		
Minimum Clarifier Detention Time	1.8 hr (@ peak flow)		
Minimum Disinfection Basin Detention Time	20 min (@ peak flow)		
Air Supply (Aeration Zone)	3,200 scfm/day/lb of BOD <sub>5</sub>		
Air Supply (Aerobic Digester/EQ)	30 scfm/1,000 cf of volume		
Air Supply (Disinfection)	20 scfm/1,000 cf of volume		

### Calculations of Requirements

BOD<sub>5</sub> Loading 58.38 lbs/day

Unit Requirements	Quantity
Aeration Zone Volume	1,668 cf
Aerobic Digester Volume at Minimum Loading	1,168 cf
Aerobic Digester Volume at Minimum SRT	701 cf
Clarifier Surface Area	33 sf
Clarifier Volume at Minimum Detention Time	802 cf
Disinfection Volume	74 cf
Equalization Volume	891 cf

Air Supply Requirements	Quantity	
Aeration Process	132 scfm	Note: The process calculation is based on 9' of submergence with a correction factor of 1.69 and clean water transfer efficiency of 0.85% per foot of submergence.
Digester	38 scfm	
Disinfection	6 scfm	
Air Lift Pumps & Initial Mixing	20 scfm	
Total Air Required (Process/Digestion/Airlifts)	196 scfm	
Total Air Required (EQ Basin)	31 scfm	

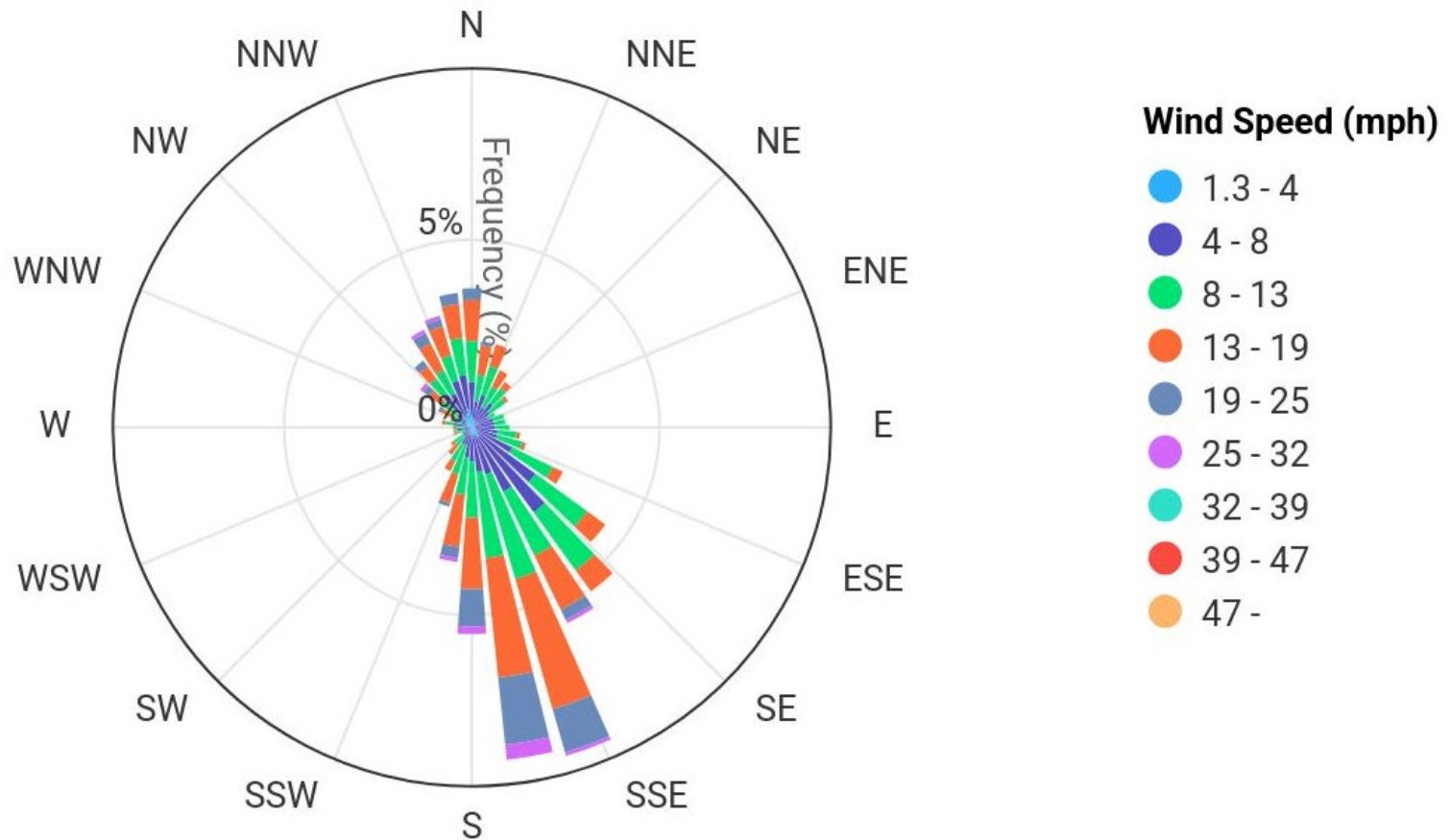
### Proposed Unit Features

Proposed Units	Quantity	#Units	Length	Width	Height	SWD
Aeration Zone Volume	2,016 cf	1	16	12	12.17	10.50
Aerobic Digester Volume	1,280 cf	1	10	12	12.17	10.67
Clarifier Surface Area	113 sf	1		12	12.17	
Clarifier Volume	1,018 cf					9.00
EQ Basin	1,024 cf	1	8	12	12.17	10.67
Chlorine Contact Volume	288 cf	1	3	12	12.17	8.00
Blowers (Process/Digestion/Airlifts/Post-Aeration)	200 scfm	2	10.0 hp			
Blowers (Equalization)	35 scfm	1	5.0 hp			

***ATTACHMENT 18***  
***WIND ROSE***

# DENTON MUNICIPAL AP (TX) Wind Rose

January 01, 2022 - December 31, 2022  
Sub-Interval: January 1 - December 31, 0 - 24



Click and drag to zoom

***ATTACHMENT 19***  
***SEWAGE SLUDGE SOLIDS MANAGEMENT PLAN***

**Domestic Technical Report 1.1**  
**Sewage Sludge Solids Management Plan**

Planning Considerations

Influent Design Flow	0.02 MGD
Total Sludge Holding Tank Volume	1,280 cubic feet
Dimensions	10' L x 12' W x 10.67' SWD
Aeration Basin MLSS (mg/L)	1,500 to 3,000 mg/l

BOD <sub>5</sub> Removal	Influent Concentration =	350 mg/l
	Effluent Concentration =	10 mg/l
	Net Removal =	340 mg/l

<u>Solids Generated</u>	<u>100% Flow</u>	<u>75% Flow</u>	<u>50% Flow</u>	<u>25% Flow</u>
Pounds BOD <sub>5</sub> /day Removed	57	43	28	14
Pounds/Day of Dry Sludge Produced	18	13	9	4
Pounds/Day of Wet Sludge Produced	1,191	893	595	298
Gallons/Day of Wet Sludge Produced	143	107	71	36

Sludge will stay in the digester; clear liquor will be decanted off the digester and returned to the aeration basin. Sludge is wasted from the final clarifier to the aerobic digester. Some sludge from the clarifier is also returned to the aeration basin.

Removal Schedule

Days Between Sludge Removal	67	89	134	268
-----------------------------	----	----	-----	-----

Assumptions

- (1) Assumed 0.315 pounds of dry sludge produced per pound of BOD<sub>5</sub> removed
- (2) Assumed solids concentration in the tank 1.5%
- (3) Assumed stabilized sludge density = water density 8.34 lb/gal

***ATTACHMENT 20***  
***PUBLIC INVOLVEMENT PLAN FORM***



Texas Commission on Environmental Quality

## Public Involvement Plan Form for Permit and Registration Applications

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

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

### Section 1. Preliminary Screening

New Permit or Registration Application

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

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

### Section 2. Secondary Screening

Requires public notice,

Considered to have significant public interest, and

Located within any of the following geographical locations:

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

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

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

### 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?

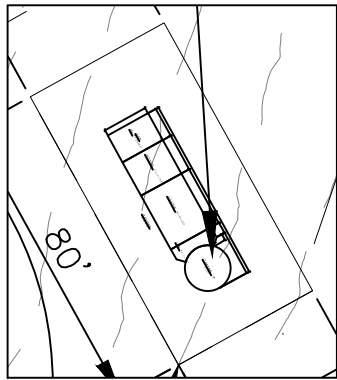
Publish in alternative language newspaper

Posted on Commissioner's Integrated Database Website

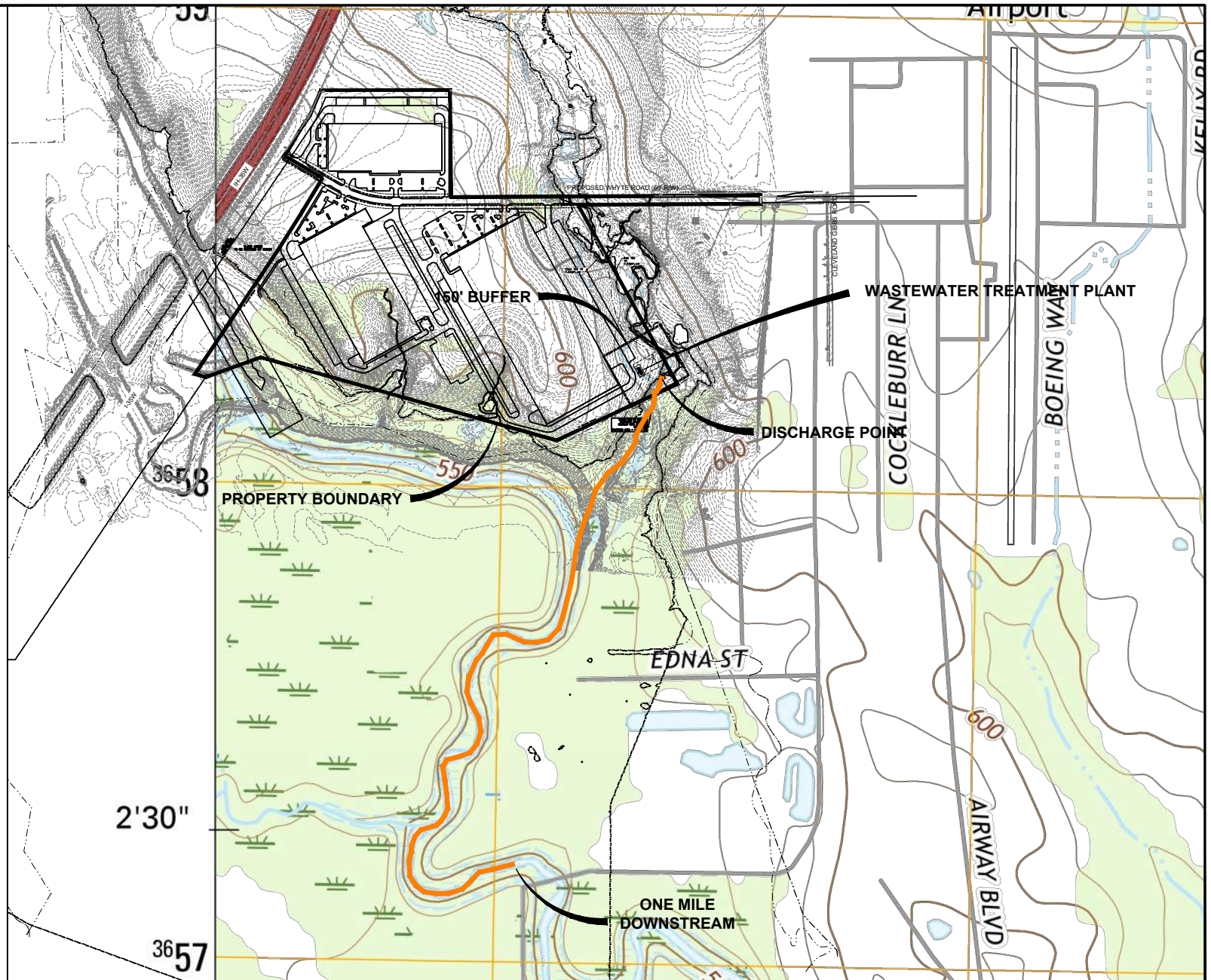
Mailed by TCEQ's Office of the Chief Clerk

Other (specify)

***SPIF1***  
***USGS MAP***

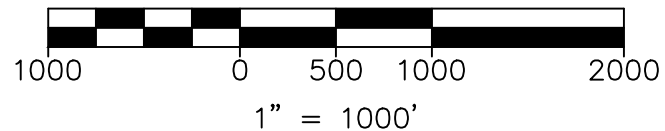


ENLARGED  
WWTP



**wwdengineering**  
engineered wastewater solutions  
F-12009

9217 Hwy 290 W., Ste 110  
Austin, Texas 78736  
(512) 288-2111



ATTACHMENT - SP1F 1  
ARGYLE QUADRANGLE  
CROSS TIMBERS (3 BUILDINGS)  
TPDES APPLICATION  
NORTHLAKE, TEXAS

# TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

## SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

### FOR AGENCIES REVIEWING DOMESTIC OR INDUSTRIAL TPDES WASTEWATER PERMIT APPLICATIONS

**TCEQ USE ONLY:**

Application type: \_\_\_\_Renewal \_\_\_\_Major Amendment \_\_\_\_Minor Amendment \_\_\_\_New

County: \_\_\_\_\_ Segment Number: \_\_\_\_\_

Admin Complete Date: \_\_\_\_\_

Agency Receiving SPIF:

\_\_\_\_ Texas Historical Commission

\_\_\_\_ U.S. Fish and Wildlife

\_\_\_\_ Texas Parks and Wildlife Department

\_\_\_\_ U.S. Army Corps of Engineers

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

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

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

The following applies to all applications:

1. Permittee: Denton Cross Timbers Partners, LLC

Permit No. WQ00 \_\_\_\_\_

EPA ID No. TX \_\_\_\_\_

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

SE Corner of FM 1171 & IH 35 West, Denton 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: Raymond Kieffer

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

Title: Vice President

Mailing Address: 2100 McKinney Ave, Suite 800

City, State, Zip Code: Dallas, Texas 75201

Phone No.: 469-203-2614 Ext.:

Fax No.:

E-mail Address: rkieffer@trammellcrow.com

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

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.

From discharge point into a dry/intermittent creek/swale, thence to Denton Creek, thence to Catherine Creek, Segment 0826A

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

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

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

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

☐ Disturbance of vegetation or wetlands

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

N/A

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

N/A

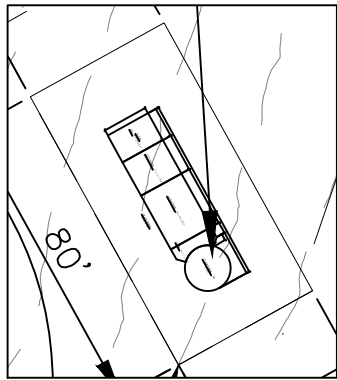
THE FOLLOWING ITEMS APPLY ONLY TO APPLICATIONS FOR NEW TPDES PERMITS AND MAJOR AMENDMENTS TO TPDES PERMITS

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

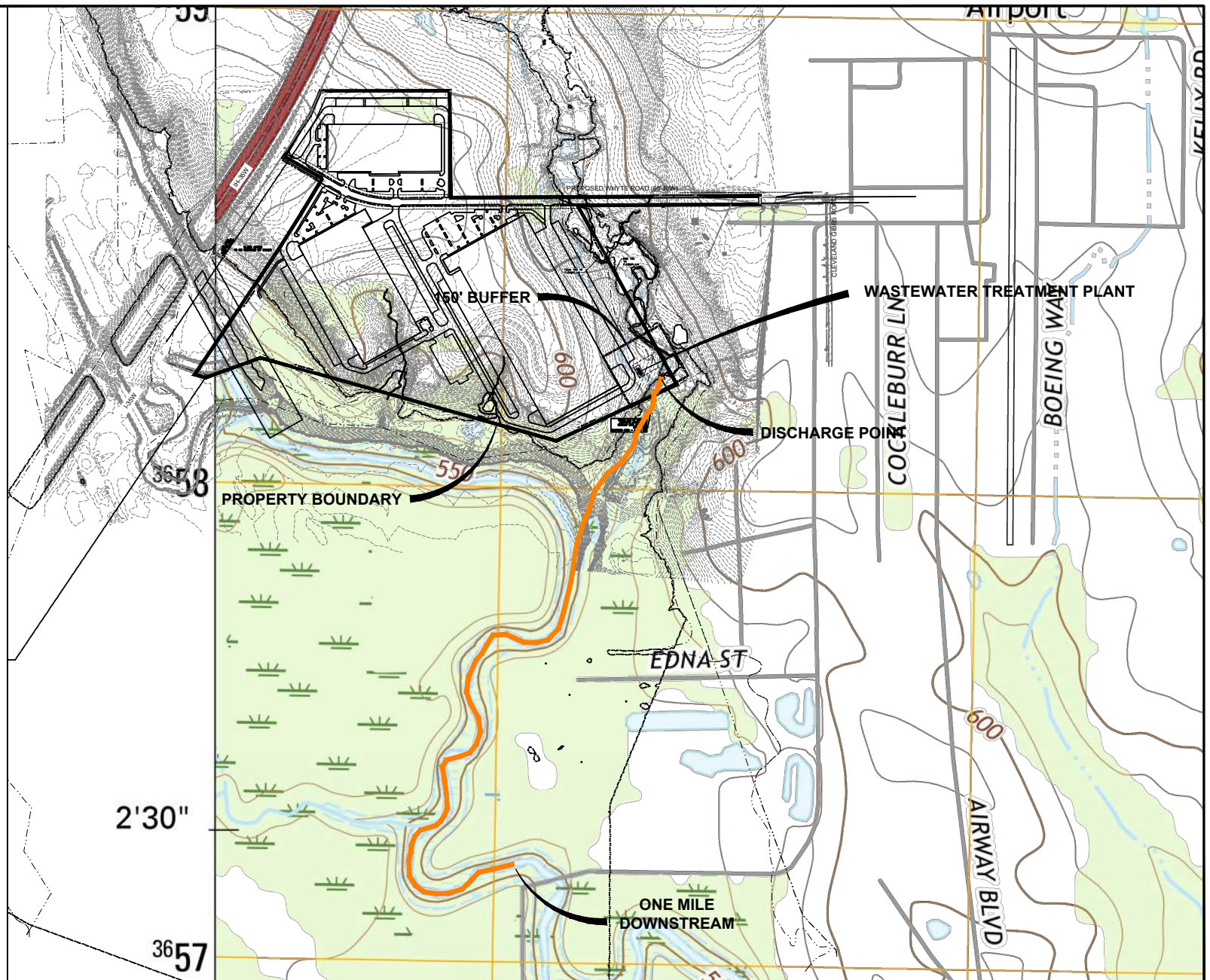
N/A

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

Farmland

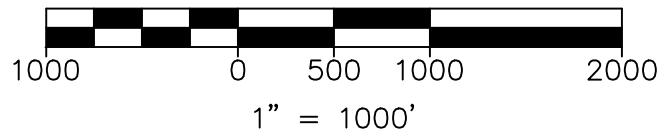


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WWTP



**wwdengineering**  
engineered wastewater solutions  
F-12009

9217 Hwy 290 W., Ste 110  
Austin, Texas 78736  
(512) 288-2111



ATTACHMENT - SP1F 1  
ARGYLE QUADRANGLE  
CROSS TIMBERS (3 BUILDINGS)  
TPDES APPLICATION  
NORTHLAKE, TEXAS

**Plain Language Summary (English)**  
**Texas Pollutant Discharge Elimination System (TPDES)**  
**Permit Application**

Denton Cross Timbers Partners LLC is applying for a permit to construct a wastewater treatment facility to be located on a parcel approximately 4,000 feet South of the Southeast corner of FM 1171/Cross Timbers Blvd and IH35W in Northlake, Texas. This application is a new application to discharge up to 20,000 gallons per day of treated domestic wastewater.

Discharges from the facility are expected to contain five-day carbonaceous biochemical oxygen demand (CBOD<sub>5</sub>), total suspended solids (TSS), ammonia nitrogen (NH<sub>3</sub>-N), and *Escherichia coli*. Additional potential pollutants are included in the Domestic Technical Report 1.0, Section 7. Pollutant Analysis of Treated Effluent in the permit application package. All phases of the domestic wastewater treatment plant will consist of a complete mix activated sludge treatment plant. Treatment units consist of a bar screen, aeration tank, clarifier, sludge holding tank, and chlorine contact chamber.

#	NAME	ADDRESS
1	Property not Found (DCCAD)	
2	Henry Northlake Development LLC	900 Parker Square Ste 250
3	Henry Northlake Development LLC	900 Parker Square Ste 250
4	Henry Northlake Development LLC	900 Parker Square Ste 250
5	Henry Northlake Development LLC	900 Parker Square Ste 250
6	Henry Northlake Development LLC	900 Parker Square Ste 250
7	Texas Air Classics Inc.	PO Box 1542
8	Texas Air Classics Inc.	PO Box 1542
9	RO Properties LLC	170 W Main Street Ste 200
10	Xiangtao Li	3109 Elizabeth Lane
11	Henry Northlake Development LLC	900 Parker Square Ste 250
12	Henry Northlake Development LLC	900 Parker Square Ste 250
13	Henry Northlake Development LLC	900 Parker Square Ste 250
14	Edna Schulz LLC	12005 Cleveland Gibbs Road
15	McMarty Family Partnership LP	1972 Casa Loma Court
16	McMarty Family Partnership LP	1972 Casa Loma Court
17	Andres Venegas	177 Lakeview Drive
18	Andres Venegas	177 Lakeview Drive
19	Andres Venegas	177 Lakeview Drive
20	Charles E. and Deborah L. Cook	P.O. Box 34
21	Charles E. and Deborah L. Cook	P.O. Box 34
22	Cesar and Cano Isabel Venzor	6194 Edna Street
23	Yvonne Berkner	6195 Edna Street
24	Brenda Darlene Beaty	P.O. Box 957
25	Sam Edwin and Shannon Keli Berube	1003 Texas Trail
26	Emmit Woods	11929 Joyce Lane
27	Huey A. Thomas	11917 Joyce Lane
28	W Parnell II LLC	8440 Steeplechase Circle
29	D E Way Ranch Corporation	9562 FM 740
30	JHGS Investments LTD PS & BLW FLP Real Property LLC	6440 N Central Expressway Ste 815
31	JHGS Investments LTD PS & BLW FLP Real Property LLC	6440 N Central Expressway Ste 815
32		



CITY	STATE	ZIP
Flower Mound	TX	75028-7440
Flower Mound	TX	75028-7440
Flower Mound	TX	75028-7440
Flower Mound	TX	75028-7440
Flower Mound	TX	75028-7440
Roanoke	TX	76262-1542
Roanoke	TX	76262-1542
Lewisville	TX	75057
Copper Canyon	TX	75077-8463
Flower Mound	TX	75028-7440
Flower Mound	TX	75028-7440
Flower Mound	TX	75028-7440
Roanoke	TX	76262-5769
Grapevine	TX	76051-2805
Grapevine	TX	76051-2805
Roanoke	TX	76262-5279
Roanoke	TX	76262-5279
Roanoke	TX	76262-5279
Roanoke	TX	76262-0034
Roanoke	TX	76262-0034
Roanoke	TX	76262-5775
Roanoke	TX	76262-5775
Glen Rose	TX	76043-0957
Kellar	TX	76262-6829
Roanoke	TX	76262
Roanoke	TX	76262-5779
Argyle	TX	76226-6377
Forney	TX	75126-8114
Dallas	Tx	75206-4938
Dallas	Tx	75206-4938

## Candice Calhoun

---

**From:** Freisner, David @ Dallas <DFreisner@trammellcrow.com>  
**Sent:** Monday, June 23, 2025 1:25 PM  
**To:** Erin Banks - WWD; Candice Calhoun  
**Subject:** TCC Cross Timbers - TCEQ Contact  
**Attachments:** TCEQ - Core Data Form.pdf

Candice,

Per our conversation last week attached is a revised core data form to correct the deficiencies. I have included scanned versions of the wet signed form and can mail the originals as needed. I also have added the extra page that has the building corner with coordinates and measurements to the adjacent streets. Let me know If this satisfies all the questions that were open.

### **David Freisner | Vice President**

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2121 N. Pearl Street, Suite 200 | Dallas, TX 75201  
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[DFreisner@trammellcrow.com](mailto:DFreisner@trammellcrow.com)  
[www.trammellcrow.com](http://www.trammellcrow.com)

Details about the personal data CBRE collects and why, as well as your data privacy rights under applicable law, are available at **[CBRE – Privacy Policy.](#)**

## Candice Calhoun

---

**From:** Freisner, David @ Dallas <DFreisner@trammellcrow.com>  
**Sent:** Tuesday, June 24, 2025 2:17 PM  
**To:** Candice Calhoun; Erin Banks - WWD  
**Subject:** RE: TCC Cross Timbers - TCEQ Contact  
**Attachments:** Scanned from a Xerox Multifunction Printer.pdf

Updated form attached with the description as requested.

### David Freisner | Vice President

Trammell Crow Company  
2121 N. Pearl Street, Suite 200 | Dallas, TX 75201  
C +1 903.268.1010  
[DFreisner@trammellcrow.com](mailto:DFreisner@trammellcrow.com)  
[www.trammellcrow.com](http://www.trammellcrow.com)

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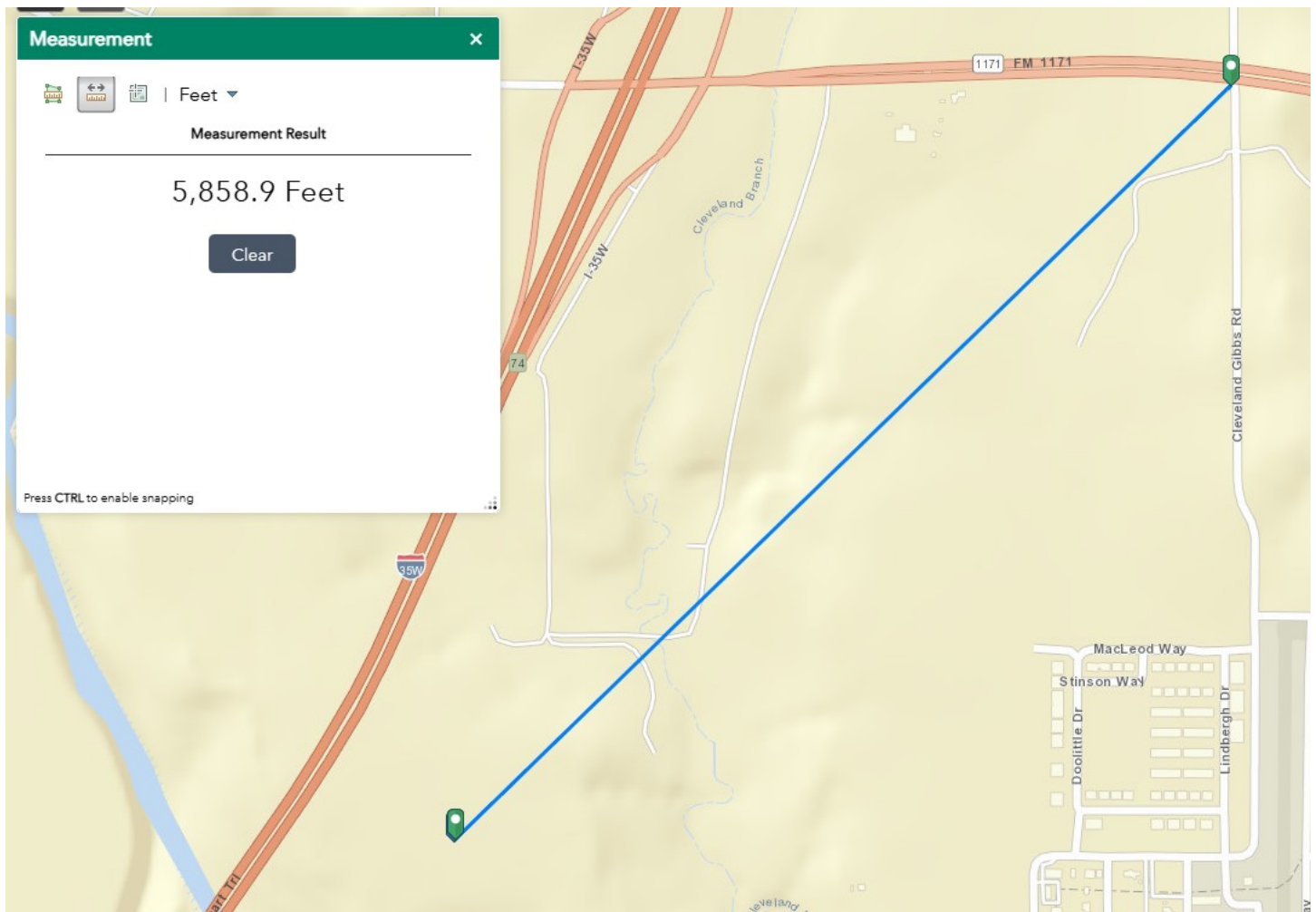
**From:** Candice Calhoun <Candice.Calhoun@tceq.texas.gov>  
**Sent:** Tuesday, June 24, 2025 8:51 AM  
**To:** Freisner, David @ Dallas <DFreisner@trammellcrow.com>; Erin Banks - WWD <erin.banks@wwdengineering.net>  
**Subject:** RE: TCC Cross Timbers - TCEQ Contact

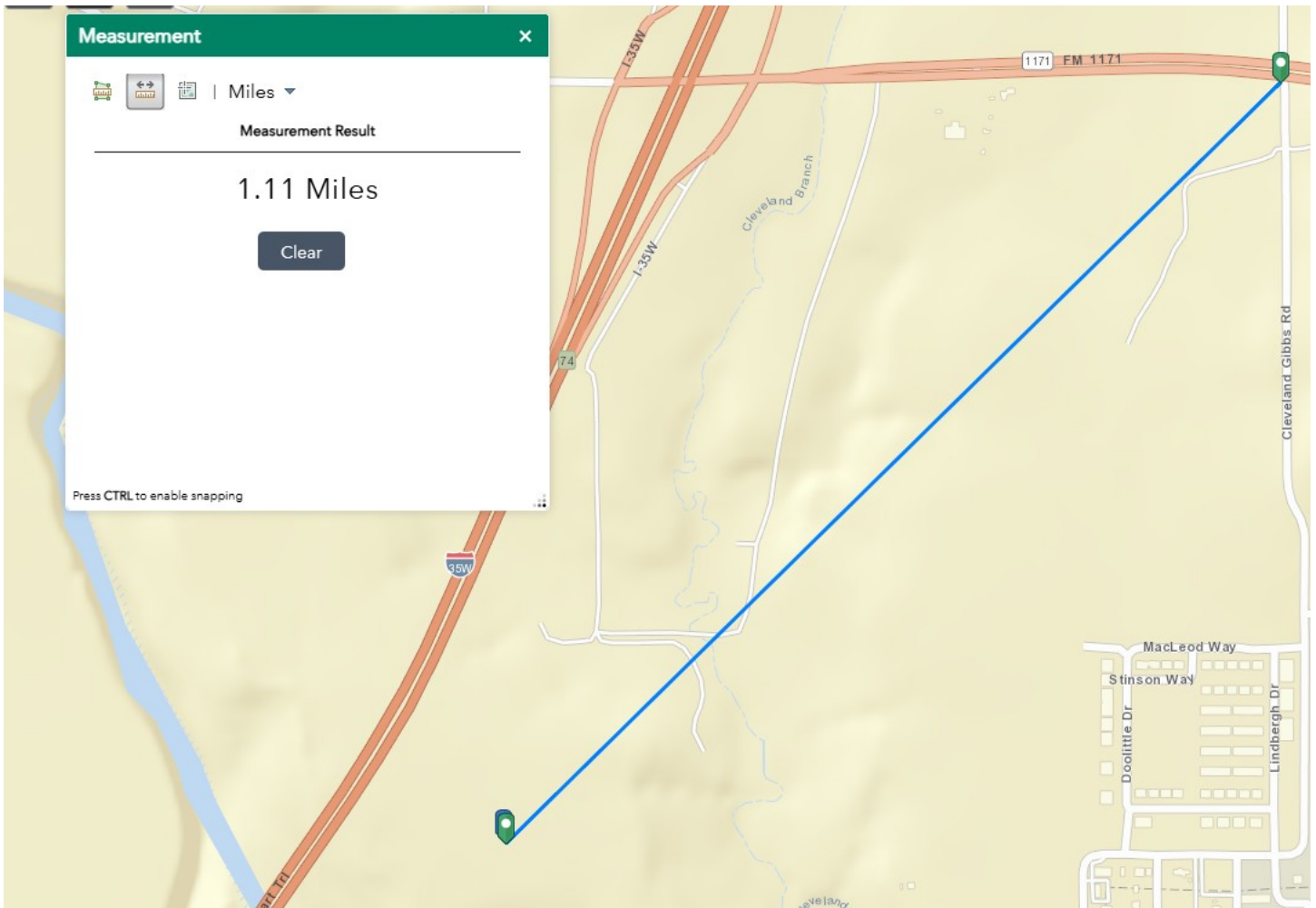
**External**

Good morning, David,

Regarding item 5 of the NOD, the description to the facility, it needs to be a distance in feet or miles from a road intersection. Per my review it looks like the closest intersection would either be Cleveland Gibbs Road and Farm-to-Market Road 1171 or Farm-to-Market Road 1171 and Interstate Highway 35 West. If you would like to use the Cleveland Gibbs Road and Farm-to-market Road, it seems the distance should be approximately 6,000 feet or 1.1 miles. I have placed a snip-it, of both distances from that intersection, below. If you would like to use this intersection with one of these distances, please provide an updated CDF to reflect that, or provide an updated CDF to provide a distance in feet or miles from an intersection of your choosing.

Regarding the remainder of the information on the CDF, the information provided is sufficient for items 4 and 6 of the NOD.





Please let me know if you have any additional questions.

Regards,



**Candice Courville**

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

[candice.calhoun@tceq.texas.gov](mailto:candice.calhoun@tceq.texas.gov)

How is our customer service? Fill out our online customer satisfaction survey at  
[www.tceq.texas.gov/customersurvey](http://www.tceq.texas.gov/customersurvey)

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**From:** Freisner, David @ Dallas <[DFreisner@trammellcrow.com](mailto:DFreisner@trammellcrow.com)>

**Sent:** Monday, June 23, 2025 1:25 PM

**To:** Erin Banks - WWD <[erin.banks@wwdengineering.net](mailto:erin.banks@wwdengineering.net)>; Candice Calhoun <[Candice.Calhoun@tceq.texas.gov](mailto:Candice.Calhoun@tceq.texas.gov)>

**Subject:** TCC Cross Timbers - TCEQ Contact



# TCEQ Core Data Form

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

## SECTION I: General Information

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

## SECTION II: Customer Information

<b>4. General Customer Information</b>		<b>5. Effective Date for Customer Information Updates</b> (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>				
<b>6. Customer Legal Name</b> (If an individual, print last name first: eg: Doe, John)			<i>If new Customer, enter previous Customer below:</i>	
Denton Cross Timbers Partners, LLC				
<b>7. TX SOS/CPA Filing Number</b>	<b>8. TX State Tax ID</b> (11 digits)	<b>9. Federal Tax ID</b> (9 digits)	<b>10. DUNS Number</b> (if applicable)	
0805387597		99-0738910		
<b>11. Type of Customer:</b>	<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:		
<b>12. Number of Employees</b>		<b>13. Independently Owned and Operated?</b>		
<input checked="" type="checkbox"/> 0-20 <input type="checkbox"/> 21-100 <input type="checkbox"/> 101-250 <input type="checkbox"/> 251-500 <input type="checkbox"/> 501 and higher		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
<b>14. Customer Role</b> (Proposed or Actual) – as it relates to the Regulated Entity listed on this form. Please check one of the following				
<input checked="" type="checkbox"/> Owner <input type="checkbox"/> Operator <input type="checkbox"/> Owner & Operator <input type="checkbox"/> Other:				
<input type="checkbox"/> Occupational Licensee <input type="checkbox"/> Responsible Party <input type="checkbox"/> VCP/BSA Applicant				
<b>15. Mailing Address:</b>	2100 McKinney Avenue, Suite 800			
City	Dallas	State	TX	ZIP 75201 ZIP + 4
<b>16. Country Mailing Information</b> (if outside USA)		<b>17. E-Mail Address</b> (if applicable)		
		DFreisner@trammellcrow.com		

<b>18. Telephone Number</b> ( 903 ) 268-1010	<b>19. Extension or Code</b>	<b>20. Fax Number (if applicable)</b> (   ) -
---	------------------------------	--

### SECTION III: Regulated Entity Information

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

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

<b>25. Description to Physical Location:</b>	Building with the North East corner at the coordinates N: 7068855.8345, E: 2354414.2903, which is approximately 6,000 feet to the intersection of Cleveland Gibbs Road and Farm-to-Market Road 1171.						
<b>26. Nearest City</b>				<b>State</b>		<b>Nearest ZIP Code</b>	
Northlake				TX		76262	
<i>Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).</i>							
<b>27. Latitude (N) In Decimal:</b>		33.051570		<b>28. Longitude (W) In Decimal:</b>		-97.246225	
Degrees	Minutes	Seconds		Degrees	Minutes	Seconds	
<b>29. Primary SIC Code</b> (4 digits)	<b>30. Secondary SIC Code</b> (4 digits)		<b>31. Primary NAICS Code</b> (5 or 6 digits)		<b>32. Secondary NAICS Code</b> (5 or 6 digits)		
4225			493110				
<b>33. What is the Primary Business of this entity?</b> (Do not repeat the SIC or NAICS description.)							
Warehousing & Distribution							
2100 McKinney Avenue, Suite 800							

( 903 ) 268-1010		( ) -
------------------	--	-------

**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 checked="" 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 type="checkbox"/> Wastewater	<input type="checkbox"/> Wastewater Agriculture	<input type="checkbox"/> Water Rights	<input type="checkbox"/> Other:

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

<b>40. Name:</b>	David Freisner	<b>41. Title:</b>	Vice President
<b>42. Telephone Number</b>	<b>43. Ext./Code</b>	<b>44. Fax Number</b>	<b>45. E-Mail Address</b>
( 903 ) 268-1010		( ) -	DFreisner@trammellcrow.com

### **SECTION V: Authorized Signature**

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

<b>Company:</b>	Denton Cross Timbers Partners, LLC	<b>Job Title:</b>	Authorized Signatory
<b>Name (In Print):</b>	Jake Marks	<b>Phone:</b>	( 214 ) 562- 5471
<b>Signature:</b>		<b>Date:</b>	6-23-25

## Erwin Madrid

---

**From:** Erwin Madrid  
**Sent:** Wednesday, July 2, 2025 11:21 AM  
**To:** erin.banks@wwdengineering.net  
**Cc:** Candice Calhoun  
**Subject:** Application for Proposed Permit No. WQ0016820001 – Notice of Deficiency 30-Day Will Return Letter  
**Attachments:** WQ0016820001\_Will Return Ltr.pdf  
**Importance:** High

Dear applicant,

The attached Notice of Deficiency 30-Day Will Return Letter was mailed on **July 2, 2025**, requesting additional information needed to declare the application administratively complete. Please mail an original and two copies (with a cover letter) of the complete response by **August 1, 2025**.

Regards,

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



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

## Candice Calhoun

---

**From:** Erin Banks - WWD <erin.banks@wwdengineering.net>  
**Sent:** Friday, July 11, 2025 11:17 AM  
**To:** Candice Calhoun  
**Subject:** RE: Application for Proposed Permit No. WQ0016820001 - Notice of Deficiency  
**Attachments:** Domestic Wastewater Permit App 7-11-25.docx; CT-3B\_TPDES-3.pdf; CT-3B\_TPDES-5.pdf

Yes, in an effort to make sure we have everything correct in the formal resubmittal, I have attached the revised admin report, can you please let me know if it appears I have addressed all of your items (Spanish PLS and NORI are being updated).

Also, here are my other responses, which I will write up formally once agreed upon:

1. We have updated the form, see attached
2. We will submit hard copies as soon as all items are agreed upon and addressed
3. Previously sent payment submittal form and was cleared
- 4-6 Previously cleared, original CDF to be included in hard copy
7. removed information on effluent disposal site
8. added location description of facility
- 9 ??? I am not sure what we need to add here
10. working on updating
11. please see attached
12. we have tried to clarify as much as possible, please see attached
13. The Denton County website/CAD had no information available for this landowner
14. to be included in hard copy submittal
15. We are adding description of facility location, proposed commercial/industrial complex to be located approximately 6,000 feet SW of the intersection of Cleveland Gibbs Road and FM 1171, Not sure how to address discharge route.
16. working on finalizing Spanish

Thank you,  
Erin Banks, P.E.



*State of Texas HUB Certified Firm*  
9217 Hwy 290 West, Suite 110  
Austin, TX 78736  
512-288-2111

---

**From:** Candice Calhoun <Candice.Calhoun@tceq.texas.gov>  
**Sent:** Friday, July 11, 2025 10:24 AM  
**To:** Erin Banks - WWD <erin.banks@wwdengineering.net>  
**Subject:** RE: Application for Proposed Permit No. WQ0016820001 - Notice of Deficiency

Erin,

Andres Venegas  
177 Lakeview Drive  
Roanoke, TX 76262-5279

Brenda Darlene Beaty  
P.O. Box 957  
Glen Rose, TX 76043-0957

Cesar and Cano Isabel Venzor  
6194 Edna Street  
Roanoke, TX 76262-5775

Charles E. and Deborah L. Cook  
P.O. Box 34  
Roanoke, TX 76262-0034

D E Way Ranch Corporation  
9562 FM 740  
Forney, TX 75126-8114

Edna Schulz LLC  
12005 Cleveland Gibbs Road  
Roanoke, TX 76262-5769

Emmit Woods  
11929 Joyce Lane  
Roanoke, TX 76262

Henry Northlake Development  
LLC  
900 Parker Square Ste 250  
Flower Mound, TX 75028-7440

Huey A. Thomas  
11917 Joyce Lane  
Roanoke, TX 76262-5779

JHGS Investments LTD PS & BLW  
FLP Real Property LLC  
6440 N Central Expressway Ste  
815

McMarty Family Partnership LP  
1972 Casa Loma Court  
Grapevine, TX 76051-2805

RO Properties LLC  
170 W Main Street Ste 200  
Lewisville, TX 75057

Sam Edwin and Shannon Keli  
Berube  
1003 Texas Trail  
Kellar, TX 76262-6829

Texas Air Classics Inc.  
PO Box 1542  
Roanoke, TX 76262-1542

W Parnell II LLC  
8440 Steeplechase Circle  
Argyle, TX 76226-6377

Xiangtao Li  
3109 Elizabeth Lane  
Copper Canyon, TX 75077-8463

Yvonne Berkner  
6195 Edna Street  
Roanoke, TX 76262-5775

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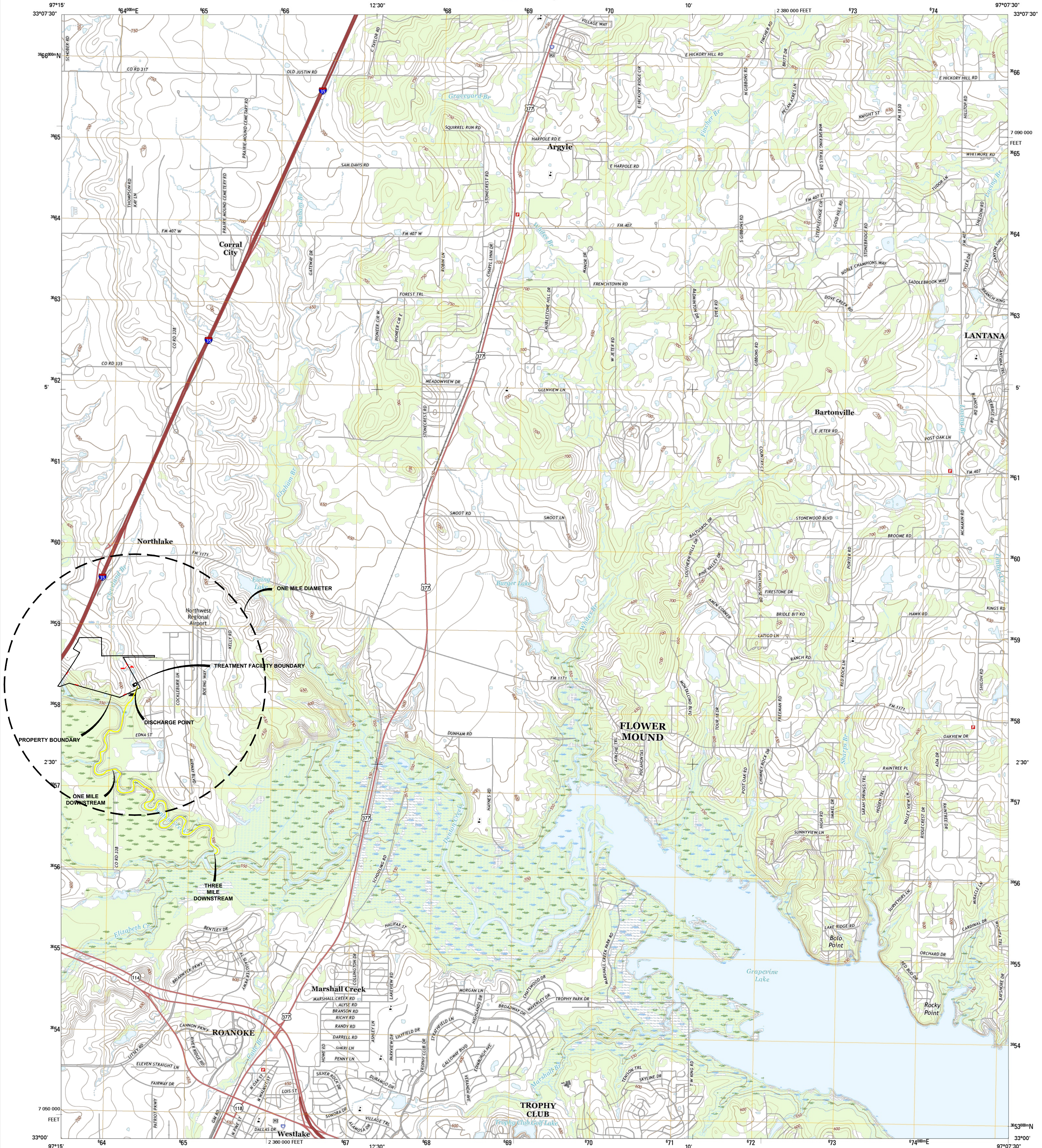
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U.S. DEPARTMENT OF THE INTERIOR  
U.S. GEOLOGICAL SURVEY



ARGYLE QUADRANGLE  
TEXAS-DENTON CO.  
7.5-MINUTE SERIES



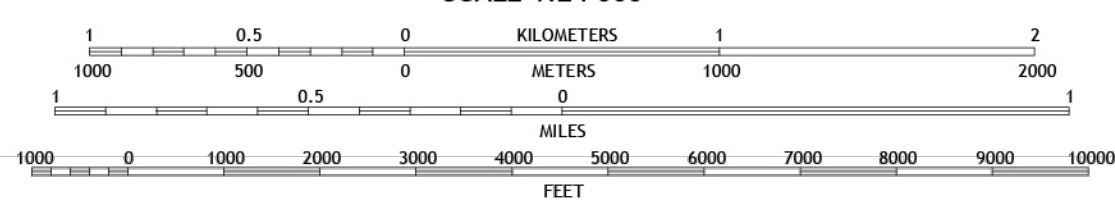
Produced by the United States Geological Survey

North American Datum of 1983 (NAD83)  
World Geodetic System of 1984 (WGS84). Projection and  
1000-foot ticks: Texas Coordinate System of 1983 (north  
central zone).

This map is not a legal document. Boundaries may be  
generalized for this map scale. Private lands within government  
reservations may not be shown. Obtain permission before  
entering private lands.

Imagery.....NAP, July 2014  
Roads.....U.S. Census Bureau, 2014 - 2015  
Names.....GNES, 2015  
Hydrography.....National Hydrography Dataset, 2014  
Contours.....National Elevation Dataset, 2005  
Boundaries.....Multiple sources; see metadata file 1972 - 2015  
Wetlands.....FWS National Wetlands Inventory 1977 - 2014

UTM GRID AND 2016 MAGNETIC NORTH DECLINATION AT CENTER OF SHEET
U.S. National Grid 100,000-m Square ID 798 Grid Zone Designation 14S



SCALE 1:24 000

CONTOUR INTERVAL 10 FEET  
NORTH AMERICAN VERTICAL DATUM OF 1988

This map was produced to conform with the  
National Geospatial Program US Topo Product Standard, 2011.  
A metadata file associated with this product is draft version 0.6.19



QUADRANGLE LOCATION

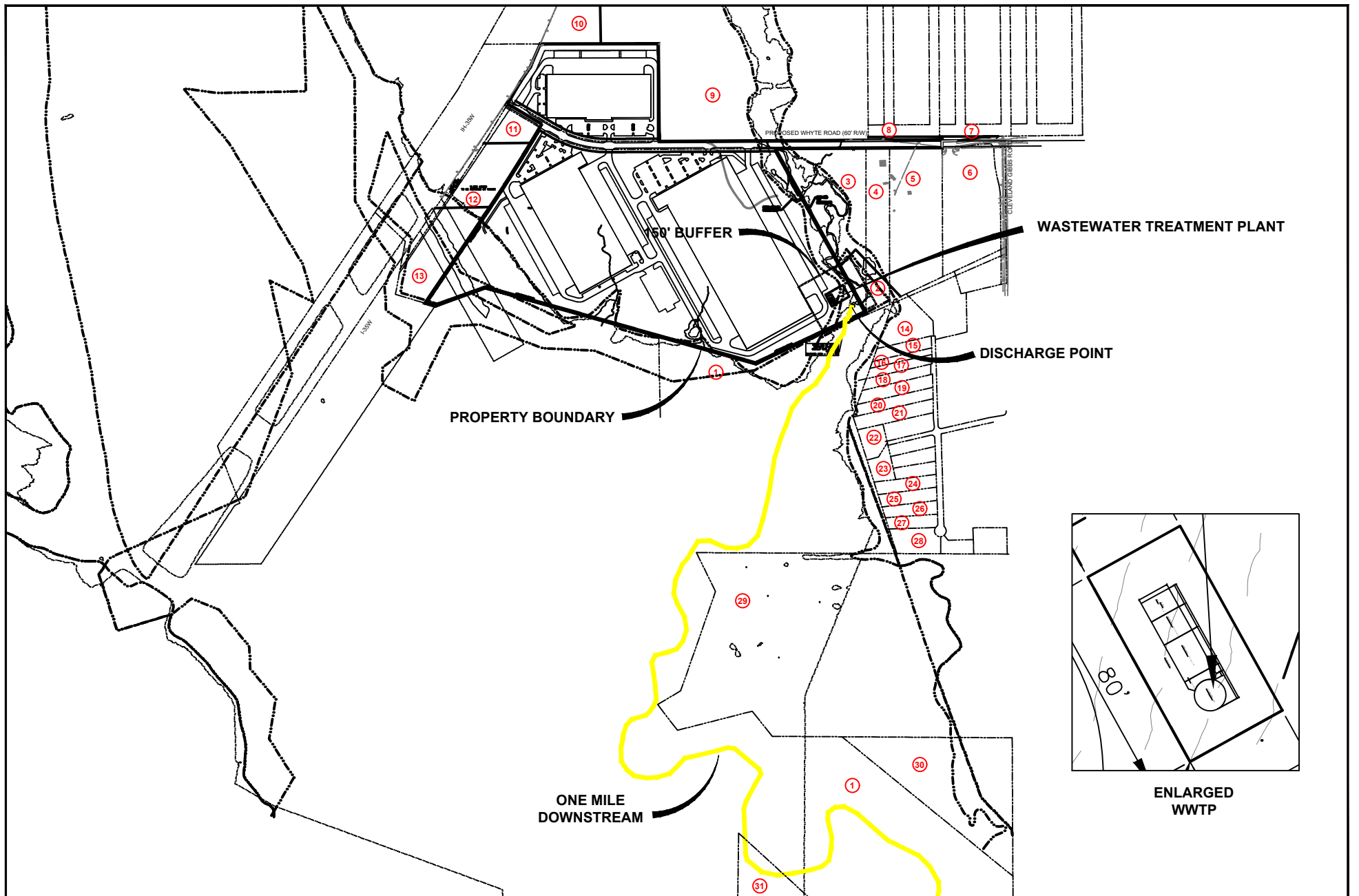
ROAD CLASSIFICATION	
Expressway	Local Connector
Secondary Hwy	Local Road
Ramp	4WD
Interstate Route	US Route
	State Route

1	2	3	1 Ponder
4	5	6	2 Denton West
7	8	9	3 Denton East
			4 Justin
			5 Lewisville West
			6 Keller
			7 Colleyville
			8 Grapevine

ADJOINING QUADRANGLES

ARGYLE, TX  
2016

\* 7643016394884  
NSN 764-301-6394-884  
NSA REF NO. USGS XZ N1400



## Candice Calhoun

---

**From:** Erin Banks - WWD <erin.banks@wwdengineering.net>  
**Sent:** Tuesday, July 15, 2025 10:23 AM  
**To:** Candice Calhoun  
**Subject:** RE: Application for Proposed Permit No. WQ0016820001 - Notice of Deficiency  
**Attachments:** DCT Core data Form 7-25.pdf; Response to TCEQ Admin letter dated 6-11-25.pdf; Municipal Discharge Renewal Spanish NORI 06.19.25.docx; payment form.pdf; Plain Language Summary Cross Timbers Spanish.docx; Domestic Wastewater Permit App 7-15-25.pdf; Adjacent Landowners Cross Timbers Labels 06.03.25.docx; CT-3B\_TPDES-3.pdf; PIP 7-25.pdf

**Importance:** High

Candice-

Here is our official response.

The hard copy will be sent out today, should this be the original submittal or should we change the pages out for the updates we have made?

Also, do you want this in a binder or just bound by rubber bands for distribution?

Thank you,  
Erin Banks, P.E.



*State of Texas HUB Certified Firm*  
9217 Hwy 290 West, Suite 110  
Austin, TX 78736  
512-288-2111

---

**From:** Candice Calhoun <Candice.Calhoun@tceq.texas.gov>  
**Sent:** Monday, July 14, 2025 6:51 AM  
**To:** Erin Banks - WWD <erin.banks@wwdengineering.net>  
**Subject:** RE: Application for Proposed Permit No. WQ0016820001 - Notice of Deficiency

Erin,

Just the original hard copy of the application, as our records indicate we have not received it. Please also ensure that the original signed CDF is included in that as well. The other items can be emailed.

Please let me know if you have any additional questions.



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)

## **Resumen En Language Sencillo (Spanish)**

### **Sistema de Eliminacion de Descargas Contaminantes de Texas (TPDES) Solicitud de Permiso**

Denton Cross Timbers Partner, LLC esta solicitando un permiso para construir una planta de tratamiento de aguas residuales, en complejo comercial/industrial propuesto que se ubicara aproximadamente a 6,000' al suroeste de la interseccion de Cleveland Gibbs Rd and FM 1171, cerca de la ciudad de Northlake in Denton County, Texas 76262. Esta aplicacion es una nueva aplicacion para descargar hasta 20,000 galones por dia de agua domestica tratada.

Se espera que las descargas de la instalacion contengan una demanda bioquimica de oxigeno carbonoso de cinco dias (CBOD<sub>5</sub>), solidos suspendidos totales (TSS), nitrogeno amoniacal (NH<sub>3</sub>-N), y Escherichia coli. Se incluyen contaminantes potenciales adicionales en el Informe Tecnico Nacional 1.0, Section 7. Analisis de contaminantes del efluente tratado en el paquete de solicitud de permiso. Todas las fases de la planta de tratamiento de aguas residuales domesticas consistiran en una planta completa de tratamiento de lodos activados de mezcla. Las unidades de tratamiento constan de una rejilla de barras, un tanque de aireacion, un clarificador, un tanque de retencion de lodos y una camara de contacto con cloro.



# TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

## DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the application.

APPLICANT NAME: Denton Cross Timbers Partners, LLC

PERMIT NUMBER (If new, leave blank): WQ00016820001

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

Minor Amendment (for any flow) \$150.00 ☐

**Payment Information:**

Mailed      Check/Money Order Number: 4250  
Check/Money Order Amount: \$350.00  
Name Printed on Check: WWD Engineering

EPAY      Voucher Number: Click to enter text.

Copy of Payment Voucher enclosed?      Yes ☐

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

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

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

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

- ☐ Active      ☒ Inactive

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

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

d. Check the box next to the appropriate application type

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

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

f. For existing permits:

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

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

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

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

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

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

Denton Cross Timbers Partners, 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: 606392215

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: Marks, Jake

Title: Principal

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

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

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

[Click to enter text.](#)

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

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

CN: Click to enter text.

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

Prefix: Click to enter text.

Last Name, First Name: Click to enter text.

Title: Click to enter text.

Credential: Click to enter text.

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

### C. Core Data Form

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

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

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

- A. Prefix: Ms Last Name, First Name: Banks, Erin  
Title: President Credential: PE  
Organization Name: WWD Engineering  
Mailing Address: 9217 Hwy 290W; Suite 110 City, State, Zip Code: Austin, TX 78736  
Phone No.: 512-801-9049 E-mail Address: erin.banks@wwdengineering.net  
Check one or both: ☒ Administrative Contact ☒ Technical Contact
- B. Prefix: Click to enter text. Last Name, First Name: Click to enter text.  
Title: Click to enter text. Credential: Click to enter text.  
Organization Name: Click to enter text.  
Mailing Address: Click to enter text. City, State, Zip Code: Click to enter text.  
Phone No.: Click to enter text. E-mail Address: Click to enter text.  
Check one or both: ☐ Administrative Contact ☐ Technical Contact

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

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

- A. Prefix: Mr Last Name, First Name: Kieffer, Raymond  
Title: Vice President Credential: Click to enter text.  
Organization Name: Trammell Crow Co.  
Mailing Address: 2100 McKinney Ave; Ste 800 City, State, Zip Code: Dallas, TX 75201  
Phone No.: 214-863-4280 E-mail Address: rkieffer@trammellcrow.com

B. Prefix: Mr Last Name, First Name: Calloway, Russell  
Title: Development Manager Credential: PE  
Organization Name: Trammell Crow Company  
Mailing Address: 2100 McKinney Ave; Suite 800 City, State, Zip Code: Dallas, TX 75201  
Phone No.: 404-277-8356 E-mail Address: rcalloway@trammellcrow.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: Calloway, Russell  
Title: CEO Credential: PE  
Organization Name: Trammell Crow Company  
Mailing Address: 2100 McKinney Ave; Ste 800 City, State, Zip Code: Dallas, TX 75201  
Phone No.: 404-277-8356 E-mail Address: rcalloway@trammellcrow.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: Calloway, Russell  
Title: Development Manager Credential: PE  
Organization Name: Trammell Crow Company  
Mailing Address: 2100 McKinney Ave; Ste 800 City, State, Zip Code: Dallas, TX 75201  
Phone No.: 404-277-8356 E-mail Address: rcalloway@trammellcrow.com

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

### A. Individual Publishing the Notices

Prefix: Ms Last Name, First Name: Banks, Erin  
Title: President Credential: PE  
Organization Name: WWD Engineering  
Mailing Address: 9217 Hwy 290W; Suite 110 City, State, Zip Code: Austin, TX 78736  
Phone No.: 512-801-9049 E-mail Address: erin.banks@wwdengineering.net

**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: Kieffer, Raymond

Title: Vice President

Credential: Click to enter text.

Organization Name: Trammell Crow Co

Mailing Address: 2100 McKinney Ave; Ste 800 City, State, Zip Code: Dallas, TX 75201

Phone No.: 214-863-4280

E-mail Address: rkiefer@trammellcrow.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: Northlake Town Hall

Location within the building: Front Desk

Physical Address of Building: 1500 Commerce Circle, Suite 300

City: Northlake

County: Denton

Contact (Last Name, First Name): Reddin, Nathan

Phone No.: 940-648-3200 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: A

#### 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: 20

### 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 112223797

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):

Denton Cross Timbers

C. Owner of treatment facility: Denton Cross Timbers Partners, 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: Marks, Jake

Title: Principal Credential: Click to enter text.

Organization Name: Denton Cross Timbers Partners, LLC

Mailing Address: 2100 McKinney Ave; Ste 800 City, State, Zip Code: Dallas, TX 75201

Phone No.: 214-562-5471 E-mail Address: jmarks@trammellcrow.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 TPDES, proposed commercial/industrial complex to be located approximately 6,000 feet SW of the intersection of Cleveland Gibbs Road and FM 1171, Denton 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 TPDES – into unnamed dry creek/swale, thence to Denton Creek, thence to Catherine Creek

City nearest the outfall(s): Denton

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

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

☐ Yes ☒ No

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

- ☐ Authorization granted      ☐ Authorization pending

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

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

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

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

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

☐ Yes      ☐ No

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

N/A

- B. City nearest the disposal site: [Click to enter text.](#)

- C. County in which the disposal site is located: [Click to enter text.](#)

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

[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: [See table of contents](#)

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

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

Permit Number: WQ0016820001

Applicant: Denton Cross timbers Partners, 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): Jake Marks

Signatory title: Principal

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

(Use blue ink)

Subscribed and Sworn to before me by the said \_\_\_\_\_

on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

My commission expires on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public

[SEAL]

\_\_\_\_\_  
County, Texas

# DOMESTIC WASTEWATER PERMIT APPLICATION ADMINISTRATIVE REPORT 1.0

The following information is required for new and amendment applications.

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

- 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: Denton County
- 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:** SPIF Attachment B

# WATER QUALITY PERMIT

## PAYMENT SUBMITTAL FORM

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

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

**Mail this form and the check or money order to:**

*BY REGULAR U.S. MAIL*

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

*BY OVERNIGHT/EXPRESS MAIL*

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

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

1. Check or Money Order Number: \$350.00
2. Check or Money Order Amount: [Click to enter text.](#)
3. Date of Check or Money Order: [Click to enter text.](#)
4. Name on Check or Money Order: WWD Engineering
5. APPLICATION INFORMATION

Name of Project or Site: Denton Cross Timbers

Physical Address of Project or Site: [Click to enter text.](#)

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

**Staple Check or Money Order in This Space**

# ATTACHMENT 1

## INDIVIDUAL INFORMATION

### Section 1. Individual Information (Instructions Page 41)

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

Prefix (Mr., Ms., Miss): [Click to enter text.](#)

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

Driver's License or State Identification Number: [Click to enter text.](#)

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

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

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

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

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

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

#### **For Commission Use Only:**

Customer Number:

Regulated Entity Number:

Permit Number:

# DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST OF COMMON DEFICIENCIES

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

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

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

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

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

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

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

## **Things to Know:**

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

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

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

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

Summary of Application (in Plain Language) ☒ Yes