



Administrative Package Cover Page

This file contains the following documents:

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



Portada de Paquete Administrativo

Este archivo contiene los siguientes documentos:

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

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY



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

PROPOSED/ PERMIT NO. WQ0016847001

APPLICATION. PLI I-B, LP, 1100 West 6th Street, Austin, Texas 78703, has applied to the Texas Commission on Environmental Quality (TCEQ) for proposed Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0016847001 (EPA I.D. No. TX0148164) to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 990,000 gallons per day. The domestic wastewater treatment facility will be located approximately 1.07 miles south of the intersection of Scull Road/Cottonseed Run and Dupuy Ranch Road and 3,527 feet southwest of the intersection of River Ranch Circle and River Lakes Lane, in the city of Martindale, in Guadalupe County, Texas 78655. The discharge route will be from the plant site to an unnamed tributary; thence to Lower San Marcus River. TCEQ received this application on July 10, 2025. The permit application will be available for viewing and copying at Seguin Public Library, 313 West Nolte Street, Seguin, in Guadalupe 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=-97.86916,29.833055&level=18>

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

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

El aviso de idioma alternativo en español está disponible en

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

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

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

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

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

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

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

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

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

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

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

Further information may also be obtained from PLI I-B, LP at the address stated above or by calling Ms. Siena Werner, P.E., Project Manager/Kimley-Horn, at 737-787-7618.

Issuance Date: August 25, 2025

Comisión de Calidad Ambiental del Estado de Texas



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

PERMISO PROPUESTO NO. WQ0016847001

SOLICITUD. PLI I-B, LP, 1100 West 6th Street, Austin, Texas, 78703 ha solicitado a la Comisión de Calidad Ambiental del Estado de Texas (TCEQ) para el propuesto Permiso No. WQ0016847001 (EPA I.D. No. TX 0148164) 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 990,000 galones por día. La planta de tratamiento de aguas residuales domésticas estará ubicada aproximadamente a 1.07 millas al sur de la intersección de Scull Road/Cottonseed Run y Dupuy Ranch Road, y a 3,527 pies al suroeste de la intersección de River Ranch Circle y River Lakes Lane, en la ciudad de Martindale, en el condado de Guadalupe, Texas 78655. TCEQ recibió esta solicitud el 10 de Julio de 2025. La solicitud para el permiso estará disponible para leerla y copiarla en Biblioteca Publica de Seguin, 313 West Nolte Street, Seguin, 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=-97.86916,29.833055&level=18>

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

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

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

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

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

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

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

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

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

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

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

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

También se puede obtener información adicional del PLI I-B, LP a la dirección indicada arriba o llamando a Siena Werner, P.E., Gerente de Proyecto/Kimley-Horn al 737-787-7618.

Fecha de emisión: 25 de agosto de 2025



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

SUMMARY OF APPLICATION IN PLAIN LANGUAGE FOR TPDES OR TLAP PERMIT APPLICATIONS

Summary of Application (in plain language) Template and Instructions for Texas Pollutant Discharge Elimination System (TPDES) and Texas Land Application (TLAP) Permit Applications

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

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

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

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

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

PLI I-B, LP. (CNXXXXXXXX) proposes to operate Scull Road Wastewater Treatment Plant (RNXXXXXXXX), a conventional activated sludge process wastewater treatment plant operated to complete mix mode. The facility will be located at approximately 4,218 feet southeast of Scull Road and 3,009 feet southwest of River Ranch Circle, in Martindale, Guadalupe County, Texas 78655. This application is for a new wastewater treatment plant to discharge at a daily average flow rate of 990,000 gallons per day of treated domestic wastewater.

Discharges from the facility are expected to contain Biochemical Oxygen Demand, Total Suspended Solids, Ammonia Nitrogen, and Total Phosphorous. The Single-family flows will be treated by a series of conventional wastewater treatment plant processes including screening, aeration, clarification, digestion, filtration, and disinfection.

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

AGUAS RESIDUALES DOMÉSTICAS /AGUAS PLUVIALES

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

PLI I-B, LP. (CNXXXXXXXXX) propone operar la Planta de Tratamiento de Aguas Residuales de Scull Road (RNXXXXXXXXX, una planta de lodos actividdos convencional operada hasta moda mezcla completa. La instalación estará ubicada en aproximadamente 4.218 pies al sureste de Scull Road y 3.009 pies al suroeste de River Ranch Cirl , en Martindale, Condado de Guadalupe, Texas 78655. Esta solicitud es para una nueva planta de tratamiento de aguas residuales que descargará un caudal promedio diario de 990.000 galones por día de aguas residuales domésticas tratadas.

Se espera que las descargas de la instala instalación contengan demanda Biológica de Oxígeno, Sólidos Suspendidos Totales, Nitrógeno Ammoniacal, y Fósforo Total. Los flujos unifamiliares se estara tratado por una serie de procesos convencionales de tratamiento de aguas residuales, que incluyen cribado, sedimentación, aireación, clarificación, digestión, filtración y desinfección.



JULY 2025
SCULL ROAD WWTP
DOMESTIC WASTEWATER PERMIT
APPLICATION (TPDES)

SUBMITTED BY KIMLEY-HORN AND ASSOCIATES ON BEHALF OF PLI I-B, LP.



July 9th, 2025

Texas Commission on Environmental Quality
Applications Review and Processing Team (MF 148)
Building F, Room 2101
12100 Park 35 Circle
Austin, Texas 78753

RE: Discharge Permit for the Scull Road Wastewater Treatment Plant

Dear Water Quality Team:

This letter serves to transmit the wastewater discharge permit application for the Scull Wastewater Treatment Plant.

The permit application that follows contains the following forms and attachments:

- Attachment A. Domestic Administrative Report (Form 10053)
- Attachment B. Core Data Form
- Attachment C. Plain Language Summary
- Attachment D. Public Involvement Plan
- Attachment E. USGS Map
- Attachment F. Supplemental Permit Information Form
- Attachment G. Affected Landowners Map
- Attachment H. Buffer Zone Map
- Attachment I. Domestic Technical Report (Form 10054)
- Attachment J. Stream Assessment, Original Photographs
- Attachment K. Process Flow Diagram
- Attachment L. Site Drawing
- Attachment M. Nearby Plants
- Attachment N. Design Calculations
- Attachment O. Wind Rose
- Attachment P. Sewage Sludge Solids Management Plan



The attached application contains detailed contact information. In addition, you may contact me with any requests at siena.werner@kimley-horn.com or by phone at 1 (737)-787-7618.

Sincerely,

KIMLEY-HORN AND ASSOCIATES, INC.

Texas Firm No. 928

A handwritten signature in black ink that reads "Siena Werner".

Siena Werner

Project Manager

Attachment A - Domestic Administrative Report
(Form 10053)



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the application.

APPLICANT NAME: PLI I-B, LP.

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

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

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

For TCEQ Use Only

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



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

**DOMESTIC WASTEWATER PERMIT APPLICATION
ADMINISTRATIVE REPORT 1.0**

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

Section 1. Application Fees (Instructions Page 26)

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

Flow	New/Major Amendment	Renewal
<0.05 MGD	\$350.00 <input type="checkbox"/>	\$315.00 <input type="checkbox"/>
≥0.05 but <0.10 MGD	\$550.00 <input type="checkbox"/>	\$515.00 <input type="checkbox"/>
≥0.10 but <0.25 MGD	\$850.00 <input 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 checked="" 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: 1003
Check/Money Order Amount: \$1,650.00
Name Printed on Check: Peregrine Land Investments I, LP
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: N/A

f. For existing permits:

Permit Number: WQ00 N/A

EPA I.D. (TPDES only): TX N/A

Expiration Date: N/A

Section 3. Facility Owner (Applicant) and Co-Applciant 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?

PLI I-B, LP.

(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: Riley, Tim

Title: Manager

Credential: N/A

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

N/A

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

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

CN: 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: N/A

Last Name, First Name: N/A

Title: N/A

Credential: N/A

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

C. Core Data Form

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

Section 4. Application Contact Information (Instructions Page 27)

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

A. Prefix: Ms.

Last Name, First Name: Werner, Siena

Title: Project Manager

Credential: PE

Organization Name: Kimley-Horn

Mailing Address: 5301 Southwest PKWY, Bldg. 2, Suite 100 City, State, Zip Code: Austin, TX 78735

Phone No.: 737-787-7618

E-mail Address: siena.werner@kimley-horn.com

Check one or both: ☒ Administrative Contact ☐ Technical Contact

B. Prefix: Mr.

Last Name, First Name: Clements, Ian

Title: Project Engineer

Credential: PE

Organization Name: Kimley-Horn

Mailing Address: 5301 Southwest PKWY, Bldg. 2, Suite 100 City, State, Zip Code: Austin, TX 78735

Phone No.: 737-241-9266

E-mail Address: ian.clements@kimley-horn.com

Check one or both: ☐ Administrative Contact ☒ Technical Contact

Section 5. Permit Contact Information (Instructions Page 27)

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

A. Prefix: Mr.

Last Name, First Name: Riley, Tim

Title: Manager

Credential: N/A

Organization Name: Peregrine Investment Management, LLC.

Mailing Address: 1100 W. 6th Street City, State, Zip Code: Austin, TX, 78703

Phone No.: 512-944-5045 E-mail Address: Triley@peregrine.land

B. Prefix: Miss Last Name, First Name: Butler, Mary Katherine

Title: Manager Credential: N/A

Organization Name: Peregrine Investment Management, LLC.

Mailing Address: 1100 West 6th Street City, State, Zip Code: Austin, TX, 78703

Phone No.: 512-944-3812 E-mail Address: MKButler@peregrine.land

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: Nape, Noah

Title: Manager Credential: N/A

Organization Name: Peregrine Investment Management, LLC.

Mailing Address: 1100 W. 6th Street City, State, Zip Code: Austin, TX, 78703

Phone No.: 512-940-1424 E-mail Address: Npape@peregrine.land

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: Riley, Tim

Title: Manager Credential: N/A

Organization Name: Peregrine Investment Management, LLC

Mailing Address: 1100 W. 6th Street City, State, Zip Code: Austin, TX, 78703

Phone No.: 512-944-5045 E-mail Address: Triley@peregrine.land

Section 8. Public Notice Information (Instructions Page 27)

A. Individual Publishing the Notices

Prefix: Ms. Last Name, First Name: Werner, Siena

Title: Project Manager Credential: PE

Organization Name: Kimley-Horn

Mailing Address: 5301 Southwest PKWY, Bldg.2, Suite 100 City, State, Zip Code: Austin, TX 78735

Phone No.: 737-787-7618 E-mail Address: siena.werner@kimley-horn.com

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

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

☒ E-mail Address

☐ Fax

☐ Regular Mail

C. Contact permit to be listed in the Notices

Prefix: Ms.

Last Name, First Name: Werner, Siena

Title: Project Engineer

Credential: PE

Organization Name: Kimley-Horn

Mailing Address: 5301 Southwest PKWY, Bldg.2, Suite 100 City, State, Zip Code: Austin, TX 78735

Phone No.: 737-787-7618

E-mail Address: siena.werner@kimley-horn.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: Seguin Public Library

Location within the building: Public Viewing Location on the second floor

Physical Address of Building: 313 W Nolte St

City: Seguin

County: Guadalupe

Contact (Last Name, First Name): N/A

Phone No.: N/A Ext.: N/A

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: C: Plain Language Summary

G. Public Involvement Plan Form

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

Attachment: D: Public Involvement Plan

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 N/A

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):

PLI EMS RANCH-Scull Road

C. Owner of treatment facility: PLI I-B, LP

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

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

Prefix: _ Last Name, First Name: Riley, Tim

Title: N/A Credential: N/A

Organization Name: PLI I-B, LP

Mailing Address: 1100 W. 6th Street City, State, Zip Code: Austin, TX, 78703

Phone No.: 512-940-1424 E-mail Address: info@peregrine.land

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

Attachment: N/A

E. Owner of effluent disposal site:

Prefix: N/A

Last Name, First Name: N/A

Title: N/A

Credential: N/A

Organization Name: N/A

Mailing Address: N/A

City, State, Zip Code: N/A

Phone No.: N/A

E-mail Address: N/A

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

Attachment: N/A

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

Prefix: N/A

Last Name, First Name: N/A

Title: N/A

Credential: N/A

Organization Name: N/A

Mailing Address: N/A

City, State, Zip Code: N/A

Phone No.: N/A

E-mail Address: N/A

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

Attachment: N/A

Section 10. TPDES Discharge Information (Instructions Page 31)

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

☐ Yes ☐ No

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

New permit application. The wastewater treatment facility and effluent disposal site is located approximately 4,218 feet southeast of Scull Road and 3,009 feet southwest of River Ranch Circle in Martindale, Guadalupe County, Texas, 78655.

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:

Outfall discharges into an unclassified stream segment southwest of San Marcos Highway and TX-142 at 29.83320° N, 97.86917° W. The WWTP discharges into the Lower San Marcos River (segment 1808), which flows into Guadalupe River and is classified as segments 1803 and 1804.

City nearest the outfall(s): Martindale

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

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

☐ Yes ☒ No

If yes, indicate by a check mark if:

☐ Authorization granted ☐ Authorization pending

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

Attachment: N/A

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

Section 11. TLAP Disposal Information (Instructions Page 32)

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

☐ Yes ☐ No

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

N/A

- B. City nearest the disposal site: N/A

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

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

N/A

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

Section 12. Miscellaneous Information (Instructions Page 32)

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

☐ Yes ☒ No

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

☐ Yes ☐ No ☒ Not Applicable

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

N/A

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

☐ Yes ☒ No

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

D. Do you owe any fees to the TCEQ?

☐ Yes ☒ No

If yes, provide the following information:

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

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

E. Do you owe any penalties to the TCEQ?

☐ Yes ☒ No

If yes, please provide the following information:

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

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

Section 13. Attachments (Instructions Page 33)

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

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

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

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

☐ Attachment 1 for Individuals as co-applicants

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

Section 14. Signature Page (Instructions Page 34)

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

Permit Number:

Applicant: PLI I-B, LP.

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):

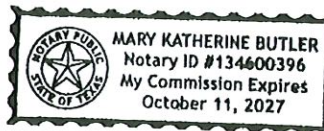
Signatory title:

Signature:  Date: 4/6/25
(Use blue ink)

Subscribed and Sworn to before me by the said Tim Riley
on this 7th day of April, 20 25.
My commission expires on the 11th day of October, 20 27.

Mary Katherine Butler
Notary Public

travis
County, Texas



[SEAL]

COMPANY AGREEMENT

OF

PLI GP I-B, LLC

A Texas Limited Liability Company

This Company Agreement of PLI GP I-B, LLC, a Texas limited liability company, executed to be effective as of September 26, 2023, is adopted, executed and agreed to by the Manager (as defined below) and the sole Member (as defined below).

1. **Formation.** PLI GP I-B, LLC (the “**Company**”) has been organized as a Texas limited liability company under and pursuant to the Texas Business Organizations Code (the “**TBOC**”).

2. **Sole Member.** Peregrine Land Investments I, LP, a Delaware limited partnership (the “**Member**”), shall be the sole member of the Company.

3. **Managers.** Carlotta McLean, Stormey Barton, Tim Riley, and Noah Pape shall be the initial managers of the Company (collectively, the “**Managers**” and each a “**Manager**”).

4. **Contributions.** In exchange for One Hundred Percent (100%) of the membership interests in the Company, the Member has made an initial contribution to the capital of the Company in the amount of One Hundred and 00/100 Dollars (\$100.00). Without creating any rights in favor of any third party, the Member may, from time to time, make additional contributions of cash or property to the capital of the Company, but shall have no obligation to do so.

5. **Distributions.** The Member shall be entitled to (a) receive all distributions (including, without limitation, liquidating distributions) made by the Company, and (b) enjoy all other rights, benefits and interests in the Company.

6. **Single-Member Limited Liability Company for Tax Purposes.** The Managers hereby state that it is their intention that the Company shall be treated as a disregarded entity for purposes of United States federal income tax laws, and further states that they will not take any position or make any election, in a tax return or otherwise, inconsistent herewith. In furtherance of the foregoing, the Company will file its results of operations as part of the Member’s income tax return for each year for United States federal income tax purposes.

7. **Indemnification.**

(a) **Right to Indemnification.** Subject to the limitations and conditions as provided in this Section 7, each person who was or is made a party or is threatened to be made a party to or is involved in any threatened, pending, or completed action, suit or proceeding, whether civil, criminal, administrative, arbitral or investigative (a “**Proceeding**”), or any appeal in such a Proceeding or any inquiry or investigation that could lead to such a Proceeding, by reason of the fact that such person is or was a Member or Manager of the Company or while

such member or Manager of the Company is or was serving at the request of the Company as a Member, Manager, director, officer, partner, venturer, proprietor, trustee, employee, agent, or similar functionary of another foreign or domestic limited liability company, corporation, partnership, joint venture, sole proprietorship, trust, employee benefit plan, or other enterprise shall be indemnified by the Company to the fullest extent permitted by the TBOC, as the same exists or may hereafter be amended (but, in the case of any such amendment, only to the extent that such amendment permits the Company to provide broader indemnification rights than said law permitted the Company to provide prior to such amendment) against judgments, penalties (including excise and similar taxes and punitive damages), fines, settlements and reasonable expenses (including attorneys' fees) (collectively, "**Damages**") actually incurred by such person in connection with such Proceeding, and indemnification under this Section 7 shall continue as to a person who has ceased to serve in the capacity which initially entitled such person to indemnity hereunder. The rights granted pursuant to this Section 7 shall be deemed contract rights, and no amendment, modification or repeal of this Section 7 shall have the effect of limiting or denying any such rights with respect to actions taken or Proceedings arising prior to any such amendment, modification, or repeal. It is expressly acknowledged that the indemnification provided in this Section 7 could involve indemnification for negligence or under theories of strict liability. Notwithstanding anything to the contrary in this Section 7, no Member, Manager or other person shall be indemnified by the Company for any Proceeding, or any appeal, investigation, inquiry, or Damages thereof, arising out of or related to such Member's, Manager's or other person's misconduct against the Company.

(b) **Advance Payment.** The right to indemnification conferred in this Section 7 shall include the right to be paid or reimbursed by the Company the reasonable expenses incurred by a person of the type entitled to be indemnified under Section 7 who was, is or is threatened to be made a named defendant or respondent in a Proceeding in advance of the final disposition of the Proceeding and without any determination as to the person's ultimate entitlement to indemnification; provided, however, that the payment of such expenses incurred by any such person in advance of the final disposition of a Proceeding, shall be made only upon delivery to the Company of a written affirmation by such person of its good faith belief that it has met the standard of conduct necessary for indemnification under this Section 7 and a written undertaking, by or on behalf of such person, to repay all amounts so advanced if it shall ultimately be determined that such indemnified person is not entitled to be indemnified under this Section 7 or otherwise.

(c) **Indemnification of Officers, Employees and Agents.** The Company shall indemnify and advance expenses to an officer of the Company to the extent required to do so by the TBOC or other applicable law. The Company, by adoption of a resolution of the Managers, may indemnify and advance expenses to an officer, employee or agent of the Company to the same extent and subject to the same conditions under which it may indemnify and advance expenses to a Member or Manager under this Section 7; and the Company may indemnify and advance expenses to persons who are not or were not members, officers, employees, or agents of the Company but who are or were serving at the request of the Company as a member, manager, director, officer, partner, venturer, proprietor, trustee, employee, agent, or similar functionary of another foreign or domestic limited liability company, corporation, partnership, joint venture, sole proprietorship, trust, employee benefit plan, or other enterprise against any liability asserted against such person and incurred by such person in such a capacity

or arising out of its status as such a person to the same extent that the Company may indemnify and advance expenses to the Member or Manager under this Section 7.

(d) **Appearance as a Witness.** Notwithstanding any other provision of this Section 7, the Company may pay or reimburse expenses incurred by a Manager or Member in connection with its appearance as a witness or other participation in a Proceeding at a time when it is not a named defendant or respondent in the Proceeding.

(e) **Nonexclusivity of Rights.** The right to indemnification and the advancement and payment of expenses conferred in this Section 7 shall not be exclusive of any other right which a Manager or Member may have or hereafter acquire under any law, provision of this Agreement or otherwise.

(f) **Insurance.** The Company may purchase and maintain insurance, at its expense, to protect itself and any person who is or was serving as a Manager, Member, officer, employee, or agent of the Company or is or was serving at the request of the Company as a member, manager, director, officer, partner, venturer, proprietor, trustee, employee, agent, or similar functionary of another foreign or domestic limited liability company, corporation, partnership, joint venture, sole proprietorship, trust, employee benefit plan, or other enterprise against any expense, liability or loss, whether or not the Company would have the power to indemnify such person against such expense, liability or loss under this Section 7.

(g) **Member Notification.** To the extent required by law, any indemnification of or advance of expenses to a Manager or Member in accordance with this Section 7 shall be duly recorded in the official documentation of the Company within the twelve (12)-month period immediately following the date of the indemnification or advance.

(h) **Savings Clause.** If this Section 7 or any portion hereof shall be invalidated on any ground by any court of competent jurisdiction, then the Company shall nevertheless indemnify and hold harmless the Manager or Member or any other person indemnified pursuant to this Section 7 as to costs, charges and expenses (including attorneys' fees), judgments, fines and amounts paid in settlement with respect to any action, suit, or proceeding, whether civil, criminal, administrative, or investigative to the full extent permitted by any applicable portion of this Section 7 that shall not have been invalidated and to the fullest extent permitted by law.

8. **Amendment of Company Agreement.** Any amendment or supplement to this Agreement shall only be effective if in writing and if the same shall be consented to and approved by the Managers.

9. **Management.**

(a) **Powers.** The powers of the Company shall be exercised by or under the authority of, and the business and affairs of the Company shall be managed under the direction of, a majority of the Managers, acting jointly. The Managers may expressly authorize any Manager or any officer of the Company, acting alone, to execute documents or otherwise act on behalf of and in the name of the Company. Any person dealing with the Company, other than a Member, may rely on the authority of the Managers and officers in taking any action in the name

of the Company without inquiry into the provisions or compliance herewith, regardless of whether that action is actually taken in accordance with the provisions of this Agreement.

(b) Term. Each Manager shall serve for an indefinite term until replaced by a majority vote of the Members or until such Manager's earlier death, resignation or removal.

(c) Removal; Resignation; Vacancies.

(i) The Member may remove or replace the Managers at any time, with or without cause, and any vacancy occurring in the office of Manager shall be filled by the Member. Managers need not be residents of the State of Texas or a member of the Company.

(ii) A Manager may resign at any time by giving thirty (30) days' written notice to the Company. Any such resignation shall be effective upon receipt thereof unless it is specified to be effective at some other time or upon the occurrence of some other event. The Company's acceptance of a resignation shall not be necessary to make it effective.

(iii) The removal or resignation of a Manager shall not constitute an expulsion or withdrawal of a Manager as a Member of the Company or otherwise affect the Manager's rights as a Member. If a Manager is removed or resigns, the Member shall promptly elect a successor as soon as reasonably practicable.

10. **Meetings.**

(a) Members. For as long as there is a sole member of the Company, a meeting shall not be necessary and any acts to be performed by the Member may be handled in accordance with Section 13 herein.

(b) Managers. A quorum for the transaction of business by the Managers shall require the presence or written proxy of a majority of the Managers. The Managers may designate times for the conduct of regular meetings of the Managers. Except as otherwise expressly provided herein, the act of the Managers present at any meeting at which a quorum is present shall be the act of the Managers. In the event the Managers are unable to reach a decision and agree to an action by the Managers, the Managers shall refer the action to the Member, who shall resolve such matter.

11. **Officers.**

(a) The Managers may, from time to time, designate one or more persons to be the officers of the Company. Any officers so designated shall have such authority and perform such duties as the Managers may, from time to time, delegate to them. The Managers may assign titles to particular officers. Unless the Managers decide otherwise, if the title is one commonly used for officers of a for-profit corporation formed under the TBOC, the assignment of such title shall constitute the delegation to such officer of the authority and duties that are normally associated with that office. Each officer shall hold office until such officer's successor shall be duly designated and shall qualify or until such officer's death or until such officer shall resign or shall have been removed in the manner hereinafter provided. Any number of offices

may be held by the same person. The salaries or other compensation, if any, of the officers and agents of the Company shall be fixed from time to time by the Managers.

(b) Any officer may resign as such at any time. Such resignation shall be made in writing and shall take effect at the time specified therein, or if no time is specified, at the time of its receipt by the Managers. The acceptance of a resignation shall not be necessary to make it effective, unless expressly so provided in the resignation. Any officer may be removed as such, either with or without cause, by the Managers whenever in their judgment the best interests of the Company will be served thereby; provided, however, that such removal shall be without prejudice to the contract rights, if any, of the officer so removed. Designation of an officer shall not of itself create contract rights. Any vacancy occurring in any office of the Company may be filled by the Managers.

12. **Termination.** The Company shall terminate and its affairs shall be wound up at such time, if any, as the Member may elect. No other event (including, without limitation, an event described in Section 11.051 or 11.056, of the TBOC) will cause the Company to terminate.


13. **Action by Written Consent.** Any action that may be taken at a meeting of Managers or the Members, as applicable, may be taken without a meeting if a consent in writing, setting forth the action to be taken, shall be signed by the Managers or Members whose consent is required to approve such action under the TBOC or this Agreement, and such consent shall have the same force and effect as a unanimous vote of the Managers, Members or such committee, as applicable, at a meeting duly called and held. No notice shall be required in connection with the use of a written consent pursuant to this Section 13.

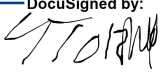
14. **Governing Law.** THIS COMPANY AGREEMENT IS GOVERNED BY AND SHALL BE CONSTRUED IN ACCORDANCE WITH THE LAWS OF THE STATE OF TEXAS (EXCLUDING ITS CONFLICT OF LAWS RULES).


[Signature Page Follows]


EXECUTED as of the day and year first written above.

INITIAL MANAGERS:

DocuSigned by:

25792495EA9E475...
Carlotta McLean

DocuSigned by:

1424AA83E364402...
Stormey Barton


DocuSigned by:

444D5CDBB133446...
Tim Riley

DocuSigned by:

5E997D5E7E7B4E6...
Noah Pape

INITIAL MEMBER:

PEREGRINE LAND INVESTMENTS I, LP

By: PEREGRINE LAND INVESTMENTS GP I, LLC,
its General Partner

DocuSigned by:

By: _____
444D5CDBB133446...
Name: Tim Riley
Title: Manager

LIMITED PARTNERSHIP AGREEMENT

OF

PLI I-B, LP

A Texas Limited Partnership

This Limited Partnership Agreement of PLI I-B, LP, a Texas limited partnership (the “**Partnership**”), is made and entered into effective as of September 26, 2023, by and among the Partners (as defined below).

RECITALS

WHEREAS, the Partnership was formed pursuant to a Certificate of Formation which was executed by the General Partner and filed for recordation in the office of the Texas Secretary of State on or about September 26, 2023 (the “**Certificate**”).

NOW, THEREFORE, for and in consideration of the mutual covenants, rights, and obligations set forth in this Agreement, the benefits to be derived from them, and other good and valuable consideration, the receipt and the sufficiency of which each Partner acknowledges and confesses, the Partners agree as follows:

ARTICLE I DEFINITIONS

1.1 **Certain Definitions.** Capitalized terms used in this Agreement that are not defined in the body of this Agreement shall have the meanings set forth in this Section 1.1.

“**Affiliate**” means, with respect to any Person, any other Person controlling, controlled by, or under common control with that first Person. As used in this Agreement, the term “**control**” (including with correlative meanings, the terms “**controlling**”, “**controlled by**” and “**under common control with**”), as used with respect to any Person, shall mean the possession, directly or indirectly, of the power to direct or cause the direction of the management and policies of such Person, whether through the ownership of voting securities, by contract or otherwise.

“**Agreement**” means this Limited Partnership Agreement of PLI I-B, LP, as it may be further amended from time to time in accordance with the provisions hereof.

“**Capital Account**” means the account to be maintained by the Partnership for each Partner in accordance with Treasury Regulation Section 1.704-1(b)(2)(iv) and, to the extent not inconsistent therewith, the following provisions:

- (a) a Partner’s Capital Account shall be credited with the cash or fair market value of the Partner’s Capital Contributions, the amount of any Partnership liabilities assumed by the Partner, the Partner’s distributive share of Profit and any item of income or gain specially allocated to the Partner pursuant to the provisions of Section 3.4; and

- (b) a Partner's Capital Account shall be debited with the amount of cash and the fair market value of any Partnership property distributed to the Partner, the amount of any liabilities of the Partner assumed by the Partnership (or which are secured by property contributed by the Partner to the Partnership), the Partner's distributive share of Loss and any item of expenses or losses specially allocated to the Partner pursuant to the provisions of Section 3.4.

If any Partnership Interest is Disposed in accordance with the terms of this Agreement, the transferee shall succeed to the Capital Account of the transferor to the extent the Capital Account is attributable to the transferred Partnership Interest; provided, however, that if the transfer causes a termination of the Partnership under Code Section 708(b)(1)(B), the Capital Accounts of the Partners shall be adjusted in conformance with Treasury Regulation Section 1.704-1(b)(2)(iv)(I) and Treasury Regulation Section 1.708-1(b)(1)(iv). Each Partner shall have a single Capital Account that reflects all of its Partnership Interests, regardless of the class of Partnership Interest owned by that Partner and regardless of the time or manner in which it was acquired.

"Capital Contribution" means any contribution by a Partner of cash or property to the capital of the Partnership.

"Code" means the Internal Revenue Code of 1986 and any successor statute, as amended from time to time.

"Dispose" or **"Disposition"** means a sale, gift, assignment, transfer, exchange, mortgage, pledge, grant of a security interest or other disposition or encumbrance, or the acts of the foregoing, whether directly or indirectly and regardless of whether voluntary or involuntary (including by way of bankruptcy, operation of law or otherwise).

"General Partner" means PLI GP I-B, LLC, a Texas limited liability company, or any other Person that is subsequently admitted to the Partnership as a general partner as provided in this Agreement, but does not include any Person who has ceased to be a general partner in the Partnership.

"Limited Partner" means Peregrine Land Investments I, LP, a Delaware limited partnership, or any other Person subsequently admitted to the Partnership as a limited partner as provided in this Agreement but does not include any such Person prior to admittance or any Person who has ceased to be a limited partner in the Partnership.

"Minimum Gain" means has the meaning given that term in Treasury Regulation Section 1.704-2(d).

"Partner" means the General Partner or any Limited Partner.

"Partner Nonrecourse Debt" has the meaning given that term in Treasury Regulation Section 1.704-2(b)(4).

“Partnership Interest” means the interest of a Partner in the Partnership, including the rights and obligations associated with such interest as provided for in this Agreement and under applicable law, and the related Sharing Ratio.

“Person” means a natural person, partnership (whether general or limited), limited liability company, trust, estate, association, corporation, custodian, nominee or any other individual or entity in its own or any representative capacity.

“Profit” and **“Loss”** means for each fiscal year of the Partnership (or other period for which Profit or Loss must be computed), the Partnership’s taxable income or loss determined in accordance with Code Section 703(a), with the following adjustments:

(a) all items of income, gain, loss and deduction required to be stated separately pursuant to Code Section 703(a)(1) shall be included in computing taxable income or loss;

(b) any tax-exempt income of the Partnership, not otherwise taken into account in computing Profit or Loss, shall be included in computing taxable income or loss;

(c) any expenditures of the Partnership described in Code Section 705(a)(2)(B) (or treated as such pursuant to Treasury Regulation Section 1.704-1(b)(2)(iv)(i)) and not otherwise taken into account in computing Profit or Loss, shall be subtracted from taxable income or increase taxable loss; and

(d) any other adjustments required to be made, or in the discretion of the General Partner permitted to be made, pursuant to Section 704(b) of the Code and the Treasury Regulations promulgated thereunder.

“TBOC” means the Texas Business Organizations Code and any successor statute, as amended from time to time.

“Unreturned Capital Contributions” means, with respect to any Partner, the cumulative amount of Capital Contributions made by such Partner to the Partnership, less the cumulative amount of cash and fair market value (as determined by the General Partner) of Partnership property distributed by the Partnership to such Partner pursuant to Section 3.5(a).

1.2 **Construction.** Unless the context requires otherwise: (a) references to Articles and Sections refer to Articles and Sections of this Agreement and (b) all accounting terms not specifically defined herein shall be construed in accordance with United States generally accepted accounting principles, applied on a consistent basis.

ARTICLE II

CONTINUATION; ADMISSION OF CERTAIN PARTNERS

2.1 **Continuation.** The Partnership was formed by the filing of the Certificate, and the Partnership is hereby continued as a limited partnership pursuant to the TBOC.

2.2 **Name.** All Partnership business must be conducted under the name “PLI I-B, LP” or such other name that complies with applicable law as the General Partner may select from time to time.

2.3 **Registered Office; Registered Agent; Other Offices.** The registered office of the Partnership in the State of Texas shall be at such place as the General Partner may designate from time to time. The registered agent for service of process on the Partnership in the State of Texas or any other jurisdiction shall be such Person or Persons as the General Partner may designate from time to time. The principal office of the Partnership in the United States shall be at such place as the General Partner may designate from time to time, which need not be in the State of Texas, and the Partnership shall maintain records there as required by Section 153.551 of the TBOC. The Partnership may have such other offices as the General Partner may designate from time to time.

2.4 **Purposes.** The purposes of the Partnership are to engage in any lawful business or activity for which limited partnerships may be organized under the TBOC.

2.5 **Certificate; Foreign Qualification.** The General Partner has executed and caused the Certificate to be filed with the Texas Secretary of State. The General Partner shall cause the Partnership to comply, to the extent such matters are reasonably within the control of the General Partner, with all requirements necessary to qualify the Partnership as a foreign limited partnership (or a partnership in which the Limited Partners have limited liability) in any other jurisdiction to the extent qualification as such is required in order for the Partnership to conduct the intended activities or business. Upon the request of the General Partner, each Partner shall execute, acknowledge, swear to, and deliver all certificates and other instruments conforming to this Agreement that are necessary or appropriate as determined by the General Partner to qualify, continue, and terminate the Partnership as a limited partnership under the laws of the State of Texas and to qualify, continue, and terminate the Partnership as a foreign limited partnership (or a partnership in which the Limited Partners have limited liability) in all other jurisdictions in which the Partnership may conduct business, and to this end the General Partner may use the power of attorney contained in this Agreement.

2.6 **Term.** The Partnership commenced upon the filing of the Certificate with the Texas Secretary of State and shall have a perpetual existence, unless and until it is dissolved and terminated in accordance with Article VI. Uncertificated Interests. Unless the General Partner determines otherwise, the Partnership Interests shall be uncertificated. Admission. The General Partner is hereby admitted as the sole general partner of the Partnership. The Limited Partner is hereby admitted as a Limited Partner of the Partnership.

ARTICLE III

CAPITAL CONTRIBUTIONS; ALLOCATIONS AND DISTRIBUTIONS

3.1 **Capital Contributions.** No Partner is required to make any Capital Contribution to the Partnership. Upon the request of the General Partner from time to time, the Limited Partners

may, in their sole discretion, make Capital Contributions to the Partnership; provided, however, that any such Capital Contributions shall be made by all of the Limited Partners on a pro rata basis in accordance with their respective Sharing Ratios (as defined in Section 3.2). In the event the General Partner permits any such Capital Contributions to be made by the Limited Partners in a manner other than on a pro rata basis in accordance with their Sharing Ratios, the General Partner shall cause the Limited Partners' Sharing Ratios to be adjusted in a manner proportionate to the Limited Partners' aggregate Capital Contributions and shall amend Section 3.2 to reflect such adjustment. The General Partner shall not be required to make any Capital Contributions.

3.3 Sharing Ratios. The "Sharing Ratio" of each Partner shall be as set forth on Schedule 1, subject to adjustment in accordance with Section 3.1.

3.3 Capital Accounts. The General Partner shall maintain a Capital Account for each Partner.

3.4 Allocations.

(a) *Allocations for Capital Account Purposes.* Except as provided in Section 704(b) of the Code and the regulations thereunder, all Profit and Loss of the Partnership and all items of income, gain, loss, deduction and credit shall be allocated among the Partners in accordance with their respective Sharing Ratios.

(b) *Allocations for Income Tax Purposes.* All items of income, gain, loss and deduction for Federal income tax purposes shall be allocated in the same manner as the corresponding item of Profits and Losses is allocated pursuant to Section 3.4(a), except as otherwise provided in this Section 3.4(b). In accordance with Code Section 704(c) and the applicable Treasury Regulations thereunder, income, gain, loss and deduction with respect to any property contributed to the Partnership shall, solely for tax purposes, be allocated among the Partners so as to take account of any variation between the adjusted basis of such property to the Partnership for Federal income tax purposes and its fair market value as of the date of contribution. In the event the book value of any property is adjusted pursuant to Treasury Regulation Section 1.704-2(b)(2)(iv)(f) or (g), subsequent allocations of income, gain, loss and deduction with respect to such property shall take account of any variation between the adjusted basis of such property for Federal income tax purposes and its book value in the same manner as under Code Section 704(c) and the applicable Regulations thereunder. The General Partner shall elect, in its sole discretion, an applicable allocation method for purposes of the allocations pursuant to this Section 3.4(b).

3.5 Distributions. Subject to any restrictions imposed by applicable law (including the TBOC) or by contract (including restricted payment or similar provisions contained in debt instruments binding on the Partnership), to the extent that the General Partner determines that the Partnership has cash or other property on hand available for distribution (after payment of all then-due obligations of the Partnership, and the establishment of reserves for anticipated needs of the Partnership, including, without limitation for operating expenses (including salaries and bonuses), indemnification payments, capital expenditures, debt payments and acquisition costs), the

Partnership may from time to time, in the sole discretion of the General Partner, make distributions of cash or other property to the Partners as follows:

(a) *First*, to the Partners pro rata in accordance with their respective Unreturned Capital Contributions until each such Partner has received an amount equal to such Partner's Unreturned Capital Contributions; and

(b) *Thereafter*, to the Partners pro rata in accordance with their respective Sharing Ratios.

ARTICLE IV COVENANTS; INVESTMENT REPRESENTATIONS

4.1 **Management of Partnership.** All management powers over the business and affairs of the Partnership shall be vested exclusively in the General Partner, and the General Partner shall have full power and authority to do all things deemed necessary or desirable by it in the conduct of the business of the Partnership without the need for approval by or any other authorization or consent from the Limited Partners. Without limiting the foregoing, the General Partner may (a) cause the Partnership to borrow money, (b) cause the Partnership to lease, sell, dispose, transfer, mortgage or otherwise encumber all or any part of the Partnership's property and assets, (c) cause the Partnership to dissolve or wind up, and (d) amend this Agreement, in each case, without the need for approval by or any other authorization or consent from the Limited Partners.

4.2 **Indemnification.** To the fullest extent permitted by law, the Partnership shall indemnify the General Partner, its Affiliates and their respective officers, directors, partners, members, employees and agents and hold them harmless from and against all losses, costs, liabilities, damages and expenses (including, without limitation, costs of suit and attorneys' fees) any of them may incur as a General Partner or in performing the obligations of the General Partner, **SPECIFICALLY INCLUDING THOSE INCURRED AS A RESULT OF THE INDEMNIFIED PERSON'S SOLE, PARTIAL OR CONCURRENT NEGLIGENCE OR STRICT LIABILITY, AND ON REQUEST BY THE INDEMNIFIED PERSON THE PARTNERSHIP SHALL ADVANCE EXPENSES ASSOCIATED WITH DEFENSE OF ANY RELATED ACTION.**

4.3 **Power of Attorney.**

(a) Each Limited Partner hereby makes, constitutes and appoints the General Partner its true and lawful attorney-in-fact for it, in its name, place and stead and for its use and benefit, to sign, execute, certify, acknowledge, swear to, file and record:

(i) all certificates of limited partnership, assumed name or similar certificates, and other certificates and instruments (including counterparts of this Agreement and amendments to this Agreement) that the General Partner deems necessary in its reasonable discretion to be filed by the Partnership under the laws of the State of Texas or any other state or jurisdiction in which the Partnership is doing or intends to do business;

(ii) any and all amendments or changes to the instruments described in this Section 4.3, as now or hereafter amended, which the General Partner may deem necessary in its reasonable discretion to effect a change or modification of the Partnership in accordance with the terms of this Agreement, including, without limitation, amendments or changes to reflect any amendments adopted by the Partners in accordance with the terms of this Agreement;

(iii) all certificates of cancellation and other instruments that the General Partner deems necessary in its reasonable discretion to effect the dissolution and termination of the Partnership pursuant to the terms of this Agreement; and

(iv) any other instrument that is now or may hereafter be required by law to be filed on behalf of the Partnership or is deemed necessary by the General Partner in its reasonable discretion to carry out fully the provisions of this Agreement in accordance with its terms, including, but not limited to, repurchasing any outstanding Partnership Interests (all in its sole discretion, in accordance with the terms and provisions of this Agreement).

Each Limited Partner authorizes such attorney-in-fact to take any further action that such attorney-in-fact shall reasonably consider necessary in connection with any of the foregoing, hereby giving such attorney-in-fact full power and authority to do and perform each and every act or thing whatsoever requisite or advisable to be done in connection with the foregoing as fully as such Limited Partner might or could do personally, and hereby ratifying and confirming all that such attorney-in-fact shall lawfully do or cause to be done by virtue thereof or hereof.

(b) The power of attorney granted pursuant to this Section 4.3:

(i) is a special power of attorney coupled with an interest and is irrevocable;

(ii) may be exercised by such attorney-in-fact by listing the Partners executing any agreement, certificate, instrument or other document with the single signature of any such attorney-in-fact acting as attorney-in-fact for such Partners; and

(iii) shall survive the bankruptcy, insolvency, dissolution or cessation of existence of a Partner and shall survive the delivery of an assignment by a Partner of its Partnership Interest or any portion thereof, except that where a Partner is admitted as a substituted partner of the Partnership, the power of attorney shall survive the delivery of such assignment for the sole purpose of enabling any such attorney-in-fact to effect such substitution.

4.4 No Preemptive Rights; No Withdrawal; No Redemption. No Partner shall have a preemptive or similar right to acquire additional Partnership Interests. No Limited Partner may withdraw from the Partnership prior to the dissolution of the Partnership. No Limited Partner may redeem its Partnership Interest or any portion thereof.

4.5 Transfer Restrictions. No Partner may Dispose of all or any portion of its Partnership Interest without the prior written consent of the General Partner, which consent may

be given or withheld in the sole discretion of the General Partner, and any purported Disposition without such prior written consent is void ab initio and of no force or effect.

ARTICLE V TAXES

5.1 **Tax Returns.** The General Partner shall cause to be prepared and filed all necessary federal and state income tax returns for the Partnership, including the elections described in Section 5.2. Each Partner shall furnish to the General Partner all pertinent information in its possession relating to Partnership operations that is necessary to enable the Partnership's income tax returns to be prepared and filed.

5.2 **Tax Elections.** The Partnership shall make tax election the General Partner may deem appropriate and in the best interests of the Partners.

5.3 **Tax Matters Partner.** The General Partner shall be the "tax matters partner" of the Partnership pursuant to Section 6231(a)(7) of the Code. The General Partner shall take such action as may be necessary to cause each other Partner to become a "notice partner" within the meaning of Section 6223 of the Code. The General Partner shall inform each other Partner of all significant matters that may come to its attention in its capacity as tax matters partner.

ARTICLE VI DISSOLUTION, LIQUIDATION, AND TERMINATION

6.1 **Dissolution.** The Partnership shall dissolve and its business and affairs shall be wound up on the first to occur of the following:

- (a) the decision of the General Partner; or
- (b) any other event causing dissolution as described in Section 11.058(b) of the TBOC;

provided, however, that upon the occurrence of any event described in Section 6.1(b), the Limited Partners may elect in writing to reconstitute and continue the business of the Partnership within ninety (90) days of any such occurrence and in such case the remaining General Partner (or a substitute General Partner appointed by the Limited Partners) shall, and hereby agrees to, continue the business of the Partnership.

6.2 **Liquidation.** On dissolution of the Partnership, unless the Partnership is reconstituted pursuant to Section 6.1, the General Partner shall act as liquidator or may appoint one or more other Persons as liquidator; provided, however, that if the Partnership dissolves on account of an event of the type described in Section 153.155(a)(4)-(11) of the TBOC with respect to the General Partner, the liquidator shall be one or more Persons selected in writing by the Limited Partners. The liquidator shall proceed diligently to wind up the affairs of the Partnership and make final distributions as provided in this Agreement. The costs of liquidation shall be borne as a Partnership expense. Until final distribution, the liquidator shall continue to operate the

Partnership properties with all of the power and authority of the General Partner. The steps to be accomplished by the liquidator are as follows:

(a) as promptly as practicable after dissolution and again after final liquidation, the liquidator shall cause a proper accounting to be made of the Partnership's assets, liabilities and operations through the last day of the calendar month in which the dissolution occurs or the final liquidation is completed, as applicable;

(b) the liquidator shall pay from Partnership funds all of the debts and liabilities of the Partnership or otherwise make adequate provision for them (including, without limitation, the establishment of a cash escrow fund for contingent liabilities in such amount and for such term as the liquidator may reasonably determine); and

(c) all remaining assets of the Partnership shall be distributed to the Partners in accordance with Section 3.5.

All distributions in kind to the Partners shall be made subject to the liability of each distributee for its allocable share of costs, expenses and liabilities previously incurred or for which the Partnership has committed prior to the date of termination and those costs, expenses and liabilities shall be allocated to the distributee under this Section 6.2. The distribution of cash and/or property to a Partner in accordance with the provisions of this Section 6.2 constitutes a complete return to the Partner of its Capital Contributions and a complete distribution to the Partner of its Partnership Interest and all of the Partnership's property and constitutes a compromise to which all Partners have consented within the meaning of Section 153.203 of the TBOC. To the extent that a Partner returns funds to the Partnership, such Partner has no claim against any other Partner for those funds.

6.3 Termination. On completion of the distribution of Partnership assets as provided in this Agreement, the Partnership shall be terminated, and the General Partner (or such other Person or Persons as the TBOC may require or permit) shall cause the cancellation of the Certificate and any filings made by the Partnership shall take such other actions as may be necessary to terminate the Partnership.

ARTICLE VII GENERAL PROVISIONS

7.1 Notices. All notices, requests or consents provided for or permitted to be given under this Agreement must be in writing and must be given either by depositing that writing in the United States mail, addressed to the recipient, postage paid, and registered or certified with return receipt requested or by delivering that writing to the recipient in person, by courier or by facsimile transmission. A notice, request or consent given under this Agreement is effective on receipt at the address of the Person to receive it. All notices, requests, and consents to be sent to a Partner must be sent to or made at the address of such Partner contained in the Partnership's records.

7.2 **Entire Agreement; Supersedure.** This Agreement constitutes the entire agreement of the Partners relating to the Partnership and supersede any and all prior contracts or agreements with respect to the Partnership, whether oral or written.

7.3 **Effect of Waiver or Consent.** A waiver or consent, express or implied, to or of any breach or default by any Person in the performance by that Person of its obligations with respect to the Partnership is not a consent or waiver to or of any other breach or default in the performance by that Person of the same or any other obligations of that Person with respect to the Partnership. Failure on the part of a Person to complain of any act of any Person or to declare any Person in default with respect to the Partnership, irrespective of how long that failure continues, does not constitute a waiver by that Person of its rights with respect to that default until the applicable statute-of-limitations period has run.

7.4 **Amendment or Modification.** This Agreement may be amended or modified from time to time only by a written instrument executed by the General Partner.

7.5 **Binding Effect.** Subject to the restrictions on Dispositions set forth in this Agreement, this Agreement is binding on and inures to the benefit of the Partners and their respective heirs, legal representatives, successors and assigns.

7.6 **Governing Law; Severability.** This Agreement shall be governed by and construed in accordance with the internal laws of the State of Texas without giving effect to any choice or conflict of law provision or rule (whether of the State of Texas or any other jurisdiction) that would cause the application of laws of any jurisdiction other than those of the State of Texas. If any provision of this Agreement or its application to any Person or circumstance is held invalid or unenforceable to any extent, the remainder of this Agreement and the application of that provision to other Persons or circumstances is not affected and that provision shall be enforced to the greatest extent permitted by law.

7.7 **Venue for Dispute Resolution; Waiver of Jury.** ANY LEGAL SUIT, ACTION OR PROCEEDING ARISING OUT OF OR BASED UPON THIS AGREEMENT, THE DOCUMENTS TO BE DELIVERED HEREUNDER OR THE TRANSACTIONS CONTEMPLATED HEREBY OR THEREBY MAY BE INSTITUTED ONLY IN THE FEDERAL COURTS OF THE UNITED STATES OF AMERICA OR THE COURTS OF THE STATE OF TEXAS IN EACH CASE LOCATED IN THE CITY OF AUSTIN, TEXAS, AND EACH PARTY IRREVOCABLY SUBMITS TO THE EXCLUSIVE JURISDICTION OF SUCH COURTS IN ANY SUCH SUIT, ACTION OR PROCEEDING. EACH PARTY ACKNOWLEDGES AND AGREES THAT ANY CONTROVERSY WHICH MAY ARISE UNDER THIS AGREEMENT OR THE DOCUMENTS TO BE DELIVERED HEREUNDER IS LIKELY TO INVOLVE COMPLICATED AND DIFFICULT ISSUES AND, THEREFORE, EACH SUCH PARTY IRREVOCABLY AND UNCONDITIONALLY WAIVES ANY RIGHT IT MAY HAVE TO A TRIAL BY JURY IN RESPECT OF ANY LEGAL ACTION ARISING OUT OF OR RELATING TO THIS

AGREEMENT, ANY DOCUMENT EXECUTED OR DELIVERED IN CONNECTION HERewith OR THE TRANSACTIONS CONTEMPLATED HEREBY.

7.8 **Specific Performance and Injunctive Relief.** The parties agree that irreparable damage would occur if any provision of this Agreement were not performed in accordance with the terms hereof and that the parties shall be entitled to seek specific performance of the terms hereof and temporary or permanent injunctive relief (including restraining orders) without bond, in addition to any other remedy to which they are entitled at law or in equity.

7.9 **Further Assurances.** In connection with this Agreement and the transactions contemplated by it, each Partner shall execute and deliver any additional documents and instruments and perform any additional acts that may be necessary or appropriate to effectuate and perform the provisions of this Agreement and those transactions.

7.10 **Waiver of Certain Rights.** Each Partner irrevocably waives any right it may have to maintain any action for dissolution of the Partnership or for partition of the property of the Partnership.

7.11 **Liability to Third Parties.** No Limited Partner shall be liable for the debts, obligations or liabilities of the Partnership by reason of being a Limited Partner.


7.12 **Counterparts.** This Agreement may be executed in counterparts, each of which shall be deemed an original, but all of which together shall be deemed to be one and the same agreement. A signed copy of this Agreement delivered by facsimile, e-mail of scanned copies, DocuSign or other means of electronic transmission shall be deemed to have the same legal effect as delivery of an original signed copy of this Agreement.

[Signature Page Follows]

EXECUTED as of the day and year first written above.

GENERAL PARTNER:


PLI GP I-B, LLC

DocuSigned by:

By: _____
Name: Tim Riley
Title: Manager

LIMITED PARTNER:

PEREGRINE LAND INVESTMENTS I, LP

By: PEREGRINE LAND INVESTMENTS GP I, LLC,
its General Partner

DocuSigned by:

By: _____
Name: Tim Riley
Title: Manager

SCEULE 1

Partner	Sharing Ratio
<i>General Partner</i>	
PLI GP I-B, LLC	0%
<i>Limited Partner</i>	
Peregrine Land Investments I, LP	100%

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: Guadalupe County Appraisal District

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

☐ Yes ☒ No

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

N/A

Section 2. Original Photographs (Instructions Page 38)

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

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

Section 3. Buffer Zone Map (Instructions Page 38)

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

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

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

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

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

- ☐ Yes ☒ No

DOMESTIC WASTEWATER PERMIT APPLICATION

SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

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

Attachment: Attachment F – Supplemental Permit Information Form

WATER QUALITY PERMIT

PAYMENT SUBMITTAL FORM

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

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

Mail this form and the check or money order to:

BY REGULAR U.S. MAIL

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

BY OVERNIGHT/EXPRESS MAIL

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

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

1. Check or Money Order Number: XXXXXXXXXX
2. Check or Money Order Amount: \$1650.00
3. Date of Check or Money Order: 07/08/2025
4. Name on Check or Money Order: Peregrine Land Investments I, LP
5. APPLICATION INFORMATION

Name of Project or Site: Scull Road Wastewater Treatment Plant

Physical Address of Project or Site: New permit application. The wastewater treatment facility and effluent disposal site is located approximately 4,218 feet southeast of Scull Road and 3,009 feet southwest of River Ranch Circle in Martindale, Guadalupe County, Texas, 78655.

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

Attachment B – Core Data Form



TCEQ Core Data Form

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

SECTION I: General Information

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

SECTION II: Customer Information

4. General Customer Information		5. Effective Date for Customer Information Updates (mm/dd/yyyy)			
<input checked="" type="checkbox"/> New Customer <input type="checkbox"/> Update to Customer Information <input type="checkbox"/> Change in Regulated Entity Ownership					
<input type="checkbox"/> Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)					
The Customer Name submitted here may be updated automatically based on what is current and active with the Texas Secretary of State (SOS) or Texas Comptroller of Public Accounts (CPA).					
6. Customer Legal Name (If an individual, print last name first: eg: Doe, John)				If new Customer, enter previous Customer below:	
PLI I-B, LP.					
7. TX SOS/CPA Filing Number		8. TX State Tax ID (11 digits)		9. Federal Tax ID (9 digits)	
805242658		32091852809		93-3924591	
10. DUNS Number (if applicable)					
11. Type of Customer:		<input type="checkbox"/> Corporation		<input type="checkbox"/> Individual	
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		Partnership: <input type="checkbox"/> General <input checked="" type="checkbox"/> Limited	
12. Number of Employees		13. Independently Owned and Operated?			
<input checked="" type="checkbox"/> 0-20 <input type="checkbox"/> 21-100 <input type="checkbox"/> 101-250 <input type="checkbox"/> 251-500 <input type="checkbox"/> 501 and higher		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
14. Customer Role (Proposed or Actual) – as it relates to the Regulated Entity listed on this form. Please check one of the following					
<input 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					
15. Mailing Address:					
1100 W. 6 th Street					
City		Austin		State TX ZIP 78703 ZIP + 4	
16. Country Mailing Information (if outside USA)				17. E-Mail Address (if applicable)	
				Triley@peregrine.land	

18. Telephone Number (512) 944-5045	19. Extension or Code	20. Fax Number (if applicable) () -
------------------------------------------	-----------------------	-----------------------------------------

SECTION III: Regulated Entity Information

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

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

25. Description to Physical Location:	The wastewater treatment facility site is located approximately 4,218 feet southeast of Scull Road.							
26. Nearest City				State		Nearest ZIP Code		
Martindale				TX		78655		
Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).								
27. Latitude (N) In Decimal:		29.83320		28. Longitude (W) In Decimal:		97.86917		
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds			
29	49	59.71	97	52	9.26			
29. Primary SIC Code (4 digits)		30. Secondary SIC Code (4 digits)		31. Primary NAICS Code (5 or 6 digits)		32. Secondary NAICS Code (5 or 6 digits)		
33. What is the Primary Business of this entity? (Do not repeat the SIC or NAICS description.)								
Water & Wastewater Facility								
34. Mailing Address:								
	1100 W. 6 th Street							
	City	Austin	State	TX	ZIP	78703	ZIP + 4	
35. E-Mail Address:		Triley@peregrine.land						
36. Telephone Number			37. Extension or Code			38. Fax Number (if applicable)		
(512) 944-5045						() -		

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

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


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

SECTION IV: Preparer Information

40. Name:	Siena Werner	41. Title:	Project Manager
42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Mail Address
{ 787 } 737-7618		() -	Siena.Werner@kimley-horn.com

SECTION V: Authorized Signature

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

Company:	PEREGRINE INVESTMENT MGMT	Job Title:	MEMBER
Name (In Print):	TIM RILEY	Phone:	'512' 944 5045
Signature:		Date:	4/6/25

Attachment C – Plain Language Summary



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

SUMMARY OF APPLICATION IN PLAIN LANGUAGE FOR TPDES OR TLAP PERMIT APPLICATIONS

Summary of Application (in plain language) Template and Instructions for Texas Pollutant Discharge Elimination System (TPDES) and Texas Land Application (TLAP) Permit Applications

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

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

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

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

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

PLI I-B, LP. (CNXXXXXXXX) proposes to operate Scull Road Wastewater Treatment Plant (RNXXXXXXXX), a conventional activated sludge process wastewater treatment plant operated to complete mix mode. The facility will be located at approximately 4,218 feet southeast of Scull Road and 3,009 feet southwest of River Ranch Circle, in Martindale, Guadalupe County, Texas 78655. This application is for a new wastewater treatment plant to discharge at a daily average flow rate of 990,000 gallons per day of treated domestic wastewater.

Discharges from the facility are expected to contain Biochemical Oxygen Demand, Total Suspended Solids, Ammonia Nitrogen, and Total Phosphorous. The Single-family flows will be treated by a series of conventional wastewater treatment plant processes including screening, aeration, clarification, digestion, filtration, and disinfection.

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

AGUAS RESIDUALES DOMÉSTICAS /AGUAS PLUVIALES

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

PLI I-B, LP. (CNXXXXXXXXX) propone operar la Planta de Tratamiento de Aguas Residuales de Scull Road (RNXXXXXXXXX, una planta de lodos actividdos convencional operada hasta moda mezcla completa. La instalación estará ubicada en aproximadamente 4.218 pies al sureste de Scull Road y 3.009 pies al suroeste de River Ranch Cirl , en Martindale, Condado de Guadalupe, Texas 78655. Esta solicitud es para una nueva planta de tratamiento de aguas residuales que descargará un caudal promedio diario de 990.000 galones por día de aguas residuales domésticas tratadas.

Se espera que las descargas de la instala instalación contengan demanda Biológica de Oxígeno, Sólidos Suspendidos Totales, Nitrógeno Ammoniacal, y Fósforo Total. Los flujos unifamiliares se estara tratado por una serie de procesos convencionales de tratamiento de aguas residuales, que incluyen cribado, sedimentación, aireación, clarificación, digestión, filtración y desinfección.

INSTRUCTIONS

1. Enter the name of applicant in this section. The applicant name should match the name associated with the customer number.
2. Enter the Customer Number in this section. Each Individual or Organization is issued a unique 11-digit identification number called a CN (e.g. CN123456789).
3. Choose “operates” in this section for existing facility applications or choose “proposes to operate” for new facility applications.
4. Enter the name of the facility in this section. The facility name should match the name associated with the regulated entity number.
5. Enter the Regulated Entity number in this section. Each site location is issued a unique 11-digit identification number called an RN (e.g. RN123456789).
6. Choose the appropriate article (a or an) to complete the sentence.
7. Enter a description of the facility in this section. For example: steam electric generating facility, nitrogenous fertilizer manufacturing facility, etc.
8. Choose “is” for an existing facility or “will be” for a new facility.
9. Enter the location of the facility in this section.
10. Enter the City nearest the facility in this section.
11. Enter the County nearest the facility in this section.
12. Enter the zip code for the facility address in this section.
13. Enter a summary of the application request in this section. For example: renewal to discharge 25,000 gallons per day of treated domestic wastewater, new application to discharge process wastewater and stormwater on an intermittent and flow-variable basis, or major amendment to reduce monitoring frequency for pH, etc. If more than one outfall is included in the application, provide applicable information for each individual outfall.
14. List all pollutants expected in the discharge from this facility in this section. If applicable, refer to the pollutants from any federal numeric effluent limitations that apply to your facility.
15. Enter the discharge types from your facility in this section (e.g., stormwater, process wastewater, once through cooling water, etc.)
16. Choose the appropriate verb tense to complete the sentence.
17. Enter a description of the wastewater treatment used at your facility. Include a description of each process, starting with initial treatment and finishing with the outfall/point of disposal. Use additional lines for individual discharge types if necessary.

Questions or comments concerning this form may be directed to the Water Quality Division's Application Review and Processing Team by email at WO-ARPTeam@tceq.texas.gov or by phone at (512) 239-4671.

Example 1: Industrial Wastewater TPDES Application (ENGLISH)

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

ABC Corporation (CN600000000) operates the Starr Power Station (RN10000000000), a two-unit gas-fired electric generating facility. Unit 1 has a generating capacity of 393 megawatts (MWs) and Unit 2 has a generating capacity of 528 MWs. The facility is located at 1356 Starr Street, near the City of Austin, Travis County, Texas 78753.

This application is for a renewal to discharge 870,000,000 gallons per day of once through cooling water, auxiliary cooling water, and also authorizes the following waste streams monitored inside the facility (internal outfalls) before it is mixed with the other wastewaters authorized for discharge via main Outfall 001, referred to as “previously monitored effluents” (low-volume wastewater, metal-cleaning waste, and stormwater (from diked oil storage area yards and storm drains)) via Outfall 001. Low-volume waste sources, metal-cleaning waste, and stormwater drains on a continuous and flow-variable basis via internal Outfall 101.

The discharge of once through cooling water via Outfall 001 and low-volume waste and metal-cleaning waste via Outfall 101 from this facility is subject to federal effluent limitation guidelines at 40 CFR Part 423. The pollutants expected from these discharges based on 40 CFR Part 423 are: free available chlorine, total residual chlorine, total suspended solids, oil and grease, total iron, total copper, and pH. Temperature is also expected from these discharges. Additional potential pollutants are included in the Industrial Wastewater Application Technical Report, Worksheet 2.0.

Cooling water and boiler make-up water are supplied by Lake Starr Reservoir. The City of Austin municipal water plant (CN600000000, PWS 00000) supplies the facility’s potable water and serves as an alternate source of boiler make-up water. Water from the Lake Starr Reservoir is withdrawn at the intake structure and treated with sodium hypochlorite to prevent biofouling and sodium bromide as a chlorine enhancer to improve efficacy and then passed through condensers and auxiliary equipment on a once-through basis to cool equipment and condense exhaust steam.

Low-volume wastewater from blowdown of boiler Units 1 and 2 and metal-cleaning wastes receive no treatment prior to discharge via Outfall 101. Plant floor and equipment drains and stormwater runoff from diked oil storage areas, yards, and storm drains are routed through an oil and water separator prior to discharge via Outfall 101. Domestic wastewater, blowdown, and backwash water from the service water filter, clarifier, and sand filter are routed to the Starr Creek Domestic Sewage Treatment Plant, TPDES Permit No. WQ0010000001, for treatment and disposal. Metal-cleaning waste from equipment cleaning is generally disposed of off-site.

Example 2: Domestic Wastewater TPDES Renewal application

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

The City of Texas (CN000000000) operates the City of Texas wastewater treatment plant (RN000000000), an activated sludge process plant operated in the complete mix mode. The facility is located at 123 Texas Street, near the City of More Texas, Texas County, Texas 71234.

This application is for a renewal to discharge at an annual average flow of 1,200,000 gallons per day of treated domestic wastewater via Outfalls 001 and 002.

Discharges from the facility are expected to contain five-day carbonaceous biochemical oxygen demand (CBOD₅), total suspended solids (TSS), ammonia nitrogen (NH₃-N), and *Escherichia coli*. Additional potential pollutants are included in the Domestic Technical Report 1.0, Section 7. Pollutant Analysis of Treated Effluent and Domestic Worksheet 4.0 in the permit application package. Domestic wastewater is treated by an activated sludge process plant and the treatment units include a bar screen, a grit chamber, aeration basins, final clarifiers, sludge digesters, a belt filter press, chlorine contact chambers and a dechlorination chamber.

Example 3: Domestic Wastewater TPDES New Application

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

The City of Texas (CN000000000) proposes to operate the City of Texas wastewater treatment plant (RN000000000), an activated sludge process plant operated in the extended aeration mode. The facility will be located at 123 Texas Street, in the City of More Texas, Texas County, Texas 71234.

This application is for a new application to discharge at a daily average flow of 200,000 gallons per day of treated domestic wastewater.

Discharges from the facility are expected to contain five-day carbonaceous biochemical oxygen demand (CBOD₅), total suspended solids (TSS), ammonia nitrogen (NH₃-N), and *Escherichia coli*. Additional potential pollutants are included in the Domestic Technical Report 1.0, Section 7. Pollutant Analysis of Treated Effluent in the permit application package. Domestic wastewater will be treated by an activated sludge process plant and the treatment units will include a bar screen, a grit chamber, aeration basins, final clarifiers, sludge digesters, a belt filter press, chlorine contact chambers and a dechlorination chamber.

Example 4: Domestic Wastewater TLAP Renewal application

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

of the permit application.

The City of Texas (CN000000000) operates the City of Texas wastewater treatment plant (RN000000000), an activated sludge process plant operated in the complete mix mode. The facility is located at 123 Texas Street, near the City of More Texas, Texas County, Texas 71234.

This application is for a renewal to dispose a daily average flow not to exceed 76,500 gallons per day of treated domestic wastewater via public access subsurface drip irrigation system with a minimum area of 32 acres. This permit will not authorize a discharge of pollutants into water in the state.

Land application of domestic wastewater from the facility are expected to contain five-day biochemical oxygen demand (BOD₅), total suspended solids (TSS), 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. Domestic wastewater is treated by an activated sludge process plant and the treatment units include a bar screen, an equalization basin, an aeration basin, a final clarifier, an aerobic sludge digester, tertiary filters, and a chlorine contact chamber. In addition, the facility includes a temporary storage that equals to at least three days of the daily average flow.

Attachment D – Public Involvement Plan



Texas Commission on Environmental Quality

Public Involvement Plan Form for Permit and Registration Applications

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

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

Section 1. Preliminary Screening

New Permit or Registration Application

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

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

Section 2. Secondary Screening

Requires public notice,

Considered to have significant public interest, and

Located within any of the following geographical locations:

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

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

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

Section 3. Application Information

Type of Application (check all that apply):

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

Water Quality

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

Water Rights New Permit

 New Appropriation of Water
 New or existing reservoir

Amendment to an Existing Water Right

 Add a New Appropriation of Water
 Add a New or Existing Reservoir
 Major Amendment that could affect other water rights or the environment

Section 4. Plain Language Summary

Provide a brief description of planned activities.

Section 5. Community and Demographic Information

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

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

(City)

(County)

(Census Tract)

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

City

County

Census Tract

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

Section 6. Planned Public Outreach Activities

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

Yes No

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

Yes No

If Yes, please describe.

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

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

Yes No

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

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

Publish in alternative language newspaper

Posted on Commissioner's Integrated Database Website

Mailed by TCEQ's Office of the Chief Clerk

Other (specify)

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

Yes No

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

Yes No

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

TCEQ Regional Office

TCEQ Central Office

Public Place (specify)

Section 7. Voluntary Submittal

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

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

Yes No

What types of notice will be provided?

Publish in alternative language newspaper

Posted on Commissioner's Integrated Database Website

Mailed by TCEQ's Office of the Chief Clerk

Other (specify)

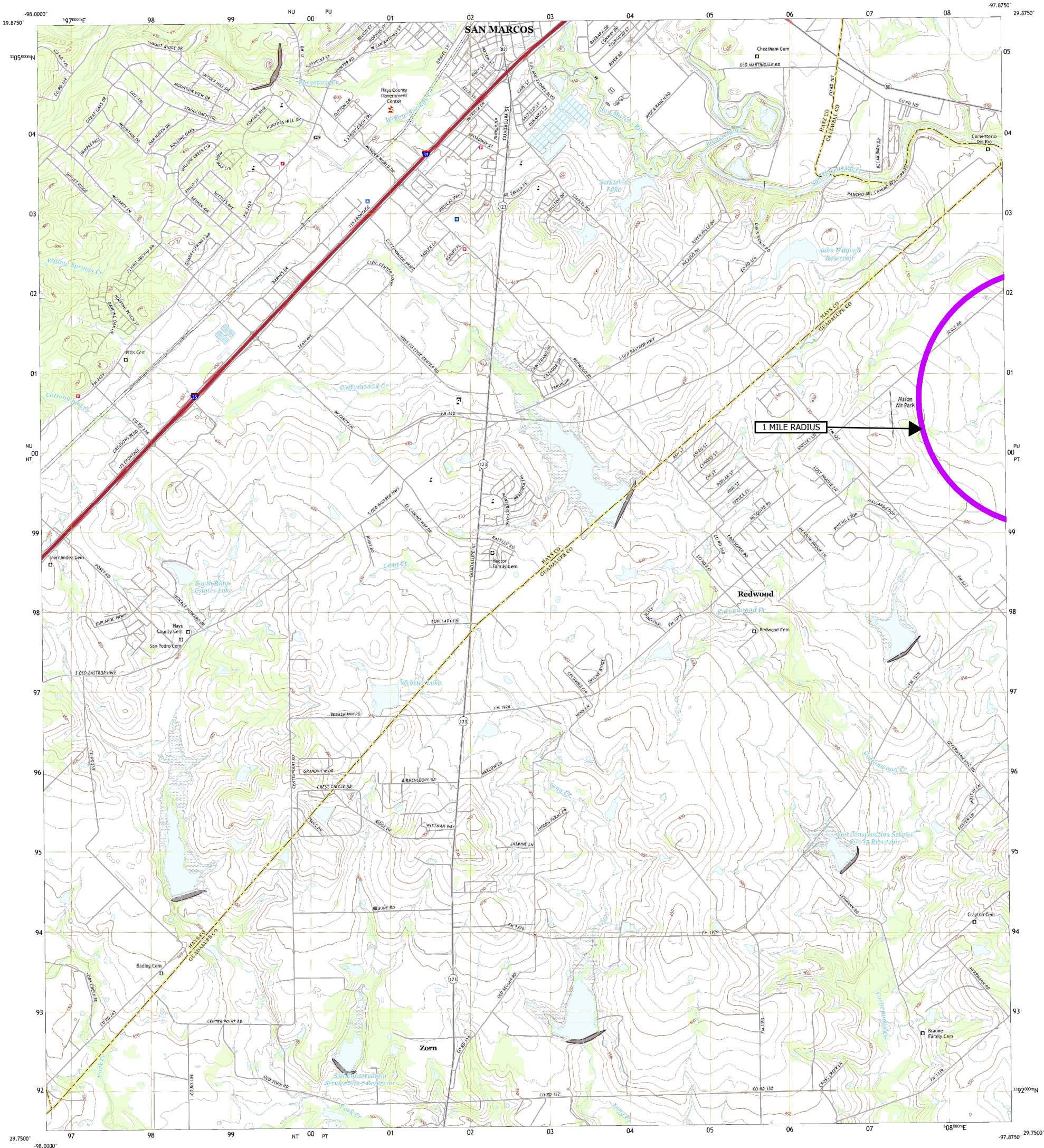
Attachment E – USGS Map



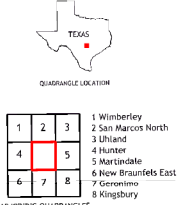
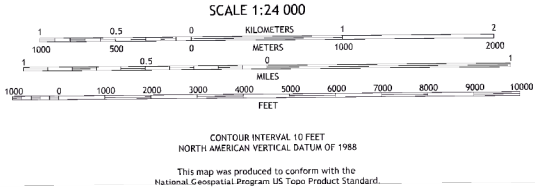
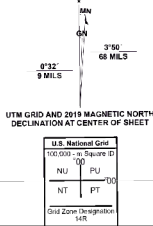
U.S. DEPARTMENT OF THE INTERIOR
U.S. GEOLOGICAL SURVEY



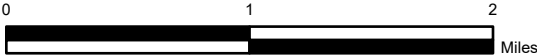
SAN MARCOS SOUTH QUADRANGLE
TEXAS
7.5-MINUTE SERIES



Produced by the United States Geological Survey
North American Datum of 1983 (NAD83)
World Geodetic System of 1984 (WGS84)
Projection and
1,000-meter grid/Universal Transverse Mercator, Zone 14R
This map is not a legal document. Boundaries may be
generated for this map scale. Private lands within government
reservations may not be shown. Obtain permission before
entering private lands.
Imagery.....NAD, October 2016 - November 2016
Roads.....U.S. Census Bureau, 2015 - 2019
Homes.....GNIS, 1979 - 2022
Hydrography.....National Hydrography Dataset, 2002 - 2018
Contours.....National Elevation Dataset, 2019
Boundaries.....Multiple sources; see metadata file 2019 - 2021
Wetlands.....FWS National Wetlands Inventory Not Available



SAN MARCOS SOUTH, TX
2022



SCULL ROAD

WASTEWATER PERMIT

USGS MAP WEST

DATE: 05/20/2025

PREPARED BY: AAB

CHECKED BY: SJW

PROJECT NUMBER: 060019203

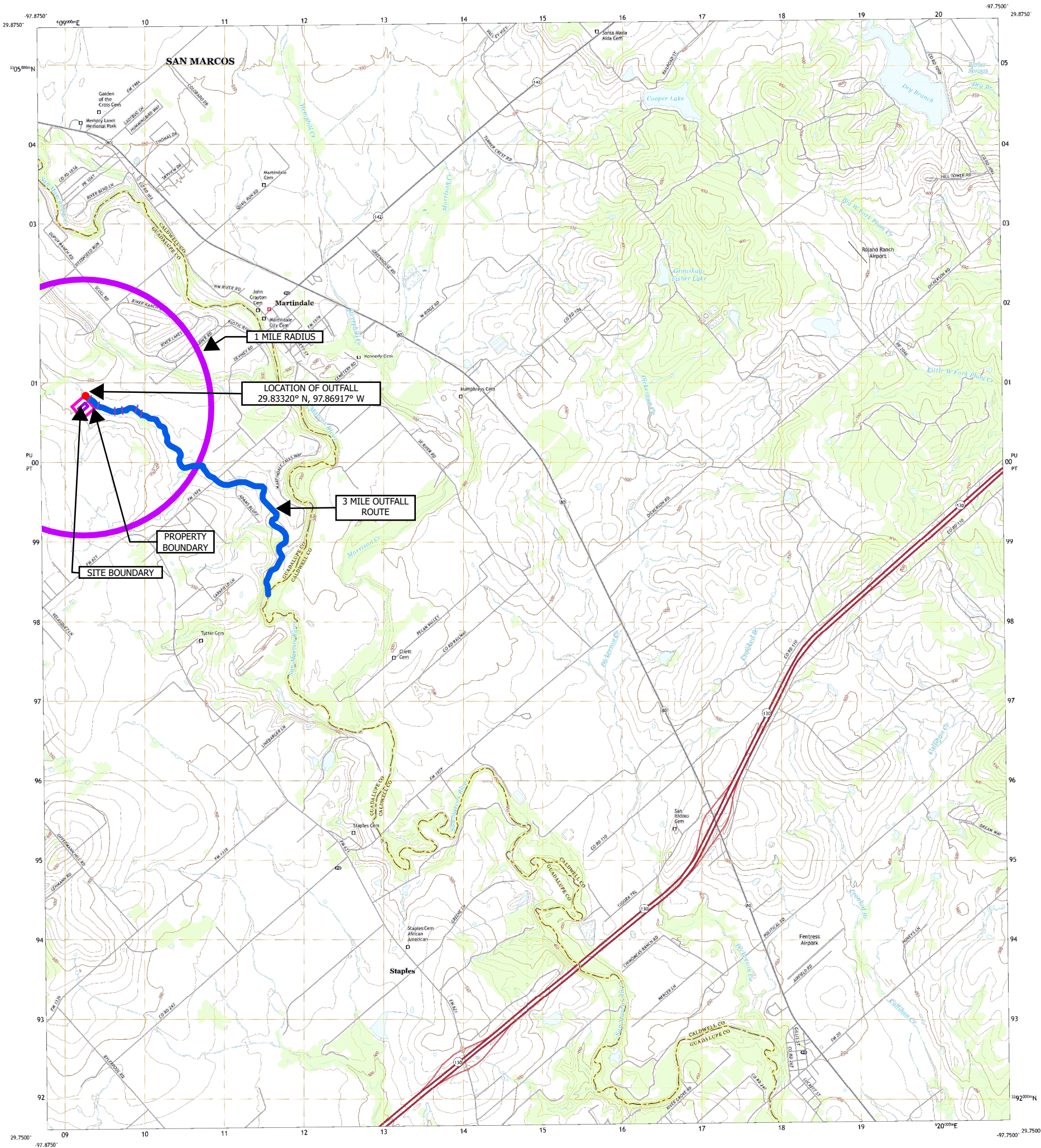




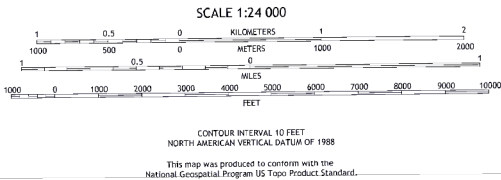
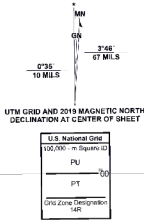
U.S. DEPARTMENT OF THE INTERIOR
U.S. GEOLOGICAL SURVEY



MARTINDALE QUADRANGLE
TEXAS
7.5-MINUTE SERIES



Produced by the United States Geological Survey
North American Datum of 1983 (NAD83)
World Geodetic System of 1984 (WGS84)
Projection and 1 000 meter grid Universal Transverse Mercator, Zone 14R
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, September 2016 - November 2016
Roads.....U.S. Census Bureau 2015 - 2019
Names.....GNIS, 2003 - 2021
Hydrography.....National Hydrography Dataset, 2002 - 2018
Contours.....National Elevation Dataset, 2021
Boundaries.....Multiple sources; see metadata file 2019 - 2021
Wetlands.....FWS National Wetlands Inventory Not Available

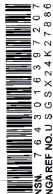


1	2	3
4	5	6
7	8	9

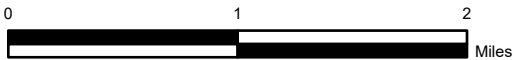
ADJACENT QUADRANGLES

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

MARTINDALE, TX
2022



N



SCULL ROAD

WASTEWATER PERMIT USGS MAP EAST

DATE: 05/20/2025

PREPARED BY: AAB

CHECKED BY: SJW

PROJECT NUMBER: 060019203



Attachment F – Supplemental Permit Information

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

FOR AGENCIES REVIEWING DOMESTIC OR INDUSTRIAL
TPDES WASTEWATER PERMIT APPLICATIONS

TCEQ USE ONLY:

Application type: ____Renewal ____Major Amendment ____Minor Amendment ____New

County: _____ Segment Number: _____

Admin Complete Date: _____

Agency Receiving SPIF:

____ Texas Historical Commission

____ U.S. Fish and Wildlife

____ Texas Parks and Wildlife Department

____ U.S. Army Corps of Engineers

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

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

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

The following applies to all applications:

1. Permittee: Tim Riley

Permit No. WQ00 _____

EPA ID No. TX _____

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

The wastewater treatment facility and effluent disposal site is located approximately 4,218 feet southeast of Scull Road and 3,009 feet southwest of River Ranch Circle in Guadalupe County.

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: Tim Riley

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

Title: Manager

Mailing Address: 1100 W. 6th Street

City, State, Zip Code: Austin, TX, 78703

Phone No.: 512-944-5045 Ext.: N/A Fax No.: N/A

E-mail Address: Triley@peregrine.land

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

N/A

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

The outfall discharges into an unclassified stream segment southeast of Scull Road at 29.83320° N, 97.86917° W. The WWTP will discharge into an unnamed tributary which flows into San Marcos River (Segment 1808).

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):

The construction impact will affect about 5.0 acres of surface disturbance with approximately 30-foot depth of excavation. Caves and karst features are not expected.

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

The existing land is natural shrubs and pasture lands.

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:

No existing structures on the proposed Wastewater Treatment Plant Site.

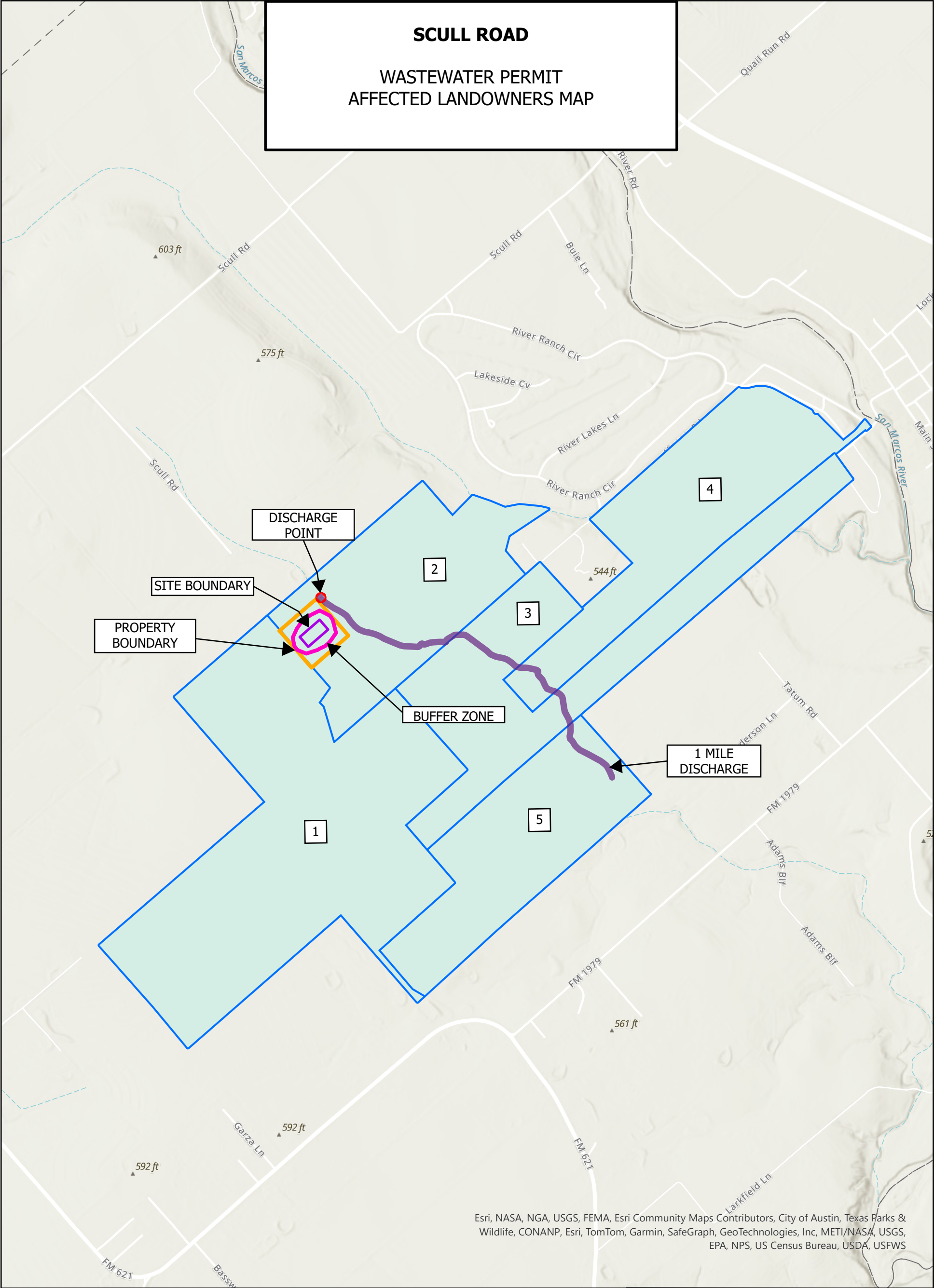
4. Provide a brief history of the property, and name of the architect/builder, if known.

Not known.

Attachment G - Affected Landowners Map

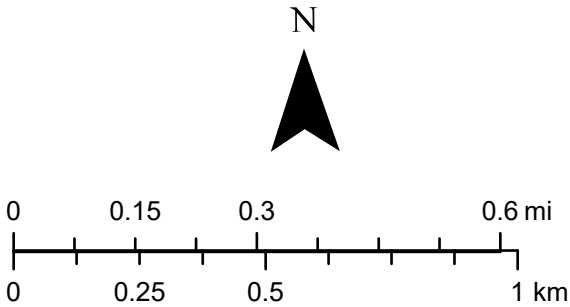
SCULL ROAD

**WASTEWATER PERMIT
AFFECTED LANDOWNERS MAP**



Esri, NASA, NGA, USGS, FEMA, Esri Community Maps Contributors, City of Austin, Texas Parks & Wildlife, CONANP, Esri, TomTom, Garmin, SafeGraph, GeoTechnologies, Inc, METI/NASA, USGS, EPA, NPS, US Census Bureau, USDA, USFWS

- PROPERTY BOUNDARY
- BUFFER ZONE
- 1 MILE DISCHARGE ROUTE
- AFFECTED LANDOWNERS
- DICHARGE POINT



DATE: 05/19/2025

PREPARED BY: AAB

CHECKED BY: SJW

PROJECT NUMBER: 060019203



Property ID	Owner Name	Mailing Address
1	EMS RANCH LLC	PO BOX 130 STAPLES, TX 78670
2	EMS RANCH LLC	PO BOX 130 STAPLES, TX 78670
3	ECK LEROY & MARY DEVINEY ECK LIVING TRUST	13205 GEORGE RD SAN ANTONIO, TX 78230
4	WATERFALL RANCH LLC	PO BOX 201 MARTINDALE, TX 78655
5	MCCLAB MICHAEL DAN	PO BOX 281 MARTINDALE, TX 78655

1
EMS RANCH LLC
PO BOX 130
STAPLES, TX 78670

2
EMS RANCH LLC
PO BOX 130
STAPLES, TX 78670

3
ECK LEROY & MARY DEVINEY ECK LIVING
TRUST
13205 GEORGE RD
SAN ANTONIO, TX 78230

4
WATERFALL RANCH LLC
PO BOX 201
MARTINDALE, TX 78655

5
MAXWELL SOCIAL CLUB
PO BOX 42
MAXWELL, TX 78656

1
EMS RANCH LLC
PO BOX 130
STAPLES, TX 78670

2
EMS RANCH LLC
PO BOX 130
STAPLES, TX 78670

3
ECK LEROY & MARY DEVINEY ECK LIVING
TRUST
13205 GEORGE RD
SAN ANTONIO, TX 78230

4
WATERFALL RANCH LLC
PO BOX 201
MARTINDALE, TX 78655

5
MAXWELL SOCIAL CLUB
PO BOX 42
MAXWELL, TX 78656

1
EMS RANCH LLC
PO BOX 130
STAPLES, TX 78670

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PO BOX 130
STAPLES, TX 78670

3
ECK LEROY & MARY DEVINEY ECK LIVING
TRUST
13205 GEORGE RD
SAN ANTONIO, TX 78230

4
WATERFALL RANCH LLC
PO BOX 201
MARTINDALE, TX 78655

5
MAXWELL SOCIAL CLUB
PO BOX 42
MAXWELL, TX 78656

Attachment H – Buffer Zone Map

Attachment I - Domestic Technical Report
(Form 10054)



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION TECHNICAL REPORT 1.0

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

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

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

A. Existing/Interim I Phase

Design Flow (MGD): 0.1

2-Hr Peak Flow (MGD): 0.4

Estimated construction start date: August 2027

Estimated waste disposal start date: August 2028

B. Interim II Phase

Design Flow (MGD): 0.25

2-Hr Peak Flow (MGD): 1

Estimated construction start date: N/A

Estimated waste disposal start date: N/A

C. Final Phase

Design Flow (MGD): 0.99

2-Hr Peak Flow (MGD): 4

Estimated construction start date: N/A

Estimated waste disposal start date: N/A

D. Current Operating Phase

Provide the startup date of the facility: N/A

Section 2. Treatment Process (Instructions Page 43)

A. Current Operating Phase

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

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

Phase 1: Raw influent will enter through a lift station and will proceed through headworks screen, then flow to 1 aeration basin, 1 clarifier, 1 digester, through cloth disc filters, into 1 chlorine contact basin, and then the outfall. Solids will be pumped out of the aerobic digesters into the sludge press then trucked to a landfill. Phase 2: Raw influent will enter the lift station, proceed through one of the headworks screens, into 3 aeration basins, 2 clarifiers, 3 aerobic digesters, through the cloth disc filters, into 2 chlorine contact basins and then the outfall. Solids will be pumped out of the aerobic digester and then trucked to a landfill. Phase 3: Raw influent will enter the lift station and proceed through the headworks screens, split flow into a total of 5 aeration basins, 4 clarifiers, 6 aerobic digesters, through cloth disc filters, into 3 chlorine contact basins, dechlorination and then the outfall. Solids will be pumped out of the aerobic digesters into the sludge press and then trucked to a landfill.

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)
Aeration Basins	5	(3) 35ftX15ftX13ft (2) 50ftX35ftX13ft
Clarifiers	4	(2) Diameter: 26 ft, Depth 10.5 ft (2) Diameter: 42 ft, Depth 10.5 ft
Digesters	6	(3) 34ftX14ftX 11.5ft (3) 40ftX20ftX11.5ft
Cloth disc filters	1	25ftX70ftX13ft
Chlorine Contact Chamber	3	(2) 20ftX12ftX10ft (1) 30ftX16ftX10ft

C. Process Flow Diagram

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

Attachment: K: Process Flow Diagram

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

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

- Latitude: 29.83320 ° N
- Longitude: 97.86917 ° W

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: L: Site Drawing

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

A subdivision off Scull Road that is about 1.28 acres of single-family homes and 0.1 acres of parkland.

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 45)

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

☐ Yes ☒ No

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

☐ Yes ☐ No

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

N/A

Section 5. Closure Plans (Instructions Page 45)

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

☐ Yes ☒ No

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

☐ Yes ☐ No

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

N/A

Section 6. Permit Specific Requirements (Instructions Page 45)

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

A. Summary transmittal

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

☐ Yes ☐ No

If yes, provide the date(s) of approval for each phase: N/A

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.**

N/A

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*.

N/A

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.

N/A

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.

N/A

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.

N/A

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:

N/A

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.

N/A

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.

N/A

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.

N/A

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

F. Discharges to the Lake Houston Watershed

Does the facility discharge in the Lake Houston watershed?

☐ Yes ☒ No

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

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

1. Acceptance of sludge from other WWTPs

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

☐ Yes ☒ No

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

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

N/A

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

2. Acceptance of septic waste

Is the facility accepting or will it accept septic waste?

☐ Yes ☒ No

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

☐ Yes ☐ No

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

☐ Yes ☐ No

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

N/A

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.

N/A

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

Is the facility in operation?

☐ Yes ☒ No

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

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

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

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

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

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

*TPDES permits only

†TLAP permits only

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

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

Section 8. Facility Operator (Instructions Page 50)

Facility Operator Name: TBD

Facility Operator's License Classification and Level: TBD

Facility Operator's License Number: TBD

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

A. WWTP's 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 Biosolids Treatment Process

Check all that apply. See instructions for guidance.

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

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

C. Biosolids Management

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

Biosolids Management

Management Practice	Handler or Preparer Type	Bulk or Bag Container	Amount (dry metric tons)	Pathogen Reduction Options	Vector Attraction Reduction Option
Disposal in Landfill	Off-site Third-Party Handler or Preparer	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: [Registered landfill to be selected at a future date](#)

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

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

E. Transportation method

Name of the hauler: TBD

Hauler registration number: TBD

Sludge is transported as a:

Liquid ☐

semi-liquid ☒

semi-solid ☐

solid ☐

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

A. Beneficial use authorization

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

☐ Yes ☒ No

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

☐ Yes ☐ No

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

☐ Yes ☐ No

B. Sludge processing authorization

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

Sludge Composting ☐ Yes ☒ No

Marketing and Distribution of sludge ☐ Yes ☒ No

Sludge Surface Disposal or Sludge Monofill ☐ Yes ☒ No

Temporary storage in sludge lagoons ☐ Yes ☒ No

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

☐ Yes ☐ No

Section 11. Sewage Sludge Lagoons (Instructions Page 53)

Does this facility include sewage sludge lagoons?

☐ Yes ☒ No

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

A. Location information

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

- Original General Highway (County) Map:

Attachment: N/A

- USDA Natural Resources Conservation Service Soil Map:

Attachment: N/A

- Federal Emergency Management Map:

Attachment: N/A

- Site map:

Attachment: N/A

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: N/A

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:

N/A

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: N/A

Total Kjeldahl Nitrogen, mg/kg: N/A

Total Nitrogen (=nitrate nitrogen + TKN), mg/kg: N/A

Phosphorus, mg/kg: N/A

Potassium, mg/kg: N/A

pH, standard units: N/A

Ammonia Nitrogen mg/kg: N/A

Arsenic: N/A

Cadmium: N/A

Chromium: N/A

Copper: N/A

Lead: N/A

Mercury: N/A

Molybdenum: N/A

Nickel: N/A

Selenium: N/A

Zinc: N/A

Total PCBs: N/A

Provide the following information:

Volume and frequency of sludge to the lagoon(s): N/A

Total dry tons stored in the lagoons(s) per 365-day period: N/A

Total dry tons stored in the lagoons(s) over the life of the unit: N/A

C. Liner information

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

☐ Yes ☐ No

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

N/A

D. Site development plan

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

N/A

Attach the following documents to the application.

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

Attachment: N/A

- Copy of the closure plan

Attachment: N/A

- Copy of deed recordation for the site

Attachment: N/A

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

Attachment: N/A

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

Attachment: N/A

- Procedures to prevent the occurrence of nuisance conditions

Attachment: N/A

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: N/A

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

A. Additional authorizations

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

☐ Yes ☒ No

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

N/A

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:

N/A

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

A. RCRA hazardous wastes

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

☐ Yes ☒ No

B. Remediation activity wastewater

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

☐ Yes ☒ No

C. Details about wastes received

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

Attachment: N/A

Section 14. Laboratory Accreditation (Instructions Page 56)

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

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

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

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

CERTIFICATION:

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

Printed Name:

Title:

Signature: _____

Date: 4/6/25

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 57)

A. Justification of permit need

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

A new treatment plant is necessary to serve the development off of Scull Road. The ultimate build out of the development will include Scull Road Development: Proposed 1.28 acres of single family and 0.1 acres of parkland. Given the acreage distribution of the proposed development, industry standard flows were used to determine that 0.99 MGD would be needed. Three phases of 0.1, 0.25, and 0.99 MGD were then decided to serve the development at Scull Road. Each phase of construction will last approximately 1 year.

B. Regionalization of facilities

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

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

1. *Municipally incorporated areas*

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

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

☐ Yes ☒ No ☐ Not Applicable

If yes, within the city limits of: N/A

If yes, attach correspondence from the city.

Attachment: N/A

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: N/A

2. *Utility CCN areas*

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

☐ Yes ☒ No

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

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

Attachment: N/A

3. *Nearby WWTPs or collection systems*

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

☐ Yes ☒ No

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

Attachment: Click to enter text.

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

Attachment: N/A

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 59)

Is this facility in operation?

☐ Yes ☒ No

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

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

A. Current organic loading

Facility Design Flow (flow being requested in application): N/A

Average Influent Organic Strength or BOD₅ Concentration in mg/l: N/A

Average Influent Loading (lbs/day = total average flow X average BOD₅ conc. X 8.34): N/A

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

N/A

B. Proposed organic loading

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

Table 1.1(1) – Design Organic Loading

Source	Total Average Flow (MGD)	Influent BOD ₅ Concentration (mg/l)
Municipality		
Subdivision	0.99	300
Trailer park – transient		
Mobile home park		
School with cafeteria and showers		
School with cafeteria, no showers		
Recreational park, overnight use		
Recreational park, day use		
Office building or factory		
Motel		
Restaurant		
Hospital		
Nursing home		
Other		
TOTAL FLOW from all sources	0.99	
AVERAGE BOD ₅ from all sources		300

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

A. Existing/Interim I Phase Design Effluent Quality

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

Total Suspended Solids, mg/l: guidance

Ammonia Nitrogen, mg/l: guidance

Total Phosphorus, mg/l: guidance

Dissolved Oxygen, mg/l: guidance

Other: N/A

B. Interim II Phase Design Effluent Quality

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

Total Suspended Solids, mg/l: guidance

Ammonia Nitrogen, mg/l: guidance

Total Phosphorus, mg/l: guidance

Dissolved Oxygen, mg/l: guidance

Other: N/A

C. Final Phase Design Effluent Quality

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

Total Suspended Solids, mg/l: guidance

Ammonia Nitrogen, mg/l: guidance

Total Phosphorus, mg/l: guidance

Dissolved Oxygen, mg/l: guidance

Other: N/A

D. Disinfection Method

Identify the proposed method of disinfection.

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

Dechlorination process: Sulfur dioxide or Sulfite salts

☐ Ultraviolet Light: 20 seconds contact time at peak flow

☐ Other: Click to enter text.

Section 4. Design Calculations (Instructions Page 59)

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

Attachment: Attachment N: Design Calculations

Section 5. Facility Site (Instructions Page 60)

A. 100-year floodplain

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

☒ Yes ☐ No

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

N/A

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

Effective FEMA FIRM map

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: N/A

If no, provide the approximate date you anticipate submitting your application to the Corps: N/A

B. Wind rose

Attach a wind rose: Attachment O: Wind Rose

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

A. Beneficial use authorization

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

☐ Yes ☒ No

If yes, attach the completed **Application for Permit for Beneficial Land Use of Sewage Sludge (TCEQ Form No. 10451)**: N/A

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)**: N/A

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

Attach a solids management plan to the application.

Attachment: Attachment P: Sewage Sludge Solids Management Plan

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

- Treatment units and processes dimensions and capacities

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

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

DOMESTIC WASTEWATER PERMIT APPLICATION

WORKSHEET 2.0: RECEIVING WATERS

The following information is required for all TPDES permit applications.

Section 1. Domestic Drinking Water Supply (Instructions Page 64)

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

☐ Yes ☒ No

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

Owner of the drinking water supply: N/A

Distance and direction to the intake: N/A

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

Attachment: N/A

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

Does the facility discharge into tidally affected waters?

☐ Yes ☒ No

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

A. Receiving water outfall

Width of the receiving water at the outfall, in feet: N/A

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).

N/A

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).

N/A

Section 3. Classified Segments (Instructions Page 64)

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

☐ Yes ☒ No

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

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

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

Name of the immediate receiving waters: Unnamed Tributary to San Marcos River

A. Receiving water type

Identify the appropriate description of the receiving waters.

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

Surface area, in acres: Click to enter text.

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

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

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

B. Flow characteristics

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

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

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

- ☐ USGS flow records
- ☐ Historical observation by adjacent landowners
- ☒ Personal observation
- ☐ Other, specify: Click to enter text.

C. Downstream perennial confluences

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

Click to enter text.

D. Downstream characteristics

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

☐ Yes ☒ No

If yes, discuss how.

Click to enter text.

E. Normal dry weather characteristics

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

The unnamed tributary is dry during dry weather conditions. A few pools exist along the stream.

Date and time of observation: 05/15/2025 at 9 am

Was the water body influenced by stormwater runoff during observations?

☐ Yes ☒ No

Section 5. General Characteristics of the Waterbody (Instructions Page 66)

A. Upstream influences

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

- | | |
|-----------------------------------------------|--------------------------------------------------------------------|
| <input type="checkbox"/> Oil field activities | <input type="checkbox"/> Urban runoff |
| <input type="checkbox"/> Upstream discharges | <input type="checkbox"/> Agricultural runoff |
| <input type="checkbox"/> Septic tanks | <input checked="" type="checkbox"/> Other(s), specify: <u>None</u> |

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: Click to enter text. |

C. Waterbody aesthetics

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

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

DOMESTIC WASTEWATER PERMIT APPLICATION

WORKSHEET 2.1: STREAM PHYSICAL CHARACTERISTICS

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

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

Section 1. General Information (Instructions Page 66)

Date of study: 05/15/2025 Time of study: 9 A.M.

Stream name: Unnamed Tributary to the San Marcos River

Location: The site is located approximately 4,218 feet southeast of Scull Road in Martindale, Texas, 78655.

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

☐ Perennial ☒ Intermittent with perennial pools

Section 2. Data Collection (Instructions Page 66)

Number of stream bends that are well defined: 0

Number of stream bends that are moderately defined: 2

Number of stream bends that are poorly defined: 2

Number of riffles: 0

Evidence of flow fluctuations (check one):

☐ Minor ☒ moderate ☐ severe

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

The stream was dry with few pools present at the time of the stream assessment on 05/15/2025 at (8 A.M.-10 A.M.). Refer to Attachment J for a map of the stream assessment and photographs of the site. There were no obstructions or modifications observed during the stream assessment. When flow is present, water will flow downstream where it will eventually reach the San Marcos River.

Stream transects

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

Table 2.1(1) - Stream Transect Records

Stream type at transect Select riffle, run, glide, or pool. See Instructions, Definitions section.	Transect location	Water surface width (ft)	Stream depths (ft) at 4 to 10 points along each transect from the channel bed to the water surface. Separate the measurements with commas.
Choose an item.	Discharge point (See attachment J)	N/A Channel Width: 42'3"	Channel Elevations @11'; 18" @20'; 19" @27'; 25" @34'; 16"
Choose an item.	Transect 1 (See attachment J)	N/A Channel Width: 39'	Channel Elevations @10'; 14" @19'; 14" @29'; 17" @36'; 6"
Choose an item.	Transect 2 (See attachment J)	N/A Channel Width: 33'	Channel Elevations @5'; 4" @13'; 10" @20'; 14" @27'; 13"
Pool	Transect 3 (See attachment J)	Channel Width: 82'	Channel Elevations @10'; 28" @20'; 50" @66'; 28" @72'; 32"
Choose an item.	Transect 4 (See attachment J)	N/A Channel Width: 29' 10"	Channel Elevations @4'; 11" @10'; 12" @18'; 13" @25'; 10"
Choose an item.	Transect 5 (See attachment J)	N/A Channel Width: 35'	Channel Elevations @5'; 8" @15'; 14"

Stream type at transect Select riffle, run, glide, or pool. See Instructions, Definitions section.	Transect location	Water surface width (ft)	Stream depths (ft) at 4 to 10 points along each transect from the channel bed to the water surface. Separate the measurements with commas.
			@17.5'; 18" @30';12"
Choose an item.	Transect 6 (See attachment J)	N/A Channel Width: 52'	Channel Elevations @16'; 24" @26'; 26" @36'; 21" @45'; 20"
Choose an item.			
Choose an item.			
Choose an item.			

Section 3. Summarize Measurements (Instructions Page 66)

Streambed slope of entire reach, from USGS map in feet/feet: 0.0038

Approximate drainage area above the most downstream transect (from USGS map or county highway map, in square miles): 2.56

Length of stream evaluated, in feet: 2640

Number of lateral transects made: 6

Average stream width, in feet: 0', Average Channel Width: 39'

Average stream depth, in feet: 0', Average Channel Depth: 1.34'

Average stream velocity, in feet/second: 0

Instantaneous stream flow, in cubic feet/second: 0

Indicate flow measurement method (type of meter, floating chip timed over a fixed distance, etc.): None, Stream was dry other than the stagnant pool

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

Maximum pool depth, in feet: 4.2'

DOMESTIC WASTEWATER PERMIT APPLICATION WORKSHEET 3.0: LAND DISPOSAL OF EFFLUENT

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

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

Identify the method of land disposal:

- | | |
|-------------------------------------------------------------------------------------------|----------------------------------------------------------------|
| <input type="checkbox"/> Surface application | <input type="checkbox"/> Subsurface application |
| <input type="checkbox"/> Irrigation | <input type="checkbox"/> Subsurface soils absorption |
| <input type="checkbox"/> Drip irrigation system | <input type="checkbox"/> Subsurface area drip dispersal system |
| <input type="checkbox"/> Evaporation | <input type="checkbox"/> Evapotranspiration beds |
| <input type="checkbox"/> Other (describe in detail): Click to enter text. | |

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

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

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

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

Table 3.0(1) – Land Application Site Crops

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

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

Table 3.0(2) – Storage and Evaporation Ponds

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

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

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

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

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

☐ Yes ☐ No

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

[Click to enter text.](#)

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

[Click to enter text.](#)

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

[Click to enter text.](#)

Section 5. Annual Cropping Plan (Instructions Page 68)

Attach an Annual Cropping Plan which includes a discussion of each of the following items. If not applicable, provide a detailed explanation indicating why. **Attachment:** [Click to enter text.](#)

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

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

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

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

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

Table 3.0(3) – Water Well Data

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

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

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

Section 7. Groundwater Quality (Instructions Page 69)

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

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

Are groundwater monitoring wells available onsite? ☐ Yes ☐ No

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

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

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

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

A. Soil map

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

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

B. Soil analyses

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

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

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

Table 3.0(4) – Soil Data

Soil Series	Depth from Surface	Permeability	Available Water Capacity	Curve Number

Section 9. Effluent Monitoring Data (Instructions Page 71)

Is the facility in operation?

☐ Yes ☐ No

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

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

Table 3.0(5) – Effluent Monitoring Data

[illegible]

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

Click to enter text.

DOMESTIC WASTEWATER PERMIT APPLICATION

WORKSHEET 3.1: SURFACE LAND DISPOSAL OF EFFLUENT

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

Section 1. Surface Disposal (Instructions Page 72)

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

A. Irrigation

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

Design application frequency:

hours/day [Click to enter text.](#) And days/week [Click to enter text.](#)

Land grade (slope):

average percent (%): [Click to enter text.](#)

maximum percent (%): [Click to enter text.](#)

Design application rate in acre-feet/acre/year: [Click to enter text.](#)

Design total nitrogen loading rate, in lbs N/acre/year: [Click to enter text.](#)

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

Method of application: [Click to enter text.](#)

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

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

B. Evaporation ponds

Daily average effluent flow into ponds, in gallons per day: [Click to enter text.](#)

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

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

C. Evapotranspiration beds

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

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

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

Void ratio of soil in the beds: [Click to enter text.](#)

Storage volume within the beds, in acre-feet: [Click to enter text.](#)

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

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

D. Overland flow

Area used for application, in acres: [Click to enter text.](#)

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

Design application rate, in gpm/foot of slope width: [Click to enter text.](#)

Slope length, in feet: [Click to enter text.](#)

Design BOD₅ loading rate, in lbs BOD₅/acre/day: [Click to enter text.](#)

Design application frequency:

hours/day: [Click to enter text.](#) And days/week: [Click to enter text.](#)

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

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

Section 2. Edwards Aquifer (Instructions Page 73)

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

☐ Yes ☐ No

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

☐ Yes ☐ No

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

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

DOMESTIC WASTEWATER PERMIT APPLICATION

WORKSHEET 3.2: SURFACE LAND DISPOSAL OF EFFLUENT

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

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

Section 1. Subsurface Application (Instructions Page 74)

Identify the type of system:

- ☐ Conventional Gravity Drainfield, Beds, or Trenches (new systems must be less than 5,000 GPD)
- ☐ Low Pressure Dosing
- ☐ Other, specify: [Click to enter text.](#)

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

Area of drainfield, in square feet: [Click to enter text.](#)

Application rate, in gal/square foot/day: [Click to enter text.](#)

Depth to groundwater, in feet: [Click to enter text.](#)

Area of trench, in square feet: [Click to enter text.](#)

Dosing duration per area, in hours: [Click to enter text.](#)

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

Dosing amount per area, in inches/day: [Click to enter text.](#)

Infiltration rate, in inches/hour: [Click to enter text.](#)

Storage volume, in gallons: [Click to enter text.](#)

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

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

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

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

Section 2. Edwards Aquifer (Instructions Page 74)

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

- ☐ Yes ☐ No

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

- ☐ Yes ☐ No

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

DOMESTIC WASTEWATER PERMIT APPLICATION

WORKSHEET 3.3: SUBSURFACE AREA DRIP DISPERSAL (SADDS) LAND DISPOSAL OF EFFLUENT

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

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

Section 1. Administrative Information (Instructions Page 75)

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

B. [Click to enter text.](#) Is the owner of the land where the treatment facility is located the same as the owner of the treatment facility?

☐ Yes ☐ No

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

[Click to enter text.](#)

C. Owner of the subsurface area drip dispersal system: [Click to enter text.](#)

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

☐ Yes ☐ No

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

[Click to enter text.](#)

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

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

☐ Yes ☐ No

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

[Click to enter text.](#)

Section 2. Subsurface Area Drip Dispersal System (Instructions Page 75)

A. Type of system

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

B. Irrigation operations

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

Infiltration Rate, in inches/hour: [Click to enter text.](#)

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

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

Storage volume, in gallons: [Click to enter text.](#)

Major soil series: [Click to enter text.](#)

Depth to groundwater, in feet: [Click to enter text.](#)

C. Application rate

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

☐ Yes ☐ No

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

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

☐ Yes ☐ No

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

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

☐ Yes ☐ No

Hydraulic application rate, in gal/square foot/day: [Click to enter text.](#)

Nitrogen application rate, in lbs/gal/day: [Click to enter text.](#)

D. Dosing information

Number of doses per day: [Click to enter text.](#)

Dosing duration per area, in hours: [Click to enter text.](#)

Rest period between doses, in hours: [Click to enter text.](#)

Dosing amount per area, in inches/day: [Click to enter text.](#)

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

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

☐ Yes ☐ No

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

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

Section 3. Required Plans (Instructions Page 75)

A. Recharge feature plan

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

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

B. Soil evaluation

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

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

C. Site preparation plan

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

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

D. Soil sampling/testing

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

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

Section 4. Floodway Designation (Instructions Page 76)

A. Site location

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

☐ Yes ☐ No

B. Flood map

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

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

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

A. Buffer Map

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

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

B. Buffer variance request

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

☐ Yes ☐ No

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

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

Section 6. Edwards Aquifer (Instructions Page 76)

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

☐ Yes ☐ No

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

☐ Yes ☐ No

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

DOMESTIC WASTEWATER PERMIT APPLICATION

WORKSHEET 4.0: POLLUTANT ANALYSIS REQUIREMENTS

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

This worksheet is not required minor amendments without renewal.

Section 1. Toxic Pollutants (Instructions Page 78)

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

Grab ☐ Composite ☐

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

Table 4.0(1) – Toxics Analysis

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

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

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

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

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

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

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

Section 2. Priority Pollutants

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

Grab ☐ Composite ☐

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

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

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

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

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

Table 4.0(2)B – Volatile Compounds

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

Table 4.0(2)C – Acid Compounds

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

Table 4.0(2)D – Base/Neutral Compounds

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

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

Table 4.0(2)E - Pesticides

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

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

Section 3. Dioxin/Furan Compounds

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

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

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

[Click to enter text.](#)

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

☐ Yes ☐ No

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

[Click to enter text.](#)

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

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

Grab ☐ Composite ☐

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

Table 4.0(2)F – Dioxin/Furan Compounds

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

DOMESTIC WASTEWATER PERMIT APPLICATION

WORKSHEET 5.0: TOXICITY TESTING REQUIREMENTS

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

This worksheet is not required minor amendments without renewal.

Section 1. Required Tests (Instructions Page 88)

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

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

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

Section 2. Toxicity Reduction Evaluations (TREs)

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

☐ Yes ☐ No

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

[Click to enter text.](#)

Section 3. Summary of WET Tests

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

Table 5.0(1) Summary of WET Tests

Test Date	Test Species	NOEC Survival	NOEC Sub-lethal

DOMESTIC WASTEWATER PERMIT APPLICATION

WORKSHEET 6.0: INDUSTRIAL WASTE CONTRIBUTION

The following is required for all publicly owned treatment works.

Section 1. All POTWs (Instructions Page 89)

A. Industrial users (IUs)

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

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

Categorical IUs:

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

Average Daily Flows, in MGD: [Click to enter text.](#)

Significant IUs - non-categorical:

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

Average Daily Flows, in MGD: [Click to enter text.](#)

Other IUs:

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

Average Daily Flows, in MGD: [Click to enter text.](#)

B. Treatment plant interference

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

☐ Yes ☐ No

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

[Click to enter text.](#)

C. Treatment plant pass through

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

☐ Yes ☐ No

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

Click to enter text.

D. Pretreatment program

Does your POTW have an approved pretreatment program?

☐ Yes ☐ No

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

Is your POTW required to develop an approved pretreatment program?

☐ Yes ☐ No

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

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

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

A. Substantial modifications

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

☐ Yes ☐ No

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

Click to enter text.

B. Non-substantial modifications

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

☐ Yes ☐ No

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

Click to enter text.

C. Effluent parameters above the MAL

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

Table 6.0(1) – Parameters Above the MAL

Pollutant	Concentration	MAL	Units	Date

D. Industrial user interruptions

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

☐ Yes ☐ No

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

Click to enter text.

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

A. General information

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

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

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

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

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

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

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

B. Process information

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

[Click to enter text.](#)

C. Product and service information

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

[Click to enter text.](#)

D. Flow rate information

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

Process Wastewater:

Discharge, in gallons/day: [Click to enter text.](#)

Discharge Type: ☐ Continuous ☐ Batch ☐ Intermittent

Non-Process Wastewater:

Discharge, in gallons/day: [Click to enter text.](#)

Discharge Type: ☐ Continuous ☐ Batch ☐ Intermittent

E. Pretreatment standards

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

☐ Yes ☐ No

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

☐ Yes ☐ No

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

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

[Click or tap here to enter text.](#) [Click to enter text.](#)

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

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

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

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

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

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

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

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

F. Industrial user interruptions

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

☐ Yes ☐ No

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

[Click to enter text.](#)

WORKSHEET 7.0

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

CLASS V INJECTION WELL INVENTORY/AUTHORIZATION FORM

Submit the completed form to:

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

For TCEQ Use Only

Reg. No. _____

Date Received _____

Date Authorized _____

Section 1. General Information (Instructions Page 92)

1. TCEQ Program Area

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

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

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

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

2. Agent/Consultant Contact Information

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

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

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

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

3. Owner/Operator Contact Information

☐ Owner ☐ Operator

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

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

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

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

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

4. Facility Contact Information

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

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

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

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

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

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

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

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

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

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

Attach topographic quadrangle map as attachment A.

6. **Well Information**

Type of Well Construction, select one:

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

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

7. **Purpose**

Detailed Description regarding purpose of Injection System:

[Click to enter text.](#)

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

8. **Water Well Driller/Installer**

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

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

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

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

Section 2. Proposed Down Hole Design

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

Table 7.0(1) – Down Hole Design Table

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

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

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

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

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

Section 4. Site Hydrogeological and Injection Zone Data

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

Section 5. Site History

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

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

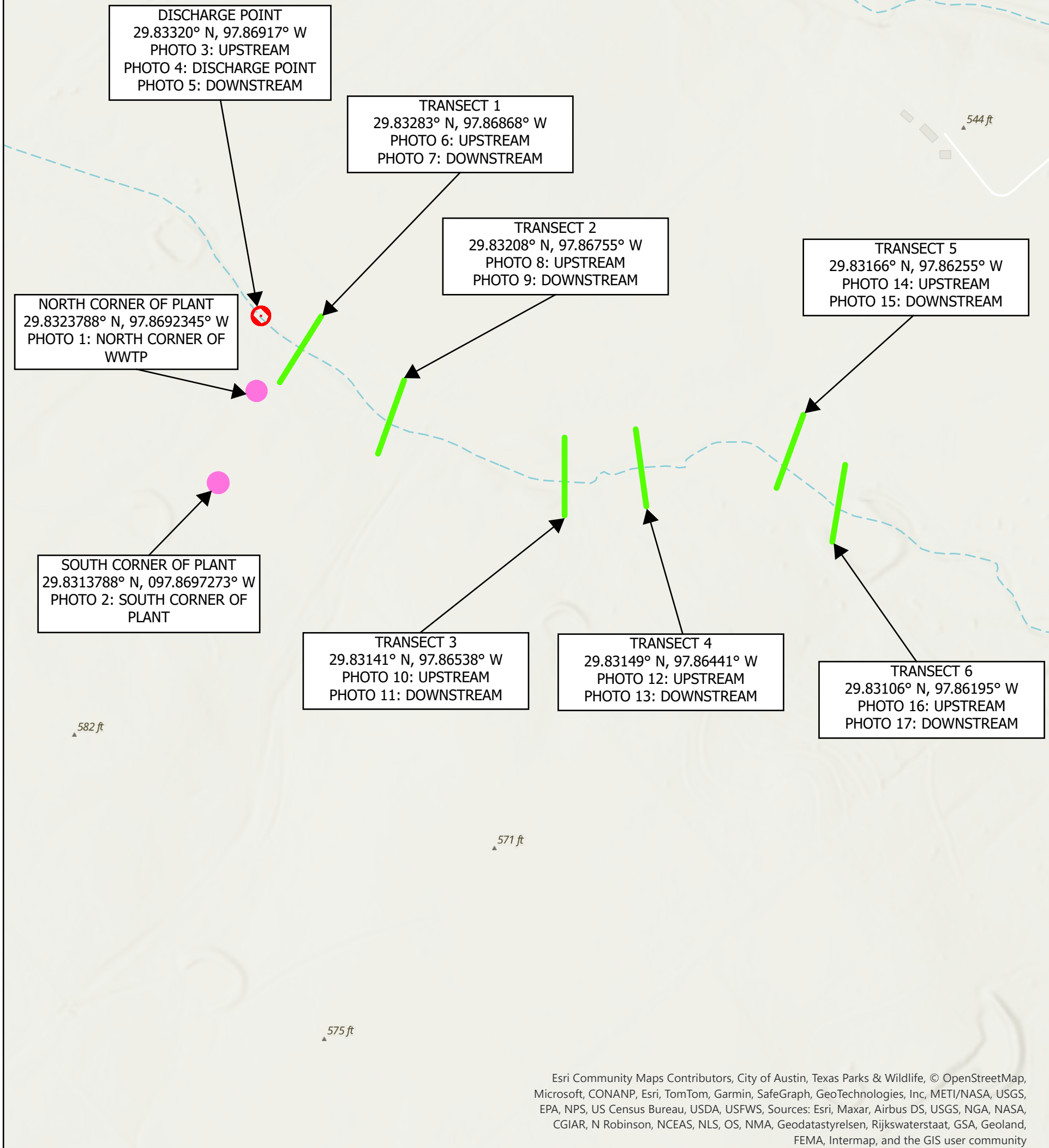
Class V Injection Well Designations

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

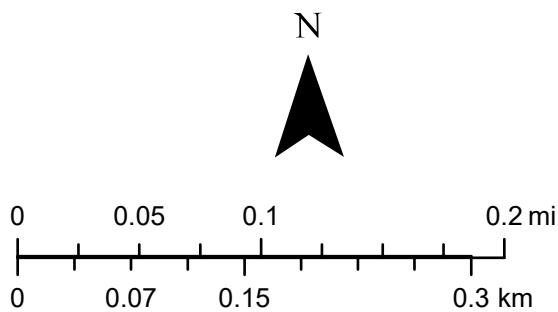
Attachment J – Stream Assessment, Original Photographs

SCULL ROAD

WASTEWATER PERMIT
STREAM ASSESSMENT MAP



- DISCHARGE POINT
- TRANSECTS
- PLANT CORNERS



DATE: 05/19/2025

PREPARED BY: AAB

CHECKED BY: SJW

PROJECT NUMBER: 060019203

Kimley»Horn

Photo 1: Northern Corner of WWTP



Photo 2: Southern Corner of WWTP



Photo 3: Discharge Point Facing Upstream



Photo 4: Photo of the Discharge Point



Photo 5: Discharge Point Facing Downstream



Photo 6: Transect 1 Facing Upstream



Photo 7: Transect 1 Facing Downstream



Photo 8: Transect 2 Facing Upstream



Photo 9: Transect 2 Facing Downstream



Photo 10: Transect 3 Facing Upstream



Photo 11: Transect 3 Facing Downstream



Photo 12: Transect 4 Facing Upstream



Photo 13: Transect 4 Facing Downstream



Photo 14: Transect 5 Facing Upstream



Photo 15: Transect 5 Facing Downstream



Photo 16: Transect 6 Facing Upstream



Photo 17: Transect 6 Facing Downstream



Attachment K – Process Flow Diagram

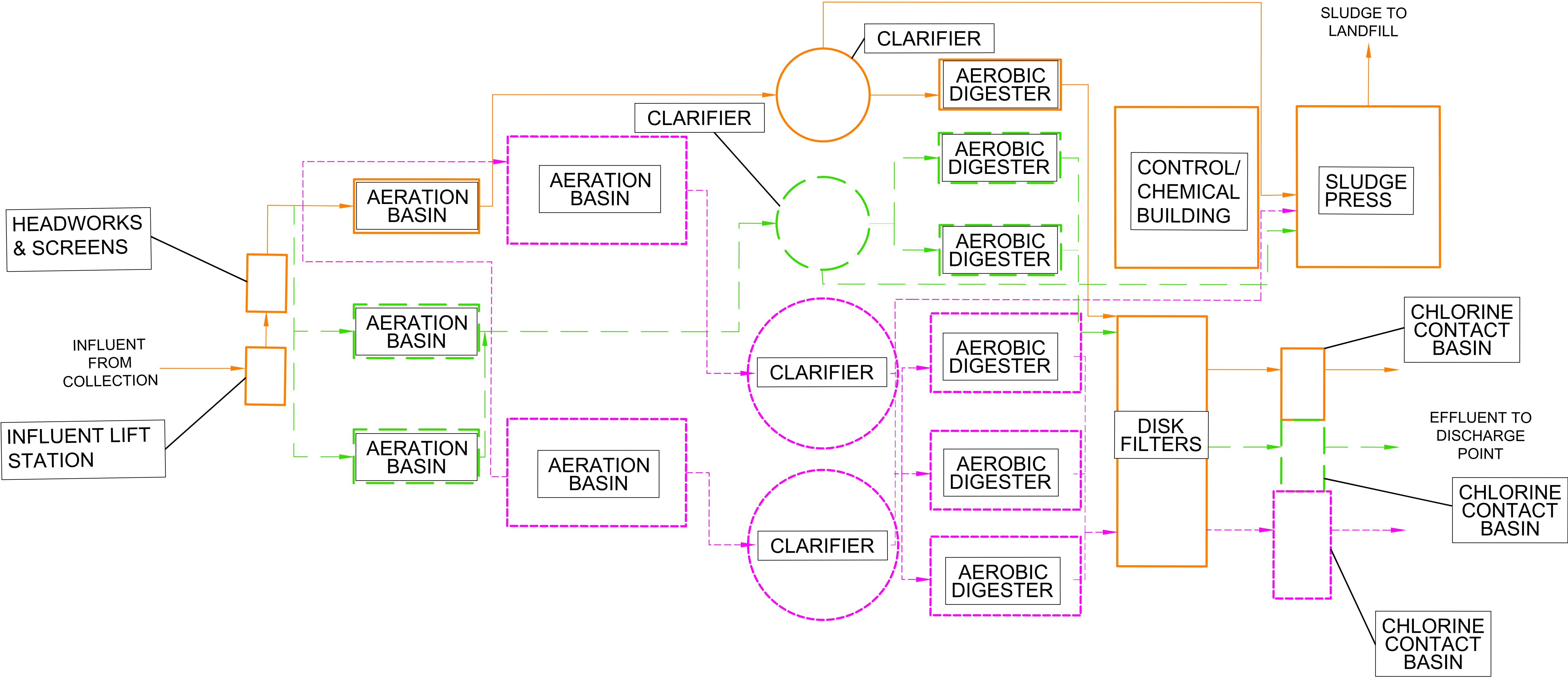
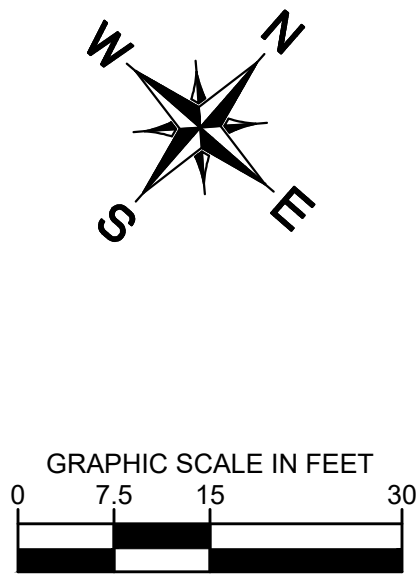
Plotted By: Neessa, Riley Date: July 08, 2025 01:41:24pm File Path: \\kimley-horn.com\\TS_SAU\\SAU\\MR\\060019203_Scull Road_TPEDES\\TPEDES\\CADD\\Process Flow Diagram_v2.dwg

This document, together with the concepts and designs presented herein, as an instrument of service, is intended only for the specific purpose and client for which it was prepared. Reuse of and improper reliance on this document without written authorization and adaptation by Kimley-Horn and Associates, Inc. shall be without liability to Kimley-Horn and Associates, Inc.

PHASE 1

PHASE 2

PHASE 3



Scull Road WWTTP
Martindale, Texas

SHEET NUMBER
1 of 1

PROCESS FLOW
DIAGRAM

KHA PROJECT
060019203

DATE
June 25

SCALE
AS SHOWN

DESIGNED BY
S/JW

DRAWN BY
AAB/PMN

CHECKED BY

THIS DOCUMENT IS INCOMPLETE
AND IS RELEASED TEMPORARILY
FOR INTERIM REVIEW ONLY. IT IS
NOT TO BE USED FOR BIDDING OR PERMIT PURPOSES.

SENA, J. WERNER
P.E.

SERIAL NO. 156244
DATE: JUNE 2025

Kimley»Horn

5301 SOUTHWEST PARKWAY, BUILDING 2, SUITE 100
AUSTIN, TEXAS 78746
PHONE: 512-446-2220
WWW.KIMLEY-HORN.COM

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TPE Firm No. 628

REVISIONS

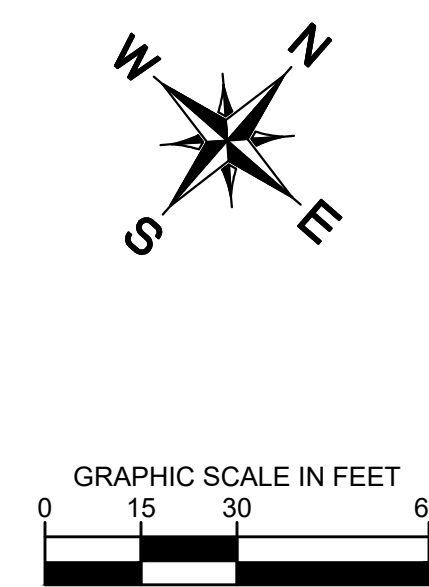
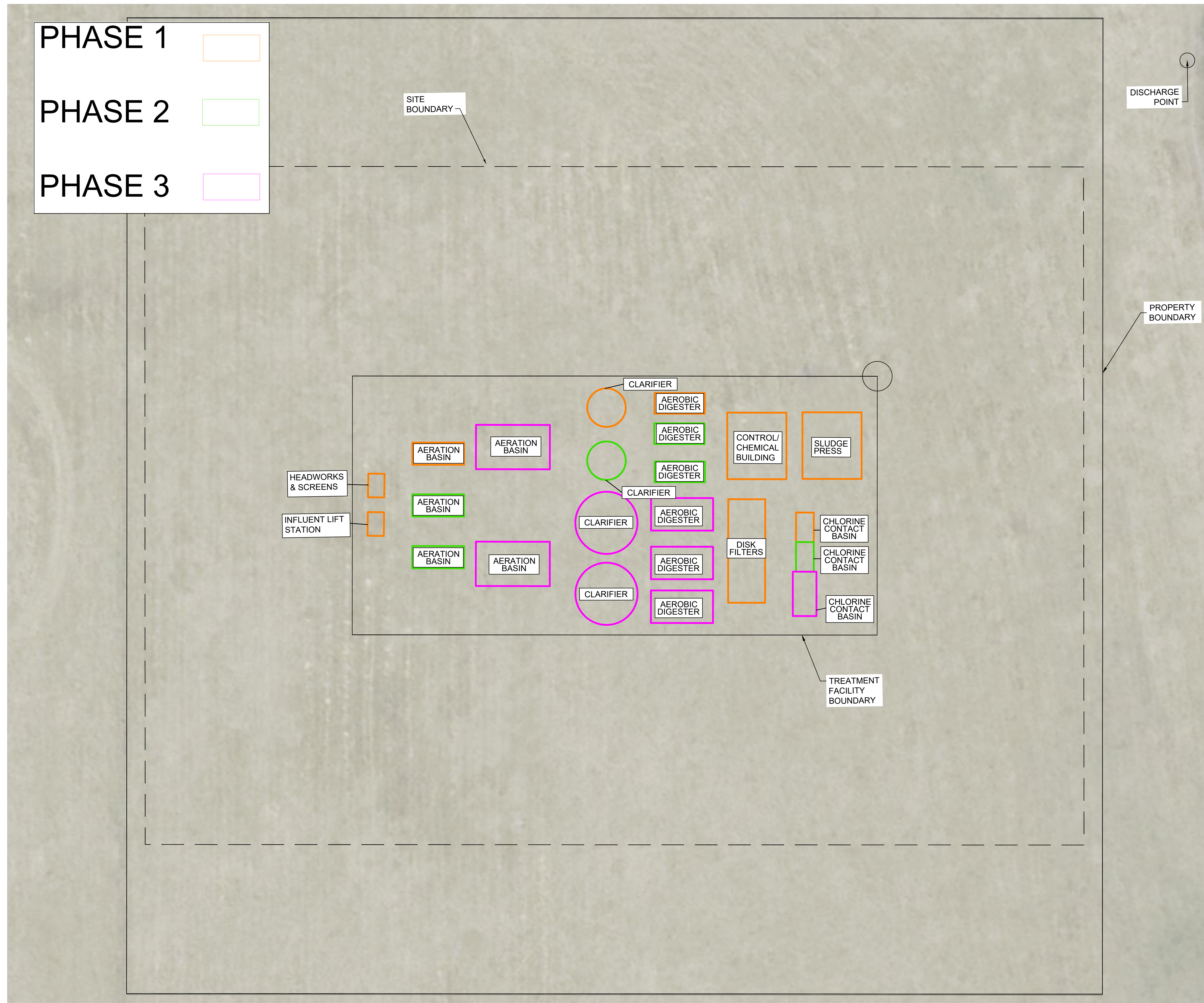
No.


DATE

BY

Attachment L – Site Drawing

Printed By: Neices, Rity. Date: July 08, 2025. 01:44:06pm File Path: \\kimley-horn.com\\TS_SAU\\SAU_W060019203_Souil Road_TPOES\\TPOES\\CAD\\Site_Plan\\3.dwg
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SHEET NUMBER 1 of 1	Scully Road WWTP Martindale, Texas	SITE DRAWING	KHA PROJECT 060119203	THIS DOCUMENT IS INCOMPLETE UNTIL THE DATE SHOWN FOR INTERIM REVIEW ONLY. IT IS NOT INTENDED FOR CONSTRUCTION, BIDDING, OR PERMIT PURPOSES.	 Kimley-Horn 5301 SOUTHWEST PARKWAY, BUILDING 2, SUITE 100 Austin, Texas 78746 PHONE: 512-646-2330 FAX: 512-646-2331 WWW.KIMLEY-HORN.COM © 2017 KIMLEY-HORN AND ASSOCIATES, INC. TBPE Firm No. 928	No. _____ REVISIONS _____ DATE _____ BY _____
			DATE June 25	SCALE: AS SHOWN DESIGNED BY: SJW SERIAL NO.: 056244 DATE: JUNE 2025 DRAWN BY: AAB/IRMN CHECKED BY: IMC		

Attachment M – Nearby Plants



Dear Texas Commission on Environmental Quality,

The Scull Road WWTP is preparing an application for a new Texas Pollutant Discharge Elimination System (TPDES) wastewater discharge permit. Upon utilizing the TCEQ Wastewater Outfall Map Viewer, four wastewater treatment facilities were identified within a three-mile radius of the proposed facility site. Among these, two wastewater treatment facilities have active permits: Fleming Farms WWTP has a capacity of 0.08 MGD and Cotton Center Martindale WWTP has a capacity of 0.21 MGD. Neither of these facilities have the capacity to accept our proposed flows. The other two waste water treatment plants, Riverbend Ranch WWTP and Martindale Tract WWTP, currently have pending permits and have not yet been constructed. According to TCEQ 10053 instructions, these facilities do not meet the applicable criteria as they are not operational and lack the capacity to serve the proposed service area. In conclusion, no regionalization map or requests for service were included in this permit.

Sincerely,
KIMLEY-HORN AND ASSOCIATES, INC.
Texas Firm No. 928

A handwritten signature in black ink that reads "Siena Werner".

Siena Werner
Project Manager

Attachment N – Design Calculations

Project: Scull Road WWTP
Designed by: RMN
Date: 6/19/2025

Phase 1 - 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	0.1 MGD	Influent BOD ₅	250 mg/l
Peaking Factor	4	Influent BOD ₅	209 lbs/day
Peak Flow	0.4 MGD		

Process Design - The treatment plant has been designed to produce an effluent quality in compliance with the proposed permitted parameters of : CBOD₅ = 5 mg/l; TSS = 5 mg/l; NH₃-N = 2 mg/l; Dissolved Oxygen = 4 mg/l; Chlorine Residual = 1 mg/l after 20 minutes detention time. In order to achieve the required removal efficiencies, activated sludge process operated in the single stage nitrification mode has been chosen.

The anticipated operating ranges for MLSS and RASS in mg/l are 3,000 mg/l and 6,000 mg/l, respectively.

Aeration Basin

TCEQ Maximum Organic Loading 35 lbs BOD₅ / day / 1,000 ft³

Aeration Volume Required 5,957 ft³

Volume Provided:

Number of Tanks	1
Length	35 ft.
Width	15 ft.
Height	13
SWD	12 ft.
Volume	6,300 ft ³
Capacity	0.11 MGD Average Flow

Total Volume	6,300 ft ³
Volume greater than required	YES
Organic Loading	33.10 lbs BOD ₅ / day

Clarifier

TCEQ Maximum surface Loading (Qpk)	1200	gal / day / ft ² at peak flow
TCEQ Minimum detention time (Qpk)	1.8	hours at peak flow
TCEQ Maximum weir Loading (Qpk)	20000	gal / day / ft.
Surface area required	333.33333 ft ²	20.6 ft. min. dia. for one clarifier
Volume required	4,011 ft ³	
Volume Provided:		
Number of Tanks	1	
Diameter	26 ft.	
SWD	10.5 ft.	
Surface Area	531 ft ²	
Volume	5,575 ft ³	
Capacity	0.14 MDG Average Flow	
Total Surface Area	531 ft ²	Greater than required?
Total Volume	5,575 ft ³	Greater than required?
Clarifier Surface Loading (Qave)	188.35 GPD/FT ²	
Clarifier Surface Loading (Qpk)	753.40 GPD/FT ²	
Clarifier Detention Time (Qave)	10.01 Hours	
Clarifier Detention Time (Qpk)	2.50 Hours	
Weir Length	75.40 ft.	
Weir Loading	5,305.16	GPD/LF

Digesters

TCEQ Required design volume 20 ft³ / lb. BOD₅ / day
TCEQ Minimum sludge retention time 60 Days

Volume required 4,170 ft³

Volume Provided:

Number of Tanks 1
Length 34 ft.
Width 14 ft.
Height 11.5
SWD 10 ft.
Volume 4,760 ft³
Capacity 0.11 MDG Average Flow

Total Volume 4,760 ft³
Volume greater than required YES
Organic Loading 22.83 ft³ / lb. BOD₅ / day

Chlorine Contact Chamber

TCEQ Minimum detention time (Qpk) 20 min.
TCEQ Minimum volume (Qpk) 743 ft³

Volume required 743 ft³

Volume Provided:

Number of Tanks 1
Length 20 ft.
Width 12 ft.
Height 10
SWD 8.5 ft.
Volume 2,040 ft³
Capacity 0.275 MGD Average Flow Greater than required? YES

Detention Time 46.14 Minutes

Chlorination

Design Maximum chlorine dose	8	mg/l	
Typical chlorine dose	4	mg/l	
Cylinder size	150	lbs.	
		(Use 1.0 for 150 # cylinder and 8.0 for 2000 #	
Withdrawal factor	1	cylinders)	
Low Ambient Temp	65	Use 65 for indoor storage	
Chlorine required at low flow	0.8 lbs per day @ 25% design flow rate		
Chlorine required at design flow	3.3 lbs per day		
Maximum chlorine required	27 lbs per day		
Max. withdrawal rate per cylinder	65 lbs per day (Formula for vacuum systems only)		
No. of Cylinders required per bank	1	For Redundancy use	2
One bank of cylinders will last	90 days at average flow and typical chlorine usage		

Air Requirements

Air requirements for aeration basins	2.2 lb. oxygen per lb. BOD
Air requirements for digesters	30 SCFM /1000 cu. ft.
Minimum mixing requirements	20 SCFM /1000 cu. ft.
Diffuser transfer efficiency	6.63% (In wastewater)

$$\text{Air required in aeration basin} = \frac{434 \text{ SCFM} \times \{(\text{lb BOD}) \times (\text{lb Oxygen} / \text{lb BOD})\}}{(\text{T.E.}) (\text{lb. Oxygen} / \text{lb. air}) (\text{lb. air} / \text{cu. ft.}) (\text{min} / \text{day})}$$

Verify mixing requirements: 69 OK

Air required for digesters:	143 SCFM
Air required for post aeration	20
Air required for post aeration-CL2	47 SCFM
Air required for initial mixing	25
Air required for air lifts	91 SCFM

Total air required 740 SCFM

Maximum water depth over diffuser	10 feet
Pressure loss in piping	1.2 psi
Pressure @ blowers	5.5 psi

Air flow per blower @ required pressure	1350 SCFM
Blowers required w/o standby	0.5

Total blowers required 2.0

Project: Scull Road WWTP
Designed by: RMN
Date: 6/19/2025

Phase 2 - 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	0.25 MGD	Influent BOD ₅	250 mg/l
Peaking Factor	4	Influent BOD ₅	521 lbs/day
Peak Flow	1 MGD		

Process Design - The treatment plant has been designed to produce an effluent quality in compliance with the proposed permitted parameters of : CBOD₅ =5 mg/l; TSS = 5 mg/l; NH₃-N = 2 mg/l; Dissolved Oxygen = 4 mg/l; Chlorine Residual = 1 mg/l after 20 minutes detention time. In order to achieve the required removal efficiencies, activated sludge process operated in the single stage nitrification mode has been chosen.

The anticipated operating ranges for MLSS and RASS in mg/l are 3,000 mg/l and 6,000 mg/l, respectively.

Aeration Basin

TCEQ Maximum Organic Loading 35 lbs BOD₅ / day / 1,000 ft³

Aeration Volume Required 14,893 ft³

Volume Provided:

Number of Tanks	3
Length	35 ft.
Width	15 ft.
Height	13
SWD	12 ft.
Volume	18,900 ft ³
Capacity	0.32 MGD Average Flow

Total Volume	18,900 ft ³
Volume greater than required	YES
Organic Loading	27.58 lbs BOD ₅ / day

Clarifier

TCEQ Maximum surface Loading (Qpk)	1,200 gal / day / ft ² at peak flow
TCEQ Minimum detention time (Qpk)	1.8 hours at peak flow
TCEQ Maximum weir Loading (Qpk)	20,000 gal / day / ft.

Surface area required	833.33333 ft ²	32.6 ft. min. dia. for one clarifier
Volume required	10,027 ft ³	

Volume Provided:

Number of Tanks	2
Diameter	26 ft.
SWD	10.5 ft.
Surface Area	531 ft ²
Volume	11,150 ft ³
Capacity	0.16 MDG Average Flow

Total Surface Area	1062 ft ²	Greater than required?	YES
Total Volume	11,150 ft ³	Greater than required?	YES

Clarifier Surface Loading (Qave)	235.44 GPD/FT ²
Clarifier Surface Loading (Qpk)	941.75 GPD/FT ²

Clarifier Detention Time (Qave)	8.01 Hours
Clarifier Detention Time (Qpk)	2.00 Hours

Weir Length	75.40 ft.	
Weir Loading	13,262.91	GPD/LF

Digesters

TCEQ Required design volume 20 ft³ / lb. BOD₅ / day
TCEQ Minimum sludge retention time 60 Days

Volume required 10,425 ft³

Volume Provided:

Number of Tanks 3
Length 34 ft.
Width 14 ft.
Height 11.5
SWD 10 ft.
Volume 14,280 ft³
Capacity 0.34 MDG Average Flow

Total Volume 14,280 ft³
Volume greater than required YES
Organic Loading 27.395683 ft³ / lb. BOD₅ / day

Chlorine Contact Chamber

TCEQ Minimum detention time (Qpk) 20 min.
TCEQ Minimum volume (Qpk) 1,857 ft³

Volume required 1,857 ft³

Volume Provided:

Number of Tanks 2
Length 20 ft.
Width 12 ft.
Height 10
SWD 8.5 ft.
Volume 4,080 ft³
Capacity 0.549 MGD Average Flow Greater than required? YES

Detention Time 73.83 Minutes

Chlorination

Design Maximum chlorine dose	8 mg/l		
Typical chlorine dose	4 mg/l		
Cylinder size	150 lbs.		
	(Use 1.0 for 150 # cylinder and 8.0 for 2000 #		
Withdrawal factor	1 cylinders)		
Low Ambient Temp	65	Use 65 for indoor storage	
Chlorine required at low flow	2.1 lbs per day @ 25% design flow rate		
Chlorine required at design flow	8.3 lbs per day		
Maximum chlorine required	67 lbs per day		
Max. withdrawal rate per cylinder	65 lbs per day (Formula for vacuum systems only)		
No. of Cylinders required per bank	2	For Redundancy use	3
One bank of cylinders will last	54 days at average flow and typical chlorine usage		

Air Requirements

Air requirements for aeration basins	2.2 lb. oxygen per lb. BOD
Air requirements for digesters	30 SCFM /1000 cu. ft.
Minimum mixing requirements	20 SCFM /1000 cu. ft.
Diffuser transfer efficiency	6.63% (In wastewater)

$$\text{Air required in aeration basin} = \frac{1,086 \text{ SCFM}}{\frac{= \{(\text{lb BOD}) * (\text{lb Oxygen} / \text{lb BOD})\}}{(\text{T.E.}) (\text{lb. Oxygen} / \text{lb. air}) (\text{lb. air} / \text{cu. ft.}) (\text{min} / \text{day})}}$$

Verify mixing requirements: 57 OK

Air required for digesters:	428 SCFM
Air required for post aeration	20
Air required for post aeration-CL2	47 SCFM
Air required for initial mixing	25
Air required for air lifts	91 SCFM

Total air required 1,678 SCFM

Maximum water depth over diffuser	10 feet
Pressure loss in piping	1.2 psi
Pressure @ blowers	5.5 psi

Air flow per blower @ required pressure	1350 SCFM
Blowers required w/o standby	1.2

Total blowers required 3.0

Project: Scull Road WWTP
 Designed by: RMN
 Date: 6/19/2025

Phase 3 - 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	0.99	MGD	Influent BOD ₅	250	mg/l
Peaking Factor	4		Influent BOD ₅	2064 lbs/day	
Peak Flow	3.96 MGD				

Process Design - The treatment plant has been designed to produce an effluent quality in compliance with the proposed permitted parameters of : CBOD₅ =5 mg/l; TSS = 5 mg/l; NH₃-N = 2 mg/l; Dissolved Oxygen = 4 mg/l; Chlorine Residual = 1 mg/l after 20 minutes detention time. In order to achieve the required removal efficiencies, activated sludge process operated in the single stage nitrification mode has been chosen.

The anticipated operating ranges for MLSS and RASS in mg/l are 3,000 mg/l and 6,000 mg/l, respectively.

Aeration Basin

TCEQ Maximum Organic Loading	35	lbs BOD ₅ / day / 1,000 ft ³
Aeration Volume Required	58,976 ft ³	
Volume Provided:		
Number of Tanks	3	Volume Provided: Number of Tanks
Length	35 ft.	Length
Width	15 ft.	Width
Height	13	Height
SWD	12 ft.	SWD
Volume	60,900 ft ³	
Capacity	1.02 MGD Average Flow	
Total Volume	60,900 ft ³	
Volume greater than required	YES	
Organic Loading	33.89 lbs BOD ₅ / day	

Clarifier

TCEQ Maximum surface Loading (Qpk)	1,200 gal / day / ft ² at peak flow		
TCEQ Minimum detention time (Qpk)	1.8 hours at peak flow		
TCEQ Maximum weir Loading (Qpk)	20,000 gal / day / ft.		
Surface area required	3300 ft ²	64.8 ft. min. dia. for one clarifier	
Volume required	39,706 ft ³		
Volume Provided:	Volume Provided:		
Number of Tanks	2	Number of Tanks	2
Diameter	26 ft.	Diameter	42 ft.
SWD	10.5 ft.	SWD	10.5 ft.
Surface Area	531 ft ²	Surface Area	1385.44236 ft ²
Volume	11,150 ft ³	Volume	29094.28956 ft ³
Capacity	0.16 MDG Average Flow		
Total Surface Area	3833 ft ²	Greater than required?	Y
Total Volume	40,244 ft ³	Greater than required?	Y
Clarifier Surface Loading (Qave)	258.30 GPD/FT ²		
Clarifier Surface Loading (Qpk)	1033.20 GPD/FT ²		
Clarifier Detention Time (Qave)	7.30 Hours		
Clarifier Detention Time (Qpk)	1.82 Hours		
Weir Length	75.40 ft.		
Weir Loading	52,521.13	GPD/LF	

Digesters

TCEQ Required design volume 20 ft³ / lb. BOD₅ / day
TCEQ Minimum sludge retention time 60 Days

Volume required 41,283 ft³

Volume Provided:		Volume Provided:	
Number of Tanks	3	Number of Tanks	3
Length	34 ft.	Length	42 ft.
Width	14 ft.	Width	22 ft.
Height	11.5	Height	11.5
SWD	10 ft.	SWD	10 ft.
Volume	42,000 ft ³		
Capacity	1.01 MDG Average Flow		

Total Volume 42,000 ft³
Volume greater than required YES
Organic Loading 20.35 ft³ / lb. BOD₅ / day

Chlorine Contact Chamber

TCEQ Minimum detention time (Qpk) 20 min.
TCEQ Minimum volume (Qpk) 60 ft³

Volume required 7,353 ft³

Volume Provided:		Volume Provided:	
Number of Tanks	2	Number of Tanks	1
Length	20 ft.	Length	30 ft.
Width	12 ft.	Width	16 ft.
Height	10	Height	10
SWD	8.5 ft.	SWD	8.5 ft.
Volume	8,160 ft ³		
Capacity	1.099 MGD Average Flow	Greater than required?	YES

Detention Time 55.93 Minutes

Chlorination

Design Maximum chlorine dose	8 mg/l		
Typical chlorine dose	4 mg/l		
Cylinder size	150 lbs.		
	(Use 1.0 for 150 # cylinder and 8.0 for 2000 #)		
Withdrawal factor	1 cylinders)		
Low Ambient Temp	65	Use 65 for indoor storage	
Chlorine required at low flow	8.3 lbs per day @ 25% design flow rate		
Chlorine required at design flow	33.0 lbs per day		
Maximum chlorine required	264 lbs per day		
Max. withdrawal rate per cylinder	65 lbs per day (Formula for vacuum systems only)		
No. of Cylinders required per bank	5	For Redundancy use	6
One bank of cylinders will last	27 days at average flow and typical chlorine usage		

Air Requirements

Air requirements for aeration basins	2.2 lb. oxygen per lb. BOD
Air requirements for digesters	30 SCFM /1000 cu. ft.
Minimum mixing requirements	20 SCFM /1000 cu. ft.
Diffuser transfer efficiency	6.63% (In wastewater)

$$\text{Air required in aeration basin} = \frac{4,302 \text{ SCFM}}{= \{(\text{lb BOD}) * (\text{lb Oxygen} / \text{lb BOD})\} / (\text{T.E.}) (\text{lb. Oxygen} / \text{lb. air}) (\text{lb. air} / \text{cu. ft.}) (\text{min} / \text{day})}$$

Verify mixing requirements: 71 OK

Air required for digesters:	1260 SCFM
Air required for post aeration	20
Air required for post aeration-CL2	47 SCFM
Air required for initial mixing	25
Air required for air lifts	91 SCFM

Total air required 5,725 SCFM

Maximum water depth over diffuser	10 feet
Pressure loss in piping	1.2 psi
Pressure @ blowers	5.5 psi

Air flow per blower @ required pressure	1350 SCFM
Blowers required w/o standby	4.2

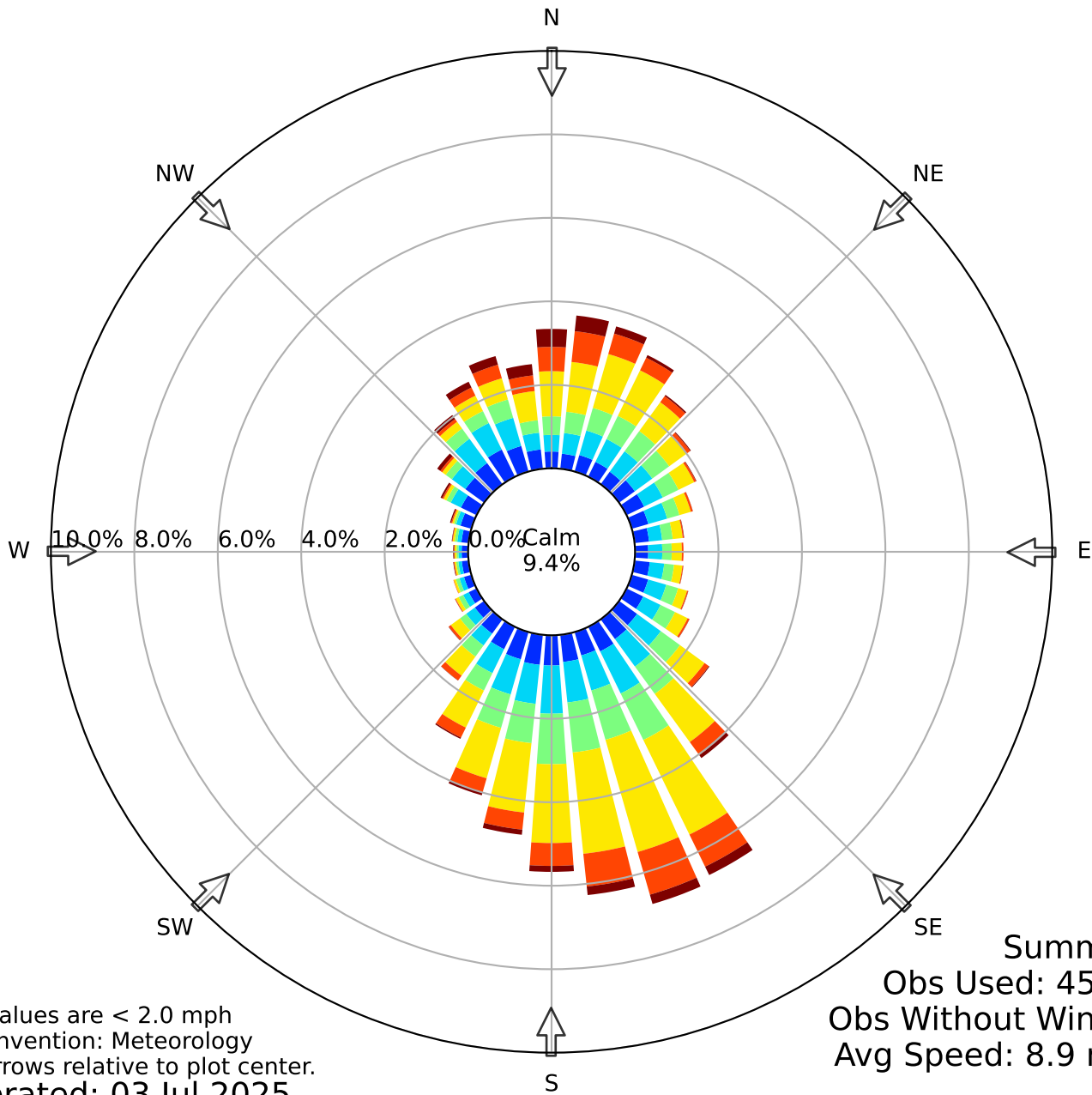
Total blowers required 6.0

Attachment O – Wind Rose



Windrose Plot for [HYI] SAN MARCOS (AWOS)

Obs Between: 01 Jan 2020 12:56 AM - 02 Jul 2025 11:56 PM America/Chicago



Calm values are < 2.0 mph
Bar Convention: Meteorology
Flow arrows relative to plot center.
Generated: 03 Jul 2025



Attachment P – Sewage Sludge Solids Management Plan

Scull Road WWTP Solids Management Plan

Phase I:

Influent Design flow = 0.1 MGD

Influent BOD₅ Concentration = 250 mg/L

Aerobic Digester Volume = 35,607 gallons

Aeration Basin MLSS = 3,000 mg/L

Table 1 – Sludge Production (Phase I)

Solids Generated	100% Flow	75% Flow	50% Flow	25% Flow
Influent BOD₅ (lb/day)	209	156	104	52
Dry Sludge Produced (lb/day)*	73	55	37	18
Wet Sludge Produced (lb/day)	4,868	3,651	2,434	1,217
Volume of Wet Sludge Produced (gallons)	584	438	292	146

*Assuming 0.35 lbs of digested dry sludge produced per pound of influent BOD₅ at average temperatures and 1.5% solids concentration in the digester.

Table 2 – Sludge Removal Schedule (Phase I)

Removal Schedule (days)	100% Flow	75% Flow	50% Flow	25% Flow
Days Between Sludge Removal	70	94	140	281

Phase II:

Influent Design flow = 0.25 MGD

Influent BOD₅ Concentration = 250 mg/L

Aerobic Digester Volume = 106,822 gallons

Aeration Basin MLSS = 3,000 mg/L

Table 3 – Sludge Production (Phase II)

Solids Generated	100% Flow	75% Flow	50% Flow	25% Flow
Influent BOD₅ (lb/day)	522	391	261	156
Dry Sludge Produced (lb/day)*	183	137	91	46
Wet Sludge Produced (lb/day)	12,170	9,128	6,085	3,043
Volume of Wet Sludge Produced (gallons)	1,459	1,094	730	365

*Assuming 0.35 lbs of digested dry sludge produced per pound of influent BOD₅ at average temperatures and 1.5% solids concentration in the digester.

Table 2 – Sludge Removal Schedule (Phase II)

Removal Schedule (days)	100% Flow	75% Flow	50% Flow	25% Flow
Days Between Sludge Removal	70	94	140	281

Phase III:

Influent Design flow = 0.99 MGD

Influent BOD₅ Concentration = 250 mg/L

Aerobic Digester Volume = 314,182 gallons

Aeration Basin MLSS = 3,000 mg/L

Table 3 – Sludge Production (Phase III)

Solids Generated	100% Flow	75% Flow	50% Flow	25% Flow
Influent BOD₅ (lb/day)	2,065	1,549	1,033	516
Dry Sludge Produced (lb/day)*	723	542	361	181
Wet Sludge Produced (lb/day)	48,195	36,146	24,097	12,049
Volume of Wet Sludge Produced (gallons)	5,779	4,334	2,889	1,445

*Assuming 0.35 lbs of digested dry sludge produced per pound of influent BOD₅ at average temperatures and 1.5% solids concentration in the digester.

Table 2 – Sludge Removal Schedule (Phase III)

Removal Schedule (days)	100% Flow	75% Flow	50% Flow	25% Flow
Days Between Sludge Removal	57	76	114	228

*Assumes sludge hauled wet at 1.5% solids from digester in a 6,000 gallon tanker.

Sludge will be wasted from the RAS flow stream to the aerobic digester. Sludge solids will be stabilized in the digester; supernatant will be decanted from the digester and returned to the facility headworks for treatment.

Liquid digested sludge will be removed from the digester for disposal on regular basis as required. one (1) 34ft x 14ft digester is proposed for Phase I, the calculated mean cell residence time (MCRT) for the digester storage volume of 35,670 gallons will be approximately 70 days at 100% capacity and annual average digested sludge production of 73 lb/day. Three (3) 34ft x 14ft digesters are proposed for Phase II, the calculated mean cell residence time (MCRT) for the digester storage volume of 106,822 gallons will be approximately 54 days at 100% capacity and annual average digested sludge production of 183 lb/day. Three (3) 34ft x 14ft and three (3) digesters are proposed for Phase III, the calculated mean cell residence time (MCRT) for the digester storage volume of 314,182 gallons will be approximately 57 days at 100% capacity and annual average digested sludge production of 723 lb/day. The digested sludge will be wet hauled and transported by a registered hauler (to be determined) to a landfill.

E. Owner of effluent disposal site:

Prefix: N/A

Last Name, First Name: N/A

Title: N/A

Credential: N/A

Organization Name: N/A

Mailing Address: N/A

City, State, Zip Code: N/A

Phone No.: N/A

E-mail Address: N/A

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

Attachment: N/A

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

Prefix: N/A

Last Name, First Name: N/A

Title: N/A

Credential: N/A

Organization Name: N/A

Mailing Address: N/A

City, State, Zip Code: N/A

Phone No.: N/A

E-mail Address: N/A

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

Attachment: N/A

Section 10. TPDES Discharge Information (Instructions Page 31)

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

☐ Yes ☐ No

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

New permit application. The wastewater treatment facility and effluent disposal site is located approximately 1.07 miles south of the intersection of Scull Road/Cottonseed Run and Dupuy Ranch Road and 3.527 feet southwest of the intersection of River Ranch Circle and River Lakes Lane in Martindale, Guadalupe County, Texas. 78655.

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:

Outfall discharges into a unclassified stream segment southwest of San Marcos Highway and TX-142 at 29.83320° N, 97.86917° W. The WWTP discharges into the Lower San Marcos River (segment 1808), which flows into Guadalupe River and is classified as segments 1803 and 1804.

City nearest the outfall(s): Martindale

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

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?

18. Telephone Number	19. Extension or Code	20. Fax Number (if applicable)
(512) 944-5045		() -

SECTION III: Regulated Entity Information

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

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

25. Description to Physical Location:	The wastewater treatment facility and effluent disposal site is located approximately 1.07 miles south of the intersection of Scull Road/Cottonseed Run and Dupuy Ranch Road and 3,527 feet southwest of the intersection of River Ranch Circle and River Lakes Lane in Martindale, Guadalupe County, Texas, 78655.							
26. Nearest City					State	Nearest ZIP Code		
Martindale					TX	78655		
<i>Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).</i>								
27. Latitude (N) In Decimal:		29.83320			28. Longitude (W) In Decimal:		97.86917	
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds			
29	49	59.71	97	52	9.26			
29. Primary SIC Code	30. Secondary SIC Code		31. Primary NAICS Code		32. Secondary NAICS Code			
(4 digits)	(4 digits)		(5 or 6 digits)		(5 or 6 digits)			
33. What is the Primary Business of this entity? (Do not repeat the SIC or NAICS description.)								
Water & Wastewater Facility								
34. Mailing Address:								
	1100 W. 6 th Street							
	City	Austin	State	TX	ZIP	78703	ZIP + 4	
35. E-Mail Address:	Triley@peregrine.land							
36. Telephone Number	37. Extension or Code				38. Fax Number (if applicable)			
(512) 944-5045					() -			



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

SUMMARY OF APPLICATION IN PLAIN LANGUAGE FOR TPDES OR TLAP PERMIT APPLICATIONS

Summary of Application (in plain language) Template and Instructions for Texas Pollutant Discharge Elimination System (TPDES) and Texas Land Application (TLAP) Permit Applications

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

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

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

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

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

PLI I-B, LP. (CNXXXXXXXX) proposes to operate Scull Road Wastewater Treatment Plant (RNXXXXXXXX), a conventional activated sludge process wastewater treatment plant operated to complete mix mode. The facility will be located at approximately 1.07 miles south of the intersection of Scull Road/Cottonseed Run and Dupuy Ranch Road and 3,527 feet southwest of the intersection of River Ranch Circle and River Lakes Lane, in Martindale, Guadalupe County, Texas 78655. This application is for a new wastewater treatment plant to discharge at a daily average flow rate of 990,000 gallons per day of treated domestic wastewater.

Discharges from the facility are expected to contain Biochemical Oxygen Demand, Total Suspended Solids, Ammonia Nitrogen, and Total Phosphorous. The Single-family flows will be treated by a series of conventional wastewater treatment plant processes including screening, aeration, clarification, digestion, filtration, and disinfection.

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

AGUAS RESIDUALES DOMÉSTICAS /AGUAS PLUVIALES

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

PLI I-B, LP. (CNXXXXXXXX) propone operar la Planta de Tratamiento de Aguas Residuales de Scull Road (RNXXXXXXXX, una planta de lodos actividdos convencional operada hasta moda mezcla completa. La instalación estará ubicada en aproximadamente 1,97 millas al sur de la intersección de Scull Road/Cottonseed Run y Dupuy Ranch Road y 3.527 pies al suroeste de la intersección de River Ranch Circle y River Lakes Lane, en Martindale, Condado de Guadalupe, Texas 78655. Esta solicitud es para una nueva planta de tratamiento de aguas residuales que descargará un caudal promedio diario de 990.000 galones por día de aguas residuales domésticas tratadas.

Se espera que las descargas de la instala instalación contengan demanda Biológica de Oxígeno, Sólidos Suspendidos Totales, Nitrógeno Ammoniacal, y Fósforo Total. Los flujos unifamiliares se estara tratado por una serie de procesos convencionales de tratamiento de aguas residuales, que incluyen cribado, sedimentación, aireación, clarificación, digestión, filtración y desinfección.

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

FOR AGENCIES REVIEWING DOMESTIC OR INDUSTRIAL TPDES WASTEWATER PERMIT APPLICATIONS

TCEQ USE ONLY:

Application type: ____Renewal ____Major Amendment ____Minor Amendment ____New

County: _____ Segment Number: _____

Admin Complete Date: _____

Agency Receiving SPIF:

____ Texas Historical Commission

____ U.S. Fish and Wildlife

____ Texas Parks and Wildlife Department

____ U.S. Army Corps of Engineers

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

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

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

The following applies to all applications:

1. Permittee: Tim Riley

Permit No. WQ00 _____

EPA ID No. TX _____

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

The wastewater treatment facility and effluent disposal site is located approximately 1.07 miles south of the intersection of Scull Road/Cottonseed Run and Dupuy Ranch Road and 3,527 feet southwest of the intersection of River Ranch Circle and River Lakes Lane in Martindale, Guadalupe County, Texas, 78655.

DOMESTIC WASTEWATER PERMIT APPLICATION

WORKSHEET 2.1: STREAM PHYSICAL CHARACTERISTICS

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

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

Section 1. General Information (Instructions Page 66)

Date of study: 05/15/2025 Time of study: 9 A.M.

Stream name: Unnamed Tributary to the San Marcos River

Location: The wastewater treatment facility and effluent disposal site is located approximately 1.07 miles south of the intersection of Scull Road/Cottonseed Run and Dupuy Ranch Road and 3,527 feet southwest of the intersection of River Ranch Circle and River Lakes Lane in Martindale, Guadalupe County, Texas, 78655.

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

☐ Perennial ☒ Intermittent with perennial pools

Section 2. Data Collection (Instructions Page 66)

Number of stream bends that are well defined: 0

Number of stream bends that are moderately defined: 2

Number of stream bends that are poorly defined: 2

Number of riffles: 0

Evidence of flow fluctuations (check one):

☐ Minor ☒ moderate ☐ severe

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

The stream was dry with few pools present at the time of the stream assessment on 05/15/2025 at (8 A.M.-10 A.M.). Refer to Attachment J for a map of the stream assessment and photographs of the site. There were no obstructions or modifications observed during the stream assessment. When flow is present, water will flow downstream where it will eventually reach the San Marcos River.

Comisión de Calidad Ambiental del Estado de Texas



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

PERMISO PROPUESTO NO. WQ00

SOLICITUD. PLI I-B, LP, 1100 West 6th Street, Austin, Texas, 78703 ha solicitado a la Comisión de Calidad Ambiental del Estado de Texas (TCEQ) para el propuesto Permiso No. WQ0016847001 (EPA I.D. No. TX 0148164) 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 990,000 galones por día. La planta estará ubicada 4418 pies al sureste de Scull Road y 3009 pies al suroeste de River Ranch Circle en el Condado de Guadalupe, Texas, 78655. La ruta de descarga estará del sitio de la planta a pendiente de revisión de RWA de TCEQ. La TCEQ recibió esta solicitud el 10 de Julio de 2025. La solicitud para el permiso estará disponible para leerla y copiarla en Biblioteca Pública de Seguin, 313 West Nolte Street, Seguin, 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=-97.86916,29.833055&level=18>

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

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

AVISO ADICIONAL. El Director Ejecutivo de la TCEQ ha determinado que la solicitud es administrativamente completa y conducirá una revisión técnica de la solicitud. Después de completar la revisión técnica, el Director Ejecutivo puede preparar un borrador del permiso y

emitirá una Decisión Preliminar sobre la solicitud. **El aviso de la solicitud y la decisión preliminar serán publicados y enviado a los que están en la lista de correo de las personas a lo largo del condado que desean recibir los avisos y los que están en la lista de correo que desean recibir avisos de esta solicitud. El aviso dará la fecha límite para someter comentarios públicos.**

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

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

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

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

La Comisión sólo puede conceder una solicitud de una audiencia de caso impugnado sobre los temas que el solicitante haya presentado en sus comentarios oportunos que no fueron

retirados posteriormente. **Si se concede una audiencia, el tema de la audiencia estará limitado a cuestiones de hecho en disputa o cuestiones mixtas de hecho y de derecho relacionadas a intereses pertinentes y materiales de calidad del agua que se hayan presentado durante el período de comentarios.**

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

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

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

También se puede obtener información adicional del PLI I-B, LP a la dirección indicada arriba o llamando a Siena Werner al 737-787-7618.

Fecha de emisión: 15 de Julio de 2025

Fecha de emisión: *[Date notice issued]*

Comisión de Calidad Ambiental del Estado de Texas



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

PERMISO PROPUESTO NO. WQ00

SOLICITUD. PLI I-B, LP, 1100 West 6th Street, Austin, Texas, 78703 ha solicitado a la Comisión de Calidad Ambiental del Estado de Texas (TCEQ) para el propuesto Permiso No. WQ0016847001 (EPA I.D. No. TX 0148164) 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 990,000 galones por día. La planta estará ubicada 4418 pies al sureste de Scull Road y 3009 pies al suroeste de River Ranch Circle en el Condado de Guadalupe, Texas, 78655. La ruta de descarga estará del sitio de la planta a pendiente de revisión de RWA de TCEQ. La TCEQ recibió esta solicitud el 10 de Julio de 2025. La solicitud para el permiso estará disponible para leerla y copiarla en Biblioteca Pública de Seguin, 313 West Nolte Street, Seguin, 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=-97.86916,29.833055&level=18>

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

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

AVISO ADICIONAL. El Director Ejecutivo de la TCEQ ha determinado que la solicitud es administrativamente completa y conducirá una revisión técnica de la solicitud. Después de completar la revisión técnica, el Director Ejecutivo puede preparar un borrador del permiso y

emitirá una Decisión Preliminar sobre la solicitud. **El aviso de la solicitud y la decisión preliminar serán publicados y enviado a los que están en la lista de correo de las personas a lo largo del condado que desean recibir los avisos y los que están en la lista de correo que desean recibir avisos de esta solicitud. El aviso dará la fecha límite para someter comentarios públicos.**

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

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

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

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

La Comisión sólo puede conceder una solicitud de una audiencia de caso impugnado sobre los temas que el solicitante haya presentado en sus comentarios oportunos que no fueron

retirados posteriormente. **Si se concede una audiencia, el tema de la audiencia estará limitado a cuestiones de hecho en disputa o cuestiones mixtas de hecho y de derecho relacionadas a intereses pertinentes y materiales de calidad del agua que se hayan presentado durante el período de comentarios.**

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

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También se puede obtener información adicional del PLI I-B, LP a la dirección indicada arriba o llamando a Siena Werner al 737-787-7618.

Fecha de emisión: 15 de Julio de 2025

Fecha de emisión: *[Date notice issued]*

1
EMS RANCH LLC
PO BOX 130
STAPLES, TX 78670

2
EMS RANCH LLC
PO BOX 130
STAPLES, TX 78670

3
ECK LEROY & MARY DEVINEY ECK LIVING
TRUST
13205 GEORGE RD
SAN ANTONIO, TX 78230

4
WATERFALL RANCH LLC
PO BOX 201
MARTINDALE, TX 78655

5
MAXWELL SOCIAL CLUB
PO BOX 42
MAXWELL, TX 78656



July 16, 2025

Francesca Findlay
Texas Commission on Environmental Quality
Applications Review and Processing Team (MC 148)
Water Quality Division
12100 Park 35 Circle
Austin, Texas 78753

**RE: Scull Road WWTP
Application for Proposed Permit No. WQ0016847001
EPA ID: (TX0148164), CN606404861, RN112245329**

Dear Francesca Findlay,

Thank you for reviewing the permit application and informing us of the additional information needed in the Notice of Deficiency letter dated July 15th, 2025. The responses to your comments are as follows:

1. Correct. Mailing address is 5301 Southwest Parkway, Building 2, Suite 100, Austin, Texas.
2. The landowners mailing list in word document is attached to this email.
3. Correct. The address is 4,418 feet southeast of Scull Road and 3,009 feet southwest of River Ranch Circle.
4. The address of the WWTP should be 4,418 feet southeast of Scull Road and 3,009 feet southwest of River Ranch Circle in NORI.
5. Spanish NORI Attached.

You may contact me with any requests or questions at siena.werner@kimley-horn.com or by phone at 787-737-7618.

Sincerely,

KIMLEY-HORN AND ASSOCIATES, INC.
Texas Firm No. 928

Siena Werner, P.E.
Project Manager

Francesca Findlay

From: Neises, Riley <Riley.Neises@kimley-horn.com>
Sent: Monday, July 21, 2025 8:02 AM
To: Francesca Findlay
Cc: Werner, Siena; Clements, Ian
Subject: RE: WQ0016847001 PLI I-B, LP
Attachments: Scull TCEQ NOD Response.pdf; Municipal Discharge New Spanish NORI.pdf; Scull Compiled Permit_12.pdf; Scull Compiled Permit_38.pdf; Scull Compiled Permit_44.pdf; Scull Compiled Permit_47.pdf; Scull Compiled Permit_48.pdf; Scull Compiled Permit_62.pdf; Scull Compiled Permit_102.pdf

Dear Francesca Findlay,

The attached responses for the Notice of Deficiency letter sent on July 15, 2025, and the NORI.

I also attached the 7 pages in the Permit that will need to be changed with the location change. The numbers following Scull Compiled Permit are the page numbers for the permit.

Please let us know if you have any additional questions or is there is anything else we can provide.

Thank you,

Riley Neises | Water/Wastewater Intern

Kimley-Horn | 5301 Southwest Parkway, Building 2, Suite 100, Austin, TX, 78735

Direct: 512-6551-1853 | Mobile: 512-994-9982

From: Francesca Findlay <Francesca.Findlay@tceq.texas.gov>
Sent: Tuesday, July 15, 2025 9:40 AM
To: Werner, Siena <Siena.Werner@kimley-horn.com>
Cc: Clements, Ian <Ian.Clements@kimley-horn.com>
Subject: FW: WQ0016847001 PLI I-B, LP

Some people who received this message don't often get email from francesca.findlay@tceq.texas.gov. [Learn why this is important](#)

Dear Ms. Werner:

The attached Notice of Deficiency letter sent on July 15, 2025, requesting additional information needed to declare the application administratively complete. Please send the complete response to my attention July 29, 2025.

Thank you,

Francesca Findlay
License & Permit Specialist
ARP Team | Water Quality Division
512-239-2441
Texas Commission on Environmental Quality



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

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

E. Owner of effluent disposal site:

Prefix: N/A

Last Name, First Name: N/A

Title: N/A

Credential: N/A

Organization Name: N/A

Mailing Address: N/A

City, State, Zip Code: N/A

Phone No.: N/A

E-mail Address: N/A

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

Attachment: N/A

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

Prefix: N/A

Last Name, First Name: N/A

Title: N/A

Credential: N/A

Organization Name: N/A

Mailing Address: N/A

City, State, Zip Code: N/A

Phone No.: N/A

E-mail Address: N/A

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

Attachment: N/A

Section 10. TPDES Discharge Information (Instructions Page 31)

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

☐ Yes ☐ No

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

New permit application. The wastewater treatment facility and effluent disposal site is located approximately 4,418 feet southeast of Scull Road and 3,009 feet southwest of River Ranch Circle in Martindale, Guadalupe County, Texas, 78655.

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:

Outfall discharges into a unclassified stream segment southwest of San Marcos Highway and TX-142 at 29.83320° N, 97.86917° W. The WWTP discharges into the Lower San Marcos River (segment 1808), which flows into Guadalupe River and is classified as segments 1803 and 1804.

City nearest the outfall(s): Martindale

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

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?

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:
2. Check or Money Order Amount: ~~\$1650.00~~
3. Date of Check or Money Order: 07/08/2025
4. Name on Check or Money Order: Peregrine Land Investments I, LP
5. APPLICATION INFORMATION

Name of Project or Site: Scull Road Wastewater Treatment Plant

Physical Address of Project or Site: New permit application. The wastewater treatment facility and effluent disposal site is located approximately 4,418 feet southeast of Scull Road and 3,009 feet southwest of River Ranch Circle in Martindale, Guadalupe County, Texas, 78655.

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

18. Telephone Number	19. Extension or Code	20. Fax Number (if applicable)
(512) 944-5045		() - -

SECTION III: Regulated Entity Information

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

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

25. Description to Physical Location:	The wastewater treatment facility site is located approximately 4,418 feet southeast of Scull Road.							
26. Nearest City					State	Nearest ZIP Code		
Martindale					TX		78655	
<i>Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).</i>								
27. Latitude (N) In Decimal:		29.83320			28. Longitude (W) In Decimal:		97.86917	
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds			
29	49	59.71	97	52	9.26			
29. Primary SIC Code		30. Secondary SIC Code		31. Primary NAICS Code		32. Secondary NAICS Code		
(4 digits)		(4 digits)		(5 or 6 digits)		(5 or 6 digits)		
33. What is the Primary Business of this entity? (Do not repeat the SIC or NAICS description.)								
Water & Wastewater Facility								
34. Mailing Address:								
	1100 W. 6 th Street							
	City	Austin	State	TX	ZIP	78703	ZIP + 4	
35. E-Mail Address:		Triley@peregrine.land						
36. Telephone Number			37. Extension or Code			38. Fax Number (if applicable)		
(512) 944-5045						() - -		



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

SUMMARY OF APPLICATION IN PLAIN LANGUAGE FOR TPDES OR TLAP PERMIT APPLICATIONS

Summary of Application (in plain language) Template and Instructions for Texas Pollutant Discharge Elimination System (TPDES) and Texas Land Application (TLAP) Permit Applications

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

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

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

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

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

PLI I-B, LP. (CNXXXXXXXX) proposes to operate Scull Road Wastewater Treatment Plant (RNXXXXXXXX), a conventional activated sludge process wastewater treatment plant operated to complete mix mode. The facility will be located at approximately 4,418 feet southeast of Scull Road and 3,009 feet southwest of River Ranch Circle, in Martindale, Guadalupe County, Texas 78655. This application is for a new wastewater treatment plant to discharge at a daily average flow rate of 990,000 gallons per day of treated domestic wastewater.

Discharges from the facility are expected to contain Biochemical Oxygen Demand, Total Suspended Solids, Ammonia Nitrogen, and Total Phosphorous. The Single-family flows will be treated by a series of conventional wastewater treatment plant processes including screening, aeration, clarification, digestion, filtration, and disinfection.

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

AGUAS RESIDUALES DOMÉSTICAS /AGUAS PLUVIALES

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

PLI I-B, LP. (CNXXXXXXXXX) propone operar la Planta de Tratamiento de Aguas Residuales de Scull Road (RNXXXXXXXXX, una planta de lodos actividdos convencional operada hasta moda mezcla completa. La instalación estará ubicada en aproximadamente 4.418 pies al sureste de Scull Road y 3.009 pies al suroeste de River Ranch Cirl , en Martindale, Condado de Guadalupe, Texas 78655. Esta solicitud es para una nueva planta de tratamiento de aguas residuales que descargará un caudal promedio diario de 990.000 galones por día de aguas residuales domésticas tratadas.

Se espera que las descargas de la instala instalación contengan demanda Biológica de Oxígeno, Sólidos Suspendidos Totales, Nitrógeno Ammoniacal, y Fósforo Total. Los flujos unifamiliares se estara tratado por una serie de procesos convencionales de tratamiento de aguas residuales, que incluyen cribado, sedimentación, aireación, clarificación, digestión, filtración y desinfección.

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

FOR AGENCIES REVIEWING DOMESTIC OR INDUSTRIAL TPDES WASTEWATER PERMIT APPLICATIONS

TCEQ USE ONLY:

Application type: ____Renewal ____Major Amendment ____Minor Amendment ____New

County: _____ Segment Number: _____

Admin Complete Date: _____

Agency Receiving SPIF:

____ Texas Historical Commission

____ U.S. Fish and Wildlife

____ Texas Parks and Wildlife Department

____ U.S. Army Corps of Engineers

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

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

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

The following applies to all applications:

1. Permittee: Tim Riley

Permit No. WQ00 _____

EPA ID No. TX _____

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

The wastewater treatment facility and effluent disposal site is located approximately 4,418 feet southeast of Scull Road and 3,009 feet southwest of River Ranch Circle in Guadalupe County.

DOMESTIC WASTEWATER PERMIT APPLICATION

WORKSHEET 2.1: STREAM PHYSICAL CHARACTERISTICS

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

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

Section 1. General Information (Instructions Page 66)

Date of study: 05/15/2025 Time of study: 9 A.M.

Stream name: Unnamed Tributary to the San Marcos River

Location: The site is located approximately 4,418 feet southeast of Scull Road in Martindale, Texas, 78655.

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

☐ Perennial ☒ Intermittent with perennial pools

Section 2. Data Collection (Instructions Page 66)

Number of stream bends that are well defined: 0

Number of stream bends that are moderately defined: 2

Number of stream bends that are poorly defined: 2

Number of riffles: 0

Evidence of flow fluctuations (check one):

☐ Minor ☒ moderate ☐ severe

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

The stream was dry with few pools present at the time of the stream assessment on 05/15/2025 at (8 A.M.-10 A.M.). Refer to Attachment J for a map of the stream assessment and photographs of the site. There were no obstructions or modifications observed during the stream assessment. When flow is present, water will flow downstream where it will eventually reach the San Marcos River.

Central Registry Internal Reporting

Main Query Page

Program Area Search

Additional ID Detail

Additional ID Program	WWPERMIT		Legacy System (Code)	(WQ)	
Additional ID	WQ0016847001	Status	PENDING		ID Type PERMIT
Name	SCULL ROAD WWTP			Sec. Addn Id	TX0148164, EPA ID
Physical Address	Not on file				
Description	THE WWTF SITE IS LOCATED APPROX 4 218 FT SE OF SCULL RD				
County	GUADALUPE	Region	REGION 13 - SAN ANTONIO		
Nearest City	MARTINDALE	State	TX	Nearest Zip	78655
Latitude	29° 49 min 59 sec (29.833055)		Longitude	97° 52 min 9 sec (-97.86916)	

Map It

Copy Map It URL

Industry Types

Classification System	Code	Name	Primary Flag
-----------------------	------	------	--------------

0 Industry Type records returned

Site Classifications

Program	Site Classification	Begin Date	End Date	CMS Min Freq Qty
WASTEWATER	DOMESTIC MINOR	07/10/2025	12/31/3000	0

Site Classification: (1-1 of 1 Record)

Customers

List All

CN Number	Name ▲	Role
CN606404861	PLI I-B LP	OWN

Customers: (1-1 of 1 Record)

Issued To

CN Number	Issued To Name	Start Date	'Issued To' History
CN606404861			View

Issued To: (1-1 of 1 Record)

Regulated Entity

Reference Number	RN112245329	Name	SCULL ROAD WWTP	Stand-Alone	N
Business Description	WATER & WASTEWATER FACILITY				

Location

Address	Not on file				
Description	THE WWTF SITE IS LOCATED APPROX 4 218 FT SE OF SCULL RD				
County	GUADALUPE	Region	REGION 13 - SAN ANTONIO		
Nearest City	MARTINDALE	State	TX	Nearest Zip	78655
Latitude	29° 49 min 59 sec (29.833055)		Longitude	97° 52 min 9 sec (-97.86916)	

[Site Help](#) | [Disclaimer](#) | [Web Policies](#) | [Accessibility](#) | [Our Compact with Texans](#) | [TCEQ Homeland Security](#) | [Contact Us](#) | [Central Registry](#)

Statewide Links: [Texas.gov](#) | [Texas Homeland Security](#) | [TRAIL Statewide Archive](#) | [Texas Veterans Portal](#)

Francesca Findlay

From: Neises, Riley <Riley.Neises@kimley-horn.com>
Sent: Tuesday, July 29, 2025 10:10 AM
To: Francesca Findlay
Cc: Clements, Ian; Werner, Siena
Subject: RE: WQ0016847001 PLI I-B, LP
Attachments: Scull Compiled Permit_12.pdf; Scull Compiled Permit_38.pdf; Scull Compiled Permit_44.pdf; Scull Compiled Permit_47_48.pdf; Scull Compiled Permit_62.pdf; Scull Compiled Permit_102.pdf

Hello Francesca,

Please find attached the updated facility location for Scull WWTP (WQ0016847001), along with the specific pages in the permit where the location has been revised.

We are currently working on correcting the signature page and will forward the updated version to you as soon as it's available.

Thank you,

Riley Neises | Water/Wastewater Intern

Kimley-Horn | 5301 Southwest Parkway, Building 2, Suite 100, Austin, TX, 78735

Direct: 512-6551-1853 | Mobile: 512-994-9982

From: Francesca Findlay <Francesca.Findlay@tceq.texas.gov>
Sent: Friday, July 25, 2025 4:37 PM
To: Neises, Riley <Riley.Neises@kimley-horn.com>
Cc: Clements, Ian <Ian.Clements@kimley-horn.com>; Werner, Siena <Siena.Werner@kimley-horn.com>
Subject: RE: WQ0016847001 PLI I-B, LP

Good afternoon,

I am reviewing your application, and I have noticed the description of the facility's location is insufficient because it does not use road intersections. The description must include the distance in feet or miles from road intersections. Please submit a revised copy of page 5 that includes either a physical address for the facility, or a more accurate description of the facility's location.

Thank you,

Francesca Findlay
License & Permit Specialist
ARP Team | Water Quality Division
512-239-2441

Texas Commission on Environmental Quality



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

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

From: Francesca Findlay
Sent: Friday, July 25, 2025 3:16 PM
To: Neises, Riley <Riley.Neises@kimley-horn.com>
Cc: Clements, Ian <Ian.Clements@kimley-horn.com>; Werner, Siena <Siena.Werner@kimley-horn.com>
Subject: RE: WQ0016847001 PLI I-B, LP

Good afternoon,

I am reviewing your documents, and I noticed that the Signature page is missing a few items. The Signature date and the date of the notary, need to be the same date. The Signatory name (typed or printed) is missing. The signatory title is also missing. Please provide an updated Signature page.

Thank you,

Francesca Findlay
License & Permit Specialist
ARP Team | Water Quality Division
512-239-2441
Texas Commission on Environmental Quality



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

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

From: Francesca Findlay
Sent: Monday, July 21, 2025 11:30 AM
To: Neises, Riley <Riley.Neises@kimley-horn.com>
Cc: Clements, Ian <Ian.Clements@kimley-horn.com>; Werner, Siena <Siena.Werner@kimley-horn.com>
Subject: RE: WQ0016847001 PLI I-B, LP

Received, thank you.

Thank you,

Francesca Findlay
License & Permit Specialist
ARP Team | Water Quality Division
512-239-2441
Texas Commission on Environmental Quality



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

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

From: Neises, Riley <Riley.Neises@kimley-horn.com>
Sent: Monday, July 21, 2025 11:07 AM
To: Francesca Findlay <Francesca.Findlay@tceq.texas.gov>
Cc: Clements, Ian <Ian.Clements@kimley-horn.com>; Werner, Siena <Siena.Werner@kimley-horn.com>
Subject: RE: WQ0016847001 PLI I-B, LP

Good morning Francesca,

I have attached the landowner's labels in a word document form.

Thank you,

Riley Neises | Water/Wastewater Intern

Kimley-Horn | 5301 Southwest Parkway, Building 2, Suite 100, Austin, TX, 78735

Direct: 512-6551-1853 | Mobile: 512-994-9982

From: Francesca Findlay <Francesca.Findlay@tceq.texas.gov>
Sent: Monday, July 21, 2025 9:26 AM
To: Neises, Riley <Riley.Neises@kimley-horn.com>
Cc: Werner, Siena <Siena.Werner@kimley-horn.com>; Clements, Ian <Ian.Clements@kimley-horn.com>
Subject: RE: WQ0016847001 PLI I-B, LP

Good morning,

I have received your documents, but I am missing the landowner's labels in a word document in Avery Labels 5160.

Thank you,

Francesca Findlay
License & Permit Specialist
ARP Team | Water Quality Division
512-239-2441
Texas Commission on Environmental Quality



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

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

From: Neises, Riley <Riley.Neises@kimley-horn.com>
Sent: Monday, July 21, 2025 8:02 AM
To: Francesca Findlay <Francesca.Findlay@tceq.texas.gov>
Cc: Werner, Siena <Siena.Werner@kimley-horn.com>; Clements, Ian <Ian.Clements@kimley-horn.com>
Subject: RE: WQ0016847001 PLI I-B, LP

Dear Francesca Findlay,

The attached responses for the Notice of Deficiency letter sent on July 15, 2025, and the NORI.

I also attached the 7 pages in the Permit that will need to be changed with the location change. The numbers following Scull Compiled Permit are the page numbers for the permit.

Please let us know if you have any additional questions or is there is anything else we can provide.

Thank you,

Riley Neises | Water/Wastewater Intern

Kimley-Horn | 5301 Southwest Parkway, Building 2, Suite 100, Austin, TX, 78735

Direct: 512-6551-1853 | Mobile: 512-994-9982

From: Francesca Findlay <Francesca.Findlay@tceq.texas.gov>
Sent: Tuesday, July 15, 2025 9:40 AM
To: Werner, Siena <Siena.Werner@kimley-horn.com>
Cc: Clements, Ian <Ian.Clements@kimley-horn.com>
Subject: FW: WQ0016847001 PLI I-B, LP

Some people who received this message don't often get email from francesca.findlay@tceq.texas.gov. [Learn why this is important](#)

Dear Ms. Werner:

The attached Notice of Deficiency letter sent on July 15, 2025, requesting additional information needed to declare the application administratively complete. Please send the complete response to my attention July 29, 2025.

Thank you,

Francesca Findlay
License & Permit Specialist
ARP Team | Water Quality Division
512-239-2441
Texas Commission on Environmental Quality



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

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



AUGUST 2025
DOYLE OVERTON ROAD WWTP
DOMESTIC WASTEWATER PERMIT
APPLICATION (TPDES)

SUBMITTED BY KIMLEY-HORN AND ASSOCIATES ON BEHALF OF PLI I-A, LP



August 8, 2025

Texas Commission on Environmental Quality
Applications Review and Processing Team (MF 148)
Building F, Room 2101
12100 Park 35 Circle
Austin, Texas 78753

RE: Discharge Permit for the Doyle Overton Road Wastewater Treatment Plant

Dear Water Quality Team:

This letter serves to transmit the wastewater discharge permit application for the Doyle Overton Road Wastewater Treatment Plant.

The permit application that follows contains the following forms and attachments:

- Attachment A. Domestic Administrative Report (Form 10053)
- Attachment B. Core Data Form
- Attachment C. Plain Language Summary
- Attachment D. Public Involvement Plan
- Attachment E. USGS Map
- Attachment F. Supplemental Permit Information Form
- Attachment G. Affected Landowners Map
- Attachment H. Buffer Zone Map
- Attachment I. Domestic Technical Report (Form 10054)
- Attachment J. Stream Assessment, Original Photographs
- Attachment K. Process Flow Diagram
- Attachment L. Site Drawing
- Attachment M. CCN Letter
- Attachment N. Nearby Plants
- Attachment O. Design Calculations
- Attachment P. Wind Rose
- Attachment Q. Sewage Sludge Solids Management Plan



The attached application contains detailed contact information. In addition, you may contact me with any requests at Kam.Grace@kimley-horn.com or by phone at 1 (512) 693-2140.

Sincerely,

KIMLEY-HORN AND ASSOCIATES, INC.

Texas Firm No. 928

A handwritten signature in black ink, appearing to read "Kam Grace".

Kam Grace

Project Manager

Attachment A - Domestic Administrative Report
(Form 10053)



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the application.

APPLICANT NAME: PLI I-A, LP

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

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

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

For TCEQ Use Only

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



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

**DOMESTIC WASTEWATER PERMIT APPLICATION
ADMINISTRATIVE REPORT 1.0**

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

Section 1. Application Fees (Instructions Page 26)

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

Flow	New/Major Amendment	Renewal
<0.05 MGD	\$350.00 <input type="checkbox"/>	\$315.00 <input type="checkbox"/>
≥0.05 but <0.10 MGD	\$550.00 <input type="checkbox"/>	\$515.00 <input type="checkbox"/>
≥0.10 but <0.25 MGD	\$850.00 <input 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 checked="" 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: 1005
Check/Money Order Amount: \$1,650.00
Name Printed on Check: Peregrine Land Investments I, LP
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 N/A

EPA I.D. (TPDES only): TX N/A

Expiration Date: N/A

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?

PLI I-A, LP

(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: Riley, Tim

Title: Principal

Credential: N/A

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

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

N/A

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

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

CN: 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: N/A

Last Name, First Name: N/A

Title: N/A

Credential: N/A

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

C. Core Data Form

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

Section 4. Application Contact Information (Instructions Page 27)

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

A. Prefix: Ms.

Last Name, First Name: Grace, Kam

Title: Civil Analyst

Credential: E.I.T.

Organization Name: Kimley-Horn

Mailing Address: 5301 Southwest Pkwy, Bldg. 2 Suite 100 City, State, Zip Code: Austin, TX 78735

Phone No.: 512-693-2140

E-mail Address: Kam.Grace@kimley-horn.com

Check one or both: ☒ Administrative Contact ☐ Technical Contact

B. Prefix: Mr.

Last Name, First Name: Green, Ben

Title: Project Engineer

Credential: P.E

Organization Name: Kimley-Horn

Mailing Address: 5301 Southwest Pkwy, Bldg. 2 Suite 100 City, State, Zip Code: Austin, TX 78735

Phone No.: 512-646-2243

E-mail Address: Ben.Green@kimley-horn.com

Check one or both: ☐ Administrative Contact ☒ Technical Contact

Section 5. Permit Contact Information (Instructions Page 27)

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

A. Prefix: Mr.

Last Name, First Name: Riley, Tim

Title: Principal

Credential: N/A

Organization Name: PLI I-A, LP

Mailing Address: 1100 W. 6th Street City, State, Zip Code: Austin, TX 78703

Phone No.: 512-944-5045 E-mail Address: triley@peregrine.land

B. Prefix: Mr. Last Name, First Name: Nape, Noah

Title: Manager Credential: N/A

Organization Name: PLI I-A, LP

Mailing Address: 1100 W. 6th Street City, State, Zip Code: Austin, TX 78703

Phone No.: 512-940-1424 E-mail Address: npape@peregrine.land

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: Riley, Tim

Title: Principal Credential: N/A

Organization Name: PLI I-A, LP

Mailing Address: 1100 W. 6th Street City, State, Zip Code: Austin, TX 78703

Phone No.: 512-944-5045 E-mail Address: triley@peregrine.land

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: Riley, Tim

Title: Principal Credential: N/A

Organization Name: PLI I-A, LP

Mailing Address: 1100 W. 6th Street City, State, Zip Code: Austin, TX 78703

Phone No.: 512-944-5045 E-mail Address: triely@peregrine.land

Section 8. Public Notice Information (Instructions Page 27)

A. Individual Publishing the Notices

Prefix: Ms. Last Name, First Name: Grace, Kam

Title: Project Manager Credential: E.I.T.

Organization Name: Kimley-Horn

Mailing Address: 5301 Southwest Pkwy, Bldg. 2 Suite 100 City, State, Zip Code: Austin, TX 78735

Phone No.: 512-693-2140 E-mail Address: Kam.Grace@kimley-horn.com

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

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

☒ E-mail Address

☐ Fax

☐ Regular Mail

C. Contact permit to be listed in the Notices

Prefix: Ms.

Last Name, First Name: Grace, Kam

Title: Project Manager

Credential: E.I.T.

Organization Name: Kimley-Horn

Mailing Address: 5301 Southwest Pkwy, Bldg.2 Suite 100 City, State, Zip Code: Austin, TX 78735

Phone No.: 512-693-2140

E-mail Address: Kam.Grace@kimley-horn.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: Elroy Community Library

Location within the building: Circulation Desk

Physical Address of Building: 13512 FM 812

City: Del Valle

County: Travis

Contact (Last Name, First Name): N/A

Phone No.: 512-243-1981 Ext.: N/A

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: Attachment C: Plain Language Summary

G. Public Involvement Plan Form

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

Attachment: Attachment D: Public Involvement Plan

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 N/A

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):

Doyle Overton Road Wastewater Treatment Plant

C. Owner of treatment facility: PLI I-A, LP

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

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

Prefix: Mr.

Last Name, First Name: Riley, Tim

Title: Principal

Credential: N/A

Organization Name: PLI I-A, LP

Mailing Address: 1100 W. 6th Street

City, State, Zip Code: Austin, TX 78703

Phone No.: 512-944-5045

E-mail Address: triley@peregrine.land

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

Attachment: N/A

E. Owner of effluent disposal site:

Prefix: N/A

Last Name, First Name: N/A

Title: N/A

Credential: N/A

Organization Name: N/A

Mailing Address: N/A

City, State, Zip Code: N/A

Phone No.: N/A

E-mail Address: N/A

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

Attachment: N/A

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

Prefix: N/A

Last Name, First Name: N/A

Title: N/A

Credential: N/A

Organization Name: N/A

Mailing Address: N/A

City, State, Zip Code: N/A

Phone No.: N/A

E-mail Address: N/A

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

Attachment: N/A

Section 10. TPDES Discharge Information (Instructions Page 31)

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

☐ Yes ☐ No

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

New permit application. The wastewater treatment facility and effluent discharge point are located approximately 630 feet in the northwestern direction (heading ~300°) from the intersection of Doyle Overton Road and Hokanson Road in Del Valle, Texas, 78617, Travis County.

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

☐ Yes ☐ No

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

New permit application. Outfall discharges into an unnamed stream segment just south of Hokanson Road at 30.09351° N, 97.63394° W. Unnamed stream feeds into Maha Creek (unclassified, 1434F), then to Cedar Creek (unclassified, 1434B), and finally into Colorado River

City nearest the outfall(s): Del Valle

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

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

☐ Yes ☒ No

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

- ☐ Authorization granted ☐ Authorization pending

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

Attachment: N/A

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

Section 11. TLAP Disposal Information (Instructions Page 32)

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

☐ Yes ☐ No

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

N/A

- B. City nearest the disposal site: N/A

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

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

N/A

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

Section 12. Miscellaneous Information (Instructions Page 32)

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

☐ Yes ☒ No

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

☐ Yes ☐ No ☒ Not Applicable

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

N/A

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

☐ Yes ☒ No

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

D. Do you owe any fees to the TCEQ?

☐ Yes ☒ No

If yes, provide the following information:

Account number: N/A

Amount past due: N/A

E. Do you owe any penalties to the TCEQ?

☐ Yes ☒ No

If yes, please provide the following information:

Enforcement order number: N/A

Amount past due: N/A

Section 13. Attachments (Instructions Page 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: N/A

Section 14 Signature Page (Instructions Page 34)

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

Permit Number:

Applicant: PLI I-A, LP

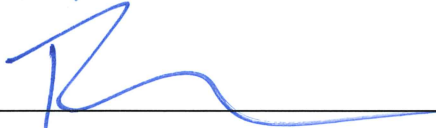
Certification:

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): Tim Kiley

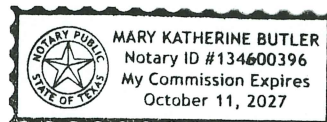
Signatory title: Principal

Signature:  Date: 5/6/25
(Use blue ink)

Subscribed and Sworn to before me by the said Tim Kiley
on this 6th day of May, 20 25.

My commission expires on the 11th day of October, 20 27.


Notary Public



[SEAL]

Travis
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: Travis County Appraisal District, June 2026

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

☐ Yes ☒ No

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

N/A

Section 2. Original Photographs (Instructions Page 38)

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

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

Section 3. Buffer Zone Map (Instructions Page 38)

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

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

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

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

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

- ☒ Yes ☐ No

DOMESTIC WASTEWATER PERMIT APPLICATION

SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

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

Attachment: Attachment F: Supplemental Permit Information Form

WATER QUALITY PERMIT

PAYMENT SUBMITTAL FORM

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

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

Mail this form and the check or money order to:

BY REGULAR U.S. MAIL

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

BY OVERNIGHT/EXPRESS MAIL

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

Fee Code: WQP Waste Permit No: N/A

1. Check or Money Order Number: 1005
2. Check or Money Order Amount: \$1650
3. Date of Check or Money Order: 7/17/25
4. Name on Check or Money Order: Peregrine Land Investments I, LP
5. APPLICATION INFORMATION

Name of Project or Site: Doyle Overton Road Wastewater Treatment Plant

Physical Address of Project or Site: The site is located approximately 630 feet in the northwestern direction (heading ~300°) from the intersection of Doyle Overton Road and Hokanson Road in Del Valle, Texas, 78617, Travis County.

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

Attachment B – Core Data Form



TCEQ Core Data Form

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

SECTION I: General Information

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

SECTION II: Customer Information

4. General Customer Information		5. Effective Date for Customer Information Updates (mm/dd/yyyy)					
<input checked="" type="checkbox"/> New Customer <input type="checkbox"/> Update to Customer Information <input type="checkbox"/> Change in Regulated Entity Ownership							
<input type="checkbox"/> Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)							
<i>The Customer Name submitted here may be updated automatically based on what is current and active with the Texas Secretary of State (SOS) or Texas Comptroller of Public Accounts (CPA).</i>							
6. Customer Legal Name (If an individual, print last name first: eg: Doe, John)				<i>If new Customer, enter previous Customer below:</i>			
PLI I-A, LP				N/A			
7. TX SOS/CPA Filing Number		8. TX State Tax ID (11 digits)		9. Federal Tax ID (9 digits)	10. DUNS Number (if applicable)		
0805340374		32092886632		933862830	138387249		
11. Type of Customer:		<input type="checkbox"/> Corporation		<input type="checkbox"/> Individual	Partnership: <input type="checkbox"/> General <input checked="" type="checkbox"/> Limited		
Government: <input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Federal <input type="checkbox"/> Local <input type="checkbox"/> State <input type="checkbox"/> Other		<input type="checkbox"/> Sole Proprietorship		<input type="checkbox"/> Other:			
12. Number of Employees				13. Independently Owned and Operated?			
<input checked="" type="checkbox"/> 0-20 <input type="checkbox"/> 21-100 <input type="checkbox"/> 101-250 <input type="checkbox"/> 251-500 <input type="checkbox"/> 501 and higher				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
14. Customer Role (Proposed or Actual) – as it relates to the Regulated Entity listed on this form. Please check one of the following							
<input 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							
15. Mailing Address:	1100 W 6 th Street						
	City	Austin	State	TX	ZIP	78703	ZIP + 4
16. Country Mailing Information (if outside USA)				17. E-Mail Address (if applicable)			
				triley@peregrine.land			

18. Telephone Number	19. Extension or Code	20. Fax Number (if applicable)
(512) 944-5045		() -

SECTION III: Regulated Entity Information

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

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

25. Description to Physical Location:	The wastewater treatment facility site is located approximately 630 feet northwest of the intersection of Doyle Overton Road and Hokanson Road.							
26. Nearest City					State	Nearest ZIP Code		
Del Valle					TX	78617		
<i>Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).</i>								
27. Latitude (N) In Decimal:		30.09351°			28. Longitude (W) In Decimal:		97.63394°	
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds			
30°	5'	36.636"	97°	38'	2.184"			
29. Primary SIC Code (4 digits)	30. Secondary SIC Code (4 digits)		31. Primary NAICS Code (5 or 6 digits)		32. Secondary NAICS Code (5 or 6 digits)			
4900	4952		220000		221320			
33. What is the Primary Business of this entity? (Do not repeat the SIC or NAICS description.)								
Water and Wastewater Facility								
34. Mailing Address:	1100 W 6 th Street							
	City	Austin	State	TX	ZIP	78703	ZIP + 4	
35. E-Mail Address:	triley@peregrine.land							
36. Telephone Number	37. Extension or Code		38. Fax Number (if applicable)					
(512) 944-5045			() -					

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

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

SECTION IV: Preparer Information

40. Name:	Kam Grace		41. Title:	Civil Analyst
42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Mail Address	
(512) 693-2140		() -	Kam.Grace@kimley-horn.com	

SECTION V: Authorized Signature

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

Company:	Kimley-Horn	Job Title:	Civil Engineer
Name (In Print):	Kameron Grace	Phone:	(512) 693-2140
Signature:	Kameron Grace	Date:	08/09/25

Attachment C – Plain Language Summary



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

SUMMARY OF APPLICATION IN PLAIN LANGUAGE FOR TPDES OR TLAP PERMIT APPLICATIONS

Summary of Application (in plain language) Template and Instructions for Texas Pollutant Discharge Elimination System (TPDES) and Texas Land Application (TLAP) Permit Applications

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

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

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

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

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

PLI I-A, LP (CN000000000) proposes to operate the Doyle Overton Road Wastewater Treatment Plant (RN000000000), a conventional activated sludge process wastewater treatment plant operated to complete mix mode. The facility will be located at approximately 630 feet northwest of the intersection of Doyle Overton Road and Hokanson Road, in Del Valle, Travis County, Texas 78617. This application is for a new application to discharge at a daily average flow rate of 990,000 gallons per day of treated domestic wastewater.

Discharges from the facility are expected to contain Biochemical Oxygen Demand, Total Suspended Solids, Ammonia Nitrogen, and Total Phosphorus. The single-family residential effluent will be treated by a series of conventional wastewater treatment plant process including screening, aeration, clarification, digestion, filtration, and disinfection.

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

AGUAS RESIDUALES **DOMÉSTICAS** /AGUAS PLUVIALES

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

PLI I-A, LP (CN000000000) propone operar la Planta de Tratamiento de Aguas Residuales de Doyle Overton Road (RN000000000), una planta de tratamiento de aguas residuales de proceso de lodos activados convencional que funciona en modo de mezcla completa. La instalación estará ubicada en aproximadamente 630 pies al Noroeste de la intersección de Doyle Overton Road y Hokanson Road, en Del Valle, Condado de Travis, Texas 78617. Esta solicitud es para una nueva aplicación para descargar a un caudal promedio diario de 9990,000 galones por día de aguas residuales domésticas tratadas.

Se espera que las descargas de la instalación contengan demanda bioquímica de oxígeno, sólidos suspendidos totales, nitrógeno amoniacal y fósforo total. El efluente residencial unifamiliar estará tratado por una serie de procesos convencionales de la planta de tratamiento de aguas residuales incluyendo cribado, aireación, clarificación, digestión, filtración, y la desinfección.

Attachment D – Public Involvement Plan



Texas Commission on Environmental Quality

Public Involvement Plan Form for Permit and Registration Applications

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

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

Section 1. Preliminary Screening

New Permit or Registration Application

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

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

Section 2. Secondary Screening

Requires public notice,

Considered to have significant public interest, and

Located within any of the following geographical locations:

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

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

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

Section 3. Application Information

Type of Application (check all that apply):

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

Water Quality

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

Water Rights New Permit

New Appropriation of Water
New or existing reservoir

Amendment to an Existing Water Right

Add a New Appropriation of Water
Add a New or Existing Reservoir
Major Amendment that could affect other water rights or the environment

Section 4. Plain Language Summary

Provide a brief description of planned activities.

Section 5. Community and Demographic Information

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

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

(City)

(County)

(Census Tract)

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

City

County

Census Tract

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

Section 6. Planned Public Outreach Activities

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

Yes No

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

Yes No

If Yes, please describe.

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

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

Yes No

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

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

Publish in alternative language newspaper

Posted on Commissioner's Integrated Database Website

Mailed by TCEQ's Office of the Chief Clerk

Other (specify)

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

Yes No

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

Yes No

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

TCEQ Regional Office

TCEQ Central Office

Public Place (specify)

Section 7. Voluntary Submittal

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

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

Yes No

What types of notice will be provided?

Publish in alternative language newspaper

Posted on Commissioner's Integrated Database Website

Mailed by TCEQ's Office of the Chief Clerk

Other (specify)

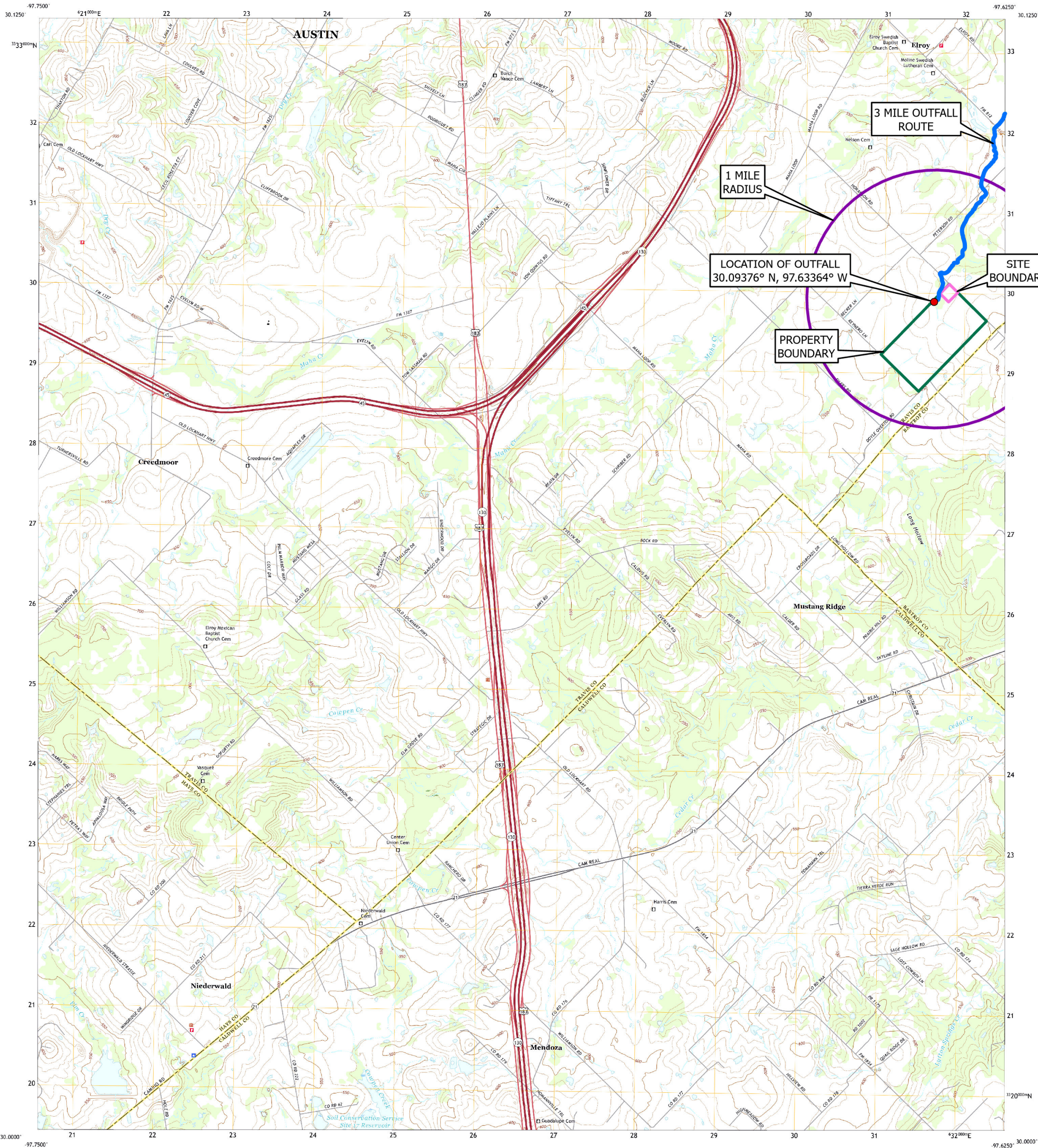
Attachment E – USGS Map



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

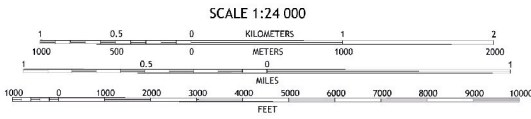
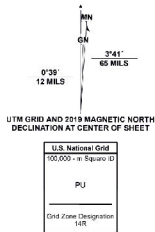


CREEDMOOR QUADRANGLE
TEXAS
7.5-MINUTE SERIES



Produced by the United States Geological Survey
North American Datum of 1983 (NAD83)
World Geodetic System of 1984 (WGS84). Projection and
100-meter grid Universal Transverse Mercator, Zone 14R.
This map is not a legal document. Boundaries may be
generalized for this map scale. Private lands within government
reservations may not be shown. Obtain permission before
entering private lands.

Imagery.....NAIP, September 2016 - November 2016
Roads.....US Census Bureau, 2015 - 2016
Names.....GNIS, 1979 - 2022
Hydrography.....National Hydrography Dataset, 2000 - 2018
Contours.....National Elevation Dataset, 2019
Boundaries.....Multiple Sources; see metadata file 2019 - 2021
Wetlands.....FWS National Wetlands Inventory Not Available



1	2	3
4	5	6
7	8	9

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

CREEDMOOR, TX
2022



DOYLE OVERTON

WASTEWATER PERMIT
USGS MAP - CREEDMOOR

Kimley»Horn

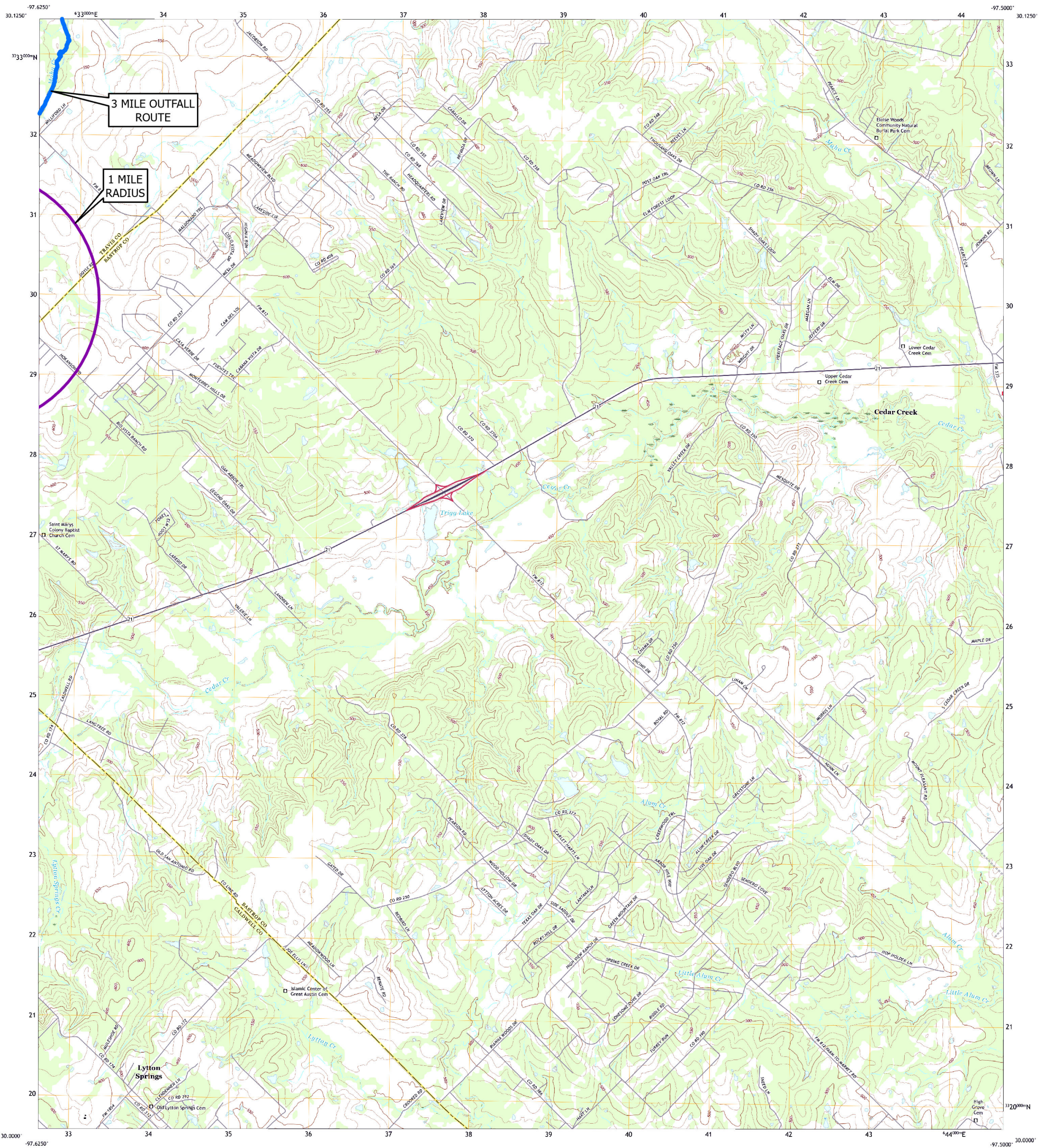
DATE: 07/29/2025
PROJECT NUMBER: 069288805



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

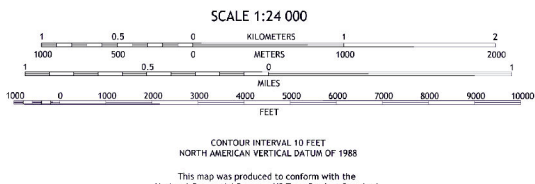
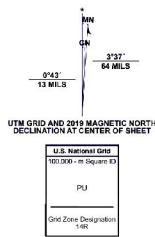


LYTTON SPRINGS QUADRANGLE
TEXAS
7.5-MINUTE SERIES



Produced by the United States Geological Survey
North American Datum of 1983 (NAD83)
World Geodetic System of 1984 (WGS84)
This map is not a legal document. Boundaries may be generalized for this map scale. Private lands with government reservations may not be shown. Obtain permission before entering private lands.

Imagery.....NAIP, September 2016 - November 2016
Roads.....U.S. Census Bureau, 2019
Names.....GNIS, 1979 - 2021
Hydrography.....National Hydrography Dataset, 2000 - 2018
Contours.....National Elevation Dataset, 2021
Boundaries.....Multiple sources; see metadata file 2019 - 2021
Wetlands.....FWS National Wetlands Inventory Not Available



1	2	3
4	5	6
7	8	9

ADJOINING QUADRANGLES



LYTTON SPRINGS, TX
2022



DOYLE OVERTON

WASTEWATER PERMIT
USGS MAP - LYTTON SPRINGS

Kimley»Horn

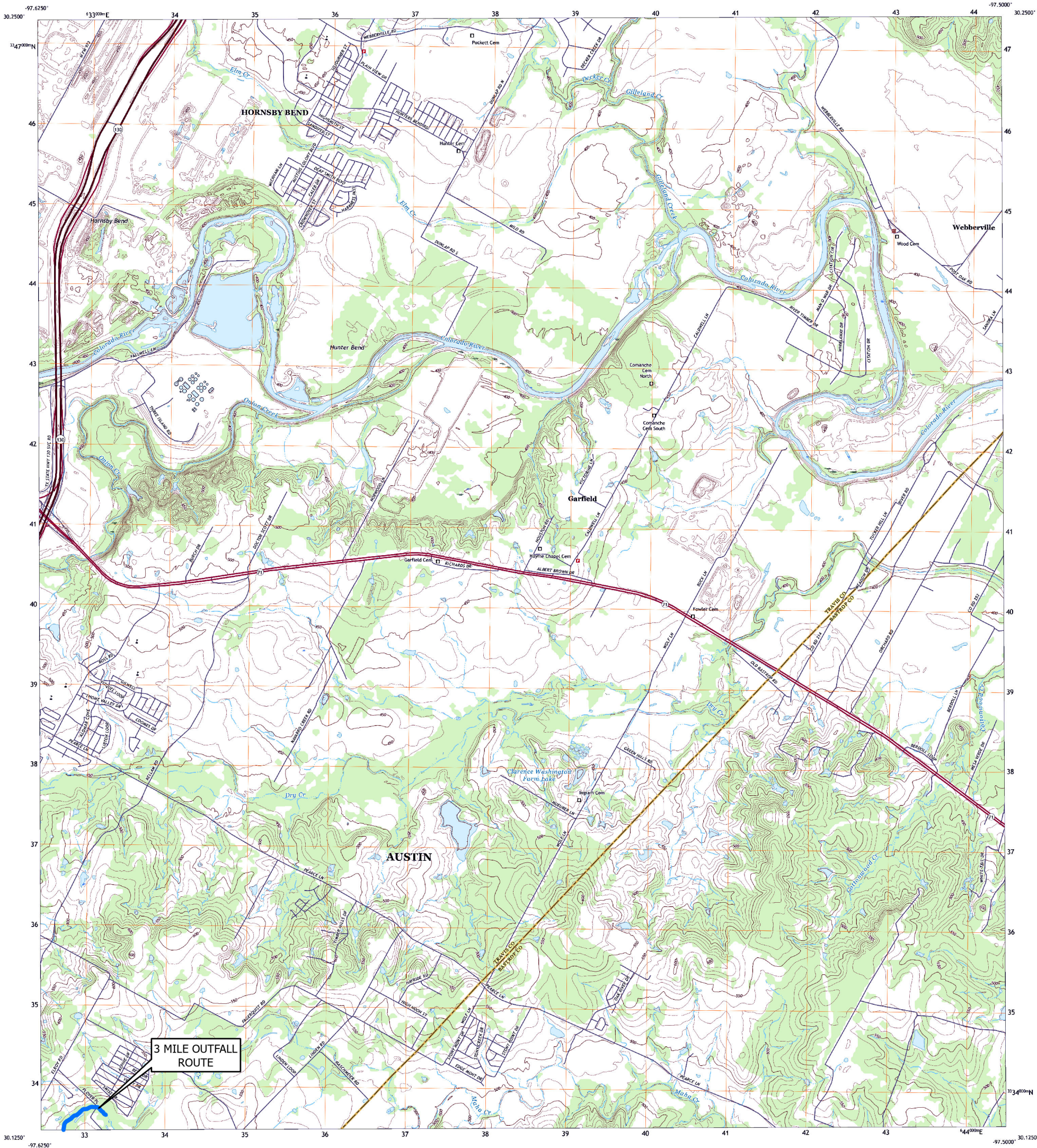
DATE: 06/18/2025
PROJECT NUMBER: 069288805



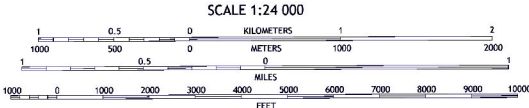
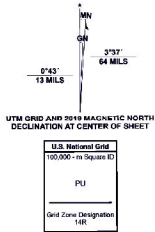
U.S. DEPARTMENT OF THE INTERIOR
U.S. GEOLOGICAL SURVEY



WEBBERVILLE QUADRANGLE
TEXAS
7.5-MINUTE SERIES



Produced by the United States Geological Survey
North American Datum of 1983 (NAD83)
World Geodetic System of 1984 (WGS84). Projection and
1000-meter grid/Universal Transverse Mercator, Zone 14R.
This map is not a legal document. Boundaries may be
generalized for this map scale. Private lands within government
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entering private lands.
Imagery.....NMAP, September 2016 - November 2016
Roads.....U.S. Census Bureau, 2019 - 2019
Names.....GNSS, 1979 - 2021
Hydrography.....National Hydrography Dataset, 2000 - 2018
Contours.....National Elevation Dataset, 2019
Boundaries.....Multiple sources; see metadata file 2019 - 2021
Wetlands.....FWS National Wetlands Inventory Not Available



1	2	3
4	5	6
7	8	9

1 Austin East
2 Manor
3 Elgin West
4 Montopolis
5 Uteley
6 Creedmoor
7 Lytton Springs
8 Bastrop SW

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

WEBBERVILLE, TX
2022



N



DOYLE OVERTON
WASTEWATER PERMIT
USGS MAP - WEBBERVILLE

Kimley»Horn

DATE: 06/18/2025
PROJECT NUMBER: 069288805

Attachment F – Supplemental Permit Information
Form

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

FOR AGENCIES REVIEWING DOMESTIC OR INDUSTRIAL TPDES WASTEWATER PERMIT APPLICATIONS

TCEQ USE ONLY:

Application type: ____Renewal ____Major Amendment ____Minor Amendment ____New

County: _____ Segment Number: _____

Admin Complete Date: _____

Agency Receiving SPIF:

____ Texas Historical Commission

____ U.S. Fish and Wildlife

____ Texas Parks and Wildlife Department

____ U.S. Army Corps of Engineers

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

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

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

The following applies to all applications:

1. Permittee: PLI I-A, LP

Permit No. WQ00 _____

EPA ID No. TX _____

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

The wastewater treatment facility and effluent discharge point are located approximately 630 feet northwest of the intersection of Doyle Overton Road and Hokanson Road in Del Valle, Texas, 78617, Travis County.

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: Tim Riley

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

Title: Principal

Mailing Address: 1100 W 6th St

City, State, Zip Code: Austin, TX 78703

Phone No.: (512) 944 - 5045 Ext.: N/A Fax No.: N/A

E-mail Address: triley@peregrine.land

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

N/A

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

The treated effluent is discharged from the plant site into an unnamed stream segment just south of Hokanson Road at 30.09351° N, 97.63394° W. The unnamed stream feeds into Maha Creek (unclassified, 1434F), then to Cedar Creek (unclassified, 1434B), and finally to the Colorado River Above La Grange (classified, 14343).

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):

The construction will ultimately affect about 5.0 acres of surface disturbance with an approximate excavation depth of 30 feet. Caves and other karst features are not expected.

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

The existing land use is natural shrubs and agricultural land.

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:

No existing structures on the proposed wastewater treatment plant site.

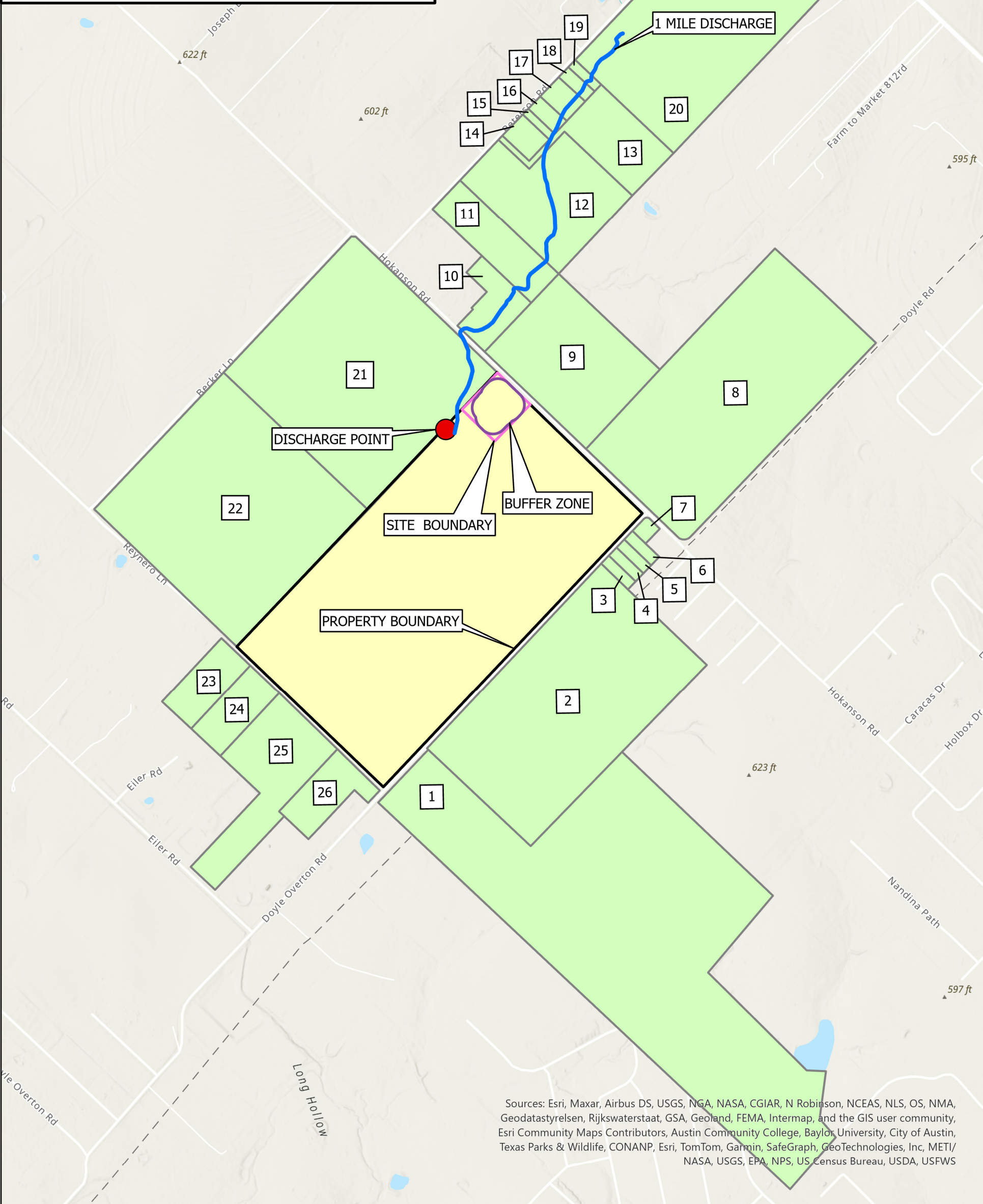
4. Provide a brief history of the property, and name of the architect/builder, if known.

Not known.

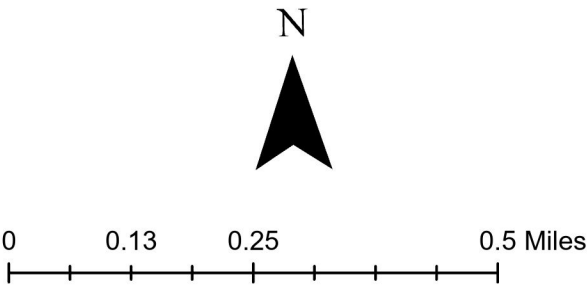
Attachment G - Affected Landowners Map

DOYLE OVERTON

WASTEWATER PERMIT
AFFECTED LANDOWNERS MAP



- SITE BOUNDARY
- BUFFER ZONE
- 1 MILE DISCHARGE ROUTE
- PLI-A LP PROPERTY
- AFFECTED LANDOWNERS
- DICHARGE POINT



Kimley»Horn

DATE: 07/29/2025
PROJECT NUMBER: 069288805

Property Label	Property ID	Owner Name	Mailing Address
1	301369	ALONSO PEDRO RESENDIZ & LEDA ZURIZADAY RESENDIZ RODRIGUEZ	160 JACARANDA DR DALE TX 78616-2154
2	301375	VALLEY REALTY LLC	314 NORTH LAKE STREET SUITE 6 AURORA IL 60506-4086
3	721175	MARTINEZ JUAN CARLOS GARCIA & MARIA M GARCIA	10743 DOYLE OVERTON RD 2 DEL VALLE TX USA 78617-5356
4	721176	GARCIA-MARTINEZ JUAN CARLOS	10727 DOYLE OVERTON RD DEL VALLE TX 78617-5320
5	721177	GARCIA JUAN C & MARIA M	10727 DOYLE OVERTON RD #2 DEL VALLE TX 78617-5519
6	721178	CORONA RICARDO & CLARA REVILLA	10727 DOYLE OVERTON RD #1 DEL VALLE TX 78617-5519
7	767964	ARCE MARIA GUADALUPE & FELIPE ORDUNO ARCE	10719 DOYLE OVERTON RD DEL VALLE TX 78617-5356
8	300951	LUCKY RED BARN LLC	207 S SANTA ANITA ST STE G10 SAN GABRIEL CA 91776-1147
9	300955	JONES J C ROY & ANNA LOU	15300 HOKANSON RD DEL VALLE TX 78617-5304
10	903981	MARTINEZ JAVIER & ANA MARIA	15000 HOKANSON RD DEL VALLE TX 78617-5344
11	300959	ZONE INVESTMENTS LLC	1101 W 34TH ST #308 AUSTIN TX 78705-1907
12	300953	LRN & MJS LLC	120 S PROSPECT DR. CORAL GABLES FL 33133-7006
13	300960	CASARED SAMMY	908 MANSELL AVE AUSTIN TX 78702-4142
14	300962	DE LA FUENTE LINDA	10019 PETERSON RD DEL VALLE TX 78617-5318
15	872595	RIOS GILBERT	10011 PETERSON RD DEL VALLE TX 78617-5318
16	300964	DODD JANICE MARIE	1654 ILLINOIS AVE PORT ISABEL TX 78578-4220
17	300961	RIOS GILBERT	10011 PETERSON RD DEL VALLE TX 78617-5318
18	300967	ESCOBAR ROSA JAIMES	4415 SILVERSTONE DR AUSTIN TX 78744-5600
19	300963	URQUIDI-WILSON PAMELA D	10001 PETERSON RD DEL VALLE TX 78617-5318
20	300947	VELAN PRABHU MANI & ARUL SAKTHI VELAN	4215 LAGO VIENTO AUSTIN TX 78734-1904
21	300914	HOKANSON FARM THE	11516 LOWESWATER LN AUSTIN TX 78754-5726
22	301370	TLK HOLDINGS	7011 BENT OAK CIR AUSTIN TX 78749-2301
23	301285	CANTU THOMAS	14806 EILERS RD AUSTIN TX 78719-9707
24	301286	CANTU THOMAS	14806 EILERS RD AUSTIN TX 78719-9707
25	301302	ESQUEDA LUIS	8818 BULLET PASS BUDA TX 78610-4845
26	301289	JAIMES JOSE LUIS	6910 CARVER AVE APT B AUSTIN TX 78752-3213

ALONSO PEDRO RESENDIZ &
LEDA ZURIZADAY RESENDIZ RODRIGUEZ
160 JACARANDA DR
DALE TX 78616-2154

VALLEY REALTY LLC
314 NORTH LAKE STREET SUITE 6
AURORA IL 60506-4086

MARTINEZ JUAN CARLOS GARCIA &
MARIA M GARCIA
10743 DOYLE OVERTON RD 2
DEL VALLE TX USA 78617-5356

GARCIA-MARTINEZ JUAN CARLOS
10727 DOYLE OVERTON RD
DEL VALLE TX 78617-5320

GARCIA JUAN C & MARIA M
10727 DOYLE OVERTON RD #2
DEL VALLE TX 78617-5519

CORONA RICARDO & CLARA REVILLA
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DEL VALLE TX 78617-5519

ARCE MARIA GUADALUPE &
FELIPE ORDUNO ARCE
10719 DOYLE OVERTON RD
DEL VALLE TX 78617-5356

LUCKY RED BARN LLC
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SAN GABRIEL CA 91776-1147

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DEL VALLE TX 78617-5304

MARTINEZ JAVIER & ANA MARIA
15000 HOKANSON RD
DEL VALLE TX 78617-5344

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AUSTIN TX 78705-1907

LRN & MJS LLC
120 S PROSPECT DR.
CORAL GABLES FL 33133-7006

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AUSTIN TX 78702-4142

DE LA FUENTE LINDA
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RIOS GILBERT
10011 PETERSON RD
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DODD JANICE MARIE
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PORT ISABEL TX 78578-4220

RIOS GILBERT
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DEL VALLE TX 78617-5318

ESCOBAR ROSA JAIMES
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AUSTIN TX 78744-5600

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DEL VALLE TX 78617-5318

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ARUL SAKTHI VELAN
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AUSTIN TX 78734-1904

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AUSTIN TX 78754-5726

TLK HOLDINGS
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AUSTIN TX 78719-9707

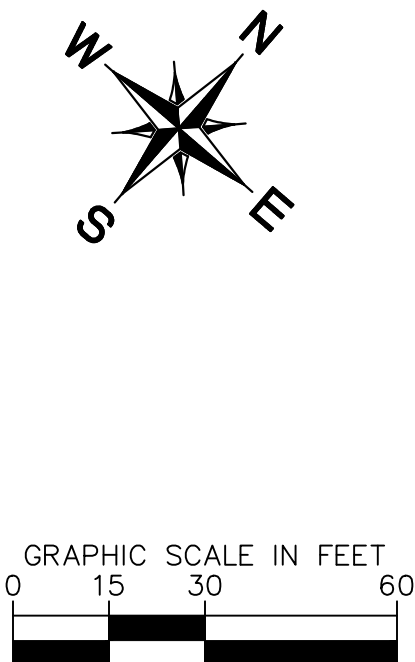
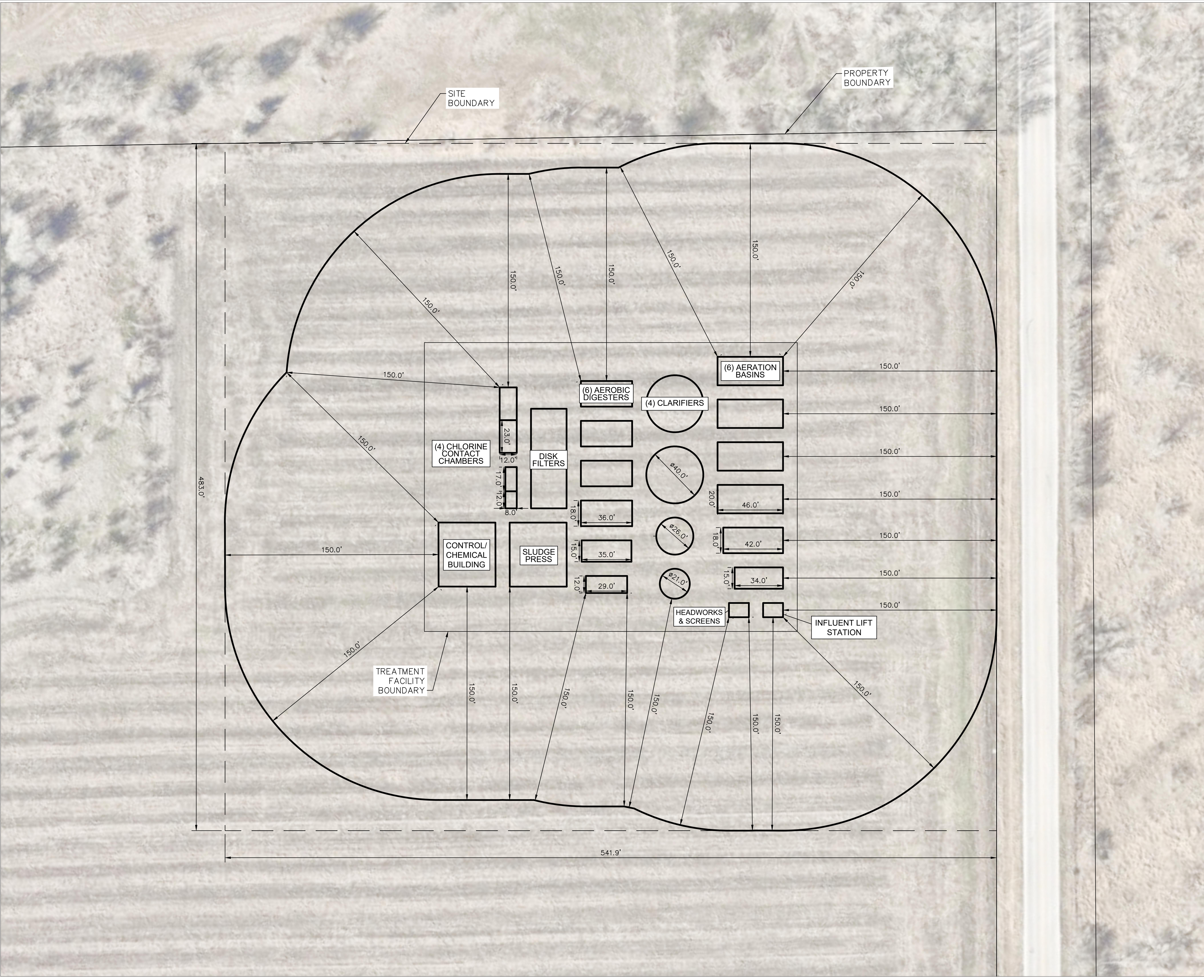
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JAIMES JOSE LUIS
6910 CARVER AVE APT B
AUSTIN TX 78752-3213

Attachment H – Buffer Zone Map

Plotted By:Reshid, Nadine Date:July 23, 2025 04:13:49pm File Path:k:\SAU_WA\06928805_Doyle_TPDES\CAD\PLANSHEETS\Buffer Zone Map.dwg

This document, together with the concepts and designs presented herein, as an instrument of service, is intended only for the specific purpose and client for which it was prepared. Reuse of and improper reliance on this document without written authorization and adaptation by Kimley-Horn and Associates, Inc. shall be without liability to Kimley-Horn and Associates, Inc.



DOYLE OVERTON WWTP DEL VALLE, TEXAS	SHEET NUMBER	KHA PROJECT 069288805	DATE JULY 2025	SCALE: AS SHOWN	Preliminary 08/08/2025 11:22:48 AM	Kimley»»Horn © 2022 KIMLEY-HORN AND ASSOCIATES, INC. 5301 Southwest Parkway, Building 2, Suite 100 Austin, Texas 78735 PHONE: 512-418-1771 FAX: 512-418-1791 WWW.KIMLEY-HORN.COM TEXAS REGISTERED ENGINEERING FIRM F-928				

Attachment I - Domestic Technical Report
(Form 10054)



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION TECHNICAL REPORT 1.0

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

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

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

A. Existing/Interim I Phase

Design Flow (MGD): 0.1

2-Hr Peak Flow (MGD): 0.4

Estimated construction start date: February 2027

Estimated waste disposal start date: February 2028

B. Interim II Phase

Design Flow (MGD): 0.25

2-Hr Peak Flow (MGD): 1

Estimated construction start date: N/A

Estimated waste disposal start date: N/A

C. Final Phase

Design Flow (MGD): 0.99

2-Hr Peak Flow (MGD): 4

Estimated construction start date: N/A

Estimated waste disposal start date: N/A

D. Current Operating Phase

Provide the startup date of the facility: N/A

Section 2. Treatment Process (Instructions Page 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.**

Phase 1: Raw influent will enter through a lift station and will proceed through a headworks screen, then flow to 1 aeration basin, 1 clarifier, 1 aerobic digester, through the cloth disc phosphorus removal stage, into 1 chlorine contact basin, and then the outfall. Solids will be pumped out of the aerobic digester and then trucked to a landfill. Phase 2: Raw influent will enter through a lift station and will proceed through a headworks screen, then will split flow into a total of 2 aeration basins, 2 clarifiers, 2 aerobic digesters, through the cloth disc phosphorous removal stage, into 2 chlorine contact basins, and then the outfall. Solids will be pumped out of the aerobic digester and then trucked to a landfill. Phase 3: Raw influent will enter through a lift station and will proceed through a headworks screen, then will split flow into a total of 6 aeration basins, 4 clarifiers, 6 aerobic digesters, through the cloth disc phosphorous removal stage, into 4 chlorine contact basins, and then the outfall. Solids will be pumped out of the aerobic digester and then trucked to a landfill.

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)
Aeration Basins	6	(1) 34ft X 15ft X 12ft (1) 42ft X 18ft X 12ft (4) 46ft X 20ft X 12ft
Clarifiers	4	(1) Diameter: 21ft; Depth: 12ft (1) Diameter: 26ft; Depth: 12ft (2) Diameter: 40ft; Depth: 12ft
Aerobic Digesters	6	(1) 29ft X 12ft X 12ft (1) 35ft X 15ft X 12ft (4) 36ft X 18ft X 12ft
Cloth Disc Filters	1	25ft X 70ft X 13ft
Chlorine Contact Chambers	4	(1) 12ft X 8ft X 10ft (1) 17ft X 8ft X 10ft (2) 23ft X 12ft X 10ft

C. Process Flow Diagram

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

Attachment: Attachment K: Process Flow Diagram

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

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

- Latitude: 30.09351° N

- Longitude: 97.63394° W

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 L: Site Drawing

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

A development northwest of the intersection of Doyle Overton Road and Hokanson Road containing approximately 300 acres of single-family homes.

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.**

N/A

Section 5. Closure Plans (Instructions Page 44)

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

☐ Yes ☒ No

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

☐ Yes ☐ No

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

N/A

Section 6. Permit Specific Requirements (Instructions Page 44)

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

A. Summary transmittal

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

☐ Yes ☒ No

If yes, provide the date(s) of approval for each phase: N/A

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.**

N/A

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*.

N/A

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.

N/A

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.

N/A

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.

N/A

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 N/A or TXRNE N/A

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:

<u>N/A</u>

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.

<u>N/A</u>

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.

N/A

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.

N/A

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.
N/A

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

1. Acceptance of sludge from other WWTPs

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

☐ Yes ☒ No

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

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

N/A

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

2. ***Acceptance of septic waste***

Is the facility accepting or will it accept septic waste?

☐ Yes ☒ No

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

☐ Yes ☐ No

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

☐ Yes ☐ No

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

N/A

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.

N/A

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

Is the facility in operation?

☐ Yes ☒ No

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

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

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

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

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

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

*TPDES permits only

†TLAP permits only

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

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

Section 8. Facility Operator (Instructions Page 49)

Facility Operator Name: TBD

Facility Operator's License Classification and Level: TBD

Facility Operator's License Number: TBD

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

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

Check all that apply. See instructions for guidance

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

B. WWTP's Sewage Sludge or Biosolids Treatment Process

Check all that apply. See instructions for guidance.

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

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

C. Sewage Sludge or Biosolids Management

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

Biosolids Management

Management Practice	Handler or Preparer Type	Bulk or Bag Container	Amount (dry metric tons)	Pathogen Reduction Options	Vector Attraction Reduction Option
Disposal in Landfill	Off-site Third-Party Handler or Preparer	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): N/A

D. Disposal site

Disposal site name: Registered landfill to be selected at a future date

TCEQ permit or registration number: TBD

County where disposal site is located: TBD

E. Transportation method

Method of transportation (truck, train, pipe, other): Registered hauler to be selected at a future date

Name of the hauler: TBD

Hauler registration number: TBD

Sludge is transported as a:

Liquid ☐

semi-liquid ☒

semi-solid ☐

solid ☐

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

A. Beneficial use authorization

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

☐ Yes ☒ No

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

☐ Yes ☐ No

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

☐ Yes ☐ No

B. Sludge processing authorization

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

Sludge Composting ☐ Yes ☒ No

Marketing and Distribution of Biosolids ☐ Yes ☒ No

Sludge Surface Disposal or Sludge Monofill ☐ Yes ☒ No

Temporary storage in sludge lagoons ☐ Yes ☒ No

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

☐ Yes ☐ No

Section 11. Sewage Sludge Lagoons (Instructions Page 53)

Does this facility include sewage sludge lagoons?

☐ Yes ☒ No

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

A. Location information

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

- Original General Highway (County) Map:
Attachment: N/A
- USDA Natural Resources Conservation Service Soil Map:
Attachment: N/A
- Federal Emergency Management Map:
Attachment: N/A
- Site map:
Attachment: N/A

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: N/A

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:

N/A

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: N/A

Total Kjeldahl Nitrogen, mg/kg: N/A

Total Nitrogen (=nitrate nitrogen + TKN), mg/kg: N/A

Phosphorus, mg/kg: N/A

Potassium, mg/kg: N/A

pH, standard units: N/A

Ammonia Nitrogen mg/kg: N/A

Arsenic: N/A

Cadmium: N/A

Chromium: N/A

Copper: N/A

Lead: N/A

Mercury: N/A

Molybdenum: N/A

Nickel: N/A

Selenium: N/A

Zinc: N/A

Total PCBs: N/A

Provide the following information:

Volume and frequency of sludge to the lagoon(s): N/A

Total dry tons stored in the lagoons(s) per 365-day period: N/A

Total dry tons stored in the lagoons(s) over the life of the unit: N/A

C. Liner information

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

☐ Yes ☐ No

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

N/A

D. Site development plan

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

N/A

Attach the following documents to the application.

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

Attachment: N/A

- Copy of the closure plan

Attachment: N/A

- Copy of deed recordation for the site

Attachment: N/A

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

Attachment: N/A

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

Attachment: N/A

- Procedures to prevent the occurrence of nuisance conditions

Attachment: N/A

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: N/A

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:

N/A

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:

N/A

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

A. RCRA hazardous wastes

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

☐ Yes ☒ No

B. Remediation activity wastewater

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

☐ Yes ☒ No

C. Details about wastes received

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

Attachment: N/A

Section 14. Laboratory Accreditation (Instructions Page 56)

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

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

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

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

CERTIFICATION:

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

Printed Name: Tim Riley

Title: Principal

Signature: 

Date: 5/6/25

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.

A new treatment plant is needed to serve the future development at the intersection of Doyle Overton Rd and Hokanson Rd. The ultimate buildout of the development will include Doyle Overton Road Development: proposed 300 acres of single family. Given the acreage distribution of proposed development, industry standard flows were used to determine that 0.99 MGD would be needed. Three phases of 0.10, 0.25, and 0.99 MGD were then decided to serve the development at Doyle Overton Road. Each phase of construction will last approximately 1 year.

B. Regionalization of facilities

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

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

1. *Municipally incorporated areas*

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

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

☐ Yes ☒ No ☐ Not Applicable

If yes, within the city limits of: N/A

If yes, attach correspondence from the city.

Attachment: N/A

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: N/A

2. *Utility CCN areas*

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

☒ Yes ☐ No

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

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

Attachment: Attachment M: CCN Letter

3. *Nearby WWTPs or collection systems*

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

☒ Yes ☐ No

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

Attachment: Attachment N: Nearby Plants

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: N/A

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): N/A

Average Influent Organic Strength or BOD₅ Concentration in mg/l: N/A

Average Influent Loading (lbs/day = total average flow X average BOD₅ conc. X 8.34): N/A

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

N/A

B. Proposed organic loading

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

Table 1.1(1) – Design Organic Loading

Source	Total Average Flow (MGD)	Influent BOD ₅ Concentration (mg/l)
Municipality		
Subdivision	0.99	300
Trailer park – transient		
Mobile home park		
School with cafeteria and showers		
School with cafeteria, no showers		
Recreational park, overnight use		
Recreational park, day use		
Office building or factory		
Motel		
Restaurant		
Hospital		
Nursing home		
Other		
TOTAL FLOW from all sources	0.99	
AVERAGE BOD ₅ from all sources		300

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: guidance

Total Suspended Solids, mg/l: guidance

Ammonia Nitrogen, mg/l: guidance

Total Phosphorus, mg/l: guidance

Dissolved Oxygen, mg/l: guidance

Other: N/A

B. Interim II Phase Design Effluent Quality

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

Total Suspended Solids, mg/l: guidance

Ammonia Nitrogen, mg/l: guidance

Total Phosphorus, mg/l: guidance

Dissolved Oxygen, mg/l: guidance

Other: N/A

C. Final Phase Design Effluent Quality

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

Total Suspended Solids, mg/l: guidance

Ammonia Nitrogen, mg/l: guidance

Total Phosphorus, mg/l: guidance

Dissolved Oxygen, mg/l: guidance

Other: N/A

D. Disinfection Method

Identify the proposed method of disinfection.

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

Dechlorination process: Sulfur dioxide or Sulfide salts

☐ Ultraviolet Light: N/A seconds contact time at peak flow

☐ Other: N/A

Section 4. Design Calculations (Instructions Page 58)

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

Attachment: Attachment O: Design Calculations

Section 5. Facility Site (Instructions Page 59)

A. 100-year floodplain

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

☒ Yes ☐ No

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

N/A

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

Effective FEMA FIRM map panel 48453Co710J.

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: N/A

If **no**, provide the approximate date you anticipate submitting your application to the Corps: N/A

B. Wind rose

Attach a wind rose: Attachment P: Wind Rose

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)**: N/A

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)**: N/A

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

Attach a solids management plan to the application.

Attachment: Attachment Q: Sewage Sludge Solids Management Plan

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

- Treatment units and processes dimensions and capacities

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

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

DOMESTIC WASTEWATER PERMIT APPLICATION

WORKSHEET 2.0: RECEIVING WATERS

The following information is required for all TPDES permit applications.

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

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

☐ Yes ☒ No

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

Owner of the drinking water supply: N/A

Distance and direction to the intake: N/A

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

Attachment: N/A

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: N/A

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).

N/A

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).

N/A

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: Unnamed Tributary to Maha Creek

A. Receiving water type

Identify the appropriate description of the receiving waters.

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

Surface area, in acres: N/A

Average depth of the entire water body, in feet: N/A

Average depth of water body within a 500-foot radius of discharge point, in feet: N/A

- ☒ Man-made Channel or Ditch
- ☐ Open Bay
- ☐ Tidal Stream, Bayou, or Marsh
- ☐ Other, specify: N/A

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: N/A

C. Downstream perennial confluences

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

N/A

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.

There is a man-made pond located on the neighboring property.

E. Normal dry weather characteristics

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

The unnamed tributary is dry during dry weather conditions.

Date and time of observation: 07/18/25 at 8:30 AM

Was the water body influenced by stormwater runoff during observations?

☐ Yes ☒ No

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

A. Upstream influences

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

- | | |
|-----------------------------------------------|--------------------------------------------------------------------|
| <input type="checkbox"/> Oil field activities | <input type="checkbox"/> Urban runoff |
| <input type="checkbox"/> Upstream discharges | <input type="checkbox"/> Agricultural runoff |
| <input type="checkbox"/> Septic tanks | <input checked="" type="checkbox"/> Other(s), specify: <u>None</u> |

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: <u>N/A</u> |

C. Waterbody aesthetics

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

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

DOMESTIC WASTEWATER PERMIT APPLICATION

WORKSHEET 2.1: STREAM PHYSICAL CHARACTERISTICS

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

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

Section 1. General Information (Instructions Page 65)

Date of study: 7/18/25 Time of study: 8:30 AM

Stream name: Unnamed Tributary to Maha Creek

Location: The site is located approximately 630 feet northwest of the intersection of Doyle Overton Rd and Hokanson Rd in Del Valle, Travis County, Texas, 78617.

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

☐ Perennial ☒ Intermittent with perennial pools

Section 2. Data Collection (Instructions Page 65)

Number of stream bends that are well defined: 0

Number of stream bends that are moderately defined: 2

Number of stream bends that are poorly defined: 1

Number of riffles: 0

Evidence of flow fluctuations (check one):

☐ Minor ☒ moderate ☐ severe

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

The stream was dry at the time of the stream assessment on 07/18/2025 from approximately 8:30 to 9:30 AM. Refer to attachment J for a map of the stream assessment and photographs of the site. There were no obstructions or modifications observed during the stream assessment. When flow is present, water will flow downstream where it will eventually reach Maha Creek.

Stream transects

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

Table 2.1(1) - Stream Transect Records

Stream type at transect Select riffle, run, glide, or pool. See Instructions, Definitions section.	Transect location	Water surface width (ft)	Stream depths (ft) at 4 to 10 points along each transect from the channel bed to the water surface. Separate the measurements with commas.
N/A	Transect 1 (See Attachment J)	N/A Channel Width: 15.8'	Channel Elevations At 4' = 0.79' (9.5") At 7.5' = 0.92' (11") At 10' = 0.75' (9") At 12' = 0.67' (8")
N/A	Transect 2 (See Attachment J)	N/A Channel Width: 20.5'	Channel Elevations At 6' = 1.17' (14") At 10' = 1.42' (17") At 12' = 0.38' (4.5") At 14' = 0' (0")
N/A	Transect 3 (See Attachment J)	N/A Channel Width: 23.8'	Channel Elevations At 6' = 0.67' (8") At 8' = 0.96' (11.5") At 11.5' = 1.5' (18") At 16' = 1.42' (17")
N/A	Transect 4 (See Attachment J)	N/A Channel Width: 13.1'	Channel Elevations At 3' = 2' (24") At 7' = 2.83' (34") At 9' = 2.75' (33") At 11' = 2.42' (29")
N/A	Transect 5 (See Attachment J)	N/A Channel Width: 37.0'	Channel Elevations At 6' = 2.0' (24") At 10' = 2.92' (35") At 18.5' = 3.33' (40") At 27' = 2.83' (34")
Choose an item.			
Choose an item.			

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

Section 3. Summarize Measurements (Instructions Page 65)

Streambed slope of entire reach, from USGS map in feet/feet: 0.002

Approximate drainage area above the most downstream transect (from USGS map or county highway map, in square miles): 1.79

Length of stream evaluated, in feet: 5,658 ft

Number of lateral transects made: 5

Average stream width, in feet: 0'; Average Channel Width: 22.0'

Average stream depth, in feet: 0'; Average Channel Depth: 2.0'

Average stream velocity, in feet/second: 0

Instantaneous stream flow, in cubic feet/second: 0

Indicate flow measurement method (type of meter, floating chip timed over a fixed distance, etc.): None; stream was dry at the time of observation

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

Maximum pool depth, in feet: N/A

DOMESTIC WASTEWATER PERMIT APPLICATION WORKSHEET 3.0: LAND DISPOSAL OF EFFLUENT

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

Section 1. Type of Disposal System (Instructions Page 67)

Identify the method of land disposal:

- | | |
|-------------------------------------------------------------------------------------------|----------------------------------------------------------------|
| <input type="checkbox"/> Surface application | <input type="checkbox"/> Subsurface application |
| <input type="checkbox"/> Irrigation | <input type="checkbox"/> Subsurface soils absorption |
| <input type="checkbox"/> Drip irrigation system | <input type="checkbox"/> Subsurface area drip dispersal system |
| <input type="checkbox"/> Evaporation | <input type="checkbox"/> Evapotranspiration beds |
| <input type="checkbox"/> Other (describe in detail): Click to enter text. | |

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

For existing authorizations, provide Registration Number: [Click to enter text.](#)

Section 2. Land Application Site(s) (Instructions Page 67)

In table 3.0(1), provide the requested information for the land application sites. Include the agricultural or cover crop type (wheat, cotton, alfalfa, bermuda grass, native grasses, etc.), land use (golf course, hayland, pastureland, park, row crop, etc.), irrigation area, amount of effluent applied, and whether or not the public has access to the area. Specify the amount of land area and the amount of effluent that will be allotted to each agricultural or cover crop, if more than one crop will be used.

Table 3.0(1) – Land Application Site Crops

Crop Type & Land Use	Irrigation Area (acres)	Effluent Application (GPD)	Public Access? Y/N

Section 3. Storage and Evaporation Lagoons/Ponds (Instructions Page 67)

Table 3.0(2) – Storage and Evaporation Ponds

Pond Number	Surface Area (acres)	Storage Volume (acre-feet)	Dimensions	Liner Type

Attach a copy of a liner certification that was prepared, signed, and sealed by a Texas licensed professional engineer for each pond.

Attachment: [Click to enter text.](#)

Section 4. Flood and Runoff Protection (Instructions Page 67)

Is the land application site within the 100-year frequency flood level?

☐ Yes ☐ No

If yes, describe how the site will be protected from inundation.

[Click to enter text.](#)

Provide the source used to determine the 100-year frequency flood level:

[Click to enter text.](#)

Provide a description of tailwater controls and rainfall run-on controls used for the land application site.

[Click to enter text.](#)

Section 5. Annual Cropping Plan (Instructions Page 67)

Attach an Annual Cropping Plan which includes a discussion of each of the following items. If not applicable, provide a detailed explanation indicating why. **Attachment:** [Click to enter text.](#)

- Soils map with crops
- Cool and warm season plant species
- Crop yield goals
- Crop growing season
- Crop nutrient requirements
- Additional fertilizer requirements
- Minimum/maximum harvest height (for grass crops)
- Supplemental watering requirements
- Crop salt tolerances
- Harvesting method/number of harvests
- Justification for not removing existing vegetation to be irrigated

Section 6. Well and Map Information (Instructions Page 68)

Attach a USGS map with the following information shown and labeled. If not applicable, provide a detailed explanation indicating why. **Attachment:** [Click to enter text.](#)

- The boundaries of the land application site(s)
- Waste disposal or treatment facility site(s)
- On-site buildings
- Buffer zones
- Effluent storage and tailwater control facilities
- All water wells within 1-mile radius of the disposal site or property boundaries
- All springs and seeps onsite and within 500 feet of the property boundaries
- All surface waters in the state onsite and within 500 feet of the property boundaries
- All faults and sinkholes onsite and within 500 feet of the property

List and cross reference all water wells located within a half-mile radius of the disposal site or property boundaries shown on the USGS map in the following table. Attach additional pages as necessary to include all of the wells.

Table 3.0(3) – Water Well Data

Well ID	Well Use	Producing? Y/N	Open, cased, capped, or plugged?	Proposed Best Management Practice
			Choose an item.	
			Choose an item.	
			Choose an item.	
			Choose an item.	
			Choose an item.	

If water quality data or well log information is available please include the information in an attachment listed by Well ID.

Attachment: [Click to enter text.](#)

Section 7. Groundwater Quality (Instructions Page 68)

Attach a Groundwater Quality Technical Report which assesses the impact of the wastewater disposal system on groundwater. This report shall include an evaluation of the water wells (including the information in the well table provided in Item 6. above), the wastewater application rate, and pond liners. Indicate by a check mark that this report is provided.

Attachment: [Click to enter text.](#)

Are groundwater monitoring wells available onsite? ☐ Yes ☐ No

Do you plan to install ground water monitoring wells or lysimeters around the land application site? ☐ Yes ☐ No

If yes, provide the proposed location of the monitoring wells or lysimeters on a site map.

Attachment: [Click to enter text.](#)

Section 8. Soil Map and Soil Analyses (Instructions Page 69)

A. Soil map

Attach a USDA Soil Survey map that shows the area to be used for effluent disposal.

Attachment: [Click to enter text.](#)

B. Soil analyses

Attach the laboratory results sheets from the soil analyses. **Note:** for renewal applications, the current annual soil analyses required by the permit are acceptable as long as the test date is less than one year prior to the submission of the application.

Attachment: [Click to enter text.](#)

List all USDA designated soil series on the proposed land application site. Attach additional pages as necessary.

Table 3.0(4) – Soil Data

Soil Series	Depth from Surface	Permeability	Available Water Capacity	Curve Number

Section 9. Effluent Monitoring Data (Instructions Page 70)

Is the facility in operation?

☐ Yes ☐ No

If no, this section is not applicable and the worksheet is complete.

If yes, provide the effluent monitoring data for the parameters regulated in the existing permit. If a parameter is not regulated in the existing permit, enter N/A.

Table 3.0(5) – Effluent Monitoring Data

[illegible]

Provide a discussion of all persistent excursions above the permitted limits and any corrective actions taken.

Click to enter text.

DOMESTIC WASTEWATER PERMIT APPLICATION

WORKSHEET 3.1: SURFACE LAND DISPOSAL OF EFFLUENT

The following is required for new and major amendment permit applications. Renewal and minor amendment permit applications may be asked for this worksheet on a case by case basis.

Section 1. Surface Disposal (Instructions Page 71)

Complete the item that applies for the method of disposal being used.

A. Irrigation

Area under irrigation, in acres: [Click to enter text.](#)

Design application frequency:

hours/day [Click to enter text.](#) And days/week [Click to enter text.](#)

Land grade (slope):

average percent (%): [Click to enter text.](#)

maximum percent (%): [Click to enter text.](#)

Design application rate in acre-feet/acre/year: [Click to enter text.](#)

Design total nitrogen loading rate, in lbs N/acre/year: [Click to enter text.](#)

Soil conductivity (mmhos/cm): [Click to enter text.](#)

Method of application: [Click to enter text.](#)

Attach a separate engineering report with the water balance and storage volume calculations, method of application, irrigation efficiency, and nitrogen balance.

Attachment: [Click to enter text.](#)

B. Evaporation ponds

Daily average effluent flow into ponds, in gallons per day: [Click to enter text.](#)

Attach a separate engineering report with the water balance and storage volume calculations.

Attachment: [Click to enter text.](#)

C. Evapotranspiration beds

Number of beds: [Click to enter text.](#)

Area of bed(s), in acres: [Click to enter text.](#)

Depth of bed(s), in feet: [Click to enter text.](#)

Void ratio of soil in the beds: [Click to enter text.](#)

Storage volume within the beds, in acre-feet: [Click to enter text.](#)

Attach a separate engineering report with the water balance and storage volume calculations, and a description of the lining.

Attachment: [Click to enter text.](#)

D. Overland flow

Area used for application, in acres: [Click to enter text.](#)

Slopes for application area, percent (%): [Click to enter text.](#)

Design application rate, in gpm/foot of slope width: [Click to enter text.](#)

Slope length, in feet: [Click to enter text.](#)

Design BOD₅ loading rate, in lbs BOD₅/acre/day: [Click to enter text.](#)

Design application frequency:

hours/day: [Click to enter text.](#) And days/week: [Click to enter text.](#)

Attach a separate engineering report with the method of application and design requirements according to *30 TAC Chapter 217*.

Attachment: [Click to enter text.](#)

Section 2. Edwards Aquifer (Instructions Page 72)

Is the facility subject to *30 TAC Chapter 213*, Edwards Aquifer Rules?

☐ Yes ☐ No

If **yes**, is the facility located on the Edwards Aquifer Recharge Zone?

☐ Yes ☐ No

If **yes**, attach a geological report addressing potential recharge features.

Attachment: [Click to enter text.](#)

DOMESTIC WASTEWATER PERMIT APPLICATION

WORKSHEET 3.2: SURFACE LAND DISPOSAL OF EFFLUENT

The following **is required** for **new and major amendment** permit applications. Renewal and minor amendments applicants may be asked for the worksheet on a case by case basis.

NOTE: All applicants proposing new/amended subsurface disposal **MUST** complete and submit Worksheet 7.0. This worksheet applies to any subsurface disposal system that **does not meet** the definition of a subsurface area drip dispersal system as defined in *30 TAC Chapter 222, Subsurface Area Drip Dispersal System*.

Section 1. Subsurface Application (Instructions Page 73)

Identify the type of system:

- ☐ Conventional Gravity Drainfield, Beds, or Trenches (new systems must be less than 5,000 GPD)
- ☐ Low Pressure Dosing
- ☐ Other, specify: [Click to enter text.](#)

Application area, in acres: [Click to enter text.](#)

Area of drainfield, in square feet: [Click to enter text.](#)

Application rate, in gal/square foot/day: [Click to enter text.](#)

Depth to groundwater, in feet: [Click to enter text.](#)

Area of trench, in square feet: [Click to enter text.](#)

Dosing duration per area, in hours: [Click to enter text.](#)

Number of beds: [Click to enter text.](#)

Dosing amount per area, in inches/day: [Click to enter text.](#)

Infiltration rate, in inches/hour: [Click to enter text.](#)

Storage volume, in gallons: [Click to enter text.](#)

Area of bed(s), in square feet: [Click to enter text.](#)

Soil Classification: [Click to enter text.](#)

Attach a separate engineering report with the information required in *30 TAC § 309.20*, excluding the requirements of *§ 309.20 b(3)(A)* and *(B)* design analysis which may be asked for on a case by case basis. Include a description of the schedule of dosing basin rotation.

Attachment: [Click to enter text.](#)

Section 2. Edwards Aquifer (Instructions Page 73)

Is the subsurface system over the Edwards Aquifer Recharge Zone as mapped by TCEQ?

- ☐ Yes ☐ No

Is the subsurface system over the Edwards Aquifer Transition Zone as mapped by TCEQ?

- ☐ Yes ☐ No

If yes to either question, the subsurface system may be prohibited by *30 TAC §213.8*. Please call the Municipal Permits Team, at 512-239-4671, to schedule a pre-application meeting.

DOMESTIC WASTEWATER PERMIT APPLICATION

WORKSHEET 3.3: SUBSURFACE AREA DRIP DISPERSAL (SADDS) LAND DISPOSAL OF EFFLUENT

The following is **required** for **new and major amendment** subsurface area drip dispersal system permit applications. Renewal and minor amendments applicants may be asked for the worksheet on a case by case basis.

NOTE: All applicants proposing new/amended subsurface disposal **MUST** complete and submit Worksheet 7.0. This worksheet applies to any subsurface disposal system that **meets** the definition of a subsurface area drip dispersal system as defined in *30 TAC Chapter 222, Subsurface Area Drip Dispersal System*.

Section 1. Administrative Information (Instructions Page 74)

A. Provide the legal name of all corporations or other business entities managed, owned, or otherwise closely related to the owner of the treatment facility:

B. [Click to enter text.](#) Is the owner of the land where the treatment facility is located the same as the owner of the treatment facility?

☐ Yes ☐ No

If **no**, provide the legal name of all corporations or other business entities managed, owned, or otherwise closely related to the owner of the land where the treatment facility is located.

[Click to enter text.](#)

C. Owner of the subsurface area drip dispersal system: [Click to enter text.](#)

D. Is the owner of the subsurface area drip dispersal system the same as the owner of the wastewater treatment facility or the site where the wastewater treatment facility is located?

☐ Yes ☐ No

If **no**, identify the names of all corporations or other business entities managed, owned, or otherwise closely related to the entity identified in Item 1.C.

[Click to enter text.](#)

E. Owner of the land where the subsurface area drip dispersal system is located: [Click to enter text.](#)

F. Is the owner of the land where the subsurface area drip dispersal system is located the same as owner of the wastewater treatment facility, the site where the wastewater treatment facility is located, or the owner of the subsurface area drip dispersal system?

☐ Yes ☐ No

If **no**, identify the name of all corporations or other business entities managed, owned, or otherwise closely related to the entity identified in item 1.E.

[Click to enter text.](#)

Section 2. Subsurface Area Drip Dispersal System (Instructions Page 74)

A. Type of system

- ☐ Subsurface Drip Irrigation
- ☐ Surface Drip Irrigation
- ☐ Other, specify: [Click to enter text.](#)

B. Irrigation operations

Application area, in acres: [Click to enter text.](#)

Infiltration Rate, in inches/hour: [Click to enter text.](#)

Average slope of the application area, percent (%): [Click to enter text.](#)

Maximum slope of the application area, percent (%): [Click to enter text.](#)

Storage volume, in gallons: [Click to enter text.](#)

Major soil series: [Click to enter text.](#)

Depth to groundwater, in feet: [Click to enter text.](#)

C. Application rate

Is the facility located **west** of the boundary shown in *30 TAC § 222.83* **and** also using a vegetative cover of non-native grasses over seeded with cool season grasses during the winter months (October-March)?

☐ Yes ☐ No

If **yes**, then the facility may propose a hydraulic application rate not to exceed 0.1 gal/square foot/day.

Is the facility located **east** of the boundary shown in *30 TAC § 222.83* **or** in any part of the state when the vegetative cover is any crop other than non-native grasses?

☐ Yes ☐ No

If **yes**, the facility must use the formula in *30 TAC §222.83* to calculate the maximum hydraulic application rate.

Do you plan to submit an alternative method to calculate the hydraulic application rate for approval by the executive director?

☐ Yes ☐ No

Hydraulic application rate, in gal/square foot/day: [Click to enter text.](#)

Nitrogen application rate, in lbs/gal/day: [Click to enter text.](#)

D. Dosing information

Number of doses per day: [Click to enter text.](#)

Dosing duration per area, in hours: [Click to enter text.](#)

Rest period between doses, in hours: [Click to enter text.](#)

Dosing amount per area, in inches/day: [Click to enter text.](#)

Number of zones: [Click to enter text.](#)

Does the proposed subsurface drip irrigation system use tree vegetative cover as a crop?

☐ Yes ☐ No

If **yes**, provide a vegetation survey by a certified arborist. Please call the Water Quality Assessment Team at (512) 239-4671 to schedule a pre-application meeting.

Attachment: [Click to enter text.](#)

Section 3. Required Plans (Instructions Page 74)

A. Recharge feature plan

Attach a Recharge Feature Plan with all information required in *30 TAC §222.79*.

Attachment: [Click to enter text.](#)

B. Soil evaluation

Attach a Soil Evaluation with all information required in *30 TAC §222.73*.

Attachment: [Click to enter text.](#)

C. Site preparation plan

Attach a Site Preparation Plan with all information required in *30 TAC §222.75*.

Attachment: [Click to enter text.](#)

D. Soil sampling/testing

Attach soil sampling and testing that includes all information required in *30 TAC §222.157*.

Attachment: [Click to enter text.](#)

Section 4. Floodway Designation (Instructions Page 75)

A. Site location

Is the existing/proposed land application site within a designated floodway?

☐ Yes ☐ No

B. Flood map

Attach either the FEMA flood map or alternate information used to determine the floodway.

Attachment: [Click to enter text.](#)

Section 5. Surface Waters in the State (Instructions Page 75)

A. Buffer Map

Attach a map showing appropriate buffers on surface waters in the state, water wells, and springs/seeps.

Attachment: [Click to enter text.](#)

B. Buffer variance request

Do you plan to request a buffer variance from water wells or waters in the state?

☐ Yes ☐ No

If **yes**, then attach the additional information required in *30 TAC § 222.81(c)*.

Attachment: [Click to enter text.](#)

Section 6. Edwards Aquifer (Instructions Page 75)

A. Is the SADDs located over the Edwards Aquifer Recharge Zone as mapped by TCEQ?

☐ Yes ☐ No

B. Is the SADDs located over the Edwards Aquifer Transition Zone as mapped by TCEQ?

☐ Yes ☐ No

If **yes to either question**, then the SADDs may be prohibited by *30 TAC §213.8*. Please call the Municipal Permits Team at 512-239-4671 to schedule a pre-application meeting.

DOMESTIC WASTEWATER PERMIT APPLICATION

WORKSHEET 4.0: POLLUTANT ANALYSIS REQUIREMENTS

The following **is required** for facilities with a permitted or proposed flow of **1.0 MGD or greater**, facilities with an approved **pretreatment** program, or facilities classified as a **major** facility. See instructions for further details.

This worksheet is not required minor amendments without renewal.

Section 1. Toxic Pollutants (Instructions Page 76)

For pollutants identified in Table 4.0(1), indicate the type of sample.

Grab ☐ Composite ☐

Date and time sample(s) collected: [Click to enter text.](#)

Table 4.0(1) – Toxics Analysis

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Acrylonitrile				50
Aldrin				0.01
Aluminum				2.5
Anthracene				10
Antimony				5
Arsenic				0.5
Barium				3
Benzene				10
Benzidine				50
Benzo(a)anthracene				5
Benzo(a)pyrene				5
Bis(2-chloroethyl)ether				10
Bis(2-ethylhexyl)phthalate				10
Bromodichloromethane				10
Bromoform				10
Cadmium				1
Carbon Tetrachloride				2
Carbaryl				5
Chlordane*				0.2
Chlorobenzene				10
Chlorodibromomethane				10

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Chloroform				10
Chlorpyrifos				0.05
Chromium (Total)				3
Chromium (Tri) (*1)				N/A
Chromium (Hex)				3
Copper				2
Chrysene				5
p-Chloro-m-Cresol				10
4,6-Dinitro-o-Cresol				50
p-Cresol				10
Cyanide (*2)				10
4,4'- DDD				0.1
4,4'- DDE				0.1
4,4'- DDT				0.02
2,4-D				0.7
Demeton (O and S)				0.20
Diazinon				0.5/0.1
1,2-Dibromoethane				10
m-Dichlorobenzene				10
o-Dichlorobenzene				10
p-Dichlorobenzene				10
3,3'-Dichlorobenzidine				5
1,2-Dichloroethane				10
1,1-Dichloroethylene				10
Dichloromethane				20
1,2-Dichloropropane				10
1,3-Dichloropropene				10
Dicofol				1
Dieldrin				0.02
2,4-Dimethylphenol				10
Di-n-Butyl Phthalate				10
Diuron				0.09
Endosulfan I (alpha)				0.01

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Endosulfan II (beta)				0.02
Endosulfan Sulfate				0.1
Endrin				0.02
Epichlorohydrin				---
Ethylbenzene				10
Ethylene Glycol				---
Fluoride				500
Guthion				0.1
Heptachlor				0.01
Heptachlor Epoxide				0.01
Hexachlorobenzene				5
Hexachlorobutadiene				10
Hexachlorocyclohexane (alpha)				0.05
Hexachlorocyclohexane (beta)				0.05
gamma-Hexachlorocyclohexane (Lindane)				0.05
Hexachlorocyclopentadiene				10
Hexachloroethane				20
Hexachlorophene				10
4,4'-Isopropylidenediphenol				1
Lead				0.5
Malathion				0.1
Mercury				0.005
Methoxychlor				2
Methyl Ethyl Ketone				50
Methyl tert-butyl ether				---
Mirex				0.02
Nickel				2
Nitrate-Nitrogen				100
Nitrobenzene				10
N-Nitrosodiethylamine				20
N-Nitroso-di-n-Butylamine				20
Nonylphenol				333

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Parathion (ethyl)				0.1
Pentachlorobenzene				20
Pentachlorophenol				5
Phenanthrene				10
Polychlorinated Biphenyls (PCB's) (*3)				0.2
Pyridine				20
Selenium				5
Silver				0.5
1,2,4,5-Tetrachlorobenzene				20
1,1,2,2-Tetrachloroethane				10
Tetrachloroethylene				10
Thallium				0.5
Toluene				10
Toxaphene				0.3
2,4,5-TP (Silvex)				0.3
Tributyltin (see instructions for explanation)				0.01
1,1,1-Trichloroethane				10
1,1,2-Trichloroethane				10
Trichloroethylene				10
2,4,5-Trichlorophenol				50
TTHM (Total Trihalomethanes)				10
Vinyl Chloride				10
Zinc				5

(*1) Determined by subtracting hexavalent Cr from total Cr.

(*2) Cyanide, amenable to chlorination or weak-acid dissociable.

(*3) The sum of seven PCB congeners 1242, 1254, 1221, 1232, 1248, 1260, and 1016.

Section 2. Priority Pollutants

For pollutants identified in Tables 4.0(2)A-E, indicate type of sample.

Grab ☐ Composite ☐

Date and time sample(s) collected: [Click to enter text.](#)

Table 4.0(2)A – Metals, Cyanide, and Phenols

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Antimony				5
Arsenic				0.5
Beryllium				0.5
Cadmium				1
Chromium (Total)				3
Chromium (Hex)				3
Chromium (Tri) (*1)				N/A
Copper				2
Lead				0.5
Mercury				0.005
Nickel				2
Selenium				5
Silver				0.5
Thallium				0.5
Zinc				5
Cyanide (*2)				10
Phenols, Total				10

(*1) Determined by subtracting hexavalent Cr from total Cr.

(*2) Cyanide, amenable to chlorination or weak-acid dissociable

Table 4.0(2)B – Volatile Compounds

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Acrolein				50
Acrylonitrile				50
Benzene				10
Bromoform				10
Carbon Tetrachloride				2
Chlorobenzene				10
Chlorodibromomethane				10
Chloroethane				50
2-Chloroethylvinyl Ether				10
Chloroform				10
Dichlorobromomethane [Bromodichloromethane]				10
1,1-Dichloroethane				10
1,2-Dichloroethane				10
1,1-Dichloroethylene				10
1,2-Dichloropropane				10
1,3-Dichloropropylene [1,3-Dichloropropene]				10
1,2-Trans-Dichloroethylene				10
Ethylbenzene				10
Methyl Bromide				50
Methyl Chloride				50
Methylene Chloride				20
1,1,2,2-Tetrachloroethane				10
Tetrachloroethylene				10
Toluene				10
1,1,1-Trichloroethane				10
1,1,2-Trichloroethane				10
Trichloroethylene				10
Vinyl Chloride				10

Table 4.0(2)C – Acid Compounds

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
2-Chlorophenol				10
2,4-Dichlorophenol				10
2,4-Dimethylphenol				10
4,6-Dinitro-o-Cresol				50
2,4-Dinitrophenol				50
2-Nitrophenol				20
4-Nitrophenol				50
P-Chloro-m-Cresol				10
Pentalchlorophenol				5
Phenol				10
2,4,6-Trichlorophenol				10

Table 4.0(2)D – Base/Neutral Compounds

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Acenaphthene				10
Acenaphthylene				10
Anthracene				10
Benzidine				50
Benzo(a)Anthracene				5
Benzo(a)Pyrene				5
3,4-Benzofluoranthene				10
Benzo(ghi)Perylene				20
Benzo(k)Fluoranthene				5
Bis(2-Chloroethoxy)Methane				10
Bis(2-Chloroethyl)Ether				10
Bis(2-Chloroisopropyl)Ether				10
Bis(2-Ethylhexyl)Phthalate				10
4-Bromophenyl Phenyl Ether				10
Butyl benzyl Phthalate				10
2-Chloronaphthalene				10
4-Chlorophenyl phenyl ether				10
Chrysene				5
Dibenzo(a,h)Anthracene				5
1,2-(o)Dichlorobenzene				10
1,3-(m)Dichlorobenzene				10
1,4-(p)Dichlorobenzene				10
3,3-Dichlorobenzidine				5
Diethyl Phthalate				10
Dimethyl Phthalate				10
Di-n-Butyl Phthalate				10
2,4-Dinitrotoluene				10
2,6-Dinitrotoluene				10
Di-n-Octyl Phthalate				10
1,2-Diphenylhydrazine (as Azo- benzene)				20
Fluoranthene				10

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Fluorene				10
Hexachlorobenzene				5
Hexachlorobutadiene				10
Hexachlorocyclo-pentadiene				10
Hexachloroethane				20
Indeno(1,2,3-cd)pyrene				5
Isophorone				10
Naphthalene				10
Nitrobenzene				10
N-Nitrosodimethylamine				50
N-Nitrosodi-n-Propylamine				20
N-Nitrosodiphenylamine				20
Phenanthrene				10
Pyrene				10
1,2,4-Trichlorobenzene				10

Table 4.0(2)E - Pesticides

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Aldrin				0.01
alpha-BHC (Hexachlorocyclohexane)				0.05
beta-BHC (Hexachlorocyclohexane)				0.05
gamma-BHC (Hexachlorocyclohexane)				0.05
delta-BHC (Hexachlorocyclohexane)				0.05
Chlordane				0.2
4,4-DDT				0.02
4,4-DDE				0.1
4,4,-DDD				0.1
Dieldrin				0.02
Endosulfan I (alpha)				0.01
Endosulfan II (beta)				0.02
Endosulfan Sulfate				0.1
Endrin				0.02
Endrin Aldehyde				0.1
Heptachlor				0.01
Heptachlor Epoxide				0.01
PCB-1242				0.2
PCB-1254				0.2
PCB-1221				0.2
PCB-1232				0.2
PCB-1248				0.2
PCB-1260				0.2
PCB-1016				0.2
Toxaphene				0.3

* For PCBs, if all are non-detects, enter the highest non-detect preceded by a "<".

Section 3. Dioxin/Furan Compounds

A. Indicate which of the following compounds from may be present in the influent from a contributing industrial user or significant industrial user. Check all that apply.

- ☐ 2,4,5-trichlorophenoxy acetic acid
Common Name 2,4,5-T, CASRN 93-76-5
- ☐ 2-(2,4,5-trichlorophenoxy) propanoic acid
Common Name Silvex or 2,4,5-TP, CASRN 93-72-1
- ☐ 2-(2,4,5-trichlorophenoxy) ethyl 2,2-dichloropropionate
Common Name Erbon, CASRN 136-25-4
- ☐ 0,0-dimethyl 0-(2,4,5-trichlorophenyl) phosphorothioate
Common Name Ronnel, CASRN 299-84-3
- ☐ 2,4,5-trichlorophenol
Common Name TCP, CASRN 95-95-4
- ☐ hexachlorophene
Common Name HCP, CASRN 70-30-4

For each compound identified, provide a brief description of the conditions of its/their presence at the facility.

[Click to enter text.](#)

B. Do you know or have any reason to believe that 2,3,7,8 Tetrachlorodibenzo-P-Dioxin (TCDD) or any congeners of TCDD may be present in your effluent?

☐ Yes ☐ No

If **yes**, provide a brief description of the conditions for its presence.

[Click to enter text.](#)

C. If any of the compounds in Subsection A **or** B are present, complete Table 4.0(2)F.

For pollutants identified in Table 4.0(2)F, indicate the type of sample.

Grab ☐ Composite ☐

Date and time sample(s) collected: [Click to enter text.](#)

Table 4.0(2)F – Dioxin/Furan Compounds

Compound	Toxic Equivalenc y Factors	Wastewater Concentration (ppq)	Wastewater Equivalents (ppq)	Sludge Concentration (ppt)	Sludge Equivalents (ppt)	MAL (ppq)
2,3,7,8 TCDD	1					10
1,2,3,7,8 PeCDD	0.5					50
2,3,7,8 HxCDDs	0.1					50
1,2,3,4,6,7,8 HpCDD	0.01					50
2,3,7,8 TCDF	0.1					10
1,2,3,7,8 PeCDF	0.05					50
2,3,4,7,8 PeCDF	0.5					50
2,3,7,8 HxCDFs	0.1					50
2,3,4,7,8 HpCDFs	0.01					50
OCDD	0.0003					100
OCDF	0.0003					100
PCB 77	0.0001					0.5
PCB 81	0.0003					0.5
PCB 126	0.1					0.5
PCB 169	0.03					0.5
Total						

DOMESTIC WASTEWATER PERMIT APPLICATION

WORKSHEET 5.0: TOXICITY TESTING REQUIREMENTS

The following **is required** for facilities with a current operating design flow of **1.0 MGD or greater**, with an EPA-approved **pretreatment** program (or those required to have one under 40 CFR Part 403), or are required to perform Whole Effluent Toxicity testing. See Page 86 of the instructions for further details.

This worksheet is not required minor amendments without renewal.

Section 1. Required Tests

Indicate the number of 7-day chronic or 48-hour acute Whole Effluent Toxicity (WET) tests performed in the four and one-half years prior to submission of the application.

7-day Chronic: [Click to enter text.](#)

48-hour Acute: [Click to enter text.](#)

Section 2. Toxicity Reduction Evaluations (TREs)

Has this facility completed a TRE in the past four and a half years? Or is the facility currently performing a TRE?

☐ Yes ☐ No

If yes, describe the progress to date, if applicable, in identifying and confirming the toxicant.

[Click to enter text.](#)

Section 3. Summary of WET Tests

If the required biomonitoring test information has not been previously submitted via both the Discharge Monitoring Reports (DMRs) and the Table 1 (as found in the permit), provide a summary of the testing results for all valid and invalid tests performed over the past four and one-half years. Make additional copies of this table as needed.

Table 5.0(1) Summary of WET Tests

Test Date	Test Species	NOEC Survival	NOEC Sub-lethal

DOMESTIC WASTEWATER PERMIT APPLICATION

WORKSHEET 6.0: INDUSTRIAL WASTE CONTRIBUTION

The following is required for all publicly owned treatment works.

Section 1. All POTWs (Instructions Page 87)

A. Industrial users (IUs)

Provide the number of each of the following types of industrial users (IUs) that discharge to your POTW and the daily flows from each user. See the Instructions for definitions of Categorical IUs, Significant IUs – non-categorical, and Other IUs.

If there are no users, enter 0 (zero).

Categorical IUs:

Number of IUs: [Click to enter text.](#)

Average Daily Flows, in MGD: [Click to enter text.](#)

Significant IUs – non-categorical:

Number of IUs: [Click to enter text.](#)

Average Daily Flows, in MGD: [Click to enter text.](#)

Other IUs:

Number of IUs: [Click to enter text.](#)

Average Daily Flows, in MGD: [Click to enter text.](#)

B. Treatment plant interference

In the past three years, has your POTW experienced treatment plant interference (see instructions)?

☐ Yes ☐ No

If yes, identify the dates, duration, description of interference, and probable cause(s) and possible source(s) of each interference event. Include the names of the IUs that may have caused the interference.

[Click to enter text.](#)

C. Treatment plant pass through

In the past three years, has your POTW experienced pass through (see instructions)?

☐ Yes ☐ No

If **yes**, identify the dates, duration, a description of the pollutants passing through the treatment plant, and probable cause(s) and possible source(s) of each pass through event. Include the names of the IUs that may have caused pass through.

Click to enter text.

D. Pretreatment program

Does your POTW have an approved pretreatment program?

☐ Yes ☐ No

If **yes**, complete Section 2 only of this Worksheet.

Is your POTW required to develop an approved pretreatment program?

☐ Yes ☐ No

If **yes**, complete Section 2.c. and 2.d. only, and skip Section 3.

If **no** to either question above, skip Section 2 and complete Section 3 for each significant industrial user and categorical industrial user.

Section 2. POTWs with Approved Programs or Those Required to Develop a Program (Instructions Page 87)

A. Substantial modifications

Have there been any **substantial modifications** to the approved pretreatment program that have not been submitted to the TCEQ for approval according to *40 CFR §403.18*?

☐ Yes ☐ No

If **yes**, identify the modifications that have not been submitted to TCEQ, including the purpose of the modification.

Click to enter text.

B. Non-substantial modifications

Have there been any **non-substantial modifications** to the approved pretreatment program that have not been submitted to TCEQ for review and acceptance?

☐ Yes ☐ No

If yes, identify all non-substantial modifications that have not been submitted to TCEQ, including the purpose of the modification.

Click to enter text.

C. Effluent parameters above the MAL

In Table 6.0(1), list all parameters measured above the MAL in the POTW’s effluent monitoring during the last three years. Submit an attachment if necessary.

Table 6.0(1) – Parameters Above the MAL

Pollutant	Concentration	MAL	Units	Date

D. Industrial user interruptions

Has any SIU, CIU, or other IU caused or contributed to any problems (excluding interferences or pass throughs) at your POTW in the past three years?

☐ Yes ☐ No

If **yes**, identify the industry, describe each episode, including dates, duration, description of the problems, and probable pollutants.

Click to enter text.

Section 3. Significant Industrial User (SIU) Information and Categorical Industrial User (CIU) (Instructions Page 88)

A. General information

Company Name: [Click to enter text.](#)

SIC Code: [Click to enter text.](#)

Contact name: [Click to enter text.](#)

Address: [Click to enter text.](#)

City, State, and Zip Code: [Click to enter text.](#)

Telephone number: [Click to enter text.](#)

Email address: [Click to enter text.](#)

B. Process information

Describe the industrial processes or other activities that affect or contribute to the SIU(s) or CIU(s) discharge (i.e., process and non-process wastewater).

[Click to enter text.](#)

C. Product and service information

Provide a description of the principal product(s) or services performed.

[Click to enter text.](#)

D. Flow rate information

See the Instructions for definitions of “process” and “non-process wastewater.”

Process Wastewater:

Discharge, in gallons/day: [Click to enter text.](#)

Discharge Type: ☐ Continuous ☐ Batch ☐ Intermittent

Non-Process Wastewater:

Discharge, in gallons/day: [Click to enter text.](#)

Discharge Type: ☐ Continuous ☐ Batch ☐ Intermittent

E. Pretreatment standards

Is the SIU or CIU subject to technically based local limits as defined in the instructions?

☐ Yes ☐ No

Is the SIU or CIU subject to categorical pretreatment standards found in *40 CFR Parts 405-471*?

☐ Yes ☐ No

If subject to categorical pretreatment standards, indicate the applicable category and subcategory for each categorical process.

Category: Subcategories: [Click to enter text.](#)

[Click or tap here to enter text.](#) [Click to enter text.](#)

Category: [Click to enter text.](#)

Subcategories: [Click to enter text.](#)

Category: [Click to enter text.](#)

Subcategories: [Click to enter text.](#)

Category: [Click to enter text.](#)

Subcategories: [Click to enter text.](#)

Category: [Click to enter text.](#)

Subcategories: [Click to enter text.](#)

F. Industrial user interruptions

Has the SIU or CIU caused or contributed to any problems (e.g., interferences, pass through, odors, corrosion, blockages) at your POTW in the past three years?

☐ Yes ☐ No

If yes, identify the SIU, describe each episode, including dates, duration, description of problems, and probable pollutants.

[Click to enter text.](#)

WORKSHEET 7.0

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

CLASS V INJECTION WELL INVENTORY/AUTHORIZATION FORM

Submit the completed form to:

TCEQ
IUC Permits Team
Radioactive Materials Division
MC-233
PO Box 13087
Austin, Texas 78711-3087
512-239-6466

For TCEQ Use Only

Reg. No. _____

Date Received _____

Date Authorized _____

Section 1. General Information (Instructions Page 90)

1. TCEQ Program Area

Program Area (PST, VCP, IHW, etc.): [Click to enter text.](#)

Program ID: [Click to enter text.](#)

Contact Name: [Click to enter text.](#)

Phone Number: [Click to enter text.](#)

2. Agent/Consultant Contact Information

Contact Name: [Click to enter text.](#)

Address: [Click to enter text.](#)

City, State, and Zip Code: [Click to enter text.](#)

Phone Number: [Click to enter text.](#)

3. Owner/Operator Contact Information

☐ Owner ☐ Operator

Owner/Operator Name: [Click to enter text.](#)

Contact Name: [Click to enter text.](#)

Address: [Click to enter text.](#)

City, State, and Zip Code: [Click to enter text.](#)

Phone Number: [Click to enter text.](#)

4. Facility Contact Information

Facility Name: [Click to enter text.](#)

Address: [Click to enter text.](#)

City, State, and Zip Code: [Click to enter text.](#)

Location description (if no address is available): [Click to enter text.](#)

Facility Contact Person: [Click to enter text.](#)

Phone Number: [Click to enter text.](#)

5. **Latitude and Longitude, in degrees-minutes-seconds**

Latitude: [Click to enter text.](#)

Longitude: [Click to enter text.](#)

Method of determination (GPS, TOPO, etc.): [Click to enter text.](#)

Attach topographic quadrangle map as attachment A.

6. **Well Information**

Type of Well Construction, select one:

- ☐ Vertical Injection
- ☐ Subsurface Fluid Distribution System
- ☐ Infiltration Gallery
- ☐ Temporary Injection Points
- ☐ Other, Specify: [Click to enter text.](#)

Number of Injection Wells: [Click to enter text.](#)

7. **Purpose**

Detailed Description regarding purpose of Injection System:

[Click to enter text.](#)

Attach a Site Map as Attachment B (Attach the Approved Remediation Plan, if appropriate.)

8. **Water Well Driller/Installer**

Water Well Driller/Installer Name: [Click to enter text.](#)

City, State, and Zip Code: [Click to enter text.](#)

Phone Number: [Click to enter text.](#)

License Number: [Click to enter text.](#)

Section 2. Proposed Down Hole Design

Attach a diagram signed and sealed by a licensed engineer as Attachment C.

Table 7.0(1) – Down Hole Design Table

Name of String	Size	Setting Depth	Sacks Cement/Grout – Slurry Volume – Top of Cement	Hole Size	Weight (lbs/ft) PVC/Steel
Casing					
Tubing					
Screen					

Section 3. Proposed Trench System, Subsurface Fluid Distribution System, or Infiltration Gallery

Attach a diagram signed and sealed by a licensed engineer as Attachment D.

System(s) Dimensions: [Click to enter text.](#)

System(s) Construction: [Click to enter text.](#)

Section 4. Site Hydrogeological and Injection Zone Data

1. Name of Contaminated Aquifer: [Click to enter text.](#)
2. Receiving Formation Name of Injection Zone: [Click to enter text.](#)
3. Well/Trench Total Depth: [Click to enter text.](#)
4. Surface Elevation: [Click to enter text.](#)
5. Depth to Ground Water: [Click to enter text.](#)
6. Injection Zone Depth: [Click to enter text.](#)
7. Injection Zone vertically isolated geologically? ☐ Yes ☐ No
Impervious Strata between Injection Zone and nearest Underground Source of Drinking Water:
Name: [Click to enter text.](#)
Thickness: [Click to enter text.](#)
8. Provide a list of contaminants and the levels (ppm) in contaminated aquifer
Attach as Attachment E.
9. Horizontal and Vertical extent of contamination and injection plume
Attach as Attachment F.
10. Formation (Injection Zone) Water Chemistry (Background levels) TDS, etc.
Attach as Attachment G.
11. Injection Fluid Chemistry in PPM at point of injection
Attach as Attachment H.
12. Lowest Known Depth of Ground Water with < 10,000 PPM TDS: [Click to enter text.](#)
13. Maximum injection Rate/Volume/Pressure: [Click to enter text.](#)
14. Water wells within 1/4 mile radius (attach map as Attachment I): [Click to enter text.](#)
15. Injection wells within 1/4 mile radius (attach map as Attachment J): [Click to enter text.](#)
16. Monitor wells within 1/4 mile radius (attach drillers logs and map as Attachment K): [Click to enter text.](#)
17. Sampling frequency: [Click to enter text.](#)
18. Known hazardous components in injection fluid: [Click to enter text.](#)

Section 5. Site History

1. Type of Facility: [Click to enter text.](#)
2. Contamination Dates: [Click to enter text.](#)
3. Original Contamination (VOCs, TPH, BTEX, etc.) and Concentrations (attach as Attachment L): [Click to enter text.](#)
4. Previous Remediation (attach results of any previous remediation as attachment M): [Click to enter text.](#)

NOTE: Authorization Form should be completed in detail and authorization given by the TCEQ before construction, operation, and/or conversion can begin. Attach additional pages as necessary.

Class V Injection Well Designations

- 5A07 Heat Pump/AC return (IW used for groundwater to heat and/or cool buildings)
- 5A19 Industrial Cooling Water Return Flow (IW used to cool industrial process equipment)
- 5B22 Salt Water Intrusion Barrier (IW used to inject fluids to prevent the intrusion of salt water into an aquifer)
- 5D02 Storm Water Drainage (IW designed for the disposal of rain water)
- 5D04 Industrial Stormwater Drainage Wells (IW designed for the disposal of rain water associated with industrial facilities)
- 5F01 Agricultural Drainage (IW that receive agricultural runoff)
- 5R21 Aquifer Recharge (IW used to inject fluids to recharge an aquifer)
- 5S23 Subsidence Control Wells (IW used to control land subsidence caused by ground water withdrawal)
- 5W09 Untreated Sewage
- 5W10 Large Capacity Cesspools (Cesspools that are designed for 5,000 gpd or greater)
- 5W11 Large Capacity Septic systems (Septic systems designed for 5,000 gpd or greater)
- 5W12 WTP disposal
- 5W20 Industrial Process Waste Disposal Wells
- 5W31 Septic System (Well Disposal method)
- 5W32 Septic System Drainfield Disposal
- 5X13 Mine Backfill (IW used to control subsidence, dispose of mining byproducts, and/or fill sections of a mine)
- 5X25 Experimental Wells (Pilot Test) (IW used to test new technologies or tracer dye studies)
- 5X26 Aquifer Remediation (IW used to clean up, treat, or prevent contamination of a USDW)
- 5X27 Other Wells
- 5X28 Motor Vehicle Waste Disposal Wells (IW used to dispose of waste from a motor vehicle site - These are currently banned)
- 5X29 Abandoned Drinking Water Wells (waste disposal)

Attachment J – Stream Assessment, Original Photographs



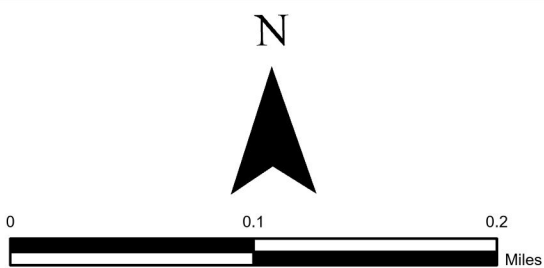
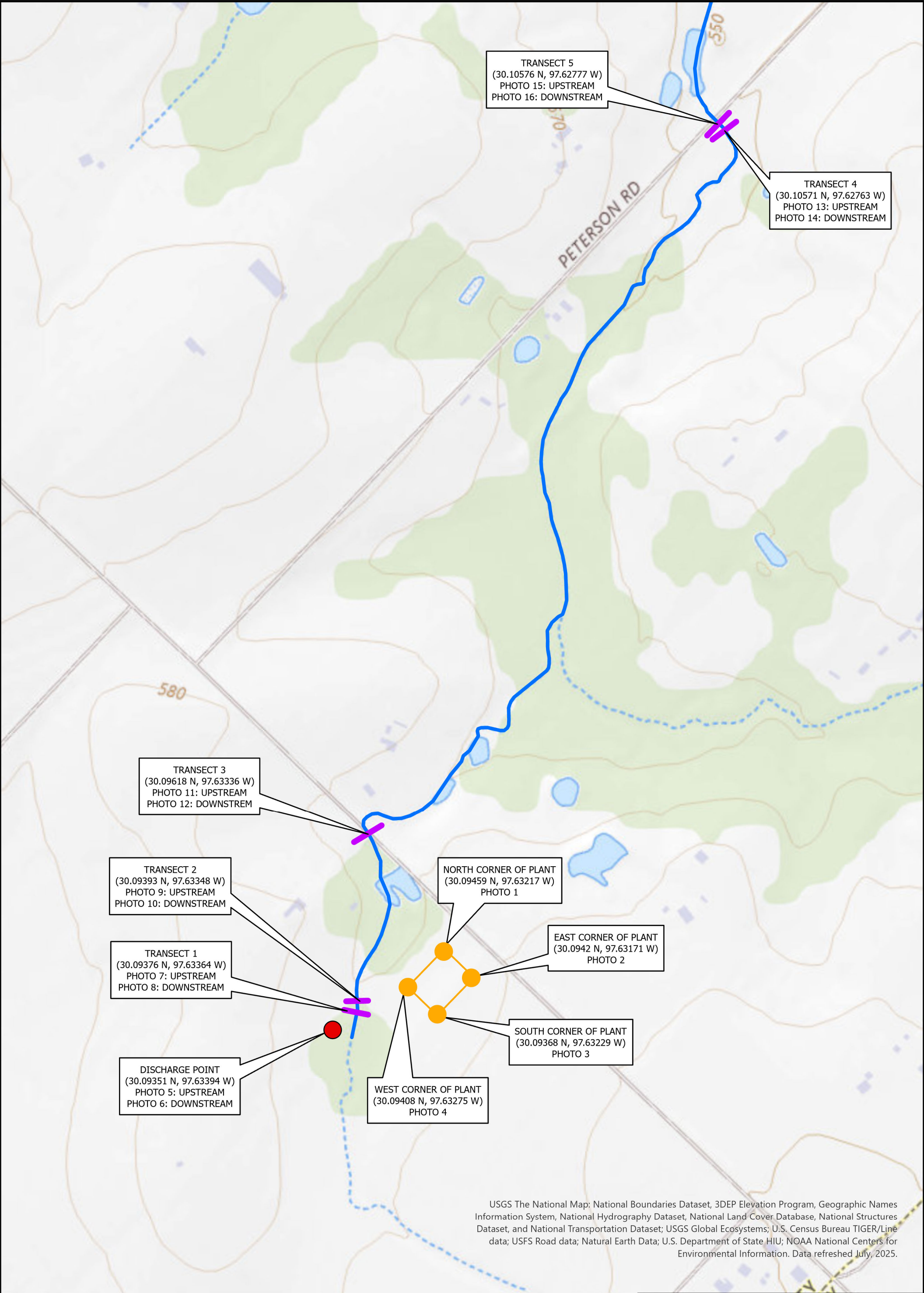
Dear Texas Commission on Environmental Quality,

The Doyle Overton Road Wastewater Treatment Plant (WWTP) is submitting an application for a new Texas Pollutant Discharge Elimination System (TPDES) permit. Per the client's directive, our stream assessment was conducted exclusively within their property and publicly accessible areas to avoid encroachment on private land. Consequently, the discharge point selected deviates from the stream centerline and instead aligns with a seemingly man-made channel located on-site. The WWTP design will elevate the grade in this area and incorporate an engineered channel adequate to convey effluent to the natural stream. Additionally, due to private property constraints, transects 4 and 5 extend slightly beyond one mile from the discharge point, measuring at approximately 5,612 and 5,658 feet from the proposed outfall, respectively.

Sincerely,
KIMLEY-HORN AND ASSOCIATES, INC.
Texas Firm No. 928

A handwritten signature in black ink, appearing to read "Kam Grace".

Kam Grace
Project Manager



DOYLE OVERTON

**WASTEWATER PERMIT
STREAM ASSESSMENT MAP**

Kimley»Horn

DATE: 07/29/2025
PROJECT NUMBER: 069288805

Photo 1: North Corner of Plant



Photo 2: East Corner of Plant



Photo 3: South Corner of Plant



Photo 4: West Corner of Plant



Photo 5: Discharge Point, Upstream



Photo 6: Discharge Point, Downstream



Photo 7: Transect 1, Upstream



Photo 8: Transect 1, Downstream



Photo 9: Transect 2, Upstream



Photo 10: Transect 2, Downstream



Photo 11: Transect 3, Upstream



Photo 12: Transect 3, Downstream



Photo 13: Transect 4, Upstream



Photo 14: Transect 4, Downstream



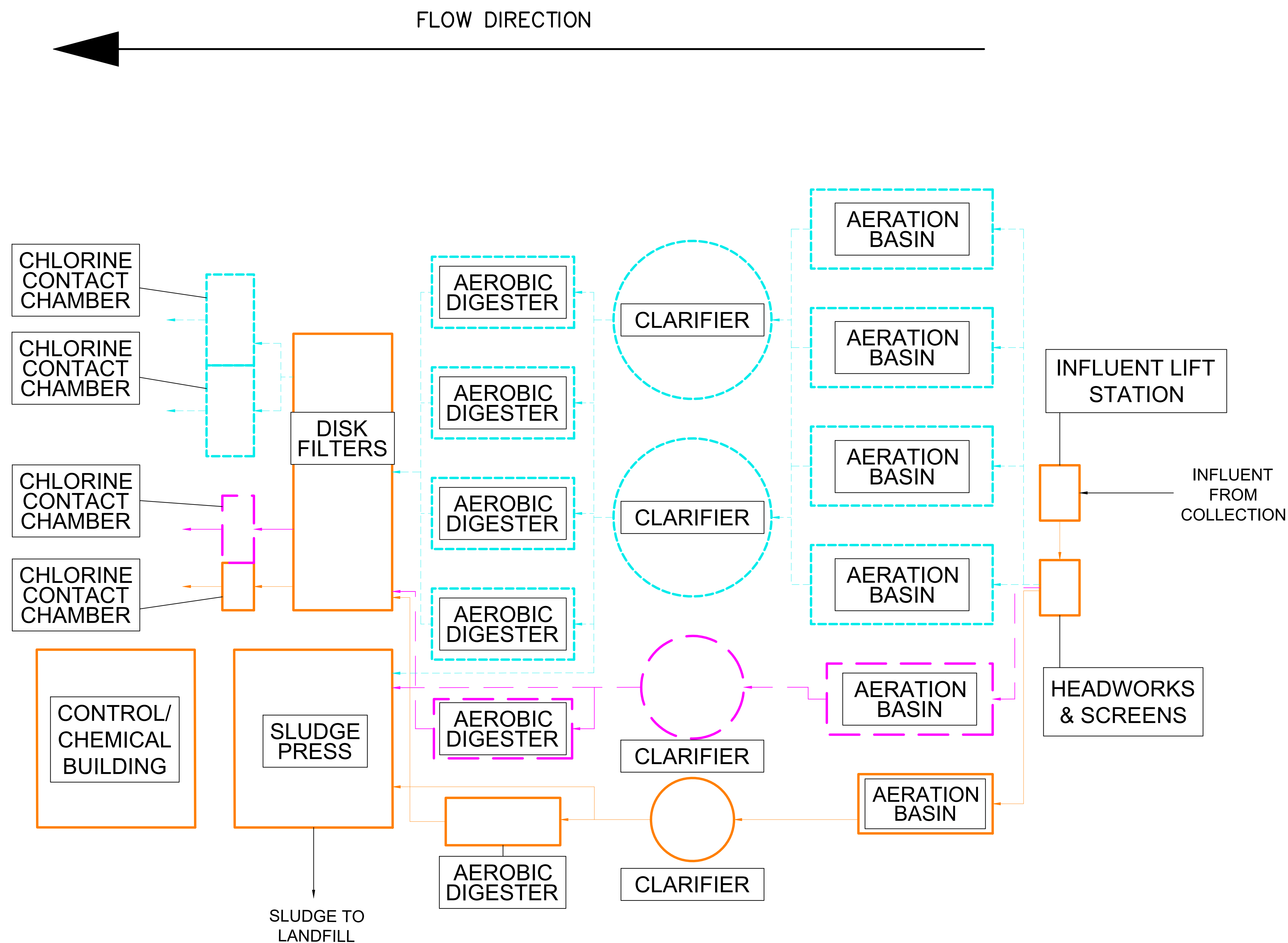
Photo 15: Transect 5, Upstream



Photo 16: Transect 5, Downstream



Attachment K – Process Flow Diagram



PHASE 1

PHASE 2

PHASE 3

[illegible]

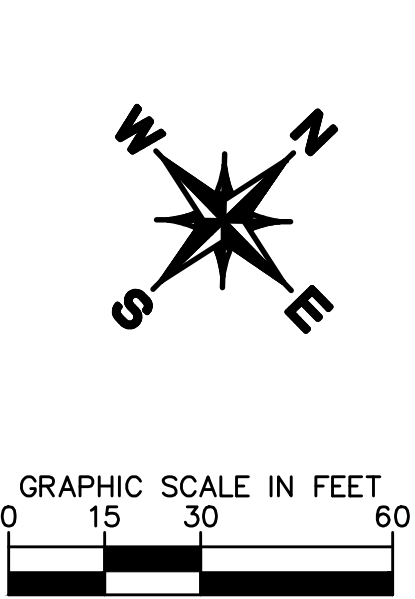
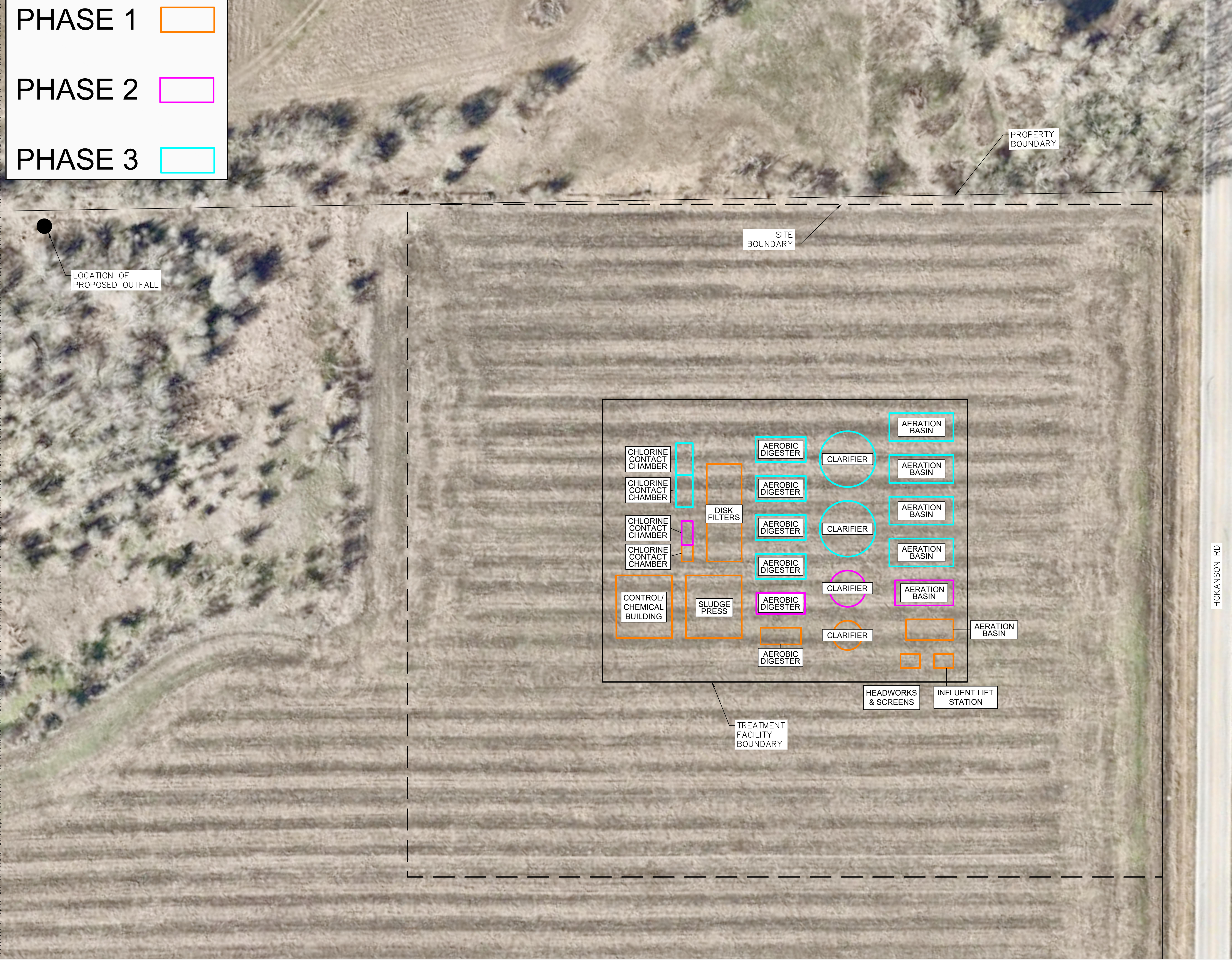
Attachment L – Site Drawing

Plotted By:Roshid, Nadine Date:July 31, 2025 03:35:57pm File Path:k:\SAU_WA\069288805_Doyle_TPDES\CAD\PLANSHEET\Site Drawing.dwg
This document, together with the concepts and designs presented herein, is provided only for the specific purpose and client for which it was prepared. Reuse or improper reliance on this document without written authorization and approval by Kimley-Horn and Associates, Inc. shall be without liability to Kimley-Horn and Associates, Inc.

PHASE 1

PHASE 2

PHASE 3



DOYLE OVERTON WWTP DEL VALLE, TEXAS		SITE DRAWING		<div>KHA PROJECT 069288805</div> <div>DATE JULY 2025</div> <div>SCALE: AS SHOWN</div>		<div><div>Preliminary</div><div>08/08/2025 11:22:48 AM</div></div>		<div><div>Kimley»»Horn</div><div>© 2022 KIMLEY-HORN AND ASSOCIATES, INC. 5301 Southwest Parkway, Building 2, Suite 100 Austin, Texas 78735 PHONE: 512-418-1771 FAX: 512-418-1791 WWW.KIMLEY-HORN.COM TEXAS REGISTERED ENGINEERING FIRM F-928</div></div>			
SHEET NUMBER								No.		REVISIONS	

Attachment M – CCN Letter



Dear Texas Commission on Environmental Quality,

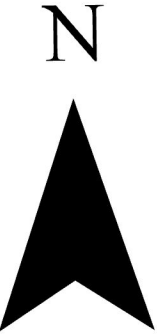
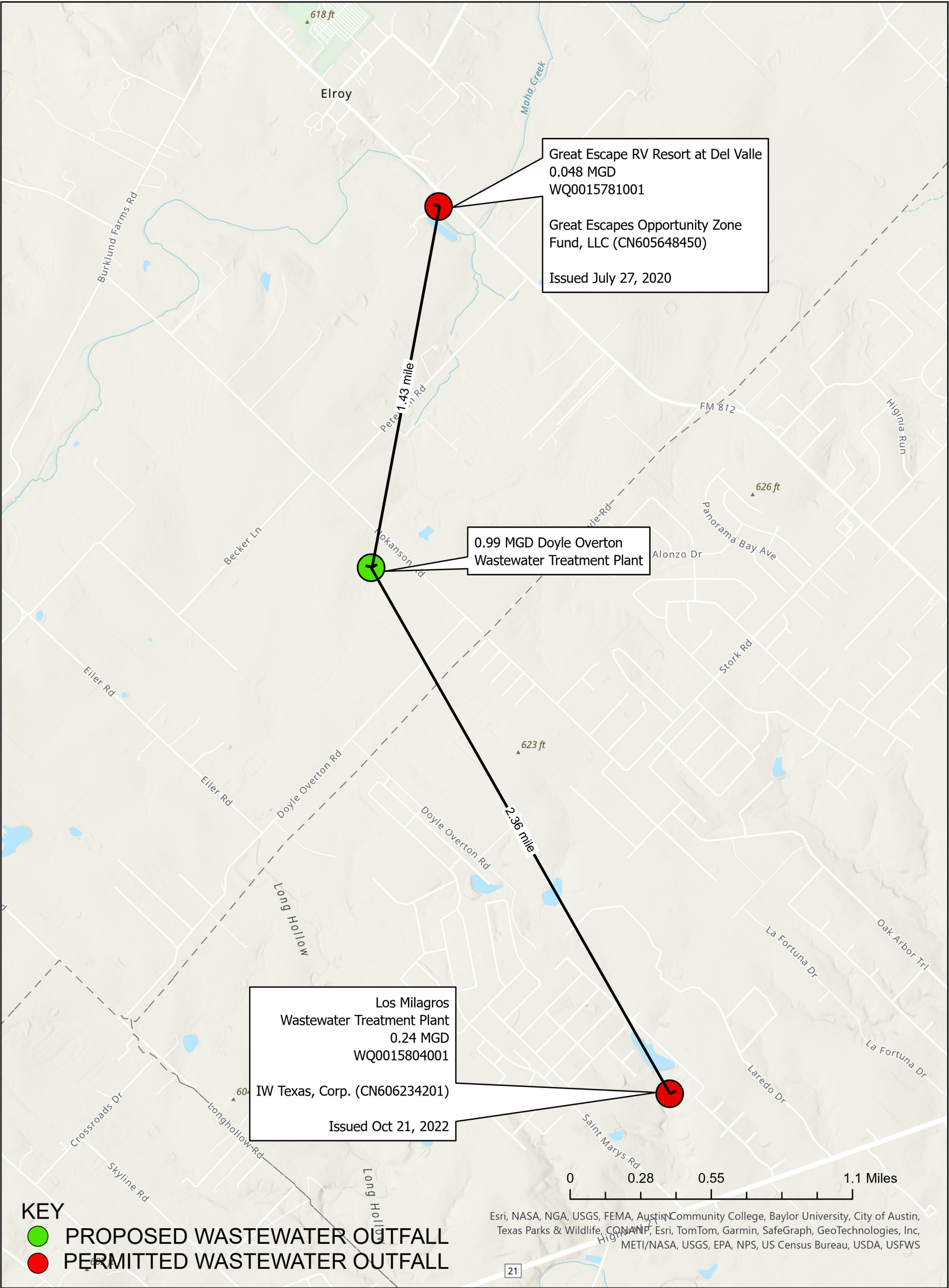
The Doyle Overton Road WWTP is preparing an application for a new Texas Pollutant Discharge Elimination System (TPDES) wastewater discharge permit. Utilizing the Public Utilities Commission of Texas's CCN viewing map, it was found this site is located in Aqua WSC's CCN (20962) and City of Austin's CCN (20636). Neither utility currently has a facility or permitted treatment capacity within a 5-mile radius of the proposed Doyle Overton Road development. Given the substantial funding required to design and construct a plant expansion and the conveyance infrastructure necessary to connect to either existing system, it has been determined that constructing a new wastewater treatment plant is the more cost-effective and feasible solution for this development.

Sincerely,
KIMLEY-HORN AND ASSOCIATES, INC.
Texas Firm No. 928

A handwritten signature in black ink, appearing to read "Kam Grace".

Kam Grace
Project Manager

Attachment N – Nearby Plants



DOYLE OVERTON WWTP REGIONALIZATION MAP



Dear Texas Commission on Environmental Quality,

The Doyle Overton Road WWTP is preparing an application for a new Texas Pollutant Discharge Elimination System (TPDES) wastewater discharge permit. Upon utilizing the TCEQ Wastewater Outfall Map Viewer, two wastewater treatment facilities were identified within a three-mile radius of the proposed facility site: Great Escape RV Resort at Del Valle with a capacity of 0.048 MGD and Los Milagros WWTP with a capacity of 0.24 MGD. Neither of these facilities have the capacity to accept our proposed flows and, thus, do not meet the applicable criteria to serve the proposed service area. In conclusion, no requests for service were included in this permit.

Sincerely,
KIMLEY-HORN AND ASSOCIATES, INC.
Texas Firm No. 928

A handwritten signature in black ink, appearing to read "Kam Grace".

Kam Grace
Project Manager

Attachment O – Design Calculations

Project: Doyle Overton Road Wastewater Treatment Plant

Date: 5/7/2025

Phase 1 - 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	0.1 MGD	Influent BOD ₅	250 mg/l
Peaking Factor	4	Influent BOD ₅	209 lbs/day
Peak Flow	0.4 MGD		

Process Design - The treatment plant has been designed to produce an effluent quality in compliance with the proposed permitted parameters of : CBOD₅ =5 mg/l; TSS = 5 mg/l; NH₃-N = 2 mg/l; Dissolved Oxygen = 4 mg/l; Chlorine Residual = 1 mg/l after 20 minutes detention time. In order to achieve the required removal efficiencies, activated sludge process operated in the single stage nitrification mode has been chosen.

The anticipated operating ranges for MLSS and RASS in mg/l are 3,000 mg/l and 6,000 mg/l, respectively.

Aeration Basin

TCEQ Maximum Organic Loading 35 lbs BOD₅ / day / 1,000 ft³

Aeration Volume Required 5,957 ft³

Volume Provided:

Number of Tanks	1
Length	34 ft.
Width	15 ft.
Height	13.5
SWD	12 ft.
Volume	6,120 ft ³
Capacity	0.10 MGD Average Flow

Total Volume 6,120 ft³

Volume greater than required YES

Organic Loading 34.07 lbs BOD₅ / day

Clarifier

TCEQ Maximum surface Loading (Qpk)	1,200 gal / day / ft ² at peak flow
TCEQ Minimum detention time (Qpk)	1.8 hours at peak flow
TCEQ Maximum weir Loading (Qpk)	20,000 gal / day / ft.

Surface area required	333.33 ft ²	20.6 ft. min. dia. for one clarifier
Volume required	4,011 ft ³	

Volume Provided:

Number of Tanks	1
Diameter	21 ft.
SWD	12 ft.
Surface Area	346 ft ²
Volume	4,156 ft ³
Capacity	0.10 MDG Average Flow

Total Surface Area	346 ft ²	Greater than required?	YES
Total Volume	4,156 ft ³	Greater than required?	YES

Clarifier Surface Loading (Qave)	288.72 GPD/FT ²
Clarifier Surface Loading (Qpk)	1154.87 GPD/FT ²

Clarifier Detention Time (Qave)	7.46 Hours
Clarifier Detention Time (Qpk)	1.87 Hours

Weir Length	59.69 ft.	
Weir Loading	6,701.26	GPD/LF

Digesters

TCEQ Required design volume 20 ft³ / lb. BOD₅ / day
TCEQ Minimum sludge retention time 60 Days

Volume required 4,170 ft³

Volume Provided:

Number of Tanks	1
Length	29 ft.
Width	12 ft.
Height	13.5
SWD	12 ft.
Volume	4,176 ft ³
Capacity	0.10 MDG Average Flow

Total Volume 4,176 ft³
Volume greater than required YES
Organic Loading 20.03 ft³ / lb. BOD₅ / day

Chlorine Contact Chamber

TCEQ Minimum detention time (Qpk) 20 min.
TCEQ Minimum volume (Qpk) 743 ft³

Volume required 743 ft³

Volume Provided:

Number of Tanks	1
Length	12 ft.
Width	8 ft.
Height	11
SWD	10 ft.
Volume	960 ft ³
Capacity	0.13 MGD Average Flow

Detention Time 21.71 Minutes

Greater than required?

YES

Chlorination

Design Maximum chlorine dose	8 mg/l	
Typical chlorine dose	4 mg/l	
Cylinder size	150 lbs.	
Withdrawal factor	1	(Use 1.0 for 150 # cylinder and 8.0 for 2000 # cylinders)
Low Ambient Temp	65	Use 65 for indoor storage
Chlorine required at low flow	0.8 lbs per day @ 25% design flow rate	
Chlorine required at design flow	3.3 lbs per day	
Maximum chlorine required	27 lbs per day	
Max. withdrawal rate per cylinder	65 lbs per day	(Formula for vacuum systems only)
No. of Cylinders required per bank	1	For Redundancy use 2
One bank of cylinders will last	90 days at average flow and typical chlorine usage	

Air Requirements

Air requirements for aeration basins	2.2 lb. oxygen per lb. BOD
Air requirements for digesters	30 SCFM /1000 cu. ft.
Minimum mixing requirements	20 SCFM /1000 cu. ft.
Diffuser transfer efficiency	6.63% (In wastewater)

$$\text{Air required in aeration basin} = \frac{= \{(\text{lb BOD}) * (\text{lb Oxygen} / \text{lb BOD})\}}{(\text{T.E.}) (\text{lb. Oxygen} / \text{lb. air}) (\text{lb. air} / \text{cu. ft.}) (\text{min} / \text{day})} 434 \text{ SCFM}$$

Verify mixing requirements: 71 OK

Air required for digesters:	125 SCFM
Air required for post aeration	20
Air required for post aeration-CL2	47 SCFM
Air required for initial mixing	25
Air required for air lifts	91 SCFM

Total air required 723 SCFM

Maximum water depth over diffuser	10 feet
Pressure loss in piping	1.2 psi
Pressure @ blowers	5.5 psi

Air flow per blower @ required pressure	1350 SCFM
Blowers required w/o standby	0.5

Total blowers required 2

Project: Doyle Overton Road Wastewater Treatment Plant

Date: 5/7/2025

Applies to Phases 1 and 2
Phase 1
Phase 2

Phase 3 - 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	0.25 MGD	Influent BOD ₅	250 mg/l
Peaking Factor	4	Influent BOD ₅	521 lbs/day
Peak Flow	1 MGD		

Process Design - The treatment plant has been designed to produce an effluent quality in compliance with the proposed permitted parameters of : CBOD₅ =5 mg/l; TSS = 5 mg/l; NH₃-N = 2 mg/l; Dissolved Oxygen = 4 mg/l; Chlorine Residual = 1 mg/l after 20 minutes detention time. In order to achieve the required removal efficiencies, activated sludge process operated in the single stage nitrification mode has been chosen.

The anticipated operating ranges for MLSS and RASS in mg/l are 3,000 mg/l and 6,000 mg/l, respectively.

Aeration Basin

TCEQ Maximum Organic Loading 35 lbs BOD₅ / day / 1,000 ft³

Aeration Volume Required 14,893 ft³

Volume Provided:

Number of Tanks	1	1	
Length	34 ft.	42 ft.	
Width	15 ft.	18 ft.	
Height	13.5 ft.	13.5 ft.	
SWD	12 ft.	12 ft.	
Volume	6,120 ft ³	9,072 ft ³	
Capacity	0.10 MGD Average Flow	0.15 MGD Average Flow	0.26 MGD Total

Total Volume 15,192 ft³

Volume greater than required

YES

Organic Loading 34.31 lbs BOD₅ / day

Clarifier

TCEQ Maximum surface Loading (Qpk)			1,200 gal / day / ft ² at peak flow	
TCEQ Minimum detention time (Qpk)			1.8 hours at peak flow	
TCEQ Maximum weir Loading (Qpk)			20,000 gal / day / ft.	
Surface area required		833 ft ²	32.6 ft. min. dia. for one clarifier	
Volume required		10,027 ft ³		
Volume Provided:				
Number of Tanks	1	1		
Diameter	21 ft.	26 ft.		
SWD	12 ft.	12 ft.		
Surface Area	346 ft ²	531 ft ²		
Volume	4,156 ft ³	6,371 ft ³		
Capacity	0.10 MDG Average Flow	0.16 MDG Average Flow	0.26 MGD Total	
Total Surface Area		877 ft ²	Greater than required?	YES
Total Volume		10,527 ft ³	Greater than required?	YES
Clarifier Surface Loading (Qave)		284.97 GPD/FT ²		
Clarifier Surface Loading (Qpk)		1,139.87 GPD/FT ²		
Clarifier Detention Time (Qave)		7.56 Hours		
Clarifier Detention Time (Qpk)		1.89 Hours		
Weir Length	135.09 ft.			
Weir Loading	7,402.56	GPD/LF		

Digesters

TCEQ Required design volume		20 ft ³ / lb. BOD ₅ / day	
TCEQ Minimum sludge retention time		60 Days	
Volume required		10,425 ft ³	
Volume Provided:			
Number of Tanks	1	1	
Length	29 ft.	35 ft.	
Width	12 ft.	15 ft.	
Height	13.5 ft.	13.5 ft.	
SWD	12 ft.	12 ft.	
Volume	4,176 ft ³	6,300 ft ³	
Capacity	0.10 MDG Average Flow	0.15 MDG Average Flow	0.25 MGD Total
Total Volume		10,476 ft ³	
Volume greater than required	YES		
Organic Loading		20.10 ft ³ / lb. BOD ₅ / day	

Chlorine Contact Chamber

TCEQ Minimum detention time (Qpk)		20 min.	
TCEQ Minimum volume (Qpk)		1,857 ft ³	
Volume required		1,857 ft ³	
Volume Provided:			
Number of Tanks	1	1	
Length	12 ft.	17 ft.	
Width	8 ft.	8 ft.	
Height	11 ft.	11 ft.	
SWD	10 ft.	10 ft.	
Volume	960 ft ³	1,360 ft ³	
Capacity	0.13 MGD Average Flow	0.18 MGD Average Flow	0.312 MGD Total
Totals	0.31 MGD Total Flow	Total Volume Greater than required?	2,320 ft ³ YES
Detention Time	41.98 Minutes		

Chlorination

Design Maximum chlorine dose	8 mg/l	
Typical chlorine dose	4 mg/l	
Cylinder size	150 lbs.	
Withdrawal factor	1 (Use 1.0 for 150 # cylinder and 8.0 for 2000 # cylinders)	
Low Ambient Temp	65 Use 65 for indoor storage	
Chlorine required at low flow	2.1 lbs per day @ 25% design flow rate	
Chlorine required at design flow	8.3 lbs per day	
Maximum chlorine required	67 lbs per day	
Max. withdrawal rate per cylinder	65 lbs per day (Formula for vacuum systems only)	
No. of Cylinders required per bank	2	For Redundancy use 3
One bank of cylinders will last	54 days at average flow and typical chlorine usage	

Air Requirements

Air requirements for aeration basins	2.2 lb. oxygen per lb. BOD
Air requirements for digesters	30 SCFM /1000 cu. ft.
Minimum mixing requirements	20 SCFM /1000 cu. ft.
Diffuser transfer efficiency	6.63% (In wastewater)

Air required in aeration basin = 1,086 SCFM

$$\frac{= \{(lb\ BOD) * (lb\ Oxygen / lb\ BOD)\}}{(T.E.) (lb. Oxygen / lb. air) (lb. air / cu. ft.) (min / day)}$$

Verify mixing requirements: 72 OK

Air required for digesters:	314 SCFM
Air required for post aeration	20
Air required for post aeration-CL2	47 SCFM
Air required for initial mixing	25
Air required for air lifts	91 SCFM

Total air required 1,564 SCFM

Maximum water depth over diffuser	10 feet
Pressure loss in piping	1.2 psi
Pressure @ blowers	5.5 psi

Air flow per blower @ required pressure 1350 SCFM

Blowers required w/o standby 1.2

Total blowers required 3

Project: Doyle Overton Road Wastewater Treatment Plant
Date: 5/7/2025

	Applies to All Phases
	Phase 1
	Phase 2
	Phase 3

Phase 3 - 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	0.99 MGD	Influent BOD ₅	250 mg/l
Peaking Factor	4	Influent BOD ₅	2064 lbs/day
Peak Flow	3.96 MGD		

Process Design - The treatment plant has been designed to produce an effluent quality in compliance with the proposed permitted parameters of : CBOD₅ =5 mg/l; TSS = 5 mg/l; NH₃-N = 2 mg/l; Dissolved Oxygen = 4 mg/l; Chlorine Residual = 1 mg/l after 20 minutes detention time. In order to achieve the required removal efficiencies, activated sludge process operated in the single stage nitrification mode has been chosen.

The anticipated operating ranges for MLSS and RASS in mg/l are 3,000 mg/l and 6,000 mg/l, respectively.

Aeration Basin

TCEQ Maximum Organic Loading	35 lbs BOD ₅ / day / 1,000 ft ³		
Aeration Volume Required	58,976 ft ³		
Volume Provided:			
Number of Tanks	1	1	4
Length	34 ft.	42 ft.	46 ft.
Width	15 ft.	18 ft.	20 ft.
Height	13.5 ft.	13.5 ft.	13.5 ft.
SWD	12 ft.	12 ft.	12 ft.
Volume	6,120 ft ³	9,072 ft ³	44,160 ft ³
Capacity	0.10 MGD Avg Flw	0.15 MGD Avg Flw	0.74 MGD Avg Flw
Total Volume	59,352 ft ³		1.00 MGD Total
Volume greater than required	YES		
Organic Loading	34.78 lbs BOD ₅ / day		

Clarifier

TCEQ Maximum surface Loading (Qpk)		1,200 gal / day / ft ² at peak flow	
TCEQ Minimum detention time (Qpk)		1.8 hours at peak flow	
TCEQ Maximum weir Loading (Qpk)		20,000 gal / day / ft.	
Surface area required		3,300 ft ²	64.8 ft. min. dia. for one clarifier
Volume required		39,706 ft ³	
Volume Provided:			
Number of Tanks	1	1	2
Diameter	21 ft.	26 ft.	40 ft.
SWD	12 ft.	12 ft.	12 ft.
Surface Area	346 ft ²	531 ft ²	2,513 ft ²
Volume	4,156 ft ³	6,371 ft ³	30,159 ft ³
Capacity	0.10 MGD Avg Flw	0.16 MGD Avg Flw	0.75 MGD Avg Flw
Total Capacity		1.01 MGD Average Flow	
Total Surface Area		3,391 ft ²	Greater than required? YES
Total Volume		40,687 ft ³	Greater than required? YES
Clarifier Surface Loading (Qave)		291.99 GPD/FT ²	
Clarifier Surface Loading (Qpk)		1,167.95 GPD/FT ²	
Clarifier Detention Time (Qave)		7.38 Hours	
Clarifier Detention Time (Qpk)		1.84 Hours	
Weir Length	254.47 ft.		
Weir Loading	15,561.82	GPD/LF	

Digesters

TCEQ Required design volume	20 ft ³ / lb. BOD ₅ / day		
TCEQ Minimum sludge retention time	60 Days		
Volume required	41,283 ft ³		
Volume Provided:			
Number of Tanks	1	1	4
Length	29 ft.	35 ft.	36 ft.
Width	12 ft.	15 ft.	18 ft.
Height	13.5 ft.	13.5 ft.	13.5 ft.
SWD	12 ft.	12 ft.	12 ft.
Volume	4,176 ft ³	6,300 ft ³	31,104 ft ³
Capacity	0.10 MGD Avg Flw	0.15 MGD Avg Flw	0.75 MGD Avg Flw
Total Capacity	1.00 MGD Total		
Total Volume	41,580 ft ³		
Volume greater than required	YES		
Organic Loading	20.14 ft ³ / lb. BOD ₅ / day		

Chlorine Contact Chamber

TCEQ Minimum detention time (Qpk)	20 min.		
TCEQ Minimum volume (Qpk)	7,353 ft ³		
Volume required	7,353 ft ³		
Volume Provided:			
Number of Tanks	1	1	2
Length	12 ft.	17 ft.	23 ft.
Width	8 ft.	8 ft.	12 ft.
Height	11 ft.	11 ft.	11 ft.
SWD	10 ft.	10 ft.	10 ft.
Volume	960 ft ³	1,360 ft ³	5,520 ft ³
Capacity	0.13 MGD Average Flow	0.18 MGD Average Flow	0.74 MGD Total
Totals	1.06 MGD Total Flow	Total Volume Greater than required?	7,840 ft ³ YES
Detention Time	71.65 Minutes		

Chlorination

Design Maximum chlorine dose	8 mg/l	
Typical chlorine dose	4 mg/l	
Cylinder size	150 lbs.	
Withdrawal factor	1 (Use 1.0 for 150 # cylinder and 8.0 for 2000 # cylinders)	
Low Ambient Temp	65 Use 65 for indoor storage	
Chlorine required at low flow	8.3 lbs per day @ 25% design flow rate	
Chlorine required at design flow	33.0 lbs per day	
Maximum chlorine required	264 lbs per day	
Max. withdrawal rate per cylinder	65 lbs per day (Formula for vacuum systems only)	
No. of Cylinders required per bank	5	For Redundancy use 6
One bank of cylinders will last	27 days at average flow and typical chlorine usage	

Air Requirements

Air requirements for aeration basins	2.2 lb. oxygen per lb. BOD
Air requirements for digesters	30 SCFM /1000 cu. ft.
Minimum mixing requirements	20 SCFM /1000 cu. ft.
Diffuser transfer efficiency	6.63% (In wastewater)

Air required in aeration basin = 4,302 SCFM

$$\frac{= \{(\text{lb BOD}) * (\text{lb Oxygen} / \text{lb BOD})\}}{(\text{T.E.}) (\text{lb. Oxygen} / \text{lb. air}) (\text{lb. air} / \text{cu. ft.}) (\text{min} / \text{day})}$$

Verify mixing requirements: 72 OK

Air required for digesters:	1247 SCFM
Air required for post aeration	20
Air required for post aeration-CL2	47 SCFM
Air required for initial mixing	25
Air required for air lifts	91 SCFM

Total air required 5,712 SCFM

Maximum water depth over diffuser	10 feet
Pressure loss in piping	1.2 psi
Pressure @ blowers	5.5 psi

Air flow per blower @ required pressure 1350 SCFM

Blowers required w/o standby 4.2

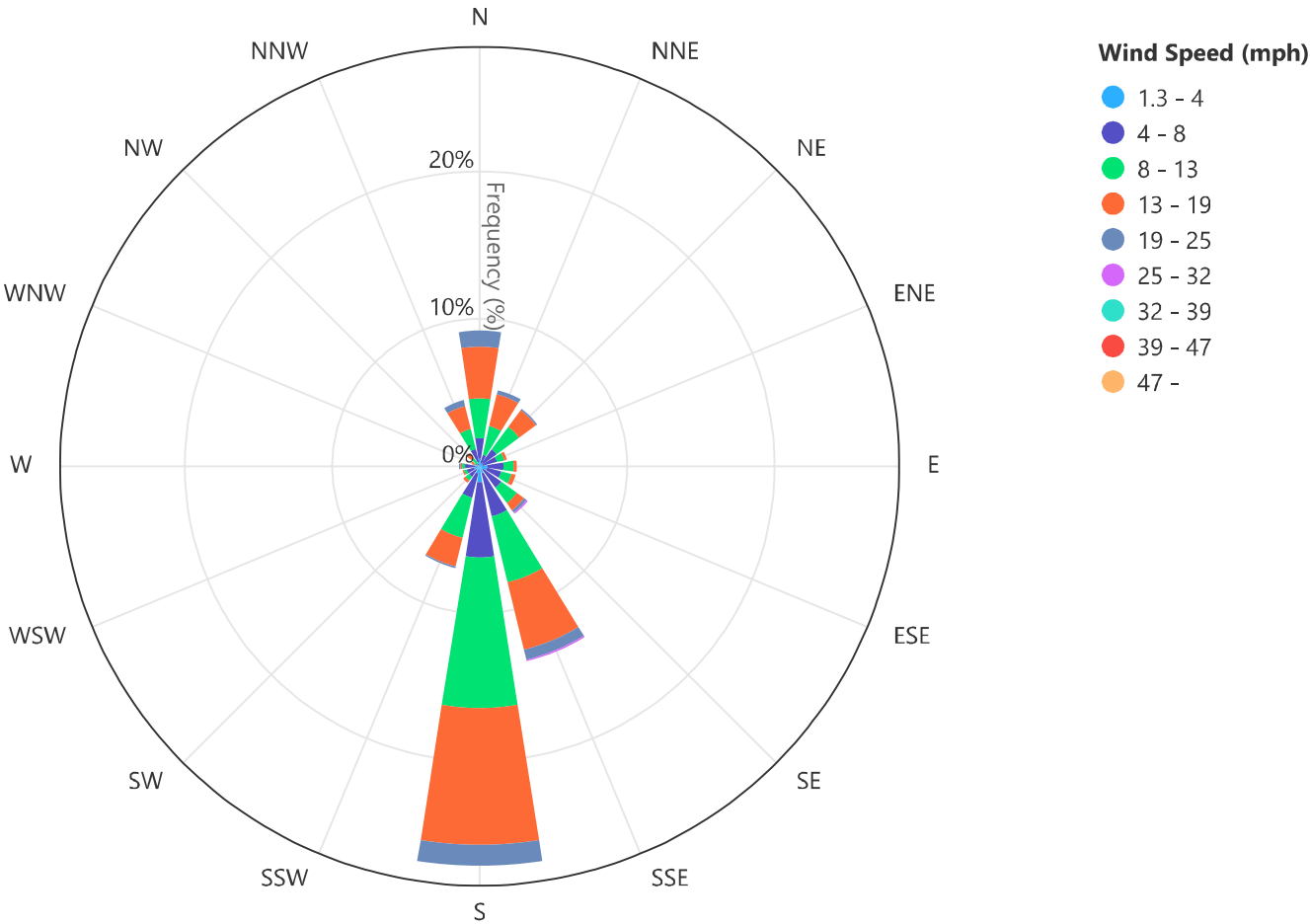
Total blowers required 6

Attachment P – Wind Rose

AUSTIN BERGSTROM INTL AP (TX) Wind Rose



January 01, 2025 - July 23, 2025
Sub-Interval: January 1 - December 31, 0 - 24



Click and drag to zoom

Attachment Q – Sewage Sludge Solids Management Plan

Doyle Overton Road WWTP Solids Management Plan

Phase I:

Influent Design flow = 0.1 MGD
 Influent BOD₅ Concentration = 250 mg/L
 Aerobic Digester Volume = 35,607 gallons
 Aeration Basin MLSS = 3,000 mg/L

Table 1 – Sludge Production (Phase I)

Solids Generated	100% Flow	75% Flow	50% Flow	25% Flow
Influent BOD₅ (lb/day)	209	156	104	52
Dry Sludge Produced (lb/day)*	73	55	37	18
Wet Sludge Produced (lb/day)	4,868	3,651	2,434	1,217
Volume of Wet Sludge Produced (gallons)	584	438	292	146

*Assuming 0.35 lbs of digested dry sludge produced per pound of influent BOD₅ at average temperatures and 1.5% solids concentration in the digester.

Table 2 – Sludge Removal Schedule (Phase I)

Removal Schedule (days)	100% Flow	75% Flow	50% Flow	25% Flow
Days Between Sludge Removal	70	94	140	281

Phase II:

Influent Design flow = 0.25 MGD
 Influent BOD₅ Concentration = 250 mg/L
 Aerobic Digester Volume = 106,822 gallons
 Aeration Basin MLSS = 3,000 mg/L

Table 3 – Sludge Production (Phase II)

Solids Generated	100% Flow	75% Flow	50% Flow	25% Flow
Influent BOD₅ (lb/day)	522	391	261	156
Dry Sludge Produced (lb/day)*	183	137	91	46
Wet Sludge Produced (lb/day)	12,170	9,128	6,085	3,043
Volume of Wet Sludge Produced (gallons)	1,459	1,094	730	365

*Assuming 0.35 lbs of digested dry sludge produced per pound of influent BOD₅ at average temperatures and 1.5% solids concentration in the digester.

Table 2 – Sludge Removal Schedule (Phase II)

Removal Schedule (days)	100% Flow	75% Flow	50% Flow	25% Flow
Days Between Sludge Removal	70	94	140	281

Phase III:

Influent Design flow = 0.99 MGD

Influent BOD₅ Concentration = 250 mg/L

Aerobic Digester Volume = 314,182 gallons

Aeration Basin MLSS = 3,000 mg/L

Table 3 – Sludge Production (Phase III)

Solids Generated	100% Flow	75% Flow	50% Flow	25% Flow
Influent BOD₅ (lb/day)	2,065	1,549	1,033	516
Dry Sludge Produced (lb/day)*	723	542	361	181
Wet Sludge Produced (lb/day)	48,195	36,146	24,097	12,049
Volume of Wet Sludge Produced (gallons)	5,779	4,334	2,889	1,445

*Assuming 0.35 lbs of digested dry sludge produced per pound of influent BOD₅ at average temperatures and 1.5% solids concentration in the digester.

Table 2 – Sludge Removal Schedule (Phase III)

Removal Schedule (days)	100% Flow	75% Flow	50% Flow	25% Flow
Days Between Sludge Removal	57	76	114	228

*Assumes sludge hauled wet at 1.5% solids from digester in a 6,000 gallon tanker.

Sludge will be wasted from the RAS flow stream to the aerobic digester. Sludge solids will be stabilized in the digester; supernatant will be decanted from the digester and returned to the facility headworks for treatment.

Liquid digested sludge will be removed from the digester for disposal on regular basis as required. one (1) 34ft x 14ft digester is proposed for Phase I, the calculated mean cell residence time (MCRT) for the digester storage volume of 35,670 gallons will be approximately 70 days at 100% capacity and annual average digested sludge production of 73 lb/day. Three (3) 34ft x 14ft digesters are proposed for Phase II, the calculated mean cell residence time (MCRT) for the digester storage volume of 106,822 gallons will be approximately 54 days at 100% capacity and annual average digested sludge production of 183 lb/day. Three (3) 34ft x 14ft and three (3) digesters are proposed for Phase III, the calculated mean cell residence time (MCRT) for the digester storage volume of 314,182 gallons will be approximately 57 days at 100% capacity and annual average digested sludge production of 723 lb/day. The digested sludge will be wet hauled and transported by a registered hauler (to be determined) to a landfill.