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

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 residuals 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 residuals domésticas tratadas.

Se espera que las descargas de la instalación contengan demanda bioquímica de oxígeno, sólidos suspendidos totals, nitrógeno ammoniacal y fósforo total. El efluente residencial unifamiliar estará tratado por una serie de procesos convencionales de la planta de tratamiento de aguas residuals inclutendo cribado, aireación, clarificación, digestión, filtración, y la desinfección.

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

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

PROPOSED PERMIT NO. WQ0016860001

APPLICATION. PLI I-A, 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. WQ0016860001 (EPA I.D. No. TX0148318) 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 2,306.4 feet northwest of the intersection of Doyle Overton Road and Hokanson Road, near the city of Del Valle, in Travis County, Texas 78617. The discharge route will be from the plant site to an unnamed tributary; thence to Maha Creek; thence to Cedar Creek; thence to the Colorao River Above La Grange. TCEQ received this application on August 13, 2025. The permit application will be available for viewing and copying at Elroy Community Library, Circulation Desk, 13512 Farm-to-Market Road 812, Del Valle, in Travis 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=-97.63394,30.09351&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-A, LP at the address stated above or by calling Ms. Kam Grace, Project Manager, at 512-693-2140.

Issuance Date: September 11, 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. WQ00

SOLICITUD. PLI I-A, 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. WQ0000016860001 (EPA I.D. No. TX0148318) 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 a 2,306.4 pies al noroeste de la intersección de Doyle Overton Road y Hokanson Road cerca de la ciudad de Del Valle, en el Condado de Travis, Texas 78617. La ruta de descarga será desde el sitio de la planta hasta un afluente sin nombre; de allí a Maha Creek; de allí a Cedar Creek; de allí al río Colorao por encima de La Grange. La TCEQ recibió esta solicitud el 13 de agosto de 2025. La solicitud para el permiso estará disponible para leerla y copiarla en la Biblioteca Comunitaria de Elroy, Escritorio de Circulación, 13512 Farm-to-Market Road 812, Del Valle, en el Condado de Travis, 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=-97.63394,30.09351&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 especifico. Si desea que se agrega su nombre en una de las listas designe cual lista(s) y envía por correo su pedido a la Oficina del Secretario Principal de la 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-A, LP a la dirección indicada arriba o llamando a Kam Grace al 512-693-2140.

Fecha de emisión: 11 de septiembre de 2025

AUGUST 2025
DOYLE OVERTON ROAD WWTP
DOMESTIC WASTEWATER PERMIT APPLICATION (TPDES)

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

Kimley»Horn

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

Kimley»Horn

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

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): WQ00Click to enter text.

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

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

For TCEQ Use Only

Segment Number _____County _____
Expiration Date _____Region_____
Permit Number _____

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION ADMINISTRATIVE REPORT 1.0

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

Section 1. Application Fees (Instructions Page 26)

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

Flow	New/Major Amendment	Renewal
<0.05 MGD	$350.00 ☐	$315.00 ☐
≥0.05 but <0.10 MGD	$550.00 ☐	$515.00 ☐
≥0.10 but <0.25 MGD	$850.00 ☐	$815.00 ☐
≥0.25 but <0.50 MGD	$1,250.00 ☐	$1,215.00 ☐
≥0.50 but <1.0 MGD	$1,650.00 ☒	$1,615.00 ☐
≥1.0 MGD	$2,050.00 ☐	$2,015.00 ☐

Minor Amendment (for any flow) $150.00 ☐

Payment Information:

Mailed Check/Money Order Number: 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-Applicant 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. 2Suite 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 Riley

Signatory title: Principal

Signature: _____ Date: 5/6/25

(Use blue ink)

Subscribed and Sworn to before me by the said Tim Riley

on this 6th day of May, 20 25.

My commission expires on the 11th day of October, 20 27.

_____

Notary Public

MARY KATHERINE BUTLER
Notary ID #134600396
My Commission Expires
October 11, 2027

[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 Use Only

TCEQ Core Data Form

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

SECTION I: General Information

1. Reason for Submission (*If other is checked please describe in space provided.*)

☒ New Permit, Registration or Authorization (*Core Data Form should be submitted with the program application.*)

☐ Renewal *(Core Data Form should be submitted with the renewal form)* ☐ Other

2. Customer Reference Number *(if issued)*	Follow this link to search for CN or RN numbers in Central Registry**	**3. Regulated Entity Reference Number** *(if issued)*
CN		**RN**

SECTION II: Customer Information

4. General Customer Information | **5. Effective Date for Customer Information Updates** (mm/dd/yyyy)

☒ New Customer ☐ Update to Customer Information ☐ Change in Regulated Entity Ownership
☐ Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)

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-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: ☐ Corporation ☐ Individual Partnership: ☐ General ☒ Limited
Government: ☐ City ☐ County ☐ Federal ☐ Local ☐ State ☐ Other ☐ Sole Proprietorship ☐ Other:

12. Number of Employees
☒ 0-20 ☐ 21-100 ☐ 101-250 ☐ 251-500 ☐ 501 and higher

13. Independently Owned and Operated?
☐ **Yes** ☒ **No**

14. Customer Role (Proposed or Actual) – *as it relates to the Regulated Entity listed on this form. Please check one of the following*

☒ Owner ☐ Operator ☐ Owner & Operator ☐ Other:
☐ Occupational Licensee ☐ Responsible Party ☐ VCP/BSA Applicant

15. Mailing Address:	1100 W 6th 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.)*

☒ New Regulated Entity ☐ Update to Regulated Entity Name ☐ 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.)*

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	

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:	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 6th 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.

☐ Dam Safety	☐ Districts	☐ Edwards Aquifer	☐ Emissions Inventory Air	☐ Industrial Hazardous Waste
☐ Municipal Solid Waste	☐ New Source Review Air	☐ OSSF	☐ Petroleum Storage Tank	☐ PWS
☐ Sludge	☐ Storm Water	☐ Title V Air	☐ Tires	☐ Used Oil
☐ Voluntary Cleanup	☒ Wastewater	☐ Wastewater Agriculture	☐ Water Rights	☐ Other:

SECTION IV: Preparer Information

40. Name:	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) 693-2190
Signature:	Kameron Grace	**Date:**	08/05/25

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 residuals 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 residuals domésticas tratadas.

Se espera que las descargas de la instalación contengan demanda bioquímica de oxígeno, sólidos suspendidos totals, nitrógeno ammoniacal y fósforo total. El efluente residencial unifamiliar estará tratado por una serie de procesos convencionales de la planta de tratamiento de aguas residuals inclutendo 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.

Not located within any of the listed geographical locations.

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)

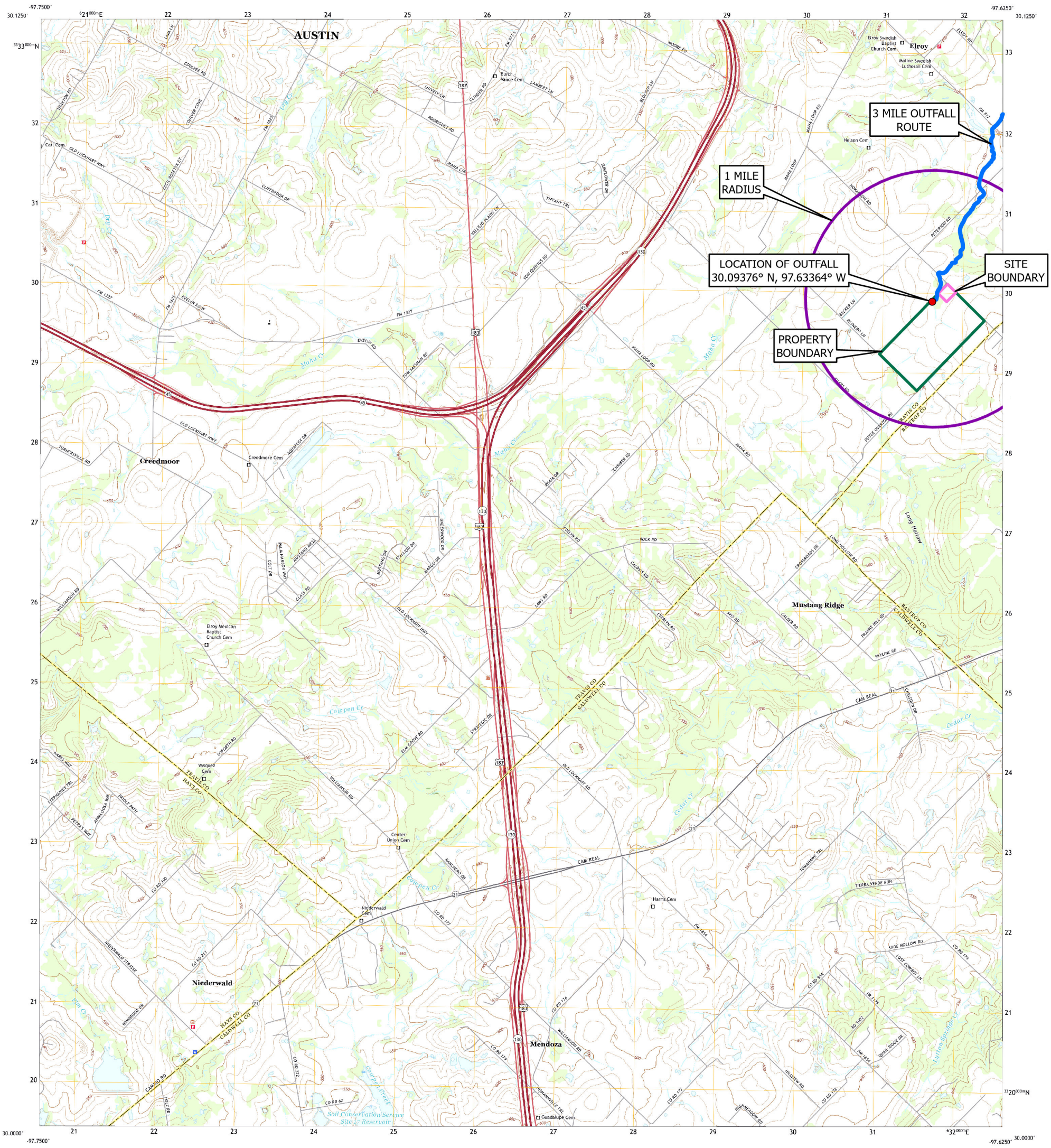
Attachment E – USGS Map

USGS science for a changing world

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

The National Map US Topo

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 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.....NAIP, September 2016 - November 2016
Roads.....U.S. Census Bureau, 2019 - 2019
Names.....GNIS, 1979 - 2022
Hydrography.....National Hydrography Dataset, 2000 - 2018
Contours.....National Elevation Dataset, 2019 - 2019
Boundaries.....Multiple sources; see metadata file 2019 - 2021

Wetlands.....FWS National Wetlands Inventory Not Available

MN
GN
3°41'
65 MILS
0°39'
12 MILS
UTM GRID AND 2019 MAGNETIC NORTH DECLINATION AT CENTER OF SHEET

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

SCALE 1:24 000

1 0.5 0 KILOMETERS 1 2
1000 500 0 METERS 1000 2000
1 0.5 0 1
1000 0 1000 2000 3000 4000 5000 6000 7000 8000 9000 10000
FEET

CONTOUR INTERVAL 10 FEET
NORTH AMERICAN VERTICAL DATUM OF 1988

This map was produced to conform with the National Geospatial Program US Topo Product Standard.

TEXAS
QUADRANGLE LOCATION

1	2	3
4		5
6	7	8

ADJOINING QUADRANGLES
1 Oak Hill
2 Montopolis
3 Webberville
4 Buda
5 Lytton Springs
6 Uhland
7 Lockhart North
8 Dale

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

CREEDMOOR, TX
2022

NSN: 7643016395710
NGA REF NO. USGSX24K16851

N

0 1 2 Miles

DOYLE OVERTON

WASTEWATER PERMIT
USGS MAP - CREEDMOOR

Kimley»Horn

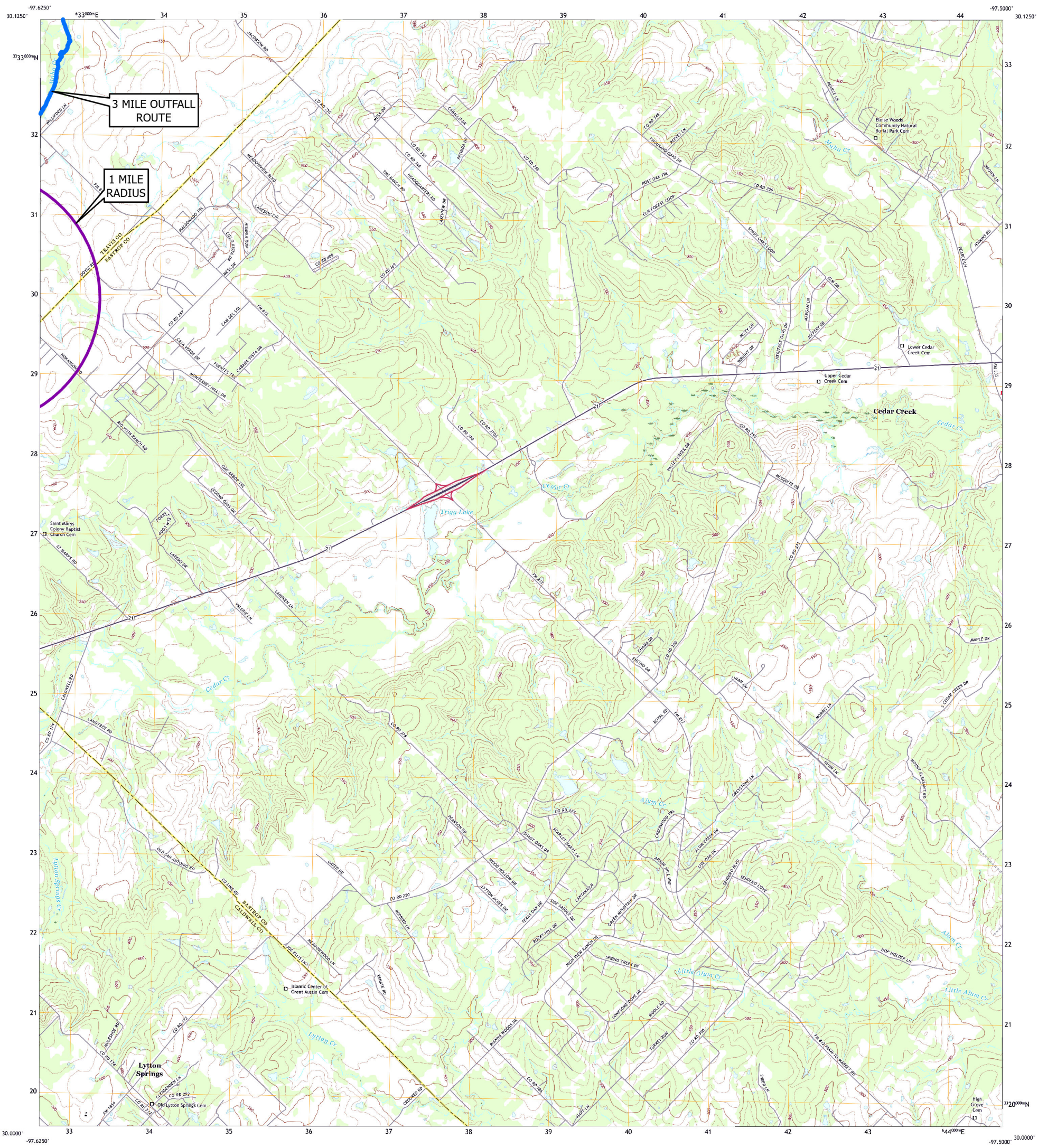
DATE: 07/29/2025
PROJECT NUMBER: 069288805

USGS science for a changing world

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

The National Map US Topo

LYTTON SPRINGS QUADRANGLE
TEXAS
7.5-MINUTE SERIES



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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

MN
GN
0°43'
13 MILS
3°37'
64 MILS
UTM GRID AND 2019 MAGNETIC NORTH DECLINATION AT CENTER OF SHEET

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

SCALE 1:24 000
1 0.5 0 KILOMETERS 1 2
1000 500 0 METERS 1000 2000
1 0.5 0 1
MILES
1000 0 1000 2000 3000 4000 5000 6000 7000 8000 9000 10000
FEET

CONTOUR INTERVAL 10 FEET
NORTH AMERICAN VERTICAL DATUM OF 1988

This map was produced to conform with the National Geospatial Program US Topo Product Standard.

TEXAS
QUADRANGLE LOCATION

1	2	3
4		5
6	7	8

1 Montopolis
2 Webberville
3 Utley
4 Creedmoor
5 Bastrop SW
6 Lockhart North
7 Dale
8 Red Rock
ADJOINING QUADRANGLES

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

LYTTON SPRINGS, TX
2022

NSN 7643016397141
NGA REF NO.USGS24K27083

N

0 1 2 Miles

DOYLE OVERTON

WASTEWATER PERMIT
USGS MAP - LYTTON SPRINGS

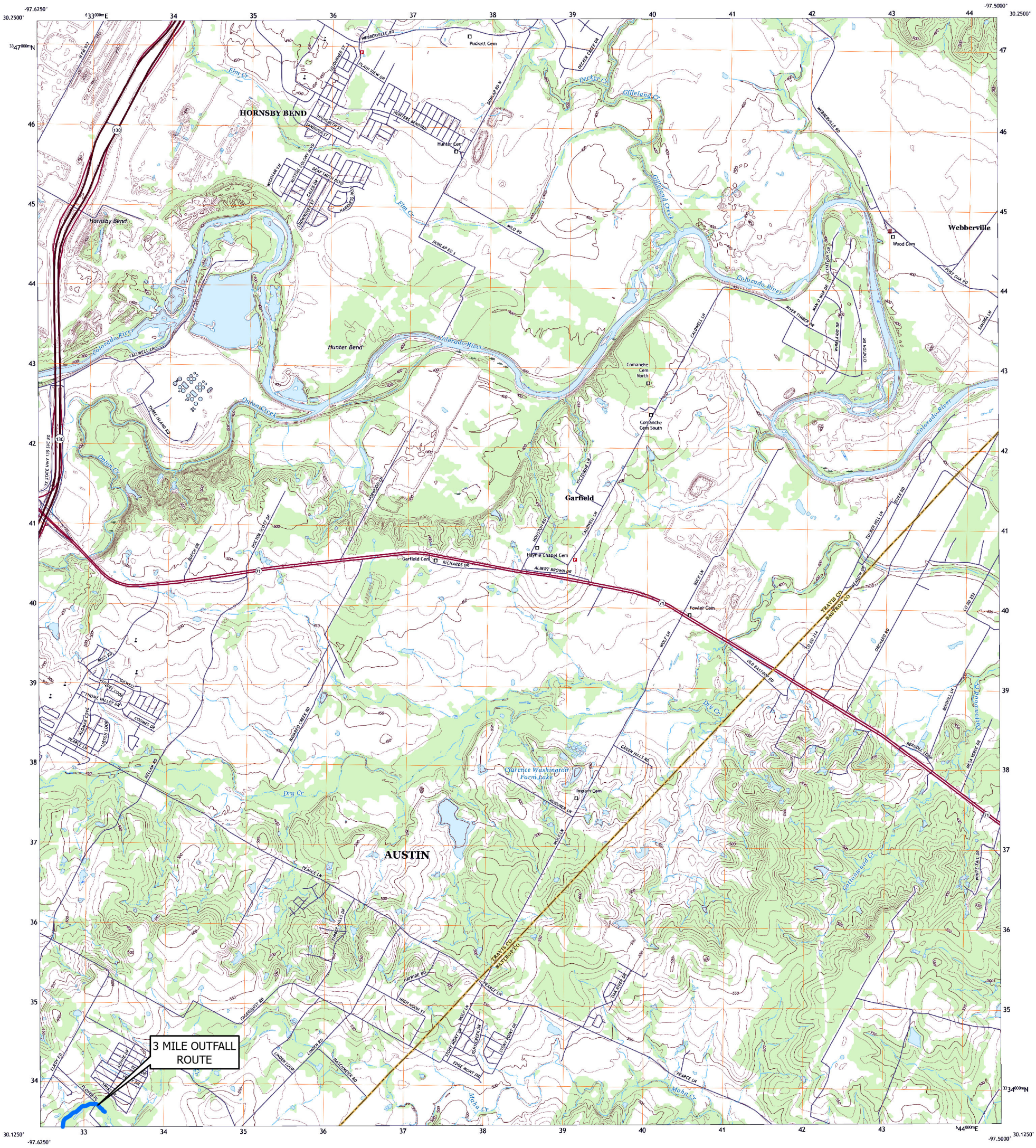
Kimley»Horn

DATE: 06/18/2025
PROJECT NUMBER: 069288805

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

The National Map US Topo

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 1 000-meter grid:Universal Transverse Mercator, Zone 14R

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Roads.....U.S. Census Bureau, 2015 - 2019
Names.....GNIS, 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

UTM GRID AND 2019 MAGNETIC NORTH DECLINATION AT CENTER OF SHEET
MN
GN
3°37' 64 MILS
0°43' 13 MILS
U.S. National Grid
100,000-m Square ID
PU
Grid Zone Designation 14R

SCALE 1:24 000
1 0.5 0 KILOMETERS 1 2
1000 500 0 METERS 1000 2000
1 0.5 0 1
MILES
1000 0 1000 2000 3000 4000 5000 6000 7000 8000 9000 10000
FEET

CONTOUR INTERVAL 10 FEET
NORTH AMERICAN VERTICAL DATUM OF 1988

This map was produced to conform with the National Geospatial Program US Topo Product Standard.

TEXAS
QUADRANGLE LOCATION

1 Austin East
2 Manor
3 Elgin West
4 Montopolis
5 Utley
6 Creedmoor
7 Lytton Springs
8 Bastrop SW
ADJOINING QUADRANGLES

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

WEBBERVILLE, TX
2022

NSN 7643-01-639-8814
NGA REF NO.USGSX24K47900

N
0 1 2 Miles

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 Click here to enter text EPA ID No. TX Click here to enter text

   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.

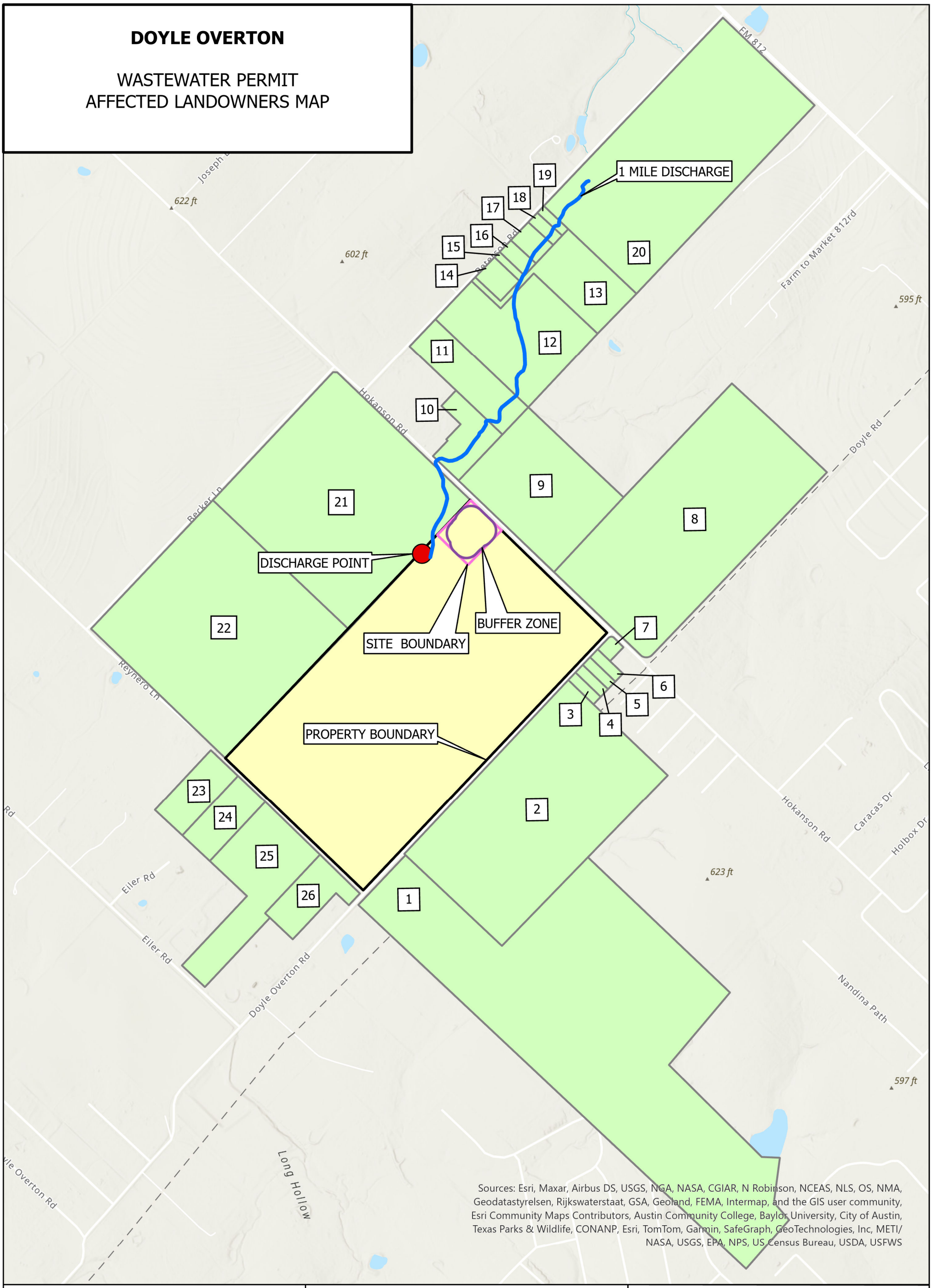
4. Provide a brief history of the property, and name of the architect/builder, if known.

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

N

0 0.13 0.25 0.5 Miles

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
10727 DOYLE OVERTON RD #1
DEL VALLE TX 78617-5519

ARCE MARIA GUADALUPE &
FELIPE ORDUNO ARCE
10719 DOYLE OVERTON RD
DEL VALLE TX 78617-5356

LUCKY RED BARN LLC
207 S SANTA ANITA ST STE G10
SAN GABRIEL CA 91776-1147

JONES J C ROY & ANNA LOU
15300 HOKANSON RD
DEL VALLE TX 78617-5304

MARTINEZ JAVIER & ANA MARIA
15000 HOKANSON RD
DEL VALLE TX 78617-5344

ZONE INVESTMENTS LLC
1101 W 34TH ST #308
AUSTIN TX 78705-1907

LRN & MJS LLC
120 S PROSPECT DR.
CORAL GABLES FL 33133-7006

CASARED SAMMY
908 MANSELL AVE
AUSTIN TX 78702-4142

DE LA FUENTE LINDA
10019 PETERSON RD
DEL VALLE TX 78617-5318

RIOS GILBERT
10011 PETERSON RD
DEL VALLE TX 78617-5318

DODD JANICE MARIE
1654 ILLINOIS AVE
PORT ISABEL TX 78578-4220

RIOS GILBERT
10011 PETERSON RD
DEL VALLE TX 78617-5318

ESCOBAR ROSA JAIMES
4415 SILVERSTONE DR
AUSTIN TX 78744-5600

URQUIDI-WILSON PAMELA D
10001 PETERSON RD
DEL VALLE TX 78617-5318

VELAN PRABHU MANI &
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4215 LAGO VIENTO
AUSTIN TX 78734-1904

HOKANSON FARM THE
11516 LOWESWATER LN
AUSTIN TX 78754-5726

TLK HOLDINGS
7011 BENT OAK CIR
AUSTIN TX 78749-2301

CANTU THOMAS
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RIOS GILBERT
10011 PETERSON RD
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ESCOBAR ROSA JAIMES
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DEL VALLE TX 78617-5318

VELAN PRABHU MANI &
ARUL SAKTHI VELAN
4215 LAGO VIENTO
AUSTIN TX 78734-1904

HOKANSON FARM THE
11516 LOWESWATER LN
AUSTIN TX 78754-5726

TLK HOLDINGS
7011 BENT OAK CIR
AUSTIN TX 78749-2301

CANTU THOMAS
14806 EILERS RD
AUSTIN TX 78719-9707

CANTU THOMAS
14806 EILERS RD
AUSTIN TX 78719-9707

ESQUEDA LUIS
8818 BULLET PASS
BUDA TX 78610-4845

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
10727 DOYLE OVERTON RD #1
DEL VALLE TX 78617-5519

ARCE MARIA GUADALUPE &
FELIPE ORDUNO ARCE
10719 DOYLE OVERTON RD
DEL VALLE TX 78617-5356

LUCKY RED BARN LLC
207 S SANTA ANITA ST STE G10
SAN GABRIEL CA 91776-1147

JONES J C ROY & ANNA LOU
15300 HOKANSON RD
DEL VALLE TX 78617-5304

MARTINEZ JAVIER & ANA MARIA
15000 HOKANSON RD
DEL VALLE TX 78617-5344

ZONE INVESTMENTS LLC
1101 W 34TH ST #308
AUSTIN TX 78705-1907

LRN & MJS LLC
120 S PROSPECT DR.
CORAL GABLES FL 33133-7006

CASARED SAMMY
908 MANSELL AVE
AUSTIN TX 78702-4142

DE LA FUENTE LINDA
10019 PETERSON RD
DEL VALLE TX 78617-5318

RIOS GILBERT
10011 PETERSON RD
DEL VALLE TX 78617-5318

DODD JANICE MARIE
1654 ILLINOIS AVE
PORT ISABEL TX 78578-4220

RIOS GILBERT
10011 PETERSON RD
DEL VALLE TX 78617-5318

ESCOBAR ROSA JAIMES
4415 SILVERSTONE DR
AUSTIN TX 78744-5600

URQUIDI-WILSON PAMELA D
10001 PETERSON RD
DEL VALLE TX 78617-5318

VELAN PRABHU MANI &
ARUL SAKTHI VELAN
4215 LAGO VIENTO
AUSTIN TX 78734-1904

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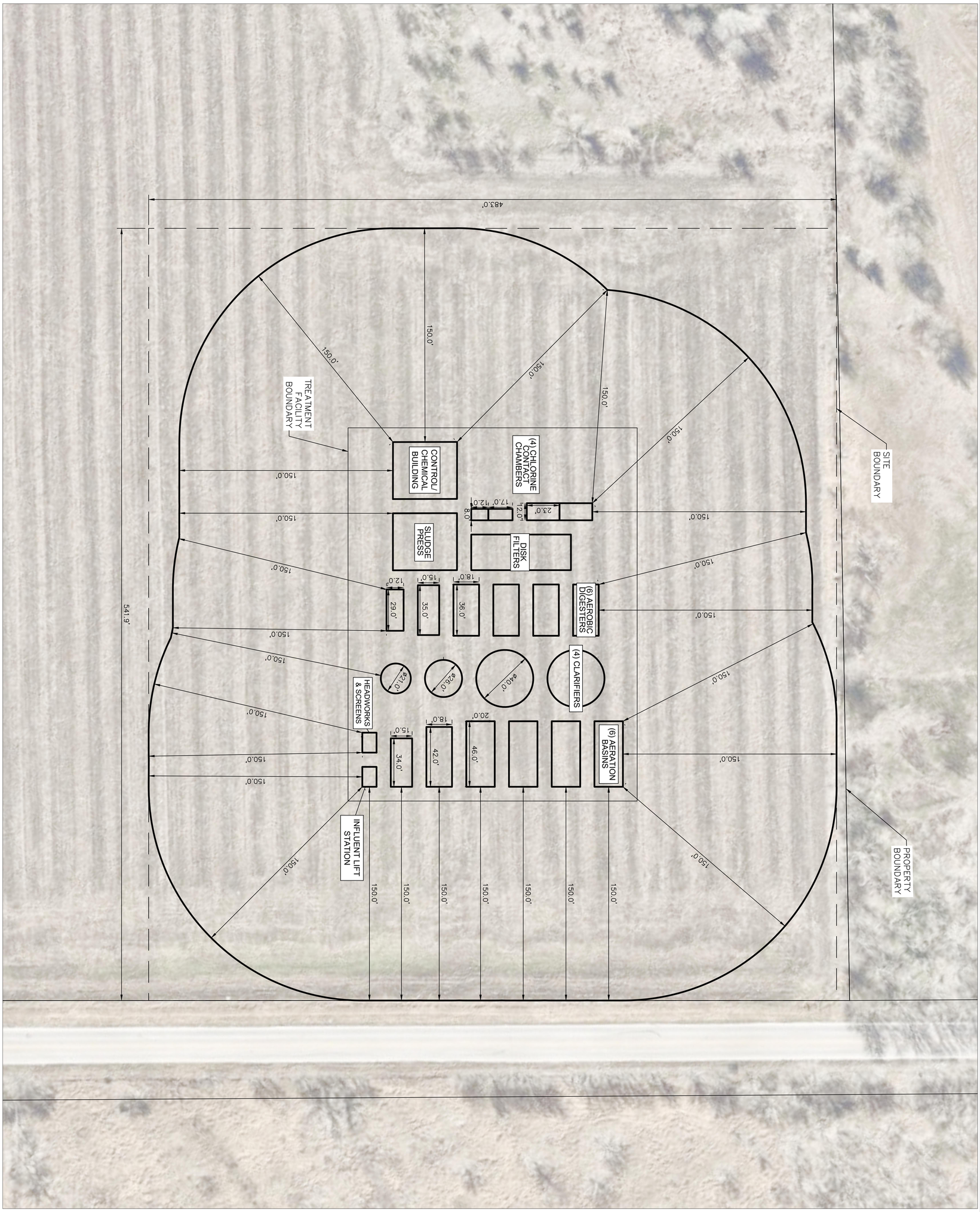
BUDA TX 78610-4845

JAIMES JOSE LUIS
6910 CARVER AVE APT B
AUSTIN TX 78752-3213

Attachment H – Buffer Zone Map



GRAPHIC SCALE IN FEET
0 15 30 60

SHEET NUMBER	DOYLE OVERTON WWTP DEL VALLE, TEXAS	BUFFER ZONE MAP	KHA PROJECT 069288805 DATE JULY 2025 SCALE: AS SHOWN	Preliminary 08/08/2025 11:22:48 AM	Kimley»Horn	No. REVISIONS DATE BY

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:

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.
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 BOD_5 concentration of the sludge, and the design BOD_5 concentration of the influent from the collection system. Also note if this information has or has 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 BOD_5 concentration of the septic waste, and the design BOD_5 concentration of the influent from the collection system. Also note if this information has or has not changed since the last permit action.

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). W***ater treatment facilities*** discharging filter backwash water, complete Table 1.0(3). Provide copies of the laboratory results sheets. **These tables are not applicable for a minor amendment without renewal.** See the instructions for guidance.

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

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

Pollutant	Average Conc.	Max Conc.	No. of Samples	Sample Type	Sample Date/Time
$CBOD_5$, mg/l					
Total Suspended Solids, mg/l					
Ammonia Nitrogen, mg/l					
Nitrate Nitrogen, mg/l					
Total Kjeldahl Nitrogen, mg/l					
Sulfate, mg/l					
Chloride, mg/l					
Total Phosphorus, mg/l					
pH, standard units					
Dissolved Oxygen*, mg/l					
Chlorine Residual, mg/l					
E.coli (CFU/100ml) freshwater					
Entercocci (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 $1x10^{-7}$ 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 BOD_5 Concentration in mg/l: N/A

Average Influent Loading (lbs/day = total average flow X average BOD_5 conc. X 8.34): N/A

Provide the source of the average organic strength or BOD_5 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 BOD5 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 48453C0710J.

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 it 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.

☐ Oil field activities
☐ Urban runoff
☐ Upstream discharges
☐ Agricultural runoff
☐ Septic tanks
☒ Other(s), specify: None

B. Waterbody uses

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

- ☐ Livestock watering
- ☐ Irrigation withdrawal
- ☐ Fishing
- ☐ Domestic water supply
- ☐ Park activities
- ☐ Contact recreation
- ☐ Non-contact recreation
- ☐ Navigation
- ☐ Industrial water supply
- ☐ Other(s), specify: N/A

C. Waterbody aesthetics

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

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

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:

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

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

For existing authorizations, provide Registration Number: Click to enter text.

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

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

Table 3.0(1) – Land Application Site Crops

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

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

Table 3.0(2) – Storage and Evaporation Ponds

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

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

Attachment: Click to enter text.

Section 4. Flood and Runoff Protection (Instructions Page 67)

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

☐ Yes ☐ No

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

Click to enter text.

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

Click to enter text.

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

Click to enter text.

Section 5. Annual Cropping Plan (Instructions Page 67)

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

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

Section 6. Well and Map Information (Instructions Page 68)

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

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

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

Table 3.0(3) – Water Well Data

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

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

Attachment: Click to enter text.

Section 7. Groundwater Quality (Instructions Page 68)

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

Attachment: Click to enter text.

Are groundwater monitoring wells available onsite? ☐ Yes ☐ No

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

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

Attachment: Click to enter text.

Section 8. Soil Map and Soil Analyses (Instructions Page 69)

A. Soil map

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

Attachment: Click to enter text.

B. Soil analyses

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

Attachment: Click to enter text.

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

Table 3.0(4) – Soil Data

Soil Series	Depth from Surface	Permeability	Available Water Capacity	Curve Number

Section 9. Effluent Monitoring Data (Instructions Page 70)

Is the facility in operation?

☐ Yes ☐ No

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

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

Table 3.0(5) – Effluent Monitoring Data

Date	30 Day Avg Flow MGD	BOD5 mg/l	TSS mg/l	pH	Chlorine Residual mg/l	Acres irrigated

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 BOD_5 loading rate, in lbs BOD_5/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 Equivalency 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 *i*nstructions?

☐ 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 WTTP 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

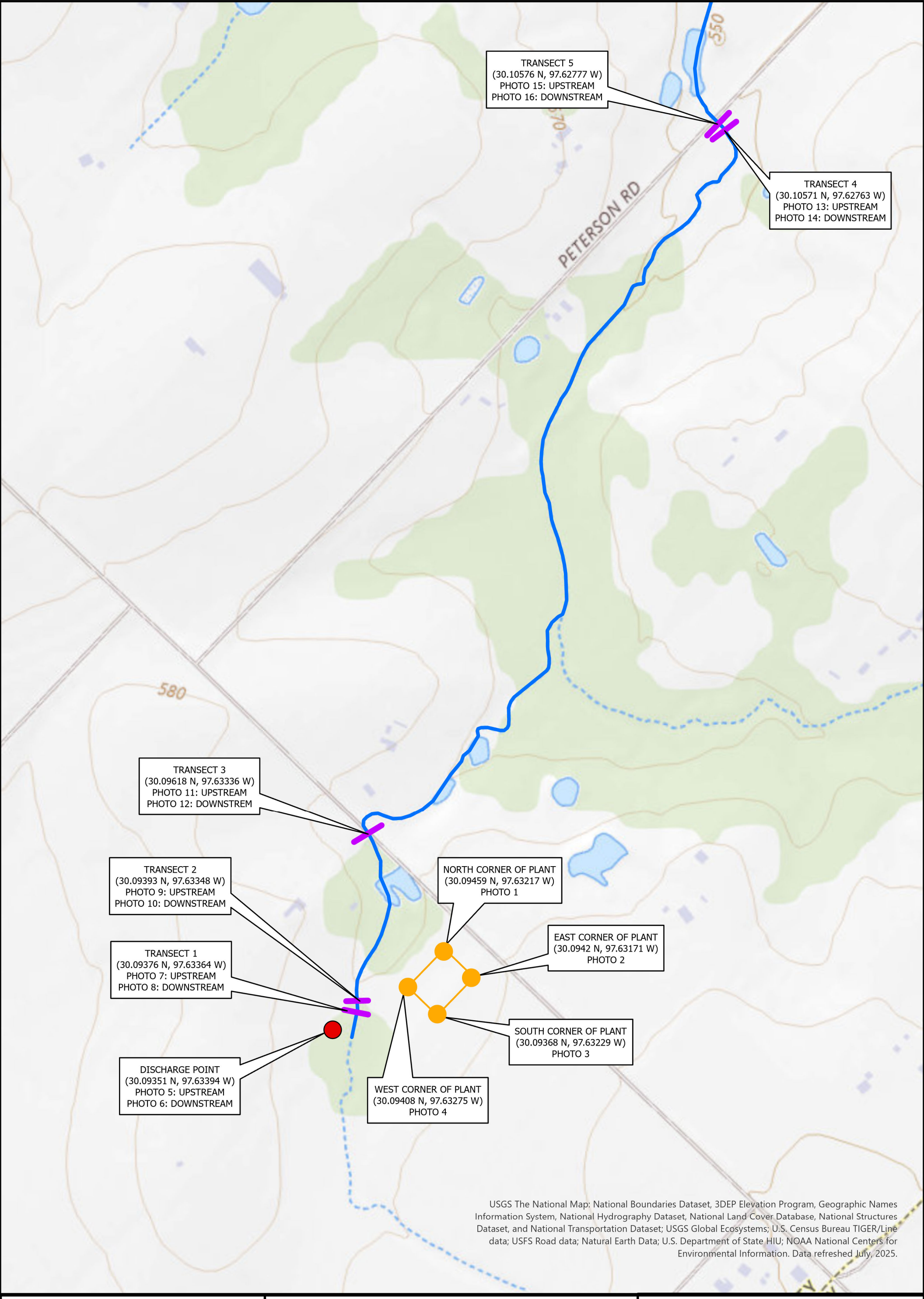
Kimley»Horn

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

Kam Grace
Project Manager



N

0 0.1 0.2 Miles

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

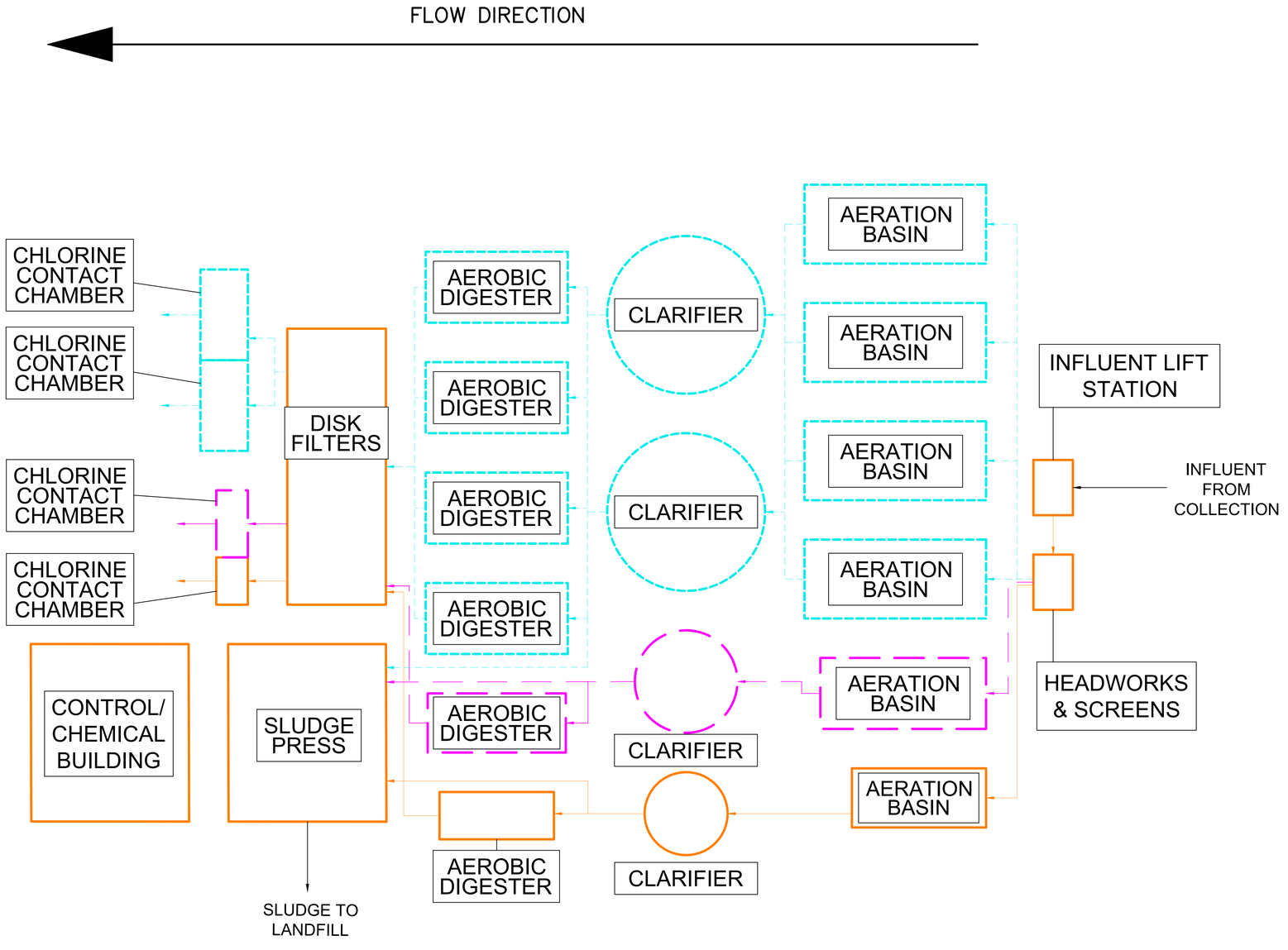
Photo 13: Transect 4, Upstream

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

No.	REVISIONS	DATE	BY

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

Preliminary
08/08/2025 11:22:48 AM

KHA PROJECT 069288805
DATE JULY 2025

PROCESS FLOW DIAGRAM

DOYLE OVERTON WWTP
DEL VALLE, TEXAS

SHEET NUMBER

Attachment L – Site Drawing

PHASE 1

PHASE 2

PHASE 3

LOCATION OF PROPOSED OUTFALL

PROPERTY BOUNDARY

SITE BOUNDARY

CHLORINE CONTACT CHAMBER

CHLORINE CONTACT CHAMBER

CHLORINE CONTACT CHAMBER

CHLORINE CONTACT CHAMBER

DISK FILTERS

CONTROL/ CHEMICAL BUILDING

SLUDGE PRESS

AEROBIC DIGESTER

AEROBIC DIGESTER

AEROBIC DIGESTER

AEROBIC DIGESTER

AEROBIC DIGESTER

CLARIFIER

CLARIFIER

CLARIFIER

CLARIFIER

AERATION BASIN

AERATION BASIN

AERATION BASIN

AERATION BASIN

AERATION BASIN

AERATION BASIN

HEADWORKS & SCREENS

INFLUENT LIFT STATION

TREATMENT FACILITY BOUNDARY

HOKANSON RD

GRAPHIC SCALE IN FEET
0 15 30 60

No.	REVISIONS	DATE	BY

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

Preliminary
08/05/2025 11:22:49 AM

KHA PROJECT 069288805
DATE JULY 2025
SCALE: AS SHOWN

SITE DRAWING

DOYLE OVERTON WWTP
DEL VALLE, TEXAS

SHEET NUMBER

Attachment M – CCN Letter

Kimley»Horn

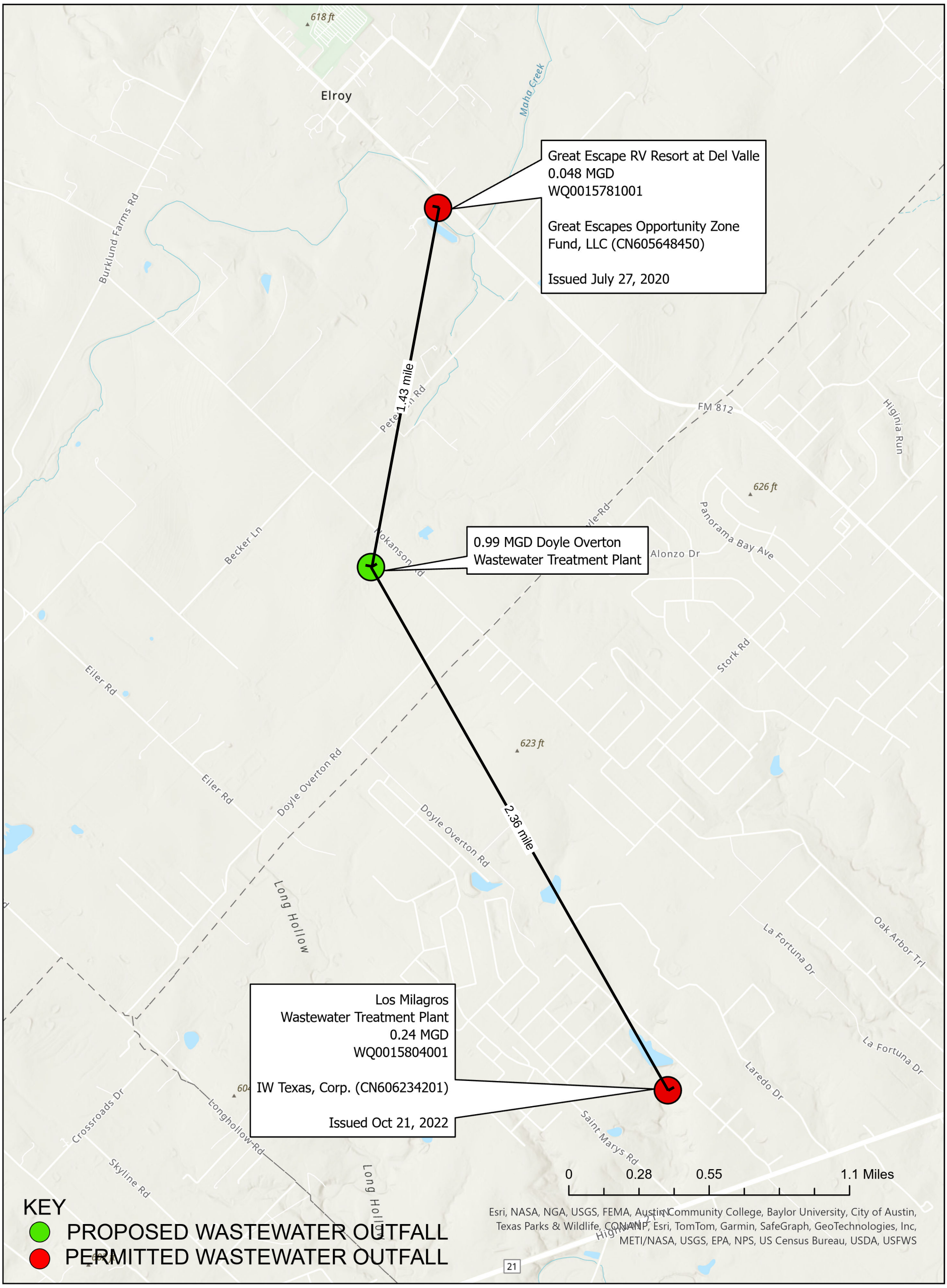
Dear Texas Commission on Environmental Quality,

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

Kam Grace
Project Manager

Attachment N – Nearby Plants



N

DOYLE OVERTON WWTP REGIONALIZATION MAP

Kimley»Horn

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

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 : $CBOD_5$ =5 mg/l; TSS = 5 mg/l; NH_3-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			5,957	ft^3
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	ft^3
Volume greater than required			YES	
Organic Loading			34.07	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	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	ft^3 / lb. BOD_5 / day
TCEQ Minimum sludge retention time			60	Days
Volume required			4,170	ft^3
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	ft^3
Volume greater than required			YES	
Organic Loading			20.03	ft^3 / lb. BOD_5 / day

Chlorine Contact Chamber

TCEQ Minimum detention time (Qpk)			20	min.	
TCEQ Minimum volume (Qpk)			743	ft^3	
Volume required			743	ft^3	
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		Greater than required?	YES
Detention Time	21.71	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	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)

Air required in aeration basin = 434 SCFM

$$= \frac{\{(\text{lb BOD}) * (\text{lb Oxygen / lb BOD})\}}{(\text{T.E.})\ (\text{lb. Oxygen / lb. air})\ (\text{lb. air / cu. ft.})\ (\text{min / day})}$$

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		Applies to Phases 1 and 2
			Phase 1
Date:	5/7/2025		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 : $CBOD_5$ =5 mg/l; TSS = 5 mg/l; NH_3-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			14,893	ft^3			
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	ft^3			
Volume greater than required			YES				
Organic Loading			34.31	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	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		2,320 ft^3
					Greater than required?		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

$$= \frac{\{(\text{lb BOD}) * (\text{lb Oxygen / lb BOD})\}}{(\text{T.E.})\ (\text{lb. Oxygen / lb. air})\ (\text{lb. air / cu. ft.})\ (\text{min / day})}$$

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	

		Applies to All Phases
Project:	Doyle Overton Road Wastewater Treatment Plant	Phase 1
		Phase 2
Date:	5/7/2025	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 : $CBOD_5$ =5 mg/l; TSS = 5 mg/l; NH_3-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		7,840	ft^3
					Greater than required?		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

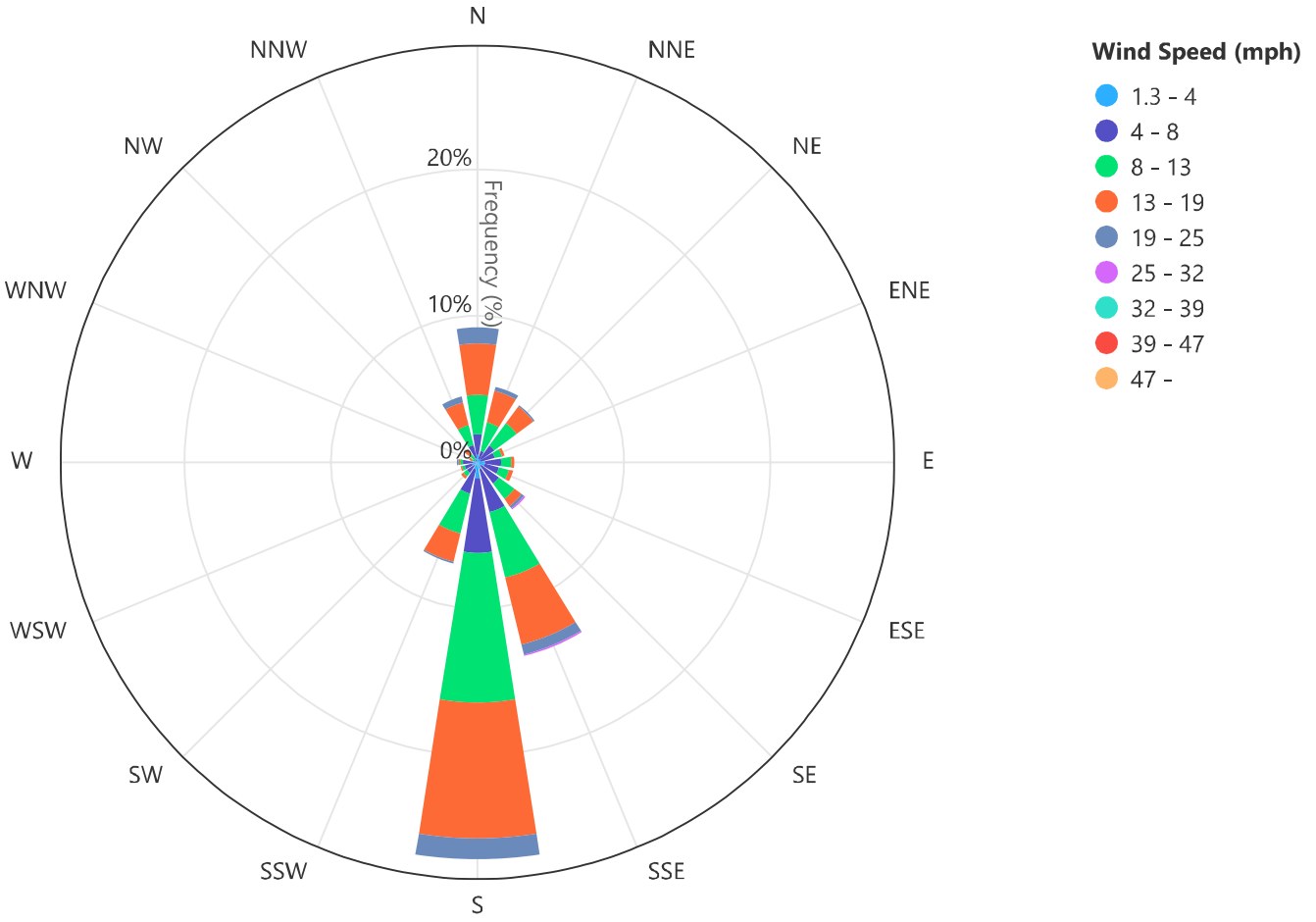
$$= \frac{\{(\text{lb BOD}) * (\text{lb Oxygen / lb BOD})\}}{(\text{T.E.})\ (\text{lb. Oxygen / lb. air})\ (\text{lb. air / cu. ft.})\ (\text{min / day})}$$

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 BOD_5 (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 BOD_5 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 BOD_5 (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 BOD_5 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 BOD_5 (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 BOD_5 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.

Kimley»Horn

September 4, 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: **Doyle Overton Road WWTP**
Application for Proposed Permit No. WQ0016860001
EPA I.D. No. TX0148318, CN606417384, RN112265285

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 August 22nd, 2025. The responses to your comments are as follows:

1. Correct. The facility's physical location description should be 2,306.4 feet northeast from Hokanson Road and Doyle Overton Road.

2. The facility's physical location description has been updated throughout the application.

3. Administrative Report 1.0, Section 3, item A has been completed appropriately. Legal entity name provided on SOS application is PLI I-A, LP.

4. Core Data Form, Section II, item 6 has been completed appropriately. Legal entity name provided on SOS application is PLI I-A, LP.

5. The Landowners Labels in a Word Document typed in Avery 5160 format have been added as an attachment to this email.

6. Permitted name should be PLI I-A, LP rather than Peregrine Land Investments GP I, LLC.

7. Spanish NORI is attached.

You may contact me with any requests or questions at Kam.Grace@kimley-horn.com or by phone at 512-693-2140.

Sincerely,

KIMLEY-HORN AND ASSOCIATES, INC.

Texas Firm No. 928

Kam Grace, E.I.T.

Project Manager

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 2,306.4 feet northwest 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

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 2,306.4 feet northwest 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

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.)*

☒ New Regulated Entity ☐ Update to Regulated Entity Name ☐ 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.)*

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 and effluent discharge point are located 2,306.4 feet northwest of the intersection of Doyle Overton Road and Hokanson Road.

26. Nearest City	State	Nearest ZIP Code
Del Valle	TX	78617

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:	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 6th 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 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 2,306.4 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 residuals de proceso de lodos activados convencional que funciona en modo de mezcla completa. La instalación estará ubicada en 2,306.4 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 residuals domésticas tratadas.

Se espera que las descargas de la instalación contengan demanda bioquímica de oxígeno, sólidos suspendidos totals, nitrógeno ammoniacal y fósforo total. El efluente residencial unifamiliar. estará tratado por una serie de procesos convencionales de la planta de tratamiento de aguas residuals inclutendo cribado, aireación, clarificación, digestión, filtración, y la 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: PLI I-A, LP

   Permit No. WQ00 Click here to enter text EPA ID No. TX Click here to enter text

   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 2,306.4 feet northwest of the intersection of Doyle Overton Road and Hokanson Road in Del Valle, Texas, 78617, Travis 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 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 2,306.4 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.

Corporations Section
P.O.Box 13697
Austin, Texas 78711-3697

Jane Nelson
Secretary of State

Office of the Secretary of State

October 04, 2023

Attn: DuBois Bryant & Campbell, LLP
DuBois Bryant & Campbell, LLP
303 Colorado St Ste 2300
Austin, TX 78701 USA

RE: PLI I-A, LP
File Number: 805242653

It has been our pleasure to file the certificate of formation for the referenced limited partnership. This letter evidences the existence of the domestic entity as of the effective date noted on the certificate.

Unless exempted, limited partnerships are subject to state tax laws, including franchise tax laws. Shortly, the Comptroller of Public Accounts will be contacting the partnership at its registered office for information that will assist the Comptroller in setting up the franchise tax account for the partnership. Information about franchise tax, and contact information for the Comptroller's office, is available on their web site at https://window.state.tx.us/taxinfo/franchise/index.html.

Limited partnerships do not file annual reports with the Secretary of State. However, a limited partnership that is not required to file a public information report under the Tax Code is subject to periodic reporting requirements with the Secretary of State. It is important for the partnership to continuously maintain a registered agent and office in Texas as this is the address to which the Secretary of State will send a request to file a periodic report. Failure to maintain a registered agent or office in Texas, failure to file a change to the agent or office information, or failure to file a periodic report when requested may result in the involuntary termination of the limited partnership.

If we can be of further service at any time, please let us know.

Sincerely,

Corporations Section
Business & Public Filings Division
(512) 463-5555
Enclosure

Corporations Section
P.O.Box 13697
Austin, Texas 78711-3697

Jane Nelson
Secretary of State

Office of the Secretary of State

CERTIFICATE OF FILING
OF

PLI I-A, LP
File Number: 805242653

The undersigned, as Secretary of State of Texas, hereby certifies that a Certificate of Formation for the above named Domestic Limited Partnership (LP) has been received in this office and has been found to conform to the applicable provisions of law.

ACCORDINGLY, the undersigned, as Secretary of State, and by virtue of the authority vested in the secretary by law, hereby issues this certificate evidencing filing effective on the date shown below.

The issuance of this certificate does not authorize the use of a name in this state in violation of the rights of another under the federal Trademark Act of 1946, the Texas trademark law, the Assumed Business or Professional Name Act, or the common law.

Dated: 09/26/2023

Effective: 09/26/2023

Jane Nelson
Secretary of State

Form 207

Secretary of State
P.O. Box 13697
Austin, TX 78711-3697
FAX: 512/463-5709

Filing Fee: $750

Certificate of Formation
Limited Partnership

Filed in the Office of the Secretary of State of Texas
Filing #: 805242653 09/26/2023
Document #: 1288958320003
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Article 1 - Entity Name and Type

The filing entity being formed is a limited partnership. The name of the entity is:

PLI I-A, LP

The name must contain the words "Limited Partnership," or "Limited," or the abbreviation "L.P.," "LP," or "Ltd." The name must not be the same as, deceptively similar to or similar to that of an existing corporate, limited liability company, or limited partnership name on file with the secretary of state. A preliminary check for "name availability" is recommended.

Article 2 - Principal Office

The address of the principal office in the United States where records of the partnership are to be kept or made available is set forth below:

1100 West 6th Street, Austin, TX, USA 78703

Article 3 – Registered Agent and Registered Office

☑ A. The initial registered agent is an organization (cannot be limited partnership named above) by the name of:

C T Corporation System

OR

☐ B. The initial registered agent is an individual resident of the state whose name is set forth below:

C. The business address of the registered agent and the registered office address is:

Street Address:
1999 Bryan St. Suite 900 Dallas TX 75201-3136

Consent of Registered Agent

☐ A. A copy of the consent of registered agent is attached.

OR

☑ B. The consent of the registered agent is maintained by the entity.

Article 4 - General Partner Information

The name and address of each general partner are as follows:

General Partner 1: (Business Name) **PLI GP I-A, LLC**

Address: **1100 West 6th Street Austin TX, USA 78703**

Supplemental Provisions / Information

[The attached addendum, if any, is incorporated herein by reference.]

Effectiveness of Filing

☑ A. This document becomes effective when the document is filed by the secretary of state.

OR

☐ B. This document becomes effective at a later date, which is not more than ninety (90) days from the date of its signing. The delayed effective date is:

Initial Mailing Address

Address to be used by the Comptroller of Public Accounts for purposes of sending tax information.

The initial mailing address of the filing entity is:

1100 West 6th Street
Austin, TX 78703
USA

Execution

The undersigned affirms that the person designated as registered agent has consented to the appointment. The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument and certifies under penalty of perjury that the undersigned is authorized under the provisions of law governing the entity to execute the filing instrument.

Signature of General Partner 1: **Tim Riley, Manager of PLI GP I-A, LLC, General Partner**

FILING OFFICE COPY

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
10727 DOYLE OVERTON RD #1
DEL VALLE TX 78617-5519

ARCE MARIA GUADALUPE &
FELIPE ORDUNO ARCE
10719 DOYLE OVERTON RD
DEL VALLE TX 78617-5356

LUCKY RED BARN LLC
207 S SANTA ANITA ST STE G10
SAN GABRIEL CA 91776-1147

JONES J C ROY & ANNA LOU
15300 HOKANSON RD
DEL VALLE TX 78617-5304

MARTINEZ JAVIER & ANA MARIA
15000 HOKANSON RD
DEL VALLE TX 78617-5344

ZONE INVESTMENTS LLC
1101 W 34TH ST #308
AUSTIN TX 78705-1907

LRN & MJS LLC
120 S PROSPECT DR.
CORAL GABLES FL 33133-7006

CASARED SAMMY
908 MANSELL AVE
AUSTIN TX 78702-4142

DE LA FUENTE LINDA
10019 PETERSON RD
DEL VALLE TX 78617-5318

RIOS GILBERT
10011 PETERSON RD
DEL VALLE TX 78617-5318

DODD JANICE MARIE
1654 ILLINOIS AVE
PORT ISABEL TX 78578-4220

RIOS GILBERT
10011 PETERSON RD
DEL VALLE TX 78617-5318

ESCOBAR ROSA JAIMES
4415 SILVERSTONE DR
AUSTIN TX 78744-5600

URQUIDI-WILSON PAMELA D
10001 PETERSON RD
DEL VALLE TX 78617-5318

VELAN PRABHU MANI &
ARUL SAKTHI VELAN
4215 LAGO VIENTO
AUSTIN TX 78734-1904

HOKANSON FARM THE
11516 LOWESWATER LN
AUSTIN TX 78754-5726

TLK HOLDINGS
7011 BENT OAK CIR
AUSTIN TX 78749-2301

CANTU THOMAS
14806 EILERS RD
AUSTIN TX 78719-9707

CANTU THOMAS
14806 EILERS RD
AUSTIN TX 78719-9707

ESQUEDA LUIS
8818 BULLET PASS
BUDA TX 78610-4845

JAIMES JOSE LUIS
6910 CARVER AVE APT B
AUSTIN TX 78752-3213

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-A, 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. WQ0000016860001 (EPA I.D. No. TX0148318) 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 a 2,306.4 pies al noroeste de la intersección de Doyle Overton Road y Hokanson Road cerca de la ciudad de Del Valle, en el Condado de Travis, Texas 78617. La ruta de descarga estará del sitio de la planta a *[description of the discharge route]*. La TCEQ recibió esta solicitud el 13 de agosto de 2025. La solicitud para el permiso estará disponible para leerla y copiarla en la Biblioteca Comunitaria de Elroy, Escritorio de Circulación, 13512 Farm-to-Market Road 812, Del Valle, en el Condado de Travis, 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=-97.63394,30.09351&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 especifico. Si desea que se agrega su nombre en una de las listas designe cual lista(s) y envía por correo su pedido a la Oficina del Secretario Principal de la 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-A, LP a la dirección indicada arriba o llamando a Kam Grace al 512-693-2140.

Fecha de emisión: *[Date notice issued]*

Francesca Findlay

From: Rashid, Nadine <Nadine.Rashid@kimley-horn.com>
Sent: Friday, September 5, 2025 9:03 AM
To: Francesca Findlay
Cc: Werner, Siena; Clements, Ian; Green, Ben; Grace, Kam
Subject: RE: WQ0016860001 : Peregrine Land Investments GP I, LLC
Attachments: Doyle Overton TCEQ NOD Response_Compiled.pdf; Municipal Discharge New Spanish NORI.docx; Mailing Labels_Doyle Overton Road WWTP.doc

Good morning,

Please see attached for the response to the Notice of Deficiency along with associated word documents.

Let us know if you have any questions or need any additional information.

Thank you,

Nadine Rashid, E.I.T.
Kimley-Horn | 5301 Southwest Parkway Suite 100, Building 2, Austin, TX 78735
Direct: (512) 265-5413

From: Francesca Findlay <Francesca.Findlay@tceq.texas.gov>
Sent: Friday, August 22, 2025 4:53 PM
To: Grace, Kam <Kam.Grace@kimley-horn.com>
Cc: BEN.GREEN@KIMLY-HORN.COM
Subject: FW: WQ0016860001 : Peregrine Land Investments GP I, LLC

Dear Ms. Grace:

The attached Notice of Deficiency letter sent on August 22, 2025, requesting additional information needed to declare the application administratively complete. Please send the complete response to my attention September 6, 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.

Francesca Findlay

From: Rashid, Nadine <Nadine.Rashid@kimley-horn.com>
Sent: Wednesday, September 10, 2025 12:15 PM
To: Francesca Findlay
Cc: Werner, Siena; Clements, Ian; Green, Ben; Grace, Kam
Subject: RE: WQ0016860001 : Peregrine Land Investments GP I, LLC
Attachments: 20250910_Core Data Form.pdf

Good afternoon,

Please see attached for the updated Core Data Form, which now includes a revised SOS Number and TX State ID Number.

Let us know if you need any additional information.

Thank you,

Nadine Rashid, E.I.T.
Kimley-Horn | 5301 Southwest Parkway Suite 100, Building 2, Austin, TX 78735
Direct: (512) 265-5413

From: Francesca Findlay <Francesca.Findlay@tceq.texas.gov>
Sent: Wednesday, September 10, 2025 10:24 AM
To: Rashid, Nadine <Nadine.Rashid@kimley-horn.com>
Cc: Werner, Siena <Siena.Werner@kimley-horn.com>; Clements, Ian <Ian.Clements@kimley-horn.com>; Green, Ben <Ben.Green@kimley-horn.com>; Grace, Kam <Kam.Grace@kimley-horn.com>
Subject: RE: WQ0016860001 : Peregrine Land Investments GP I, LLC

Good morning,

I am in the process of admin. completing your application and I noticed that I need an updated document. Please provide an updated Core Data Form. Please provide the following information. Pease update Section II, items 7-8. With the updated Secretary of State number and the updated TX State ID. Number. Please let me know if you have any questions.

Thank you

Francesca Findlay
License & Permit Specialist
ARP Team | Water Quality Division
512-239-2441
Texas Commission on Environmental Quality

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

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Sent: Friday, September 5, 2025 9:03 AM
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Cc: Werner, Siena <Siena.Werner@kimley-horn.com>; Clements, Ian <Ian.Clements@kimley-horn.com>; Green, Ben <Ben.Green@kimley-horn.com>; Grace, Kam <Kam.Grace@kimley-horn.com>
Subject: RE: WQ0016860001 : Peregrine Land Investments GP I, LLC

Good morning,

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Let us know if you have any questions or need any additional information.

Thank you,

Nadine Rashid, E.I.T.
Kimley-Horn | 5301 Southwest Parkway Suite 100, Building 2, Austin, TX 78735
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To: Grace, Kam <Kam.Grace@kimley-horn.com>
Cc: BEN.GREEN@KIMLY-HORN.COM
Subject: FW: WQ0016860001 : Peregrine Land Investments GP I, LLC

> You don't often get email from francesca.findlay@tceq.texas.gov. Learn why this is important

Dear Ms. Grace:

The attached Notice of Deficiency letter sent on August 22, 2025, requesting additional information needed to declare the application administratively complete. Please send the complete response to my attention September 6, 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.

TCEQ Use Only

TCEQ Core Data Form

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

SECTION I: General Information

1. Reason for Submission (*If other is checked please describe in space provided.*)

☒ New Permit, Registration or Authorization (*Core Data Form should be submitted with the program application.*)

☐ Renewal *(Core Data Form should be submitted with the renewal form)*

☐ Other

2. Customer Reference Number *(if issued)*	Follow this link to search for CN or RN numbers in Central Registry**	**3. Regulated Entity Reference Number** *(if issued)*
CN		**RN**

SECTION II: Customer Information

4. General Customer Information

5. Effective Date for Customer Information Updates (mm/dd/yyyy)

☒ New Customer ☐ Update to Customer Information ☐ Change in Regulated Entity Ownership
☐ Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)

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)*

PLI I-A, LP

If new Customer, enter previous Customer below:

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)*
805242653	32091852841	933862830	138387249

11. Type of Customer:

☐ Corporation ☐ Individual Partnership: ☐ General ☒ Limited

Government: ☐ City ☐ County ☐ Federal ☐ Local ☐ State ☐ Other ☐ Sole Proprietorship ☐ Other:

12. Number of Employees

☒ 0-20 ☐ 21-100 ☐ 101-250 ☐ 251-500 ☐ 501 and higher

13. Independently Owned and Operated?

☐ **Yes** ☒ **No**

14. Customer Role (Proposed or Actual) – *as it relates to the Regulated Entity listed on this form. Please check one of the following*

☒ Owner ☐ Operator ☐ Owner & Operator
☐ Occupational Licensee ☐ Responsible Party ☐ VCP/BSA Applicant ☐ Other:

15. Mailing Address:

1100 W 6th 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.)*

☒ New Regulated Entity ☐ Update to Regulated Entity Name ☐ 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.)*

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 and effluent discharge point are located 2,306.4 feet northwest of the intersection of Doyle Overton Road and Hokanson Road.				
26. Nearest City			**State**	**Nearest ZIP Code**	
Del Valle			TX	78617	

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:	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 6th 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.

☐ Dam Safety	☐ Districts	☐ Edwards Aquifer	☐ Emissions Inventory Air	☐ Industrial Hazardous Waste
☐ Municipal Solid Waste	☐ New Source Review Air	☐ OSSF	☐ Petroleum Storage Tank	☐ PWS
☐ Sludge	☐ Storm Water	☐ Title V Air	☐ Tires	☐ Used Oil
☐ Voluntary Cleanup	☒ Wastewater	☐ Wastewater Agriculture	☐ Water Rights	☐ Other:

SECTION IV: Preparer Information

40. Name:	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) 693-2190
Signature:	Kameron Grace	**Date:**	08/05/25