

This file contains the following documents:

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



Este archivo contiene los siguientes documentos:

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



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.

South Central Water Company (CN602602179) proposes to operate Williamson 99 Wastewater Treatment Plant (RN Pending), a domestic wastewater treatment plant. The facility will be located at located at approximately 1.15 miles southeast of the intersection of County Road 439 and County Road 434, in Thorndale, Williamson County, Texas 76577. This permit is to authorize the discharge of treated domestic wastewater to a volume not to exceed an average flow of 700,000 gallons per day.

Discharges from the facility are expected to contain free available chlorine, total residual chlorine, total suspended solids, oil and grease, total iron, pH differences, and temperature differences. Domestic wastewater will be treated by an activated sludge processing plant consisting of the following treatment units: bar screens, aeration basins, digester basins, clarifiers, a lift station, and chlorine contact basins.

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.

South Central Water Company (CN602602179) propone operar Planta de tratamiento de aguas residuales Williamson 99, una planta de tratamiento de aguas residuals domésticas. La instalación está ubicada en aproximadamente 1.15 millas al sureste de la intersección de Camino del Condado 439 y Camino del Condado 434, en Thorndale, Condado de Williamson, Texas 76577. Este permiso es para autorizar la descarga de aguas residuales domésticas tratadas a un volumen que no exceda un flujo promedio de 700,000 galones por día.

Se espera que las descargas de la instalación contengan cloro libre disponible, cloro residual total, sólidos suspendidos totales, aceite y grasa, hierro total, diferencias de pH y diferencias de temperatura. Aguas residuals domésticas. están tratado por una planta de procesamiento de todos activitadoes que consta de las siguientes unidades de tratamiento: pantallas de barras, cuencas de aireación, cuencas de digestores, clarificadores, una estación de bombeo y cuencas de contacto con cloro.

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY



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

PROPOSED PERMIT NO. WQ0016891001

APPLICATION. South Central Water Company, P.O. Box 570177, Houston, Texas 77257, has applied to the Texas Commission on Environmental Quality (TCEQ) for proposed Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0016891001 (EPA I.D. No. TX0148521) to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 700,000 gallons per day. The domestic wastewater treatment facility will be located approximately 1.15 miles southeast of the intersection of County Road 434 and County Road 439, near the city of Thorndale, in Williamson County, Texas 76577. The discharge route will be from the plant site via pipe to a man-made ditch, thence to an unnamed tributary, thence to Soil Conservation Service Site 22 Reservoir, thence to Holynok Creek, thence to Brushy Creek. TCEQ received this application on September 29, 2025. The permit application will be available for viewing and copying at Taylor Public Library, 801 Vance Street, Taylor, in Williamson County, Texas prior to the date this notice is published in the newspaper. The application is available for viewing and copying 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=-97.213888,30.538333&level=18

ALTERNATIVE LANGUAGE NOTICE. Alternative language notice in Spanish is available at: https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications. El aviso de idioma alternativo en español está disponible en https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications.

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

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

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

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

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

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

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

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

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

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

Further information may also be obtained from South Central Water Company at the address stated above or by calling Mr. Jerry Ince, P.E., Ward, Getz & Associates, LLC, at 713-789-1900.

Issuance Date: November 19, 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. WQ0016891001

SOLICITUD. South Central Water Company, P.O. Box 570177, Houston, Texas 77257, ha solicitado a la Comisión de Calidad Ambiental del Estado de Texas (TCEQ) para el propuesto Permiso No. WQ0016891001 (EPA I.D. No. TX 0148521) 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 700,000 galones por día. La planta estará ubicada aproximadamente 1.15 millas al sureste de la intersección de County Road 434 y County Road 439, cerca de la ciudad de Thorndale, en el condado de Williamson, Texas 76577. La ruta de descarga estará del sitio de la planta a través de una tubería a una zanja artificial, de allí a un afluente sin nombre, de allí al embalse del sitio 22 del Servicio de Conservación de Suelos, de allí a Holynok Creek, de allí a Brushy Creek. La TCEQ recibió esta solicitud el 29 de septiembre de 2025. La solicitud para el permiso estará disponible para leerla y copiarla en Biblioteca Pública de Taylor, 801 Vance Street, Taylor, en el condado de Williamson, Texas antes de la fecha de publicación de este aviso en el periódico. La solicitud está disponible para su visualización y copia 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=-97.213888,30.538333&level=18

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

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

COMENTARIO PUBLICO / REUNION PUBLICA. Usted puede presentar comentarios públicos o pedir una reunión pública sobre esta solicitud. El propósito de una reunión pública es dar

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

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

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

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

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

LISTA DE CORREO. Si somete comentarios públicos, un pedido para una audiencia administrativa de lo contencioso o una reconsideración de la decisión del Director Ejecutivo, la Oficina del Secretario Principal enviará por correo los avisos públicos en relación con la

solicitud. Además, puede pedir que la TCEQ ponga su nombre en una o más de las listas correos siguientes (1) la lista de correo permanente para recibir los avisos del solicitante indicado por nombre y número del permiso específico y/o (2) la lista de correo de todas las solicitudes en un condado específico. Si desea que se agrega su nombre en una de las listas designe cual lista(s) y envía por correo su pedido a la Oficina del Secretario Principal de la 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 South Central Water Company a la dirección indicada arriba o llamando a Sr. Jerry Ince, P.E., Ward, Getz & Associates LLC al 713-789-1900.

Fecha de emisión: 19 de noviembre de 2025

Leah Whallon

From: Audrey Anderson <aanderson@wga-llc.com>
Sent: Thursday, November 6, 2025 12:04 PM
To: Leah Whallon; Jerry Ince; Michelle Labrie

Cc: Doug Bailey

Subject: Re: Application for Proposed Permit No. WQ0016891001; South Central Water

Company; Williamson 99 WWTP; Notice of Deficiency 30-Day Will Return Letter

Attachments: 10054_Worksheet-2_Section4.pdf; AffectedLandowners Reference List.pdf; Appendix F -

SPIF Form (20971).pdf; Appendix H - Affected Landowners Mailing Labels.docx;

Williamson 99 - Overall Site Map.pdf; Williamson 99 - Site Map.pdf;

WWTP AffectedLandOwners Landscape 11x17 11062025.pdf; 10053 Section10B.pdf;

10054_Report-1_Section3.pdf; USGS Map_Reduced File Size.pdf

Follow Up Flag: Follow up Flag Status: Flagged

Leah,

Please see the attached documents with the new outfall location. Please let me know if you need anything else.

Thank you,

Audrey Anderson, EIT

Project Engineer



2500 Tanglewilde, Suite 120 | Houston, TX

77063

D: 346.771.5311 O: 713.789.1900

aanderson@wga-llc.com

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From: Leah Whallon < Leah. Whallon@Tceq.Texas.Gov>

Sent: Wednesday, November 5, 2025 10:19 AM

To: Audrey Anderson <aanderson@wga-llc.com>; Jerry Ince

<jince@wga-llc.com>; Michelle Labrie
<Michelle.Labrie@tceq.texas.gov>

Cc: Doug Bailey <doug@southcentralww.com>

Subject: RE: Application for Proposed Permit No. WQ0016891001; South Central Water Company; Williamson 99 WWTP; Notice of

Deficiency 30-Day Will Return Letter

Thank you, Audrey. Please continue to work with her to verify the proposed discharge route. Let me know if you have any questions.

Thanks,



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

From: Audrey Anderson <aanderson@wga-llc.com> Sent: Wednesday, November 5, 2025 10:15 AM

To: Leah Whallon <Leah.Whallon@Tceq.Texas.Gov>; Jerry Ince <jince@wga-llc.com>; Michelle Labrie

<Michelle.Labrie@tceq.texas.gov>

Cc: Doug Bailey <doug@southcentralww.com>

Subject: Re: Application for Proposed Permit No. WQ0016891001; South Central Water Company; Williamson 99 WWTP;

Notice of Deficiency 30-Day Will Return Letter

Good Afternoon Leah,

I am working with Michelle on adjusting the discharge route. I have not heard anything back from my last email.

Thank you,

Audrey Anderson, EIT

Project Engineer



2500 Tanglewilde, Suite 120 | Houston, TX 77063

D: 346.771.5311 O: 713.789.1900 aanderson@wga-llc.com

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From: Leah Whallon < Leah. Whallon@Tceq.Texas.Gov >

Sent: Wednesday, November 5, 2025 10:13 AM **To:** Jerry Ince < <u>jince@wga-llc.com</u>>; Audrey Anderson

<aanderson@wga-llc.com>

Cc: Doug Bailey < doug@southcentralww.com>

Subject: Application for Proposed Permit No. WQ0016891001; South Central Water Company; Williamson 99 WWTP; Notice of

Deficiency 30-Day Will Return Letter

Good Morning,

Please see the attached Notice of Deficiency 30-Day Will Return Letter dated November 3, 2025, requesting the response needed to declare the application administratively complete. The original will be sent by certified mail. Please send the complete response by December 3, 2025.

Thank you,



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

EXTERNAL EMAIL: Do not click any links or open any attachments unless you trust the sender and know the content is safe.

EXTERNAL EMAIL: Do not click any links or open any attachments unless you trust the sender and know the content is safe.

	Prefix: <u>N/A</u>	Last Name, First Name: <u>N/A</u>
	Title: <u>N/A</u>	Credential: <u>N/A</u>
	Organization Name: <u>N/A</u>	
	Mailing Address: <u>N/A</u>	City, State, Zip Code: <u>N/A</u>
	Phone No.: <u>N/A</u>	E-mail Address: <u>N/A</u>
	agreement or deed recorded ease	person as the facility owner or co-applicant, attach a lease ement. See instructions.
	Attachment: <u>N/A</u>	
F.	Owner sewage sludge disposal site (if authorization is requested for sludge disposal on property owned or controlled by the applicant)::	
	Prefix: <u>N/A</u>	Last Name, First Name: <u>N/A</u>
	Title: <u>N/A</u>	Credential: <u>N/A</u>
	Organization Name: <u>N/A</u>	
	Mailing Address: <u>N/A</u>	City, State, Zip Code: <u>N/A</u>
	Phone No.: <u>N/A</u>	E-mail Address: <u>N/A</u>
	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: <u>N/A</u>	
Se	ection 10. TPDES Dischar	ge Information (Instructions Page 31)
A.	Is the wastewater treatment facil	ity location in the existing permit accurate?
	□ Yes □ No	
		on, please give an accurate description:
		n unbuilt facility. The proposed facility's location is of the intersection of County Road 439 and County Road 434.
B.	Are the point(s) of discharge and	the discharge route(s) in the existing permit correct?
	□ Yes □ No	
	point of discharge and the disch TAC Chapter 307:	ermit application, provide an accurate description of the arge route to the nearest classified segment as defined in 30
	30.538363°, -97.215418°. The disir	outfall will be located at the approximate coordinates of infected effluent will discharge from a RCP into a man-made thence to Soil Conservation Site 22, thence to Holynok Creek
	City nearest the outfall(s): Thorne	<u>dale</u>
	County in which the outfalls(s) is	s/are located: <u>Williamson</u>
C.	Is or will the treated wastewater a flood control district drainage	discharge to a city, county, or state highway right-of-way, or ditch?

E. Owner of effluent disposal site:

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

FOR AGENCIES REVIEWING DOMESTIC OR INDUSTRIAL TPDES WASTEWATER PERMIT APPLICATIONS

TC	EQ USE ONLY:			
Ap]	plication type:RenewalMajor Am	endment _	Minor AmendmentNew	
Coı	County: Segment Number:			
Adı	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	s form applies to TPDES permit applications	s only. (Ins	structions, Page 53)	
our a is ne	uplete this form as a separate document. TCE agreement with EPA. If any of the items are reeded, we will contact you to provide the information item completely.	not comple	tely addressed or further informa	
attac appl com may	not refer to your response to any item in the chment for this form separately from the Addication will not be declared administratively pleted in its entirety including all attachment be directed to the Water Quality Division's Additional to the WQ-ARPTeam@tceq.texas.gov or by pho	lministrativ complete nts. Questic Application	We Report of the application. The without this SPIF form being ons or comments concerning this for Review and Processing Team by	`orm
The	following applies to all applications:			
1. P	Permittee: South Central Water Company			
P	Permit No. WQ00 <u>Pending</u>	EPA II) No. TX <u>Pending</u>	
a	Address of the project (or a location descript and county):			у,
	<u>Approximately 1.15 miles southeast (headin</u> <u>County Road 439 and County Road 434 near</u>		=	

	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: <u>Doug Bailey</u>
	Credential (P.E, P.G., Ph.D., etc.):
	Title: President
	Mailing Address: P.O. Box 570177
	City, State, Zip Code: <u>Houston, Texas 77257</u>
	Phone No.: <u>713-783-6611</u> Ext.: Fax No.:
	E-mail Address: <u>Doug@southcentralww.com</u>
2.	List the county in which the facility is located: <u>Williamson</u>
3. If the property is publicly owned and the owner is different than the permittee/applicate please list the owner of the property.	
	N/A
1	Provide a description of the effluent discharge route. The discharge route must follow the flow
4.	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.
	Effluent discharges from a pipe to a man-made ditch, thence to unnamed tributary, thence
	to Soil Conservation District Site 22, thence to Holynok Creek.
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).
	required in addition to the map in the administrative report).
	required in addition to the map in the administrative report). Provide original photographs of any structures 50 years or older on the property.
	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.
	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
	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 Usual effects that could damage or detract from a historic property's integrity

	□ 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):
	Proposed wastewater treatment plant including underground piping, utilities, varying depths between 0 and 20-ft below ground.
2.	Describe existing disturbances, vegetation, and land use:
	Property is considered irrigated crop land. Property has no existing structures.
	IE FOLLOWING ITEMS APPLY ONLY TO APPLICATIONS FOR NEW TPDES PERMITS AND MAJOR MENDMENTS TO TPDES PERMITS
3.	List construction dates of all buildings and structures on the property:
	No existing or demolished infrastructure has been recorded on the property. Primarily for agricultural and pasture use.
4.	Provide a brief history of the property, and name of the architect/builder, if known.
	Irrigated crop land

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**.

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)
Appendix J		

C. Process Flow Diagram

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

Attachment: Appendix K

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

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

• Latitude: <u>30.538363°</u>

Longitude: -97.215418°

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

• Latitude: <u>N/A</u>

• 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.

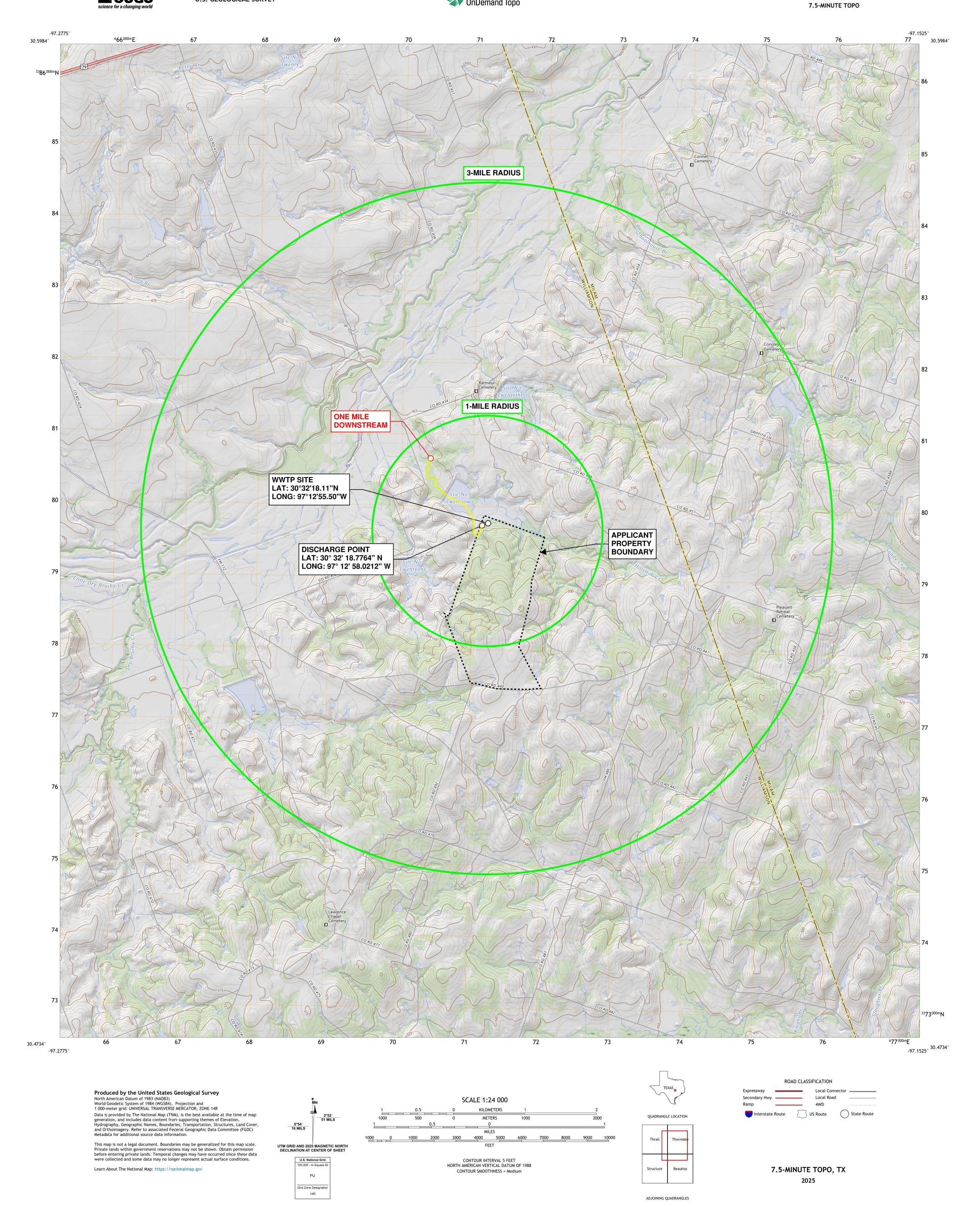
Attachment: **Appendix L**

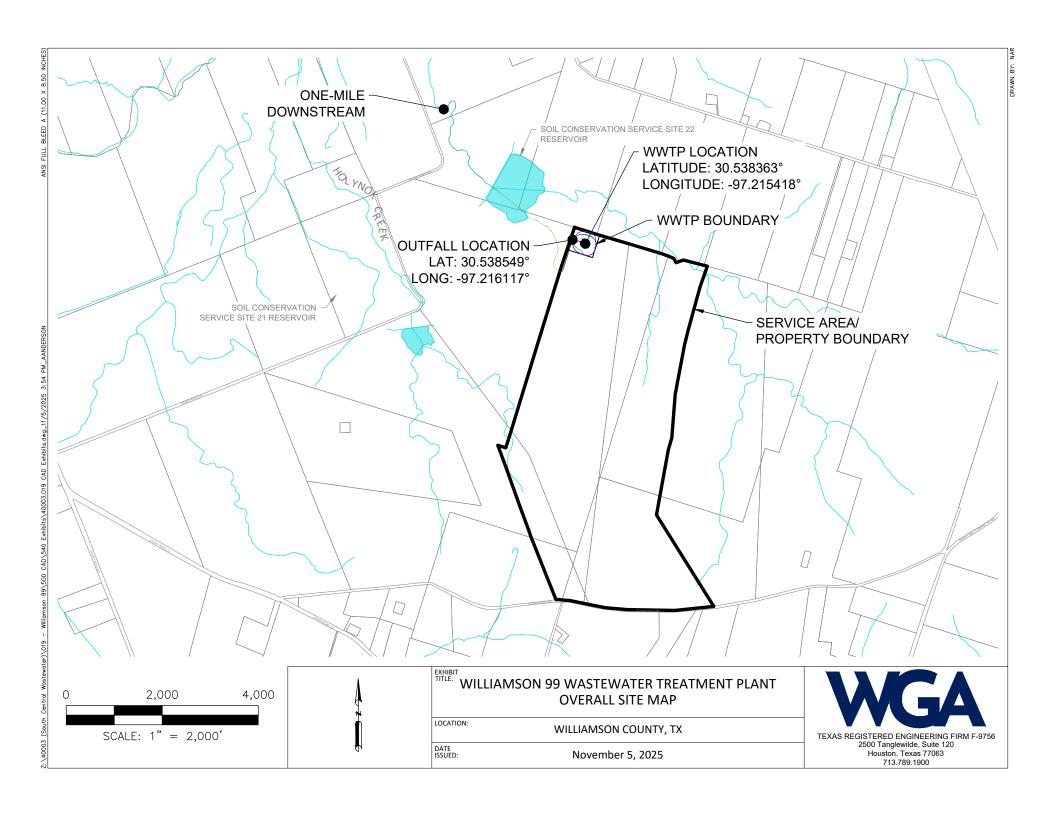
Provide the name **and** a description of the area served by the treatment facility.

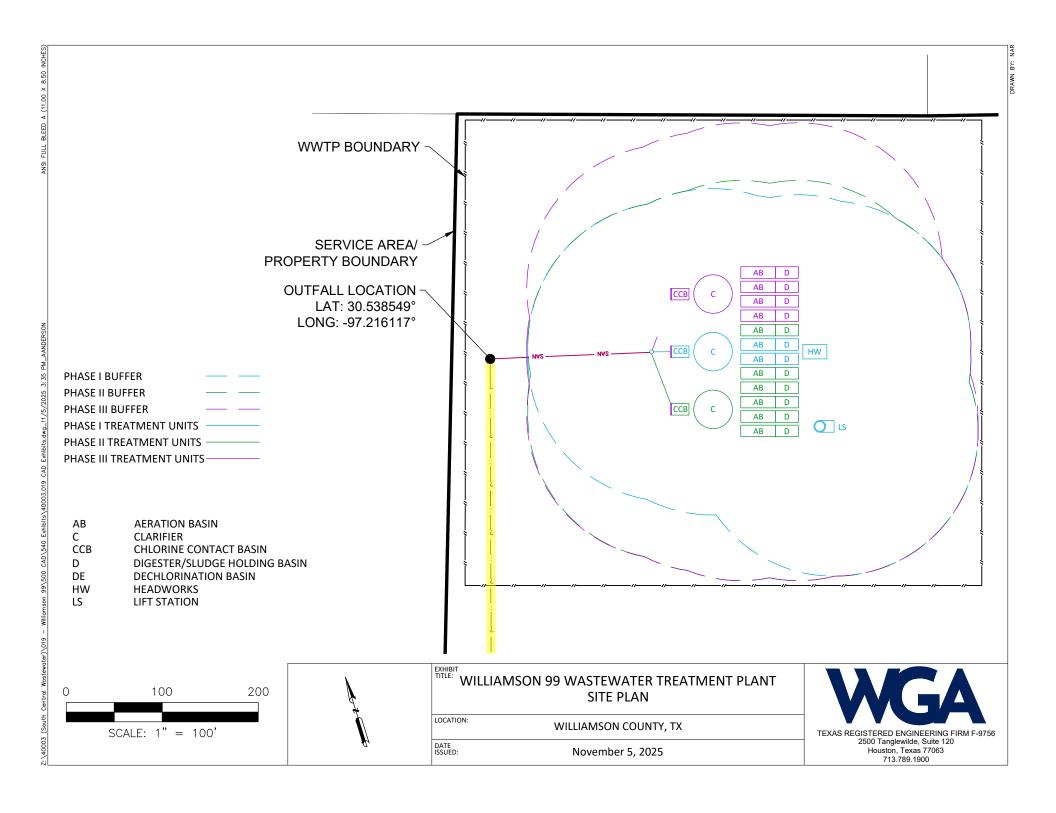
The proposed development will be named Williamson 99 Wastewater Treatment Plant and will serve a proposed subdivision with phase I consisting of 333 single family homes, phase II will serve 1,166 total single family residences, and phase III will consist of 2,333 single family residences.

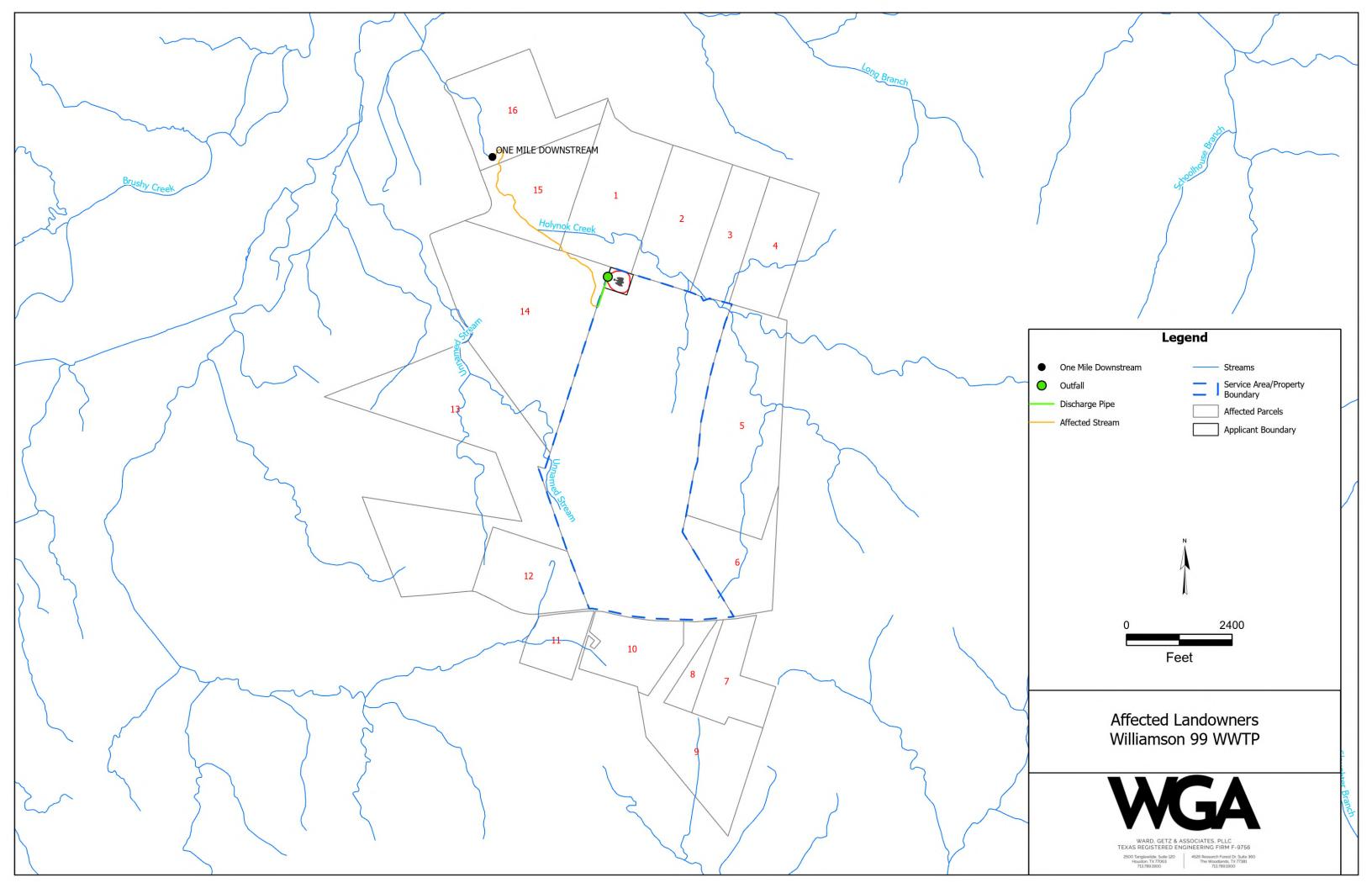
Section 3. **Classified Segments (Instructions Page 63)** Is the discharge directly into (or within 300 feet of) a classified segment? Yes ⊠ No If yes, this Worksheet is complete. **If no**, complete Sections 4 and 5 of this Worksheet. Section 4. **Description of Immediate Receiving Waters (Instructions Page 63)** Name of the immediate receiving waters: Tributary of Holynok 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: Click to enter text. Average depth of the entire water body, in feet: Click to enter text. Average depth of water body within a 500-foot radius of discharge point, in feet: Click to enter text. \boxtimes Man-made Channel or Ditch Open Bay Tidal Stream, Bayou, or Marsh Other, specify: Click to enter text. **B.** Flow characteristics If a stream, man-made channel or ditch was checked above, provide the following. For existing discharges, check one of the following that best characterizes the area *upstream* of the discharge. For new discharges, characterize the area *downstream* of the discharge (check one). Intermittent - dry for at least one week during most years Intermittent with Perennial Pools - enduring pools with sufficient habitat to maintain significant aquatic life uses Perennial - normally flowing Check the method used to characterize the area upstream (or downstream for new dischargers). USGS flow records Historical observation by adjacent landowners Personal observation Other, specify: Click to enter text.











AFFECTED LANDOWNERS REFERENCE LIST

REF. NO.	OWNER_NAME	MAILING ADDRESS	PHYSICAL ADDRESS
1	COOK, GLEN E & SUSAN ROOKE	PO BOX 860 THORNDALE, TX 76577	550 CR 439, THORNDALE, TX 76577
2	RIEGER, JASON	900 COUNTY ROAD 439 THORNDALE, TX 76577-8773	900 COUNTY ROAD 439, THORNDALE, TX 76577-8773
3	MENZEL, JOHN	PO BOX 293 THORNDALE, TX 76577-0293	CR 439 THORNDALE, TX 76577
4	ANDERSON, BOBBY & SHEILA	1400 COUNTY ROAD 439 THORNDALE, TX 76577-8739	1400 CR 439, THORNDALE, TX 76577
5	WARNER, PHILIP PAUL	2361 COUNTY ROAD 440 THORNDALE, TX 76577-8720	CR 440, THORNDALE, TX 76577
6	WARNER, PHILIP PAUL	2361 COUNTY ROAD 440 THORNDALE, TX 76577-8720	CR 440, THORNDALE, TX 76577
7	TODD, KIMBERLY ANN	1850 COUNTY ROAD 440 THORNDALE, TX 76577	1850 CR 440 THORNDALE, TX 76577
8	SHARP, SARA D	8104 CHARDONNAY CV AUSTIN, TX 78750-7854	CR 440 THORNDALE, TX 76577
9	SHARP, SARA D	8104 CHARDONNAY CV AUSTIN, TX 78750-7854	1851 CR 440, THORNDALE, TX 76577
10	VOIGT, MARCUS TY	115 COUNTY ROAD 492 THRALL, TX 78578	CR 492, THRALL, TX 76578
11	KRISTAPONIS, EDWARD V	7105 WHISPERING CREEK CT AUSTIN, TX 78736	CR 440, THRALL, TX 76578
12	DRAYER, JOSEPH & ANNA	2303 HARTFORD RD AUSTIN, TX 78703-2436	1450 CR 438, THRALL, TX 76578
13	DRAYER, JOSEPH & ANNA	2303 HARTFORD RD AUSTIN, TX 78703-2436	1450 CR 438, THRALL, TX 76578
14	DRAYER, JOSEPH & ANNA	2303 HARTFORD RD AUSTIN, TX 78703-2436	1450 CR 438, THRALL, TX 76578
15	E&J MALISH FAMILY PARTNERSHIP LP	351 COUNTY ROAD 445 TAYLOR, TX 76574	438/439 CR THRALL, TX 76578
16	E&J MALISH FAMILY PARTNERSHIP LP	352 COUNTY ROAD 445 TAYLOR, TX 76574	CR 438, THRALL, TX 76578

COOK GLEN E & SUSAN ROOKE PO BOX 860 THORNDALE TX 76577 RIEGER JASON 900 COUNTY ROAD 439 THORNDALE TX 76577-8773 MENZEL JOHN PO BOX 293 THORNDALE TX 76577-0293

ANDERSON BOBBY & SHEILA 1400 COUNTY ROAD 439 THORNDALE TX 76577-8739 WARNER PHILIP PAUL 2361 COUNTY ROAD 440 THORNDALE TX 76577-8720 WARNER PHILIP PAUL 2361 COUNTY ROAD 440 THORNDALE TX 76577-8720

TODD KIMBERLY ANN 1850 COUNTY ROAD 440 THORNDALE TX 76577 SHARP SARA D 8104 CHARDONNAY CV AUSTIN TX 78750-7854 SHARP SARA D 8104 CHARDONNAY CV AUSTIN TX 78750-7854

VOIGT MARCUS TY 115 COUNTY ROAD 492 THRALL TX 78578 KRISTAPONIS EDWARD V 7105 WHISPERING CREEK CT AUSTIN TX 78736 DRAYER JOSEPH & ANNA 2303 HARTFORD RD AUSTIN TX 78703-2436

DRAYER JOSEPH & ANNA 2303 HARTFORD RD AUSTIN TX 78703-2436

DRAYER JOSEPH & ANNA 2303 HARTFORD RD AUSTIN TX 78703-2436 E&J MALISH FAMILY PARTENERSHIP LP 351 COUNTY ROAD 445 TAYLER TX 76574

E&J MALISH FAMILY PARTENERSHIP LP 351 COUNTY ROAD 445 TAYLER TX 76574

Leah Whallon

From: Leah Whallon

Sent: Friday, October 31, 2025 4:28 PM

To: Audrey Anderson

Cc: Jerry Ince

Subject: RE: Application for Proposed Permit No. WQ0016891001; South Central Water

Company; Williamson 99 WWTP

Thank you, Audrey.

I am still waiting for the standards team to complete the review of the discharge route. Michelle advised she asked for additional updates/corrections to this info. We cannot issue the NORI until this is resolved. Please work with Michelle to provide the needed information. I will send a 30-day extension letter on Monday to continue the administrative review period. Please let me know if you have any questions.

Thanks,



Leah Whallon

Texas Commission on Environmental Quality Water Quality Division 512-239-0084 leah.whallon@tceq.texas.gov

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

From: Audrey Anderson <aanderson@wga-llc.com>

Sent: Friday, October 24, 2025 6:57 AM

To: Leah Whallon < Leah. Whallon@Tceq. Texas. Gov>

Cc: Jerry Ince <jince@wga-llc.com>

Subject: Re: Application for Proposed Permit No. WQ0016891001; South Central Water Company; Williamson 99 WWTP

Good Morning Leah,

Please see the attached written statement from the applicant saying that the easement will be recorded prior to issuance of the permit.

Please let me know if this satisfies the requirement.

Thank you,

Audrey Anderson, EIT

Project Engineer



2500 Tanglewilde, Suite 120 | Houston, TX

77063

D: 346.771.5311 O: 713.789.1900 aanderson@wga-llc.com

HBJ Best Places to Work | 2023, 2024 Houston Chronicle Top Work Places | 2023, 2024 From: Leah Whallon < Leah. Whallon@Tceq.Texas.Gov >

Sent: Thursday, October 16, 2025 10:18 AM **To:** Audrey Anderson aanderson@wga-llc.com

Cc: Jerry Ince < jince@wga-llc.com>

Subject: RE: Application for Proposed Permit No. WQ0016891001;

South Central Water Company; Williamson 99 WWTP

Hi Audrey,

We can only accept a deed recorded easement in this scenario. Do you know for what permit this was used and approved in the past?

Thank you,





Leah Whallon

Texas Commission on Environmental Quality Water Quality Division 512-239-0084 leah.whallon@tceq.texas.gov

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

From: Audrey Anderson aanderson@wga-llc.com

Sent: Tuesday, October 14, 2025 3:12 PM

To: Leah Whallon < Leah. Whallon@Tceq. Texas. Gov >

Cc: Jerry Ince < jince@wga-llc.com>

Subject: Re: Application for Proposed Permit No. WQ0016891001; South Central Water Company; Williamson 99 WWTP

The draft easement is the only one that can be obtained at the moment as the landowner will sign nor record the easement until the permit can be issued for the wastewater plant. Once the permit is issued the landowner will deed the WWTP site to South Central, but they do not want to do that if the permit cannot be granted.

I have been informed that this exact lease agreement has been used and approved in the past.

Thank you,

Audrey Anderson, EIT

Project Engineer



2500 Tanglewilde, Suite 120 | Houston, TX 77063

D: 346.771.5311 O: 713.789.1900 aanderson@wga-llc.com

HBJ Best Places to Work | 2023, 2024 Houston Chronicle Top Work Places | 2023, 2024



recorded?

Thank you,

From: Leah Whallon < Leah. Whallon@Tceq. Texas. Gov >

Sent: Tuesday, October 14, 2025 1:21 PM

To: Audrey Anderson aanderson@wga-llc.com>

Cc: Jerry Ince <jince@wga-llc.com>

Subject: RE: Application for Proposed Permit No. WQ0016891001;

South Central Water Company; Williamson 99 WWTP

Thank you, Audrey.

Would you also be able to please provide updated pages for these 2 additional items mentioned in this morning's email?

The full discharge route description in Administrative Report 1.0 Section 10.B Outfall coordinates in Technical Report 1.0 Section 3

I will confirm if we can accept the draft easement. Do you know when they will have it signed by the owner and



Leah Whallon

Texas Commission on Environmental Quality Water Quality Division 512-239-0084 leah.whallon@tceq.texas.gov

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

From: Audrey Anderson aanderson@wga-llc.com>

Sent: Tuesday, October 14, 2025 12:55 PM

To: Leah Whallon < Leah. Whallon@Tceq.Texas.Gov>

Cc: Jerry Ince < jince@wga-llc.com>

Subject: Re: Application for Proposed Permit No. WQ0016891001; South Central Water Company; Williamson 99 WWTP

Good Morning Leah,

Please see the attached in response to the NOD. Let me know if you have any questions or require any further information.

Thank you,

Audrey Anderson, EIT

Project Engineer



2500 Tanglewilde, Suite 120 | Houston, TX 77063

D: 346.771.5311 O: 713.789.1900 aanderson@wga-llc.com

HBJ Best Places to Work | 2023, 2024 Houston Chronicle Top Work Places | 2023, 2024



From: Leah Whallon <Leah.Whallon@Tceq.Texas.Gov>

Sent: Thursday, October 9, 2025 2:10 PM

To: Audrey Anderson aanderson@wga-llc.com>

Cc: Jerry Ince <jince@wga-llc.com>

Subject: Application for Proposed Permit No. WQ0016891001;

South Central Water Company; Williamson 99 WWTP

Good Afternoon,

Please see the attached Notice of Deficiency letter dated October 9, 2025, requesting additional information needed to declare the application administratively complete. Please send the complete response by October 23, 2025.

Please let me know if you have any questions.

Thank you,



Leah Whallon

Texas Commission on Environmental Quality Water Quality Division 512-239-0084 leah.whallon@tceq.texas.gov

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EXTERNAL EMAIL: Do not click any links or open any attachments unless you trust the sender and know the content is safe.

EXTERNAL EMAIL: Do not click any links or open any attachments unless you trust the sender and know the content is safe.

EXTERNAL EMAIL: Do not click any links or open any attachments unless you trust the sender and know the content is safe.



October 23nd, 2025

Texas Commission of Environmental Quality 12100 Park 35 Circle Austin, Texas 78753

RE: WQ0016891001

TCEQ,

South Central Water Company acknowledges that any easement provided for an application for a wastewater discharge permit must meet the ownership requirement according to the current rules and regulations of the TCEQ. South Central Water agrees that per this letter, we will submit an easement agreement to the county to be recorded prior to the issuance of the final permit. South Central Water Company acknowledges that if the easement is not submitted to the county, the wastewater discharge permit will not be issued.

South Central Water Company

Name: ClANE Bailey
Title: Vice President

Date: [0 | 23 | 2025



October 14, 2025 Leah Whallon Applications Review and Processing Team (MC148) Water Quality Division Texas Commission on Environmental Quality

RE: Application for Proposed Permit No.: WQ0016891001 (EPA I.D. No. TX0148521)

Applicant Name: South Central Water Company (CN602602179)

Site Name: Williamson 99 (RN112293253)

Type of Application: NEW

Response to Notice of Deficiency (NOD)

VIA EMAIL

Dear Leah Whallon.

We received the Notice of Deficiency (NOD), dated October 9, 2025, to the application for the above referenced permit. Please see the following answers below.

Comment No. 1: Administrative Report 1.0, Section 9.D

The owner of the land where the treatment facility will be located is 999 Williamson Ranch, LLC. If the landowner is not the applicant or co-applicant, please provide an executed lease agreement or deed recorded easement.

Response No. 1: Please see the attached Lease Agreement

Comment No. 2: Administrative Report 1.0, Section 13, USGS Map

Please provide an updated USGS map that shows the outfall location and downstream route beginning at the point the pipe discharges to surface water

Response No. 2: Please see the revised site drawings and USGS map.

Comment No. 3: Administrative Report 1.1, Section 1

Please provide an updated affected landowner map that shows the outfall location and one-mile downstream route beginning at the point the discharges to surface water. The map should include all landowners one mile from the updated point of discharge. Please also provide an updated cross-reference landowner list and the list formatted for mailing labels (Avery 5160) in a Microsoft Word document.

<u>Response No. 3:</u> Please see the revised affected landowner map, reference list and mailing labels.

NOD Response

<u>Comment No. 4</u>: The following is a portion of the NORI which contains information relevant to your application. Please read it carefully and indicate if it contains any errors or omissions. The complete notice will be sent to you once the application is declared administratively complete.

APPLICATION. South Central Water Company, P.O. Box 570177, Houston, Texas 77257, has applied to the Texas Commission on Environmental Quality (TCEQ) for proposed Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0016891001 (EPA I.D. No. TX0148521) to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 700,000 gallons per day. The domestic wastewater facility will be located approximately 1.15 miles southeast of the intersection of County Road 434 and County Road 439, near the city of Thorndale, in Williamson County, Texas 76577. The discharge route will be from the plant site via pipe to a storm sewer; thence to a road-side ditch; thence discharge to Brushy Creek (pending RWA). TCEQ received this application on September 29, 2025. The permit application will be available for viewing and copying at Taylor Public Library, 801 Vance Street, Taylor, in Williamson 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.tceg.texas.gov/LocationMapper/?marker=-97.213888,30.538333&level=18

Further information may also be obtained from South Central Water Company at the address stated above or by calling Mr. Jerry Ince, P.E., Ward, Getz & Associates, LLC, at 713-789-1900.

<u>Response No. 4</u>: Please remove the comma between Associates and LLC. Should read "Ward, Getz & Associates LLC". No further comments on the NORI.

Comment No. 5:

The application indicates that public notices in Spanish are required. After confirming the portion of the NORI above does not contain any errors or omissions, please use the attached template to translate the NORI into Spanish. Only the first and last paragraphs are unique to this application and require translation. Please provide the translated Spanish NORI in a Microsoft Word document.

Response No. 5: Please see the attached word document.

NOD Response

If you have any questions or require any further information, please don't hesitate to contact me at aanderson@wga-llc.com.
or by phone at 346-771-5311.

Sincerely,

Audrey Anderson, EIT Project Engineer Phone: 346-771-5311

Email: aanderson@wga-llc.com Ward, Getz & Associates LLC

Enclosure(s)

Cc: Mr. Jerry Ince, Senior Client Manager, Ward, Getz & Associates LLC, 2500 Tanglewilde, Suite 120, Houston, Texas 77063 (jince@wga-llc.com).

WASTEWATER PLANT] EASEMENT AGREEMENT Williamson99

NOTICE OF CONFIDENTIALITY RIGHTS: IF YOU ARE A NATURAL PERSON, YOU MAY REMOVE OR STRIKE ANY OF THE FOLLOWING INFORMATION FROM ANY INSTRUMENT THAT TRANSFERS AN INTEREST IN REAL PROPERTY BEFORE IT IS FILED FOR RECORD IN THE PUBLIC RECORDS: YOUR SOCIAL SECURITY NUMBER OR YOUR DRIVER'S LICENSE NUMBER.

WASTEWATER PLANT EASEMENT AGREEMENT

(approx. 5 acres)

That _____ called "<u>Grantor</u>" (whether one or more), for good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, does hereby grant, transfer, sell, assign and convey unto [COMPANY NAME], having an address of [ADDRESS], and to its successors and/or assigns, hereinafter called "<u>Grantee</u>," an exclusive and perpetual easement and right-of-way (the "<u>Easement</u>") along, over, under and across the following described property (the "<u>Property</u>"):

[PLEASE SEE EXHIBIT A]

The right-of-way, utility easement, and other rights and privileges herein granted shall include:

- 1. The right to place, construct, reconstruct, rephase, upgrade, expand the capability of, operate, maintain, repair, relocate within this Easement, rebuild, replace and remove thereon and/or in or upon the Property, a wastewater plant together with all the overhead and/or underground utility lines, including but not limited to water and sewer lines, equipment, and all other necessary or desirable appurtenances, including, but not limited to valves and manholes as deemed necessary by the Grantee to support the plant, lines and equipment within the Easement; and
- 2. The right to any additional temporary working space about or near the Easement as may be reasonably necessary, together with the right of pedestrian and/or vehicular ingress and egress over the Property and any adjoining land to or from said utility easement for the purposes of placing, constructing, reconstructing, rephasing, patrolling, inspecting, upgrading, expanding the capability of, operating, repairing, maintaining, relocating within this Easement, replacing, and/or removing said utility facilities, equipment and systems and appurtenances pertaining thereto; and
- 3. The right to clear the right of way of all obstructions, to cut, trim or remove trees and/or shrubbery located on, over or within the Easement and/or Property through any means deemed reasonable and appropriate by Grantee, including the use of machinery and the application of herbicides, and including any control of the growth of other vegetation in or about the Easement which may incidentally and necessarily result from the means of control employed; and
- 4.. The right of free access to the Easement at all reasonable hours to perform the aforementioned activities, and at any time to restore service or during an emergency.

5. This Easement is perpetual, provided, however, if Grantee ceases operating within the Easement for a period of six (6) months and Grantee's cessation of use is not due to a natural disaster, crime or property theft, acts of God, pandemic, labor strikes or acts of terrorism, then this Easement shall be terminated and the Property shall revert to Grantor or its successor and assigns. Venue for any disputes shall be in county in which the Property is located.

The rights hereby granted to Grantee may be dedicated, assigned (and/or licensed) by Grantee in whole or in part. Grantor covenants that Grantor, Grantor's heirs, successors and assigns shall not, individually, or in combination with others, interfere directly or indirectly with Grantee's use of this Easement now or at any time in the future, or with the efficiency, safety, or convenient operation of the utility(ies), utility service(s), related equipment, devices, appliances, and/or other property.

Grantor shall not construct nor cause or allow to be constructed any structure, building or improvement, nor plant any trees, nor impound any water, nor place any temporary or permanent erection of any equipment or appurtenances within the Easement in any manner as to interfere with the safe, efficient and convenient operation of the Grantee's facilities, equipment or systems. Such prohibited construction shall include, but not be limited to, new construction of a habitable structure, major modification to a preexisting habitable structure, stock tanks, dams, storage piles, swimming pools, antenna, spas, water wells, or oil wells. Grantor agrees that the Grantee shall have the right to remove, or cause to be removed, at Grantor's sole cost, any obstructions Grantor installs, erects or creates after the effective date of this Easement and which limit or impede Grantee's access to, through or across the Easement, or which interferes with or threatens to endanger the operation, reliability, efficiency, construction, reconstruction, or maintenance of Grantee's utility facilities or systems.

This Easement contains all covenants and terms between Grantor and Grantee related to the Easement. Any oral representations or modifications concerning this Easement shall be of no force and effect. Any subsequent amendment or modification to this Easement must be in writing and agreed to by the Grantor and Grantee. No waiver by Grantee of any default or breach of any covenant, condition, or stipulation herein contained, or delay by Grantee in the utilization of any right herein granted, shall be treated as a waiver of any subsequent default or breach of the same or any other covenant condition or stipulation, or as a waiver of any right of Grantee or of the ability of Grantee to utilize any such right at a future date.

TO HAVE AND TO HOLD the Easement unto said Grantee, its successors and assigns, forever, and Grantor hereby binds Grantor, and Grantor's successors, assigns, and heirs to warrant and forever defend all and singular said Easement and rights thereunder unto Grantee, its successors and assigns, against every person whomsoever lawfully claiming or to claim by through or under the same or any part thereof.

This Easement may be executed in any number of counterparts with the same effect as if all signatory parties had signed the same document. All counterparts will be construed together and will constitute one and the same instrument.

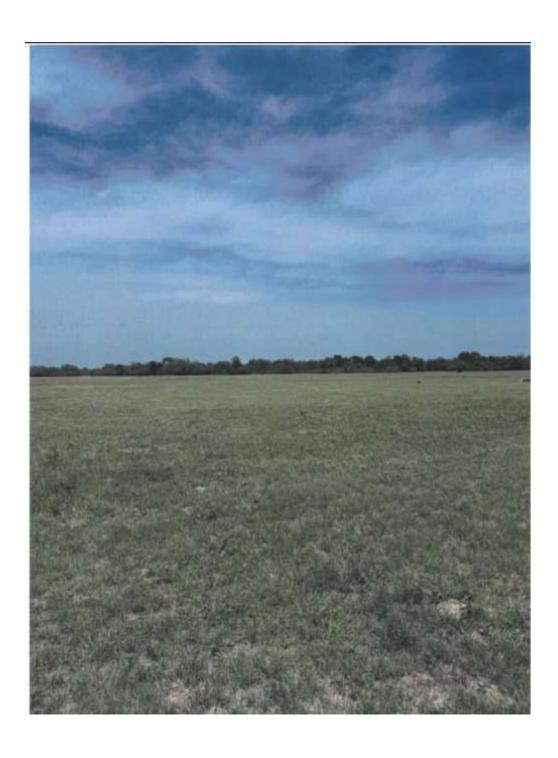
EXECUTED the day of 10 October 2025, 202.

GRANTOR:

	Williamson 99, LLC
	By:
	Name:
	Title:
	Date:10 October 2025
GRAN	NTEE:
	SOUTH CENTRAL WATER COMPANY
	By:
	Name:
	Title:
	Date:

EXHIBIT A

A tract of land containing approx 180,625 sq ft. and being of dimension 425 ft by 425 ft with the center location being $30^{\circ}32'18.11"N, 97^{\circ}12'55.50"W$.



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. South Central Water Company, P.O. Box 570177, Houston, Texas 77257, ha solicitado a la Comisión de Calidad Ambiental del Estado de Texas (TCEQ) para el propuesto Permiso No. WQ0016891001 (EPA I.D. No. TX 0148521) 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 700,000 galones por día. La planta estará ubicada aproximadamente 1.15 millas al sureste de la intersección de County Road 434 y County Road 439, cerca de la ciudad de Thorndale, en el condado de Williamson, Texas 76577. La ruta de descarga estará del sitio de la planta a a través de una tubería a una alcantarilla pluvial; de allí a una zanja al borde del camino; de allí descarga a Brushy Creek (pendiente de RWA). La TCEO recibió esta solicitud el septiembre 29, 2025. La solicitud para el permiso estará disponible para leerla y copiarla en Biblioteca Pública de Taylor, 801 Vance Street, Taylor, en el condado de Williamson, 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=-97.213888,30.538333&level=18

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

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

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

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

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

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

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

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

LISTA DE CORREO. Si somete comentarios públicos, un pedido para una audiencia administrativa de lo contencioso o una reconsideración de la decisión del Director Ejecutivo, la Oficina del Secretario Principal enviará por correo los avisos públicos en relación con la solicitud. Además, puede pedir que la TCEQ ponga su nombre en una o más de las listas correos siguientes (1) la lista de correo permanente para recibir los avisos del solicitante indicado por nombre y número del permiso específico y/o (2) la lista de correo de todas las solicitudes en un condado específico. Si desea que se agrega su nombre en una de las listas designe cual lista(s) y envía por correo su pedido a la Oficina del Secretario Principal de la 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 South Central Water Company a la dirección indicada arriba o llamando a Sr. Jerry Ince, P.E., Ward, Getz & Associates LLC al 713-789-1900.

Fecha de emisión: [Date notice issued]

TCEQ APPLICATION FOR TPDES PERMIT NEW

FOR

WILLIAMSON 99 WWTP

IN

Williamson County, Texas

ON BEHALF OF

SOUTH CENTRAL WATER COMPANY

BY



WARD, GETZ & ASSOCIATES, PLLC TEXAS REGISTERED ENGINEERING FIRM F-9756 2500 Tanglewilde, Suite 120 Houston, TX 77063 713.789.1900

SEPTEMBER 2025



September 16, 2025

Texas Commission on Environmental Quality Water Quality Division Applications Review and Processing Team (MC148) P.O. Box 13087 Austin, Texas 78711-3087

Re: South Central Water Company (CN602602179)

Williamson 99 Wastewater Treatment Plant (RN-PENDING)

TPDES Permit Application NEW PERMIT NO. WQ00-PENDING

Water Quality Division:

Ward, Getz, and Associates, LLC is submitting a complete Texas Pollutant Discharge Elimination System (TPDES) Permit Application for the proposed Williamson 99 Wastewater Treatment Plant on behalf of South Central Water Company. Please find attached one (1) original and two (2) copies of the TPDES permit application. An electronic copy has been uploaded to TCEQ's FTP Server and sent to WQDeCopy@tceq.texas.gov.

The permit application fee was paid via check and mailed to the TCEQ Financial Administration Division. Please see the attached copy of the [electronic voucher/check].

If you have any questions, or require any additional information, please contact Audrey Anderson at 346-771-5311, or by email at aanderson@wga-llc.com.

Sincerely,

Audrey Anderson, E.I.T.

Project Engineer

Ward, Getz & Associates, LLC



September 16, 2025

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

Re: South Central Water Company (CN602602179)

Williamson 99 Wastewater Treatment Plant (RN-PENDING)

TPDES Permit Application NEW PERMIT NO. WQ00-PENDING

Water Quality Division:

Ward, Getz, and Associates, LLC is submitting a complete Texas Pollutant Discharge Elimination System (TPDES) Permit Application for the new Williamson Wastewater Treatment Plant on behalf of South Central Water Company. Please find enclosed one (1) check in the amount of **\$1650.00** for the TPDES permit application fee.

If you have any questions, or require any additional information, please contact Audrey Anderson at 346-771-5311, or by email at aanderson@wga-llc.com.

Sincerely,

Audrey Anderson, E.I.T.

Project Engineer

Ward, Getz & Associates, LLC

THE THE PART OF TH

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the application.

APPLICANT	NAME:	South	Central	Water	Compan	ıy
						_

PERMIT NUMBER (If new, leave blank): WQ00Pending

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

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



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: <u>5294</u>

Check/Money Order Amount: \$1,650.00

Name Printed on Check: South Central Water Company

EPAY Voucher Number: Click to enter text.

Copy of Payment Voucher enclosed? Yes \square

Section 2. Type of Application (Instructions Page 26)

a. Check the box next to the appropriate authorization				
		Publicly Owned Domestic Wastewater		
	\boxtimes	Privately-Owned Domestic Wastewater		
		Conventional Water Treatment		

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

Active	\boxtimes	Inactive

c.	c. Check the box next to the appropriate permit type.					
 C. Check the box next to the appropriate permit type. ☑ TPDES Permit ☑ TLAP ☑ TPDES Permit with TLAP component ☑ Subsurface Area Drip Dispersal System (SADDS) 						
		TLAP				
		TPDES Permit with TLAP compo	nent			
		Subsurface Area Drip Dispersal	System (SADDS)			
d.	L. Check the box next to the appropriate application type					
	\boxtimes	New				
		Major Amendment with Renewal			Minor Amendment with Renewal	
		Major Amendment without Rene	wal \square		Minor Amendment without Renewal	
		Renewal without changes			Minor Modification of permit	
e.	For	amendments or modifications, de	escribe the prop	08	sed changes: Click to enter text.	
f.	For	existing permits:				
	Peri	mit Number: WQ00 <u>N/A</u>				
	EPA	A I.D. (TPDES only): TX <u>N/A</u>				
	Exp	iration Date: <u>N/A</u>				
Se	ctio	on 3. Facility Owner (Ap	plicant) and	(Co-Applicant Information	
		(Instructions Page				
A.	The	e owner of the facility must appl	y for the permit	t.		
	Wha	at is the Legal Name of the entity	(applicant) apply	yi	ng for this permit?	
	Sou	th Central Water Company				
		e legal name must be spelled exac legal documents forming the entit		th	e Texas Secretary of State, County, or in	
					what is the Customer Number (CN)? http://www15.tceq.texas.gov/crpub/	
	(CN: <u>602602179</u>				
		at is the name and title of the per- cutive official meeting signatory r			oplication? The person must be an OTAC § 305.44.	
]	Prefix: <u>Mr.</u>	Last Name, First	t N	Name: <u>Bailey, Doug</u>	

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

Credential: Click to enter text.

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

N/A

Title: <u>President</u>

(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: <u>N/A</u>

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

Prefix: <u>N/A</u> Last Name, First Name: <u>N/A</u>

Title: N/A Credential: N/A

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

C. Core Data Form

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

Section 4. Application Contact Information (Instructions Page 27)

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

A. Prefix: Mr. Last Name, First Name: Ince, Jerry

Title: <u>Senior Client Manager</u> Credential: <u>P.E.</u>
Organization Name: <u>Ward, Getz & Associates, LLC</u>

Mailing Address: 2500 Tanglewilde St, Suite 120 City, State, Zip Code: Houston, Texas 77063

Phone No.: (713) 789-1900 E-mail Address: jince@wga-llc.com

Check one or both: □ Administrative Contact ⊠ Technical Contact

B. Prefix: Ms. Last Name, First Name: Anderson, Audrey

Title: <u>Project Engineer</u> Credential: <u>E.I.T.</u>

Organization Name: Ward, Getz & Associates, LLC

Mailing Address: 2500 Tanglewilde St, Suite 120 City, State, Zip Code: Houston, Texas 77063

Phone No.: (346) 771-5311 E-mail Address: aanderson@wga-llc.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: Ince, Jerry

Title: <u>Senior Client Manager</u> Credential: <u>P.E.</u>
Organization Name: <u>Ward, Getz & Associates, LLC</u>

Mailing Address: <u>2500 Tanglewilde St, Suite 120</u> City, State, Zip Code: <u>Houston, Texas 77063</u>

Phone No.: (713) 789-1900 E-mail Address: jince@wga-llc.com

B. Prefix: Ms. Last Name, First Name: Anderson, Audrey

Title: <u>Project Engineer</u> Credential: <u>E.I.T.</u>

Organization Name: Ward, Getz & Associates, LLC

Mailing Address: <u>2500 Tanglewilde St, Suite 120</u> City, State, Zip Code: <u>Houston, Texas, 77063</u>

Phone No.: (346) 771-5311 E-mail Address: aanderson@wga-llc.com

Section 6. Billing Contact Information (Instructions Page 27)

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

Prefix: Mr. Last Name, First Name: Bailey, Doug

Title: President Credential: Click to enter text.

Organization Name: South Central Water Company

Mailing Address: P.O. Box 570177 City, State, Zip Code: Houston, Texas 77257

Phone No.: (713) 783-6611 E-mail Address: <u>Doug@southcentralww.com</u>

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

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

Prefix: Mr. Last Name, First Name: Bailey, Doug

Title: President Credential: Click to enter text.

Organization Name: South Central Water Company

Mailing Address: P.O. Box 570177 City, State, Zip Code: Houston, Texas 77257

Phone No.: (713) 783-6611 E-mail Address: <u>Doug@southcentralww.com</u>

Section 8. Public Notice Information (Instructions Page 27)

A. Individual Publishing the Notices

Prefix: Ms. Last Name, First Name: Anderson, Audrey

Title: <u>Project Engineer</u> Credential: <u>E.I.T.</u>
Organization Name: <u>Ward, Getz & Associates, LLC</u>

Mailing Address: <u>2500 Tanglewilde St, Suite 120</u> City, State, Zip Code: <u>Houston, Texas 77063</u>

Phone No.: (346) 771-5311 E-mail Address: aanderson@wga-llc.com

В.	Method for Receiving Notice of Receipt and Intent to Obtain a Water Quality Permit Package						
	Ind	licate by a check mark the pre	eferred method for receiving the first notice and instructions:				
	\boxtimes	E-mail Address					
		Fax					
		Regular Mail					
C.	Co	ntact permit to be listed in th	ne Notices				
	Pre	fix: <u>Mr.</u>	Last Name, First Name: <u>Ince, Jerry</u>				
	Tit	le: <u>Senior Client Manager</u>	Credential: <u>P.E.</u>				
	Org	ganization Name: <u>Ward, Getz &</u>	Associates, LLC				
	Ma	iling Address: 2500 Tanglewild	le St, Suite 120 City, State, Zip Code: Houston, Texas 77063				
	Pho	one No.: <u>(713) 789-1900</u>	E-mail Address: <u>jince@wga-llc.com</u>				
D.	Pul	olic Viewing Information					
	-	he facility or outfall is located inty must be provided.	in more than one county, a public viewing place for each				
	Pul	olic building name: <u>Taylor Pub</u> l	<u>lic Library</u>				
	Location within the building: Reference Section						
	Phy	vsical Address of Building: <u>80</u>	1 Vance St				
	Cit	y: <u>Taylor</u>	County: <u>Williamson</u>				
	Co	ntact (Last Name, First Name):	: <u>Keyes, Amy</u>				
	Pho	one No.: <u>(512) 352-3434</u> Ext.: Cl	lick to enter text.				
E.	Bili	Bilingual Notice Requirements					
		is information is required for o dification, and renewal appli	new, major amendment, minor amendment or minor ications.				
	be		s only used to determine if alternative language notices will as on publishing the alternative language notices will be in				
	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.		ram required by the Texas Education Code at the elementary he facility or proposed facility?				
		⊠ Yes □ No					
		If no , publication of an alternation.	native language notice is not required; skip to Section 9				
	2.	Are the students who attend a bilingual education program	either the elementary school or the middle school enrolled in at that school?				

No

 \boxtimes

Yes

	3.	location location		ts at the	se schoo	is attend	a bilingua	l educa	tion prog	gram a	t anotner	
			Yes	\boxtimes	No							
	4.				-	-	e a bilingua 9 TAC §89.		_	gram l	out the school ha	S
			Yes	\boxtimes	No							
	5.						or 4 , publi the biling				tive language are	
F.	Su	mmary	of App	lication	in Plain	Languag	e Template	e				
	als	o knov	vn as the	plain la			n Plain Lan or PLS, an		-) Form 20972), ment.	
	At	tachme	ent: <u>App</u>	<u>endix B</u>								
G.	Pu	blic In	volveme	ent Plan	Form							
		-					n (TCEQ Fo mit and in		,	_	plication for a t.	
	At	tachme	ent: <u>App</u>	<u>endix C</u>								
				, ,					- 0		<i>(</i> -	
Se	cti	on 9.		ulated e 29)	Entity	and Pe	ermitted	Site	Inform	ation	(Instructions	S
Α.			is curre RN <u>N/A</u>	ntly regi	ılated by	TCEQ, p	rovide the	Regula	ited Entit	y Num	ber (RN) issued t	0
					Registry		//www15.t	ceq.tex	as.gov/c	rpub/	to determine if	
B.	Na	me of 1	project o	or site (tł	ne name	known by	y the comn	nunity	where lo	cated):		
	Wi	lliamso	<u>n 99 Was</u>	tewater 1	<u> reatment</u>	<u>Plant</u>						
C.	Ov	ner of	treatme	nt facilit	y: <u>South</u>	<u>Central W</u>	ater Compa	<u>ıny</u>				
	Ov	nershi	p of Fac	ility: □	Public	\boxtimes	Private		Both		Federal	
D.	Ov	ner of	land wh	ere treat	tment fac	cility is o	r will be:					
	Pre	efix: <u>Mı</u>	<u>.</u>		I	ast Nam	e, First Nar	ne: <u>Got</u>	tipati, Ve	<u>nkat</u>		
	Tit	le: <u>Owr</u>	<u>ner</u>		(Credentia	l: Click to	enter to	ext.			
	Or	ganiza	tion Nan	1e: <u>999 W</u>	<u> Villiamso</u> 1	<u>n Ranch, I</u>	<u>LC</u>					
	Ma	iling A	ddress:	<u>1000 Rid</u>	ge Hallow	<u> Trl</u>	City, State	, Zip C	ode: <u>Irvir</u>	<u>ıg, Texa</u>	as 7706 <u>3</u>	
	Ph	one No	.: <u>(214) 4</u>	<u>55-7623</u>		E-mail A	ddress: <u>ven</u>	ıkat@la	nd-star.us	<u>3</u>		
							the facility instruction		or co-ap	plican	t, attach a lease	
		Attacl	nment: (click to e	nter text	1.						

	Prefix: <u>N/A</u>	Last Name, First Name: <u>N/A</u>
	Title: <u>N/A</u>	Credential: <u>N/A</u>
	Organization Name: <u>N/A</u>	
	Mailing Address: <u>N/A</u>	City, State, Zip Code: <u>N/A</u>
	Phone No.: <u>N/A</u>	E-mail Address: <u>N/A</u>
	If the landowner is not the sam agreement or deed recorded ea	te person as the facility owner or co-applicant, attach a lease sement. See instructions.
	Attachment: <u>N/A</u>	
F.	Owner sewage sludge disposal property owned or controlled b	site (if authorization is requested for sludge disposal on by the applicant)::
	Prefix: <u>N/A</u>	Last Name, First Name: <u>N/A</u>
	Title: <u>N/A</u>	Credential: <u>N/A</u>
	Organization Name: <u>N/A</u>	
	Mailing Address: <u>N/A</u>	City, State, Zip Code: <u>N/A</u>
	Phone No.: <u>N/A</u>	E-mail Address: <u>N/A</u>
	If the landowner is not the sam agreement or deed recorded ea	e person as the facility owner or co-applicant, attach a lease sement. See instructions.
	Attachment: N/A	
Se	ection 10. TPDES Discha	rge Information (Instructions Page 31)
A.	Is the wastewater treatment fac	cility location in the existing permit accurate?
	□ Yes □ No	
		ion, please give an accurate description:
		an unbuilt facility. The proposed facility's location is st of the intersection of County Road 439 and County Road 434.
В.	Are the point(s) of discharge ar	nd the discharge route(s) in the existing permit correct?
	□ Yes □ No	
		permit application , provide an accurate description of the harge route to the nearest classified segment as defined in 30
		y outfall will be located at the approximate coordinates of fall will be discharge by disinfected effluent force main thence to oadside ditch.
	City nearest the outfall(s): Thor	<u>ndale</u>
	County in which the outfalls(s)	is/are located: <u>Williamson</u>
C.	Is or will the treated wastewate a flood control district drainage	r discharge to a city, county, or state highway right-of-way, or e ditch?

E. Owner of effluent disposal site:

	L res 🖾 No
	If yes , indicate by a check mark if:
	\square Authorization granted \square Authorization pending
	For new and amendment applications, provide copies of letters that show proof of contact and the approval letter upon receipt.
	Attachment: Click to enter text.
D.	For all applications involving an average daily discharge of 5 MGD or more, provide the names of all counties located within 100 statute miles downstream of the point(s) of discharge: $\underline{N/A}$
Se	ection 11. TLAP Disposal Information (Instructions Page 32)
A	For TLAPs, is the location of the effluent disposal site in the existing permit accurate?
	☐ Yes ☐ No
	If no, or a new or amendment permit application , provide an accurate description of the
	disposal site location:
	N/A
B.	City nearest the disposal site: Click to enter text.
C.	County in which the disposal site is located: Click to enter text.
D.	For TLAPs , describe the routing of effluent from the treatment facility to the disposal site:
	N/A
Ε.	For TLAPs , please identify the nearest watercourse to the disposal site to which rainfall
	runoff might flow if not contained: <u>N/A</u>
Sa	ection 12. Miscellaneous Information (Instructions Page 32)
Α.	Is the facility located on or does the treated effluent cross American Indian Land? Yes No
D	
D.	If the existing permit contains an onsite sludge disposal authorization, is the location of the sewage sludge disposal site in the existing permit accurate?
	□ Yes □ No ⊠ Not Applicable
	If No, or if a new onsite sludge disposal authorization is being requested in this permit application, provide an accurate location description of the sewage sludge disposal site.
	Click to enter text.

C.	Did any person formerly employed by the TCEQ represent your company and get paid for service regarding this application?
	□ Yes ⊠ No
	If yes, list each person formerly employed by the TCEQ who represented your company and was paid for service regarding the application: Click to enter text.
D.	Do you owe any fees to the TCEQ?
	□ Yes ⊠ No
	If yes , provide the following information:
	Account number: Click to enter text.
	Amount past due: Click to enter text.
E.	Do you owe any penalties to the TCEQ?
	□ Yes ⊠ No
	If yes , please provide the following information:
	Enforcement order number: Click to enter text.
	Amount past due: Click to enter text.
C	ection 12 Attachments (Instructions Dags 22)
	ection 13. Attachments (Instructions Page 33)
	dicate which attachments are included with the Administrative Report. Check all that apply:
In	dicate which attachments are included with the Administrative Report. Check all that apply: N/A Lease agreement or deed recorded easement, if the land where the treatment facility is
In	dicate which attachments are included with the Administrative Report. Check all that apply: N/A 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.
In	dicate which attachments are included with the Administrative Report. Check all that apply: N/A 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)
In	dicate which attachments are included with the Administrative Report. Check all that apply: N/A Lease agreement or deed recorded easement, if the land where the treatment facility is located or the effluent disposal site are not owned by the applicant or co-applicant. Original full-size USGS Topographic Map with the following information: • Applicant's property boundary • Treatment facility boundary • Labeled point of discharge for each discharge point (TPDES only) • Highlighted discharge route for each discharge point (TPDES only) • Onsite sewage sludge disposal site (if applicable) • Effluent disposal site boundaries (TLAP only) • New and future construction (if applicable) • 1 mile radius information • 3 miles downstream information (TPDES only) • All ponds.

Section 14. Signature Page (Instructions Page 34)

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

Permit Number: <u>Unassigned – New Application</u>
Applicant: South Central Water Company

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 print	ted): <u>Doug B</u>	ailey
Signatory title: President		
Signature: (Use blue ink)	2	Date: 9-15-25
Subscribed and Sworn to before		
on this 1577	day of_	September , 20 25. day of tpr. 1 , 20 27.
My commission expires on the	215	_day of
Notary Public		[SEAL]
Harris, Texas		BOBBY RAY KOONCE II Notary Public, State of Texas

Notary ID 13432073-2

DOMESTIC WASTEWATER PERMIT APPLICATION ADMINISTRATIVE REPORT 1.0

The following information is required for new and amendment applications.

Section 1. Affected Landowner Information (Instructions Page 36)

Α.		cate by a check mark that the landowners map or drawing, with scale, includes the owing information, as applicable:
	\boxtimes	The applicant's property boundaries
	\boxtimes	The facility site boundaries within the applicant's property boundaries
		The distance the buffer zone falls into adjacent properties and the property boundaries of the landowners located within the buffer zone
		The property boundaries of all landowners surrounding the applicant's property (Note: if the application is a major amendment for a lignite mine, the map must include the property boundaries of all landowners adjacent to the new facility (ponds).)
		The point(s) of discharge and highlighted discharge route(s) clearly shown for one mile downstream
		The property boundaries of the landowners located on both sides of the discharge route for one full stream mile downstream of the point of discharge
		The property boundaries of the landowners along the watercourse for a one-half mile radius from the point of discharge if the point of discharge is into a lake, bay, estuary, or affected by tides
		The boundaries of the effluent disposal site (for example, irrigation area or subsurface drainfield site) and all evaporation/holding ponds within the applicant's property
	\boxtimes	The property boundaries of all landowners surrounding the effluent disposal site
		The boundaries of the sludge land application site (for land application of sewage sludge for beneficial use) and the property boundaries of landowners surrounding the applicant's property boundaries where the sewage sludge land application site is located
		The property boundaries of landowners within one-half mile in all directions from the applicant's property boundaries where the sewage sludge disposal site (for example, sludge surface disposal site or sludge monofill) is located
В.	⊠ addı	Indicate by a check mark that a separate list with the landowners' names and mailing resses cross-referenced to the landowner's map has been provided.
C.	⊠ labe	Indicate by a check mark that the landowners list has also been provided as mailing ls in electronic format (Avery 5160).
D.		ride the source of the landowners' names and mailing addresses: <u>Williamson County</u> raisal <u>District</u>
Е.		equired by $Texas\ Water\ Code\ \S\ 5.115$, is any permanent school fund land affected by application?
		□ Yes ⊠ No

	If y e	es, provide the location and foreseeable impacts and effects this application has on the (s):
	Clio	ck to enter text.
Se	ctio	n 2. Original Photographs (Instructions Page 38)
Pro	ovide	original ground level photographs. Indicate with checkmarks that the following ation is provided.
	\boxtimes	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.
	\boxtimes	At least one photograph of the existing/proposed effluent disposal site
	\boxtimes	A plot plan or map showing the location and direction of each photograph
Se	ctio	n 3. Buffer Zone Map (Instructions Page 38)
A.	info	er zone map. Provide a buffer zone map on 8.5×11 -inch paper with all of the following rmation. The applicant's property line and the buffer zone line may be distinguished by g dashes or symbols and appropriate labels.
	•	The required buffer zone; and Each treatment unit; and
В.		er zone compliance method. Indicate how the buffer zone requirements will be met. ck all that apply.
		☑ Ownership
		Restrictive easement
		Nuisance odor control
] Variance
C.		uitable site characteristics. Does the facility comply with the requirements regarding uitable site characteristic found in 30 TAC § 309.13(a) through (d)?
		☑ Yes □ No

DOMESTIC WASTEWATER PERMIT APPLICATION SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

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

Attachment: **Appendix F**

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: Pending

1. Check or Money Order Number: <u>5294</u>

2. Check or Money Order Amount: \$1,650.00

3. Date of Check or Money Order: 9/15/2025

4. Name on Check or Money Order: South Central Water Company

5. APPLICATION INFORMATION

Name of Project or Site: Williamson 99 Wastewater Treatment Plant

Physical Address of Project or Site: <u>Approximately 1.15 miles southeast of the intersection of County</u> Road 439 and County Road 434.

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.

TP				
Core Data Form (TCEQ Form No. 10400) (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 (TCEQ Form Nos. 10053 and 10054. Version dated 6/25/2018 or later.)	\boxtimes	Yes		
Water Quality Permit Payment Submittal Form (Page 19) (Original payment sent to TCEQ Revenue Section. See instructions for mailing ad	⊠ Idress	Yes		
7.5 Minute USGS Quadrangle Topographic Map Attached (Full-size map if seeking "New" permit. 8 ½ x 11 acceptable for Renewals and Amendments)		Yes		
Current/Non-Expired, Executed Lease Agreement or Easement 🗵 N/A		Yes		
Landowners Map (See instructions for landowner requirements)		Yes		
 Things to Know: All the items shown on the map must be labeled. The applicant's complete property boundaries must be delineated who boundaries of contiguous property owned by the applicant. The applicant cannot be its own adjacent landowner. You must identified andowners immediately adjacent to their property, regardless of how from the actual facility. If the applicant's property is adjacent to a road, creek, or stream, the on the opposite side must be identified. Although the properties are applicant's property boundary, they are considered potentially affected if the adjacent road is a divided highway as identified on the USGS to map, the applicant does not have to identify the landowners on the other highway. 	ify the value of the second terms of the secon	e they are owners djacent to ndowners. aphic		
Landowners Labels and Cross Reference List (See instructions for landowner requirements)		Yes		
Electronic Application Submittal (See application submittal requirements on page 23 of the instructions.)	\boxtimes	Yes		
Original signature per 30 TAC § 305.44 - Blue Ink Preferred (If signature page is not signed by an elected official or principle executive office a copy of signature authority/delegation letter must be attached)	r,	Yes		

Summary of Application (in Plain Language)

Yes

THE TOWN ISSORT

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): <u>0.10</u>

2-Hr Peak Flow (MGD): <u>0.40</u>

Estimated construction start date: <u>Mid 2026</u> Estimated waste disposal start date: <u>Mid 2027</u>

B. Interim II Phase

Design Flow (MGD): <u>0.35</u>

2-Hr Peak Flow (MGD): 1.4

Estimated construction start date: <u>Early 2029</u> Estimated waste disposal start date: <u>Late 2029</u>

C. Final Phase

Design Flow (MGD): <u>0.70</u>

2-Hr Peak Flow (MGD): <u>2.8</u>

Estimated construction start date: <u>Early 2033</u> Estimated waste disposal start date: <u>Late 2033</u>

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**.

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)
Appendix J		

C. Process Flow Diagram

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

Attachment: **Appendix K**

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

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

• Latitude: <u>30.526724</u>

• Longitude: <u>-97.22088</u>

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

Latitude: N/ALongitude: 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: **Appendix L**

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

The proposed development will be named Williamson 99 Wastewater Treatment Plant and will serve a proposed subdivision with phase I consisting of 333 single family homes, phase II will serve 1,166 total single family residences, and phase III will consist of 2,333 single family residences.

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.
		4.4)
Section 4. Unbuilt Ph	ases (Instructions Page 4	44)
Is the application for a renew	al of a permit that contains an u	inbuilt phase or phases?
□ Yes ⊠ No		
If yes, does the existing permyears of being authorized by	it contain a phase that has not b the TCEQ?	oeen constructed within five
□ Yes □ No		
	ussion regarding the continued justification may result in the lunbuilt phase or phases.	
N/A	_	
Section 5. Closure Pl	ans (Instructions Page 44	4)
Have any treatment units bee out of service in the next five	n taken out of service permanen years?	ntly, or will any units be taken
□ Yes ⊠ No		
If yes, was a closure plan sub	mitted to the TCEQ?	
□ Yes □ No		
If yes, provide a brief descrip	tion of the closure and the date	of plan approval.

N,	VA
Se	ction 6. Permit Specific Requirements (Instructions Page 44)
	applicants with an existing permit, check the Other Requirements or Special ovisions of the permit.
Α.	Summary transmittal
	Have plans and specifications been approved for the existing facilities and each proposed phase?
	□ Yes ⊠ No
	If yes, provide the date(s) of approval for each phase: Click to enter text.
	Provide information, including dates, on any actions taken to meet a <i>requirement or provision</i> 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.
	The buffer zone does not fall within any nearby properties; therefore, no action is required.

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
		yes, provide information below on the status of any actions taken to meet the nditions of an <i>Other Requirement</i> or <i>Special Provision</i> .
	N	/A
D.	Gr	it 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.	Sto	ormwater 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 <u>Click to enter text.</u> or TXRNE <u>Click to enter text.</u>
		If no, do you intend to seek coverage under TXR050000?
		□ Yes □ No
	3.	Conditional exclusion
		Alternatively, do you intend to apply for a conditional exclusion from permitting based TXR050000 (Multi Sector General Permit) Part II B.2 or TXR050000 (Multi Sector General Permit) Part V, Sector T 3(b)?
		□ Yes □ No
		If yes, please explain below then proceed to Subsection F, Other Wastes Received:

	Click to enter text.
1.	Existing coverage in individual permit
	Is your stormwater discharge currently permitted through this individual TPDES or TLAP permit?
	□ Yes □ No
	If yes , provide a description of stormwater runoff management practices at the site that are authorized in the wastewater permit then skip to Subsection F, Other Wastes Received.
	Click to enter text.
5.	Zero stormwater discharge
	Do you intend to have no discharge of stormwater via use of evaporation or other means?
	□ Yes □ No
	If yes, explain below then skip to Subsection F. Other Wastes Received.
	Click to enter text.
	Note: If there is a potential to discharge any stormwater to surface water in the state as the result of any storm event, then permit coverage is required under the MSGP or an individual discharge permit. This requirement applies to all areas of facilities with treatment plants or systems that treat, store, recycle, or reclaim domestic sewage, wastewater or sewage sludge (including dedicated lands for sewage sludge disposal located within the onsite property boundaries) that meet the applicability criteria of above. You have the option of obtaining coverage under the MSGP for direct discharges, (recommended), or obtaining coverage under this individual permit.
6.	Request for coverage in individual permit
	Are you requesting coverage of stormwater discharges associated with your treatment plant under this individual permit?
	□ Yes □ No
	If yes , provide a description of stormwater runoff management practices at the site for which you are requesting authorization in this individual wastewater permit and describe whether you intend to comingle this discharge with your treated effluent or discharge it via a separate dedicated stormwater outfall. Please also indicate if you

		intend to divert stormwater to the treatment plant headworks and indirectly discharge it to water in the state.
		Click to enter text.
		Note: Direct stormwater discharges to waters in the state authorized through this individual permit will require the development and implementation of a stormwater pollution prevention plan (SWPPP) and will be subject to additional monitoring and reporting requirements. Indirect discharges of stormwater via headworks recycling will require compliance with all individual permit requirements including 2-hour peak flow limitations. All stormwater discharge authorization requests will require additional information during the technical review of your application.
F.	Di	scharges to the Lake Houston Watershed
	Do	es the facility discharge in the Lake Houston watershed?
		□ Yes ⊠ No
		yes, attach a Sewage Sludge Solids Management Plan. See Example 5 in the instructions. ck to enter text.
G.	Ot	her 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.
		Click to enter text.
		Note: Permits that accept sludge from other wastewater treatment plants may be required to have influent flow and organic loading monitoring.
	2.	Acceptance of septic waste
		Is the facility accepting or will it accept septic waste?
		□ Yes ⊠ No
		If yes, does the facility have a Type V processing unit?
		□ Yes □ No
		If yes, does the unit have a Municipal Solid Waste permit?
		□ Yes □ No

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

Click to enter text.

Click to enter text.			

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

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

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

□ Yes ⊠ No

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

Click to enter text.		

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

Is the facility in operation?

□ Yes ⊠ No

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

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

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

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

Pollutant	Average Conc.	Max Conc.	No. of Samples	Sample Type	Sample Date/Time
CBOD ₅ , mg/l					
Total Suspended Solids, mg/l					
Ammonia Nitrogen, mg/l					
Nitrate Nitrogen, mg/l					
Total Kjeldahl Nitrogen, mg/l					
Sulfate, mg/l					
Chloride, mg/l					
Total Phosphorus, mg/l					
pH, standard units					
Dissolved Oxygen*, mg/l					
Chlorine Residual, mg/l					
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

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: <u>TBD</u>

[†]TLAP permits only

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

WW	TP's Sewage Sludge or Biosolids Management Facility Type
Che	ck 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)
ww	TP's Sewage Sludge or Biosolids Treatment Process
Che	ck all that apply. See instructions for guidance.
\boxtimes	Aerobic Digestion
	Air Drying (or sludge drying beds)
	Lower Temperature Composting
	Lime Stabilization
	Higher Temperature Composting
	Heat Drying
	Thermophilic Aerobic Digestion
	Beta Ray Irradiation
	Gamma Ray Irradiation
	Pasteurization
	Preliminary Operation (e.g. grinding, de-gritting, blending)
	Thickening (e.g. gravity thickening, centrifugation, filter press, vacuum filter)
	Sludge Lagoon
	Temporary Storage (< 2 years)
	Long Term Storage (>= 2 years)
	Methane or Biogas Recovery
	Other Treatment Process: Click to enter text.

C. Sewage Sludge or Biosolids Management

B.

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	Bulk		N/A: Disposal in Landfill	N/A: Disposal in Landfill
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): <u>Click to enter text.</u>

D. Disposal site

Disposal site name: <u>Austin Wastewater Processing Facility</u>

TCEQ permit or registration number: <u>MSW 2384</u> County where disposal site is located: Travis

E. Transportation method

Method of transportation (truck, train, pipe, other): <u>Truck</u> Name of the hauler: Wastewater Residuals Management, LLC

Hauler registration number: 2370A

Sludge is transported as a:

Liquid □ semi-liquid ⊠ se	emi-solid 🗆 🦴 soli	d 🗆
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Section 10. Permit Authorization for Sewage Sludge Disposal (Instructions Page 52)

A. Beneficial use authorization

Does the existing permit include authoriz	ation for land application	n 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 at	ıthorization				
Does the existing per storage or disposal o	mit include authorization f otions?	or an	y of the	follov	ving sludge processing,
Sludge Compostir	g		Yes		No
Marketing and Dis	tribution of Biosolids		Yes	\boxtimes	No
Sludge Surface Di	sposal or Sludge Monofill		Yes		No
Temporary storag	e in sludge lagoons		Yes		No
authorization, is the	pove sludge options and the completed Domestic Waste EQ Form No. 10056) attac	wate	r Permi	t Appl	lication: Sewage Sludge
□ Yes □ No					
Section 11. Sewag	e Sludge Lagoons (In	stru	ctions	Page	e 53)
Does this facility include	sewage sludge lagoons?				
□ Yes ⊠ No					
If yes, complete the rema	ainder of this section. If no	proc	eed to S	ection	12.
A. Location information	l				
The following maps a provide the Attachme	re required to be submitte ent Number.	d as p	art of tl	ne app	lication. For each map,
 Original Generation 	al Highway (County) Map:				
Attachment: (lick to enter text.				
• USDA Natural	Resources Conservation Se	rvice	Soil Map):	
_	lick to enter text.				
9	ency Management Map:				
	lick to enter text.				
• Site map:	1.1				
	lick to enter text.	wiet v	vithin th	o lago	oon area. Cheek all that
apply.	on if any of the following ϵ	exist v	VICIIIII (I.	ie iago	on area. Check an that
□ Overlap a des	ignated 100-year frequency	/ floo	d plain		
☐ Soils with flo	oding classification				
□ Overlap an u	istable area				
□ Wetlands					
□ Located less	han 60 meters from a fault	-			
\square None of the a	bove				
Attachment: Click	to enter text.				

Click to enter text.
Temporary storage information
Provide the results for the pollutant screening of sludge lagoons. These results are in addition to pollutant results in <i>Section 7 of Technical Report 1.0.</i>
Nitrate Nitrogen, mg/kg: Click to enter text.
Total Kjeldahl Nitrogen, mg/kg: Click to enter text.
Total Nitrogen (=nitrate nitrogen + TKN), mg/kg: Click to enter text.
Phosphorus, mg/kg: Click to enter text.
Potassium, mg/kg: Click to enter text.
pH, standard units: Click to enter text.
Ammonia Nitrogen mg/kg: Click to enter text.
Arsenic: Click to enter text.
Cadmium: Click to enter text.
Chromium: Click to enter text.
Copper: Click to enter text.
Lead: Click to enter text.
Mercury: Click to enter text.
Molybdenum: Click to enter text.
Nickel: Click to enter text.
Selenium: Click to enter text.
Zinc: Click to enter text.
Total PCBs: Click to enter text.
Provide the following information:
Volume and frequency of sludge to the lagoon(s): Click to enter text.
Total dry tons stored in the lagoons(s) per 365-day period: Click to enter text.
Total dry tons stored in the lagoons(s) over the life of the unit: Click to enter text.

C. Liner information

Does the active/	'proposed	sludge	lagoon(s) have a	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.
	Click	to enter text.
D.	Site d	evelopment plan
	Provid	le a detailed description of the methods used to deposit sludge in the lagoon(s):
	Click	to enter text.
	Attacl	n the following documents to the application.
	•	Plan view and cross-section of the sludge lagoon(s)
		Attachment: Click to enter text.
	•	Copy of the closure plan
		Attachment: Click to enter text.
	•	Copy of deed recordation for the site
		Attachment: Click to enter text.
	•	Size of the sludge lagoon(s) in surface acres and capacity in cubic feet and gallons
		Attachment: Click to enter text.
	•	Description of the method of controlling infiltration of groundwater and surface water from entering the site
		Attachment: Click to enter text.
	•	Procedures to prevent the occurrence of nuisance conditions
		Attachment: Click to enter text.
E.	Grou	ndwater monitoring
	groun	undwater monitoring currently conducted at this site, or are any wells available for dwater monitoring, or are groundwater monitoring data otherwise available for the e lagoon(s)?
		Yes □ No
	types	undwater monitoring data are available, provide a copy. Provide a profile of soil encountered down to the groundwater table and the depth to the shallowest dwater as a separate attachment.
	At	tachment: Click to enter text.

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

A. Additional authorizations
Does the permittee have additional authorizations for this facility, such as reuse authorization, sludge permit, etc?
□ Yes ⊠ No
If yes, provide the TCEQ authorization number and description of the authorization:
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 55)

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

- The laboratory is an in-house laboratory and is:
 - o periodically inspected by the TCEQ; or
 - o located in another state and is accredited or inspected by that state; or
 - o 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: Doug Bailey

Title: President

Signature: _	 	
Date:		

LABORATORY
CERTIFICATION NOT
APPLICABLE AS PLANT IS
NOT IN OPERATION

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.

The developer that has the land under contract is planning a development of approximately 2,333 single-family homes, According to TCEQ rules, using 300 GPD per LUE, this development will require 700,000 GPD. The developer plans to begin construction in mid 2026. The first phase consists of 333 homes, which will be addressed in the initial requested phase. The second phase includes 1,166 homes, with construction anticipated to begin in early 2029. The third and final phase will include 2,333 homes, with groundbreaking expected in early 2033.

B. Regionalization of facilities

For additional guidance, please review <u>TCEO's Regionalization Policy for Wastewater</u> Treatment¹.

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

1. Municipally incorporated areas

If the applicant is a city, then Item 1 is not applicable. Proceed to Item 2 Utility CCN areas.
Is any portion of the proposed service area located in an incorporated city?
□ Yes ⊠ No □ Not Applicable
If yes, within the city limits of: Click to enter text.
If yes, attach correspondence from the city.
Attachment: Click to enter text.

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

Attachment: Click to enter text.

2. Utility CCN areas

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

Yes No

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

If yes, attach a justification for the proposed facility and a cost analysis of expenditures that includes the cost of connecting to the CCN facilities versus the cost of the proposed facility or expansion. **Attachment**: Click to enter text. 3. Nearby WWTPs or collection systems Are there any domestic permitted wastewater treatment facilities or collection systems located within a three-mile radius of the proposed facility? Yes \boxtimes No If ves. 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: N/A 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): Click to enter text.

Average Influent Organic Strength or BOD₅ Concentration in mg/l: Click to enter text.

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

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

Click to enter text.		

B. Proposed organic loading

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

Table 1.1(1) - Design Organic Loading

Source	Total Average Flow (MGD)	Influent BOD5 Concentration (mg/l)
Municipality		
Subdivision	Ph. I - 0.1 MGD Ph. II - 0.35 MGD Ph. III - 0.7 MGD	Ph. I - 300 mg/L Ph. II - 300 mg/L Ph. III - 300 mg/L
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	Ph. I - 0.1 MGD Ph. II - 0.35 MGD Ph. III - 0.7 MGD	
AVERAGE BOD₅ from all sources		Ph. I - 300 mg/L Ph. II - 300 mg/L Ph. III - 300 mg/L

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

A. Existing/Interim I Phase Design Effluent Quality

Biochemical Oxygen Demand (5-day), mg/l: 10

Total Suspended Solids, mg/l: 15

Ammonia Nitrogen, mg/l: 2

Total Phosphorus, mg/l: <u>Click to enter text.</u> Dissolved Oxygen, mg/l: <u>Click to enter text.</u> Other: Click to enter text.

B. Interim II Phase Design Effluent Quality

Biochemical Oxygen Demand (5-day), mg/l: 10

Total Suspended Solids, mg/l: 15

Ammonia Nitrogen, mg/l: 2

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

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

Other: Click to enter text.

C. Final Phase Design Effluent Quality

Biochemical Oxygen Demand (5-day), mg/l: 10

Total Suspended Solids, mg/l: 15

Ammonia Nitrogen, mg/l: 2

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

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

Other: Click to enter text.

D. Disinfection Method

Identify the proposed method of disinfection.

☐ Chlorine: 2 mg/l after 26.3 minutes detention time at peak flow

Dechlorination process: N/A

□ Ultraviolet Light: <u>Click to enter text.</u> seconds contact time at peak flow

☐ Other: Click to enter text.

Section 4. Design Calculations (Instructions Page 58)

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

Attachment: Appendix M

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.

☐ Sludge Surface Disposal or Sludge Monofill

B.

B.

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

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

Attach a solids management plan to the application.

Attachment: **Appendix O**

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: <u>Click to enter text.</u>
Distance and direction to the intake: <u>Click to enter text.</u>
Attach a USGS map that identifies the location of the intake.
Attachment: Click to enter text.
Section 2. Discharge into Tidally Affected Waters (Instructions Page 63)
Does the facility discharge into tidally affected waters?
□ Yes ⊠ No
If no , proceed to Section 3. If yes , complete the remainder of this section. If no, proceed to Section 3.
A. Receiving water outfall
Width of the receiving water at the outfall, in feet: Click to enter text.
B. Oyster waters
Are there oyster waters in the vicinity of the discharge?
□ Yes □ No
If yes, provide the distance and direction from outfall(s).
Click to enter text.
C. Sea grasses
Are there any sea grasses within the vicinity of the point of discharge?
□ Yes □ No
If yes, provide the distance and direction from the outfall(s).
Click to enter text.

Section 3. **Classified Segments (Instructions Page 63)** Is the discharge directly into (or within 300 feet of) a classified segment? Yes ⊠ No If yes, this Worksheet is complete. **If no**, complete Sections 4 and 5 of this Worksheet. Section 4. **Description of Immediate Receiving Waters (Instructions Page 63)** Name of the immediate receiving waters: Unnamed Tributary A. Receiving water type Identify the appropriate description of the receiving waters. Stream Freshwater Swamp or Marsh П Lake or Pond Surface area, in acres: Click to enter text. Average depth of the entire water body, in feet: Click to enter text. Average depth of water body within a 500-foot radius of discharge point, in feet: Click to enter text. Man-made Channel or Ditch \boxtimes Open Bay Tidal Stream, Bayou, or Marsh Other, specify: Click to enter text. **B.** Flow characteristics If a stream, man-made channel or ditch was checked above, provide the following. For existing discharges, check one of the following that best characterizes the area *upstream* of the discharge. For new discharges, characterize the area downstream of the discharge (check one). Intermittent - dry for at least one week during most years Intermittent with Perennial Pools - enduring pools with sufficient habitat to maintain significant aquatic life uses Perennial - normally flowing Check the method used to characterize the area upstream (or downstream for new dischargers). USGS flow records Historical observation by adjacent landowners Personal observation Other, specify: Click to enter text.

C.	Downs	tream perennial confluences		
		e names of all perennial streams that cream of the discharge point.	at joir	n the receiving water within three miles
	N/A			
D.	Downs	tream characteristics		
		receiving water characteristics charge (e.g., natural or man-made dams	_	ithin three miles downstream of the ds, reservoirs, etc.)?
		Yes ⊠ No		
	If yes,	discuss how.		
	Click	to enter text.		
E.	Norma	l dry weather characteristics		
	Provide	e general observations of the water	body	during normal dry weather conditions.
	During	g dry weather conditions, the road side	ditch	is normally dry.
		nd time of observation: <u>9/16/25</u>		
	Was th	e water body influenced by stormw	ater r	runoff during observations?
		Yes ⊠ No		
Se	ction	5. General Characteristic	s of	the Waterbody (Instructions
		Page 65)		
Α.	Upstre	am influences		
	Is the i			ne discharge or proposed discharge site lat apply.
		Oil field activities		Urban runoff
		Upstream discharges	\boxtimes	Agricultural runoff
		Septic tanks		Other(s), specify: <u>Click to enter text.</u>

B. Waterbody uses Observed or evidences of the following uses. Check all that apply. Livestock watering Contact recreation Irrigation withdrawal Non-contact recreation **Fishing Navigation** Domestic water supply Industrial water supply Park activities \boxtimes Other(s), specify: Storm runoff 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: <u>N/A</u> Time of study: <u>N/A</u>
Stream name: Click to enter text.
Location: <u>Click to enter text.</u>
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: Click to enter text.
Number of stream bends that are moderately defined: Click to enter text.
Number of stream bends that are poorly defined: Click to enter text.
Number of riffles: Click to enter text.
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.
Click to enter text.

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	Transect location	Water surface	Stream depths (ft) at 4 to 10 points along each		
Select riffle, run, glide, or pool. See Instructions, Definitions section.		width (ft)	transect from the channel bed to the water surface. Separate the measurements with commas.		
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.					

Section 3. Summarize Measurements (Instructions Page 65)

Streambed slope of entire reach, from USGS map in feet/feet: Click to enter text.

Approximate drainage area above the most downstream transect (from USGS map or county highway map, in square miles): <u>Click to enter text.</u>

Length of stream evaluated, in feet: <u>Click to enter text.</u>

Number of lateral transects made: <u>Click to enter text.</u>

Average stream width, in feet: Click to enter text.

Average stream depth, in feet: Click to enter text.

Average stream velocity, in feet/second: Click to enter text.

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

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

Size of pools (large, small, moderate, none): Click to enter text.

Maximum pool depth, in feet: Click to enter text.

DOMESTIC WASTEWATER PERMIT APPLICATION WORKSHEET 3.0: LAND DISPOSAL OF EFFLUENT

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

Type of Disposal System (Instructions Page 67) Section 1. Identify the method of land disposal: Surface application Subsurface application Irrigation Subsurface soils absorption Subsurface area drip dispersal system Drip irrigation system Evaporation Evapotranspiration beds

□ Other (describe in detail): <u>Click to enter text.</u>

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

	1			
Attach a copy of licensed profess			red, signed, and seale	d by a Texas
Attachment:	Click to enter to	ext.		
Section 4.	Flood and R	unoff Protectio	n (Instructions P	age 67)
Is the land appli	cation site <u>withi</u>	<u>n</u> the 100-year freq	uency flood level?	
□ Yes □	No			
If yes, describe	how the site will	be protected from	inundation.	
Click to enter to	ext.			
Provide the sour	ce used to deter	mine the 100-year	frequency flood level:	
Click to enter to	ext.			
Provide a descri	 ption of tailwate	er controls and rain	fall run-on controls us	sed for the land
application site.	,			
Click to enter to	ext.			

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

- 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? \Box Yes \Box 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 Chlorine **Date** 30 Day Avg BOD5 **TSS** рН Acres Flow MGD Residual mg/l mg/l mg/l irrigated

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

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

Void ratio of soil in the beds: Click to enter text.

Storage volume within the beds, in acre-feet: Click to enter text.

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

Attachment: Click to enter text.

D. Overland flow Area used for application, in acres: Click to enter text. Slopes for application area, percent (%): Click to enter text. Design application rate, in gpm/foot of slope width: Click to enter text. Slope length, in feet: Click to enter text. Design BOD₅ loading rate, in lbs BOD₅/acre/day: Click to enter text. Design application frequency: hours/day: Click to enter text. **And** days/week: Click to enter text. Attach a separate engineering report with the method of application and design requirements according to 30 TAC Chapter 217. Attachment: Click to enter text. Section 2. Edwards Aquifer (Instructions Page 72)

Is the facility subject to 30 TAC Chapter 213, Edwards Aquifer Rules?
□ Yes □ No
If yes , is the facility located on the Edwards Aquifer Recharge Zone?
□ Yes □ No
If yes, attach a geological report addressing potential recharge features.
Attachment: Click to enter text.

DOMESTIC WASTEWATER PERMIT APPLICATION **WORKSHEET 3.2: SURFACE LAND DISPOSAL OF EFFLUENT**

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

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

Section 1. Subsurface Application (instructions Page 73)
Identify the type of system:
□ Conventional Gravity Drainfield, Beds, or Trenches (new systems must be less than 5,000 GPD)
□ Low Pressure Dosing
□ Other, specify: <u>Click to enter text.</u>
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: <u>Click to enter text.</u>
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: <u>Click to enter text.</u>
Area of bed(s), in square feet: Click to enter text.
Soil Classification: <u>Click to enter text.</u>
Attach a separate engineering report with the information required in $30\ TAC\ \S\ 309.20$, excluding the requirements of $\S\ 309.20\ b(3)(A)$ 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 <i>30 TAC §213.8</i> . 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*.

Se	ection 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:
В.	<u>Click to enter text.</u> 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: <u>Click to enter text.</u>
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.
Е.	Owner of the land where the subsurface area drip dispersal system is located: <u>Click to enter text.</u>
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

A.	Type of system
	□ Subsurface Drip Irrigation
	□ Surface Drip Irrigation
	□ Other, specify: <u>Click to enter text.</u>
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: <u>Click to enter text.</u>
	Major soil series: <u>Click to enter text.</u>
	Depth to groundwater, in feet: Click to enter text.
C.	Application rate
	Is the facility located west of the boundary shown in <i>30 TAC § 222.83</i> 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 <i>30 TAC § 222.83</i> 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 <i>30 TAC §222.83</i> 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: <u>Click to enter text.</u>
D.	Dosing information
	Number of doses per day: Click to enter text.
	Dosing duration per area, in hours: <u>Click to enter text.</u>

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.
Se	ction 3. Required Plans (Instructions Page 74)
Α.	Recharge feature plan
	Attach a Recharge Feature Plan with all information required in <i>30 TAC §222.79</i> .
	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.
Se	ction 4. Floodway Designation (Instructions Page 75)
Α.	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.
Se	ction 5. Surface Waters in the State (Instructions Page 75)

S

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.

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 <i>30 TAC §213.8</i> . Please call the Municipal Permits Team at 512-239-4671 to schedule a pre-application meeting.

B. Buffer variance request

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 sat	nple.
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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				0.05
(Lindane)				
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 1	pollutants	identified	in Ta	bles 4.0	0(2)A-E,	indicate	type o	of samp	ole.
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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				10
[1,3-Dichloropropene]				
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 Azobenzene)				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 ${f or}$ B are present, complete Table 4.0(2)F.
	For pollutants identified in Table 4.0(2)F, indicate the type of sample.

Grab □ Composite □

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

Table 4.0(2)F - Dioxin/Furan Compounds

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

DOMESTIC WASTEWATER PERMIT APPLICATION WORKSHEET 5.0: TOXICITY TESTING REQUIREMENTS

The following **is required** for facilities with a current operating design flow of **1.0 MGD or greater**, with an EPA-approved **pretreatment** program (or those required to have one under 40 CFR Part 403), or are required to perform Whole Effluent Toxicity testing. See Page 86 of the instructions for further details.

This worksheet is not required minor amendments without renewal.

Section 1. Required Tests

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

7-day Chronic: <u>Click to enter text.</u>
48-hour Acute: <u>Click to enter text.</u>

Section 2. Toxicity Reduction Evaluations (TREs)	
Has this facility completed a TRE in the past four and a half years? Or is the facility cur performing a TRE?	rently
□ Yes □ No	
If yes, describe the progress to date, if applicable, in identifying and confirming the tox	cicant.
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)

B.

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: <u>Click to enter text.</u>
Other IUs:
Number of IUs: Click to enter text.
Average Daily Flows, in MGD: <u>Click to enter text.</u>
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.

	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.
n	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.
Se	ction 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.

C. Treatment plant pass through

	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 tex	t.						
C.		all parameters mea						
Tal	monitoring during ble 6.0(1) – Parame	the last three years	s. Submit an attac	hment if necessa	ry.			
P	ollutant	Concentration	MAL	Units	Date			
D.	Industrial user in	terruptions						
		or other IU caused o ass throughs) at you			cluding			
	□ Yes □	No						
		industry, describe nd probable polluta		luding dates, dura	ation, description			
	Click to enter tex	t.						

B. Non-substantial modifications

Section 3. Significant Industrial User (SIU) Information and Categorical Industrial User (CIU) (Instructions Page 88)

Α.	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: <u>Click to enter text.</u>
	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, in gallons/day: Click to enter text. Discharge Type: \square Continuous \square Batch \square Intermittent
	Discharge Type: □ Continuous □ Batch □ Intermittent

Pretreatment standards
Is the SIU or CIU subject to technically based local limits as defined in the <i>i</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: <u>Click to enter text.</u>
Category: Click to enter text.
Subcategories: <u>Click to enter text.</u>
Category: Click to enter text.
Subcategories: <u>Click to enter text.</u>
Category: Click to enter text.
Subcategories: <u>Click to enter text.</u>
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.

E.

F.

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	TCFO	Program	Aron
ı.	ICEU	riogiam	Area

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

Program ID: Click to enter text.

Contact Name: <u>Click to enter text.</u> Phone Number: <u>Click to enter text.</u>

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: <u>Click to enter text.</u>
	Number of Injection Wells: <u>Click to enter text.</u>
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: <u>Click to enter text.</u>
	License Number: <u>Click to enter text.</u>
ectio	n 2. Proposed Down Hole Design
	a diagram signed and sealed by a licensed engineer as Attachment C.
	D(1) - Down Hole Design Table
able 7.0	C C C C C C C C C C C C C C C C C C C

Ta

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: <u>Click to enter text.</u> System(s) Construction: Click to enter text.

Section 4	Site Hydrog	reological a	and Injection	Zone Data
occuon 1.	DICC ITY CITUE	COLUBICAL		LOIIC Data

- 1. Name of Contaminated Aguifer: 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: <u>Click to enter text.</u>
- **5.** Depth to Ground Water: <u>Click to enter text.</u>
- **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: <u>Click to enter text.</u>
- **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): <u>Click to enter text.</u>
- **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): <u>Click to enter text.</u>
- **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 Aguifer 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)

Appendices

Appendix A

Core Data Form

Appendix B

Plain Language Summary

Appendix C

Public Involvement Plan

Appendix D

Original Photographs

Appendix E

Buffer Zone Map

Appendix F

SPIF Form & SPIF USGS Map

Appendix G

Original USGS Map

Appendix H

Landowners Map and Cross-Referenced List

Appendix I

Treatment Process Description

Appendix J

Treatment Unit Descriptions

Appendix K

Flow Diagram

Appendix L

Site Drawing

Appendix M

Design Calculations

Appendix N

Wind Rose

Appendix O

Solids Management Plan



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

New Pern	nit, Registra	tion or Authorization	(Core Data Form	should be s	ubmitt	ed with	the progr	ram application.)			
Renewal (Core Data F	Form should be submit	tted with the rene	ewal form)	_			ther			
2. Customer	CN 602602179 Follow 1 Follow 1 for CN 0 Cent						3. Reg	3. Regulated Entity Reference Number (if issued)			
CN 6026021							RN				
SECTIO	N II:	Customer	Inform	<u>ation</u>							
4. General Cu	istomer in	formation	5. Effective D	ate for Cu	stome	r Info	rmation	Updates (mm/dd/	уууу)		
New Custor	mer	Ūυ	pdate to Custom	er Informati	ion		Chan	ge in Regulated Ent	ity Owne	ership	
☐Change in Le	egal Name (Verifiable with the Te	as Secretary of S	tate or Texa	as Com	ptrolle	r of Public	Accounts)			
The Custome	r Name su	bmitted here may i	be updated aut	omatically	y base	d on v	what is c	urrent and active	with th	e Texas Sec	retary of State
		ller of Public Accou									
6. Customer	Legal Nam	e (If an individual, pri	nt last name first	: eg: Doe, Jo	ohn)			If new Customer,	enter pre	vious Custon	ner below:
South Central Water Company											
7. TX SOS/CP	A Filing No	ımber	8. TX State Ta	x ID (11 dig	gits)						Number (if
0161296200			17606670101	17606670101				(9 digits)		applicable)	
0101290200			17605670101					(5 digits)		N/A	
								N/A			
11. Type of C	ustomer:		tion				☐ Individ	ndividual Partnership: General C			neral Limited
		ounty Federal	Local State	Other			Sole Proprietorship				
12. Number	of Employe	ees						13. Independer	tly Ow	ned and Op	erated?
Ø 0-20 ☐	21-100	101-250 251-	500 🔲 501 ar	nd higher				⊠ Yes	□ No		
14. Customer	r Role (Prop	oosed or Actual) – as i	t relates to the Re	egulated En	tity list	ed on t	this form.	Please check one of	the follo	wing	
Owner Occupations	al Licensee	Operator Responsible Par		er & Operat P/BSA Appl				Other:			
15. Mailing	P.O. Box 5	70177									
Address:											
Audi C33.	City	Houston		State	TX		ZIP	77257		ZIP + 4	
16. Country I	Viailing Inf	ormation (if outside	USA)			17.	-Mail Ad	dress (if applicable	e)		
						Doug	Doug@southcentralww.com				

18. Telephone Number			19. Extension or	Code		20. F	ax Number (ij	f applicable)	
(713) 783-6611						() -		
SECTION III:	Regu	lated Ent	ity Inforn	natio	1				
21. General Regulated E	ntity Inforn	n ation (If 'New Reg	ulated Entity" is selec	ted, a new	permit applic	ation is a	also required.)		7
New Regulated Entity	New Regulated Entity								
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 Nar	22. Regulated Entity Name (Enter name of the site where the regulated action is taking place.)								
Williamson 99 Wastewater	Williamson 99 Wastewater Treatment Plant								
23. Street Address of the Regulated Entity:									
(No PO Boxes)		T		_					
	City	Thorndale	State	TX	ZIP	7657	7	ZIP + 4	
24. County	Williamsor	1							
		If no Stree	t Address is provid	ed, fields 2	25-28 are re	equired.			
25. Description to									
Physical Location:	Approxima	tely 1.15 miles sout	heast of the intersect	ion of Coun	ty Road 439	and Cour	nty Road 434		
26. Nearest City						State		Nea	rest ZIP Code
Thorndale						TX		7757	77
Latitude/Longitude are rused to supply coordinate	equired and es where no	d may be added/i one have been pro	updated to meet To ovided or to gain a	CEQ Core L ccuracy).	Pata Stando	ards. (Ge	eocoding of ti	ne Physical	Address may be
27. Latitude (N) In Decim	al:	30.538319		28. Longitude (W			cimal:	-97.21396	57
Degrees	Minutes	S	econds	Degre	es		Minutes	1 [Seconds
30		32	17.95		97	-	12		50.28
29. Primary SIC Code	30.	Secondary SIC Co	ode	31. Primar	y NAICS Co	de	32. Seco	ndary NAIC	S Code
(4 digits)	(4 d	ligits)		(5 or 6 digit	-		(5 or 6 dig	gits)	
4952									
33. What is the Primary B	usiness of t	his entity? (Do n	not repeat the SIC or I	NAICS descri	iption.)				
Wastewater Utilities									
34. Mailing	P.O. Box 57	70177							
Address:									
71001 6337	City	Houston	State	TX	ZIP	77257	I	ZIP + 4	
35. E-Mail Address:	Dou	g@southcentralww	com						
36. Telephone Number			37. Extension or Co	ode	38. Fa	x Numb	per (if applicab	le)	
(713)783-6611					7,				

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 New Source ☐ Municipal Solid Waste OSSF Petroleum Storage Tank □ PWS Review Air Sludge Storm Water Title V Air Tires Used Oil ☐ Voluntary Cleanup Wastewater ■ Wastewater Agriculture ■ Water Rights Other: Pending **SECTION IV: Preparer Information** 40. Name: Audrey Anderson 41. Title: Project Engineer 42. Telephone Number 43. Ext./Code 44. Fax Number 45. E-Mail Address (346) 771-5311) aanderson@wga-llc.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: South Central Water Company Job Title: President Name (In Print): Doug Bailey Phone: (713) 783- **6611** Signature: Date:

TCEQ-10400 (11/22) Page 3 of 3



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.

South Central Water Company (CN602602179) proposes to operate Williamson 99 Wastewater Treatment Plant (RN Pending), a domestic wastewater treatment plant. The facility will be located at located at approximately 1.15 miles southeast of the intersection of County Road 439 and County Road 434, in Thorndale, Williamson County, Texas 76577. This permit is to authorize the discharge of treated domestic wastewater to a volume not to exceed an average flow of 700,000 gallons per day.

Discharges from the facility are expected to contain free available chlorine, total residual chlorine, total suspended solids, oil and grease, total iron, pH differences, and temperature differences. Domestic wastewater will be treated by an activated sludge processing plant consisting of the following treatment units: bar screens, aeration basins, digester basins, clarifiers, a lift station, and chlorine contact basins.

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.

South Central Water Company (CN602602179) propone operar Planta de tratamiento de aguas residuales Williamson 99, una planta de tratamiento de aguas residuals domésticas. La instalación está ubicada en aproximadamente 1.15 millas al sureste de la intersección de Camino del Condado 439 y Camino del Condado 434, en Thorndale, Condado de Williamson, Texas 76577. Este permiso es para autorizar la descarga de aguas residuales domésticas tratadas a un volumen que no exceda un flujo promedio de 700,000 galones por día.

Se espera que las descargas de la instalación contengan cloro libre disponible, cloro residual total, sólidos suspendidos totales, aceite y grasa, hierro total, diferencias de pH y diferencias de temperatura. Aguas residuals domésticas. están tratado por una planta de procesamiento de todos activitadoes que consta de las siguientes unidades de tratamiento: pantallas de barras, cuencas de aireación, cuencas de digestores, clarificadores, una estación de bombeo y cuencas de contacto con cloro.



Public Involvement Plan

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.

TCEQ-20960 (02-09-2023)

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

D ' 1	1 1		C 1 1	
Provide 3	hrigt d	accrintion	of planned	activation
I I OVIUE a	титет и	CSCLIDUOL	от планиси	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.

language notice is n	ecessary. Please pro	ovide the following info	ormation.	
(City)				
(County)				
(Census Tract) Please indicate which City	of these three is the County	e level used for gatherin Census Tract	ng the following informat	tion.
(a) Percent of people	over 25 years of age	e who at least graduated	from high school	
- -		the specified location	race within the specified	location
(d) Percent of Linguis	stically Isolated Hous	seholds by language wit	hin the specified locatior	1
(e) Languages commo	only spoken in area l	by percentage		
(f) Community and/o	or Stakeholder Group	os		
(g) Historic public int	terest or involvemen	t		

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)



Original Photographs



EXHIBIT TITLE:

UPSTREAM PHOTOGRAPH

LOCATION: WILLIAMSON 99

DATE ISSUED: JUNE 2025



TEXAS REGISTERED ENGINEERING FIRM F-9756 2500 Tanglewilde, Suite 120 Houston, Texas 77063 713.789.1900



EXHIBIT TITLE:

DOWNSTREAM PHOTOGRAPH

LOCATION: WILLIAMSON 99

DATE ISSUED: JUNE 2025



TEXAS REGISTERED ENGINEERING FIRM F-9756 2500 Tanglewilde, Suite 120 Houston, Texas 77063 713.789.1900

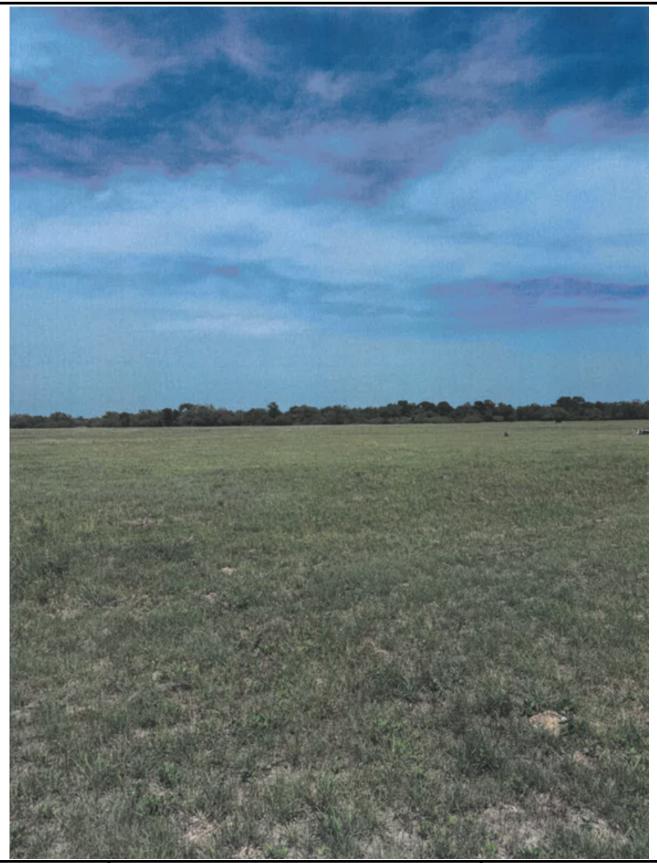


EXHIBIT TITLE:

WWTP SITE PHOTOGRAPH

LOCATION: WILLIAMSON 99

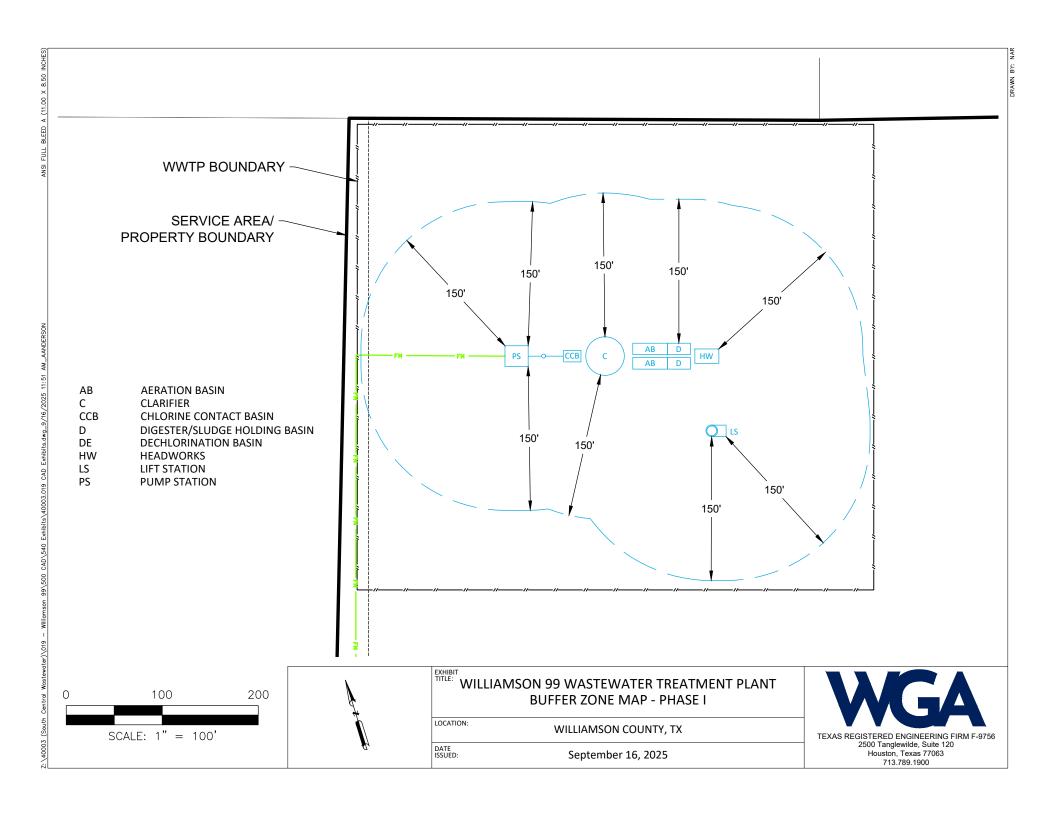
DATE ISSUED: JUNE 2025

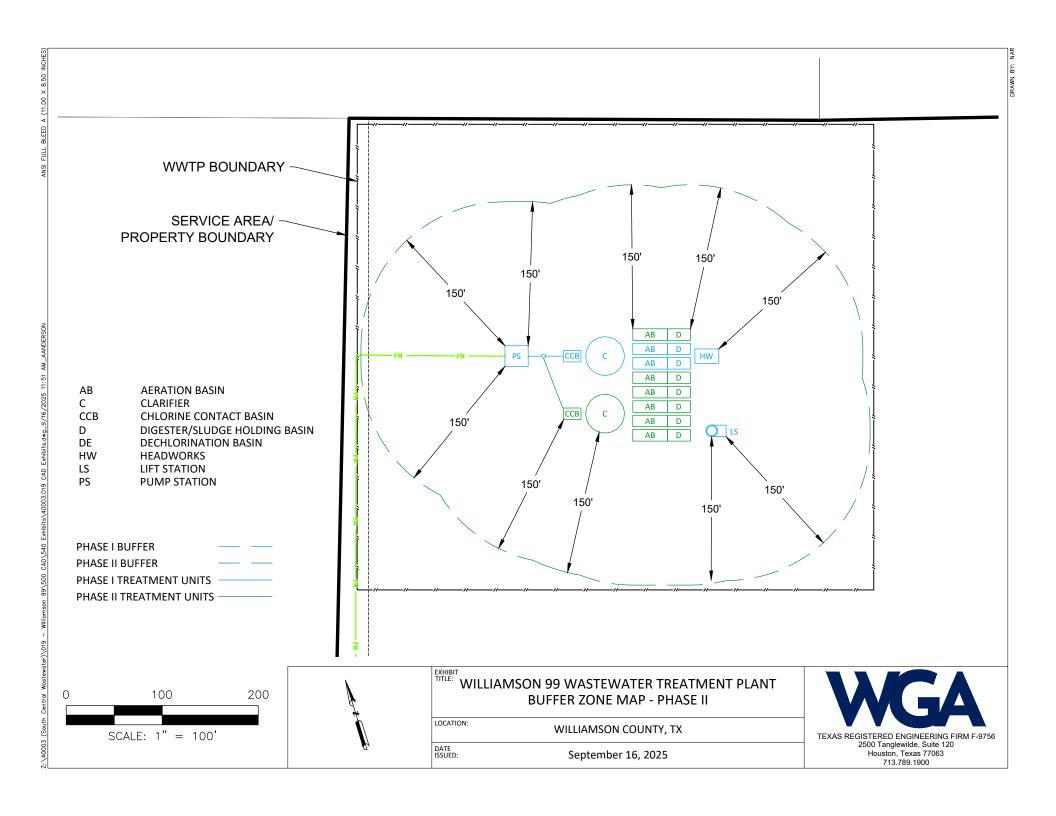


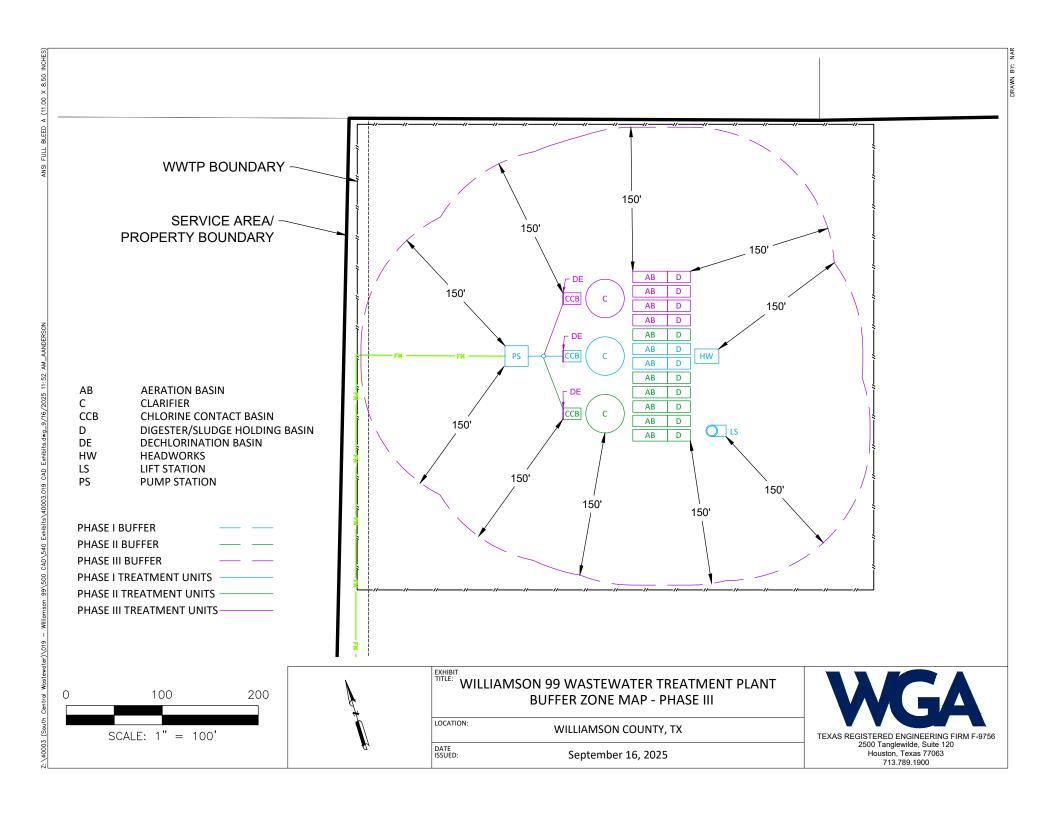
TEXAS REGISTERED ENGINEERING FIRM F-9756 2500 Tanglewilde, Suite 120 Houston, Texas 77063 713.789.1900



Buffer Zone Map









SPIF Form & SPIF USGS Map

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

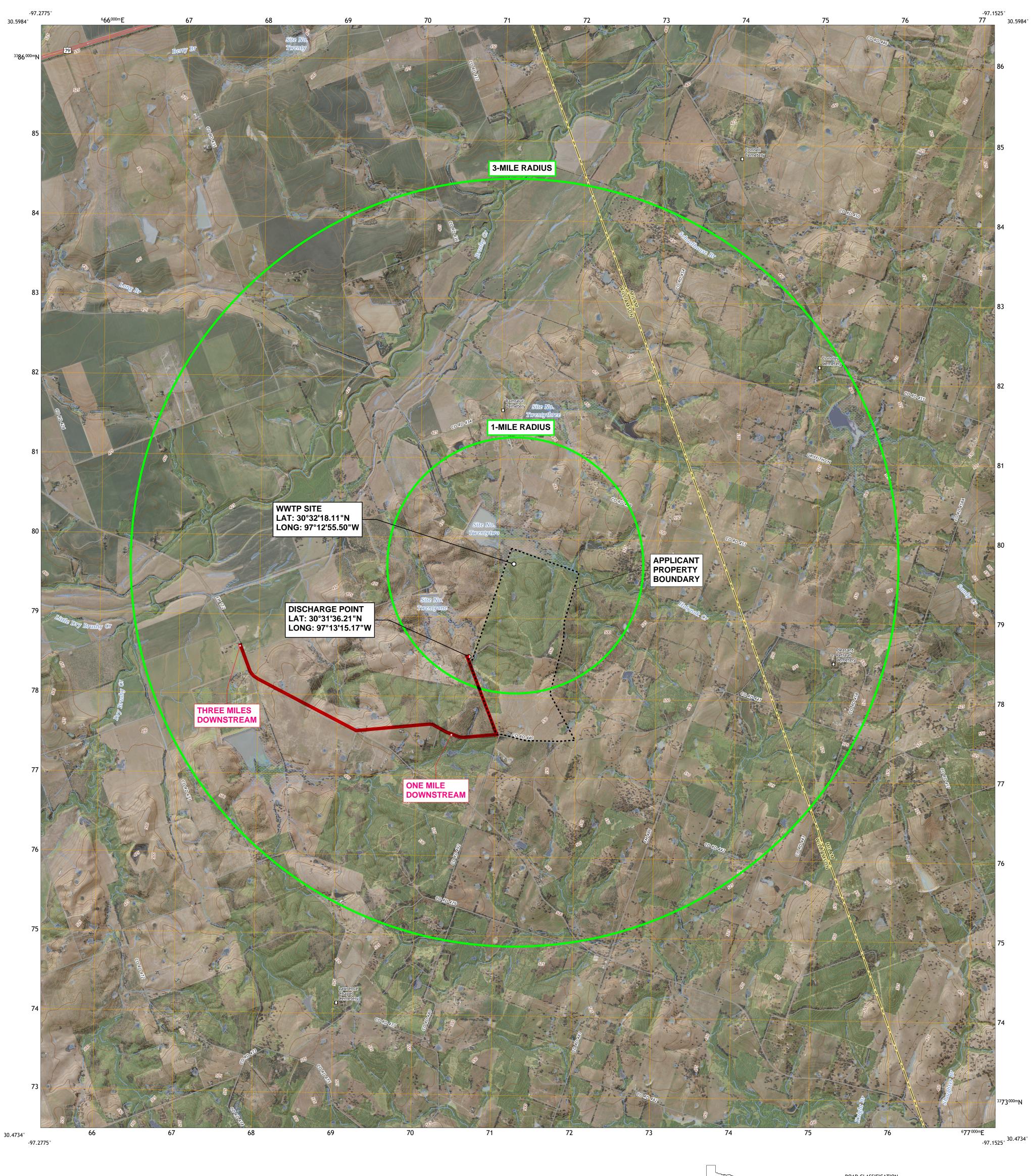
FOR AGENCIES REVIEWING DOMESTIC OR INDUSTRIAL TPDES WASTEWATER PERMIT APPLICATIONS

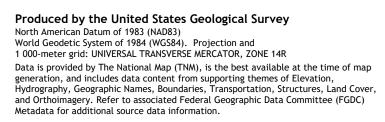
TCEQ USE ONLY:
Application type:RenewalMajor AmendmentMinor AmendmentNew
County: Segment Number:
Admin Complete Date:
Agency Receiving SPIF:
Texas Historical Commission U.S. Fish and Wildlife
Texas Parks and Wildlife Department U.S. Army Corps of Engineers
This form applies to TPDES permit applications 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

	Provide the name, address answer specific questions	, phone and fax number of an individual that can be contacted to about the property.
	Prefix (Mr., Ms., Miss): Mr.	
	First and Last Name: <u>Doug</u>	<u> Bailey</u>
	Credential (P.E, P.G., Ph.D.	etc.): Tick here to enter text
	Title: <u>President</u>	
	Mailing Address: P.O. Box	<u>570177</u>
	City, State, Zip Code: <u>Hou</u>	ston, Texas 77257
	Phone No.: <u>713-783-6611</u>	Ext.: Fax No.:
	E-mail Address: <u>Doug@so</u>	<u>ithcentralww.com</u>
2.	2. List the county in which the	e facility is located: <u>Williamson</u>
3.	please list the owner of th	owned and the owner is different than the permittee/applicant, e property.
	N/A	
4.		e effluent discharge route. The discharge route must follow the flow of discharge to the nearest major watercourse (from the point of
		gment as defined in 30 TAC Chapter 307). If known, please identif
	the classified segment nur	
		an effluent pipe to a gravity storm sewer system for 1.6 miles;
	thence to road-side ditch	for 2.73 miles; thence discharge to Brushy Creek.
5.	plotted and a general loca route from the point of di	7.5-minute USGS quadrangle map with the project boundaries tion map showing the project area. Please highlight the discharge scharge for a distance of one mile downstream. (This map is map in the administrative report).
	Provide original photogra	ohs of any structures 50 years or older on the property.
	Does your project involve	any of the following? Check all that apply.
		oads, utility lines, construction easements
	□ Visual effects that	could damage or detract from a historic property's integrity
	□ Vibration effects of	luring construction or as a result of project design
		of development that are planned for the future
	☐ Sealing caves, frac	tures, 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):
	Proposed wastewater treatment plant including underground piping, utilities, varying depths between 0 and 20-ft below ground.
2.	Describe existing disturbances, vegetation, and land use:
	Property is considered irrigated crop land. Property has no existing structures.
	HE FOLLOWING ITEMS APPLY ONLY TO APPLICATIONS FOR NEW TPDES PERMITS AND MAJOR MENDMENTS TO TPDES PERMITS
3.	List construction dates of all buildings and structures on the property:
	No existing or demolished infrastructure has been recorded on the property. Primarily for agricultural and pasture use.
4.	Provide a brief history of the property, and name of the architect/builder, if known.
	Irrigated crop land

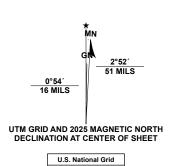






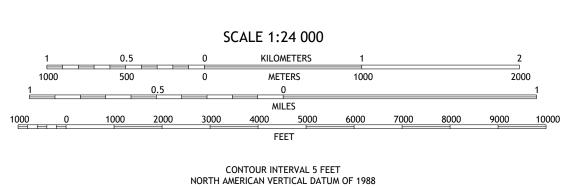
This map is not a legal document. Boundaries may be generalized for this map scale. Private lands within government reservations may not be shown. Obtain permission before entering private lands. Temporal changes may have occurred since these data were collected and some data may no longer represent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

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

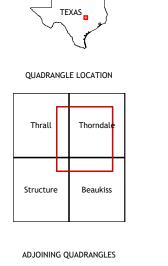


PU

14R



CONTOUR SMOOTHNESS = Medium



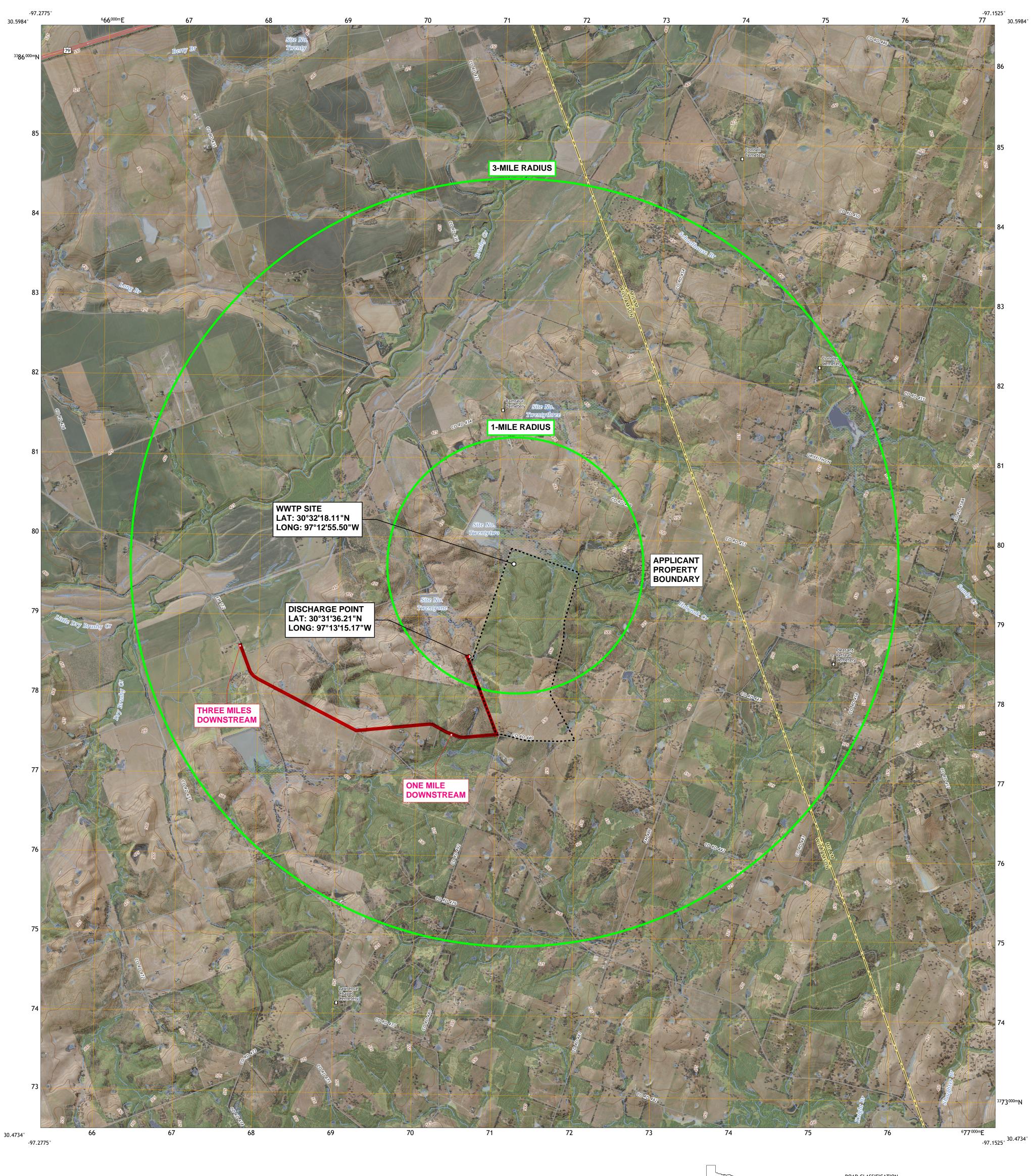


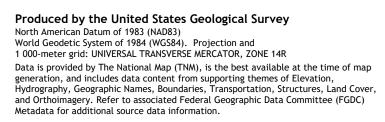
7.5-MINUTE TOPO, TX 2025



Original USGS Map

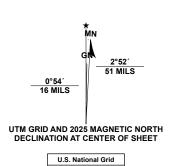






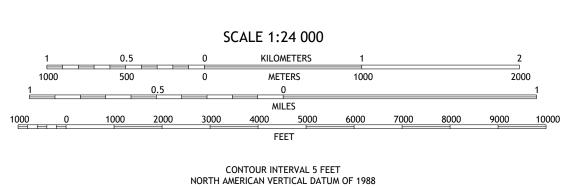
This map is not a legal document. Boundaries may be generalized for this map scale. Private lands within government reservations may not be shown. Obtain permission before entering private lands. Temporal changes may have occurred since these data were collected and some data may no longer represent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

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

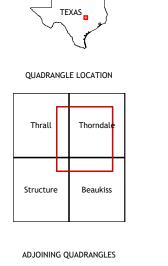


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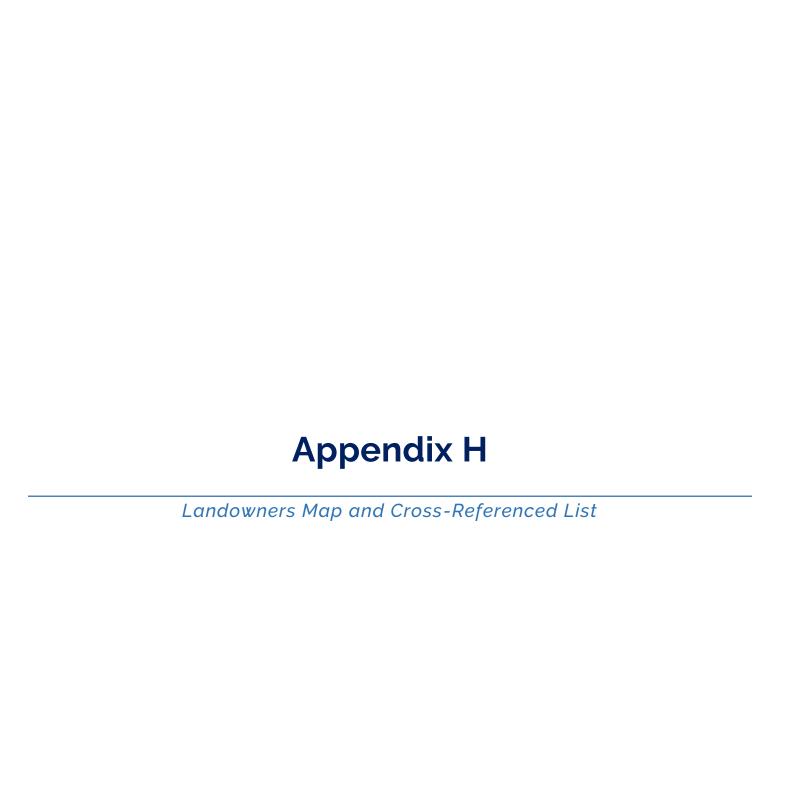


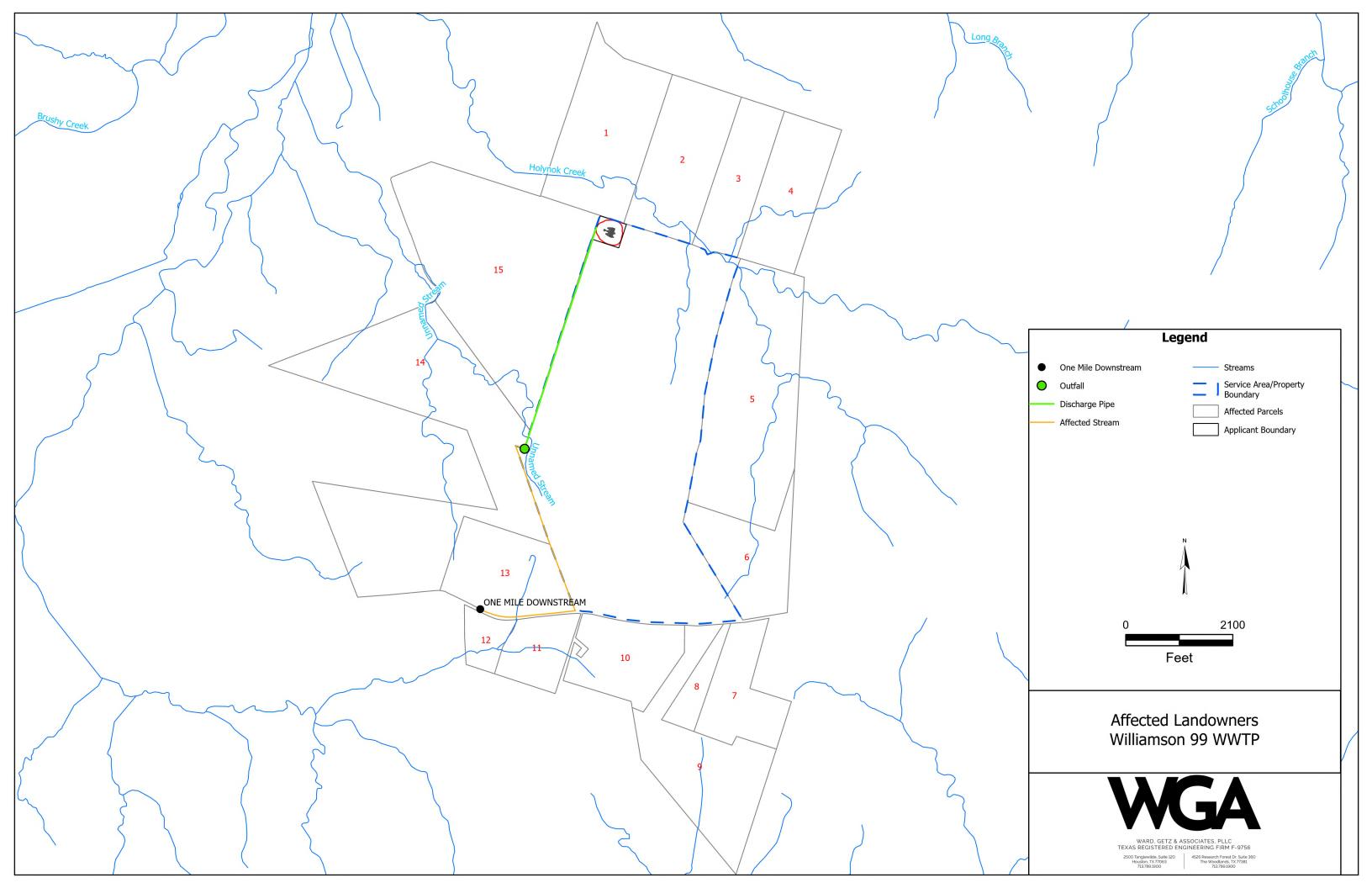
CONTOUR SMOOTHNESS = Medium





7.5-MINUTE TOPO, TX 2025





AFFECTED LANDOWNERS REFERENCE LIST

REF NO.	OWNER	PIN	OWNERS MAILING ADDRESS	PHYSICAL ADDRESS
1	COOK, GLEN E & SUSAN ROOKE	R007375	PO BOX 860 THORNDALE, TX 76577	550 CR 439, THORNDALE, TX 76577
2	RIEGER, JASON	R007376	900 COUNTY ROAD 439 THORNDALE, TX 76577-8773	900 COUNTY ROAD 439, THORNDALE, TX 76577-8773
3	MENZEL, JOHN	R007377	PO BOX 293 THORNDALE, TX 76577-0293	CR 439 THORNDALE, TX 76577
4	ANDERSON, BOBBY & SHEILA	R352431	1400 COUNTY ROAD 439 THORNDALE, TX 76577-8739	1400 CR 439, THORNDALE, TX 76577
5	WARNER, PHILIP PAUL	R525395	2361 COUNTY ROAD 440 THORNDALE, TX 76577-8720	CR 440, THORNDALE, TX 76577
6	WARNER, PHILIP PAUL	R501932	2361 COUNTY ROAD 440 THORNDALE, TX 76577-8720	CR 440, THORNDALE, TX 76577
7	TODD, KIMBERLY ANN	R310610	1850 COUNTY ROAD 440 THORNDALE, TX 76577	1850 CR 440 THORNDALE, TX 76577
8	SHARP, SARA D	R366629	8104 CHARDONNAY CV AUSTIN, TX 78750-7854	CR 440 THORNDALE, TX 76577
9	SHARP, SARA D	R315693	8104 CHARDONNAY CV AUSTIN, TX 78750-7854	1851 CR 440, THORNDALE, TX 76577
10	VOIGT, MARCUS TY	R501441	115 COUNTY ROAD 492 THRALL, TX 78578	CR 492, THRALL, TX 76578
11	KRISTAPONIS, EDWARD V	R006425	7105 WHISPERING CREEK CT AUSTIN, TX 78736	CR 440, THRALL, TX 76578
12	GAVENDA RACHEL LOUISE & STEVE	R006424	1101 QUAIL PARK DR AUSTIN, TX 78758	800 CR 440, THRALL, TX 76578
13	DRAYER, JOSEPH & ANNA	R006429	2303 HARTFORD RD AUSTIN, TX 78703-2436	CR 440, THRALL, TX 76578
14	DRAYER, JOSEPH & ANNA	R006937	2303 HARTFORD RD AUSTIN, TX 78703-2436	1450 CR 438, THRALL, TX 76578
15	DRAYER, JOSEPH & ANNA	R007448	2303 HARTFORD RD AUSTIN, TX 78703-2436	1450 CR 438, THRALL, TX 76578

COOK GLEN E & SUSAN ROOKE **RIEGER JASON** MENZEL JOHN PO BOX 860 900 COUNTY ROAD 439 PO BOX 293 THORNDALE TX 76577 THORNDALE TX 76577-0293 THORNDALE TX 76577-8773 WARNER PHILIP PAUL ANDERSON BOBBY & SHEILA WARNER PHILIP PAUL 2361 COUNTY ROAD 440 1400 COUNTY ROAD 439 2361 COUNTY ROAD 440 THORNDALE TX 76577-8720 THORNDALE TX 76577-8739 THORNDALE TX 76577-8720 TODD KIMBERLY ANN SHARP SARA D SHARP SARA D 1850 COUNTY ROAD 440 8104 CHARDONNAY CV 8104 CHARDONNAY CV THORNDALE TX 76577 AUSTIN TX 78750-7854 AUSTIN TX 78750-7854 GAVENDA RACHEL LOUISE & VOIGT, MARCUS TY KRISTAPONIS EDWARD V STEVE 115 COUNTY ROAD 492 7105 WHISPERING CREEK CT 1101 QUAIL PARK DR THRALL TX 78578 AUSTIN TX 78736 AUSTIN TX 78758

DRAYER, JOSEPH & ANNA

2303 HARTFORD RD

AUSTIN TX 78703-2436

DRAYER, JOSEPH & ANNA

2303 HARTFORD RD

AUSTIN TX 78703-2436

DRAYER, JOSEPH & ANNA

2303 HARTFORD RD

AUSTIN TX 78703-2436



Treatment Process Description

Treatment Process Description

Phase I:

Interim Phase I will have the capacity to serve an average daily flow of 0.1 MGD and a 2-hr peak flow of 278 GPM. The activated sludge processing plant will utilize an onsite lift station to pump raw influent from the subdivision to the elevated headworks consisting of two (2) manual bar screens. Weir plates in the headworks flow splitting structure will evenly split the screened influent and then gravity flow into each of the two (2) aeration basins. From the aeration basins, mixed liquor will be conveyed into the clarifier. The settled effluent will be returned to the aerated activated sludge basins or wasted to the two (2) aerated digester basins. The supernatant from the clarifier will flow over the v-notch weir, into the effluent drop box, and into the aerated chlorine contact basin where flow will be conveyed through baffle walls to facilitate mixing and maintain a minimum contact time of 20-min. Disinfected effluent is then conveyed to the v-notch weir and drop box where it will gravity flow into the sampling manhole where effluent constituents will be sampled and tested. From the sampling manhole, disinfected effluent will gravity flow to the outfall into roadside ditch for 2.73 miles; thence discharge to Brushy Creek..

Phase II:

Interim Phase II will have the capacity to serve an average daily flow of 0.35 MGD and a 2-hr peak flow of 972 GPM. The activated sludge processing plant will utilize an onsite lift station to pump raw influent from the subdivision to the elevated headworks consisting of two (2) manual bar screens. Weir plates in the headworks flow splitting structure will evenly split the screened influent and then gravity flow into each of the seven (7) aeration basins. From the aeration basins, mixed liquor will be conveyed into two (2) clarifiers. The settled effluent will be returned to the aerated activated sludge basins or wasted to the seven (7) aerated digester basins. The supernatant from the clarifiers will flow over the v-notch weir, into the effluent drop box, and into the two (2) aerated chlorine contact basins where flow will be conveyed through baffle walls to facilitate mixing and maintain a minimum contact time of 20-min. Disinfected effluent is then conveyed to the v-notch weir and drop box where it will gravity flow into the sampling manhole where effluent constituents will be sampled and tested for each basin. From the sampling manhole, disinfected effluent will gravity flow the outfall into roadside ditch for 2.73 miles; thence discharge to Brushy Creek.

Phase III:

Interim Phase II will have the capacity to serve an average daily flow of 0.70 MGD and a 2-hr peak flow of 1,944 GPM. The activated sludge processing plant will utilize an onsite lift station to pump raw influent from the subdivision to the elevated headworks consisting of two (2) manual bar screens. Weir plates in the headworks flow splitting structure will evenly split the screened influent and then gravity flow into each of the twelve (12) aeration basins. From the aeration basins, mixed liquor will be conveyed into three (3) clarifiers. The settled effluent will be returned to the aerated activated sludge basins or wasted to the twelve (12) aerated digester basins. The supernatant from the clarifiers will flow over the v-notch weir, into the effluent drop box, and into the three (3) aerated chlorine contact basins where flow will be conveyed through baffle walls to facilitate mixing and maintain a minimum contact time of 20-min. Disinfected effluent is then conveyed to the v-notch weir and drop box

where it will gravity flow into the sampling manhole where effluent constituents will be sampled and tested for each basin. From the sampling manhole, disinfected effluent will be conveyed to a manhole with a v-notch weir to maintain a minimum contact time of 20-seconds for dichlorination before out falling into roadside ditch for 2.73 miles; thence discharge to Brushy Creek.

Appendix J

Treatment Unit Descriptions

Treatment Unit Descriptions

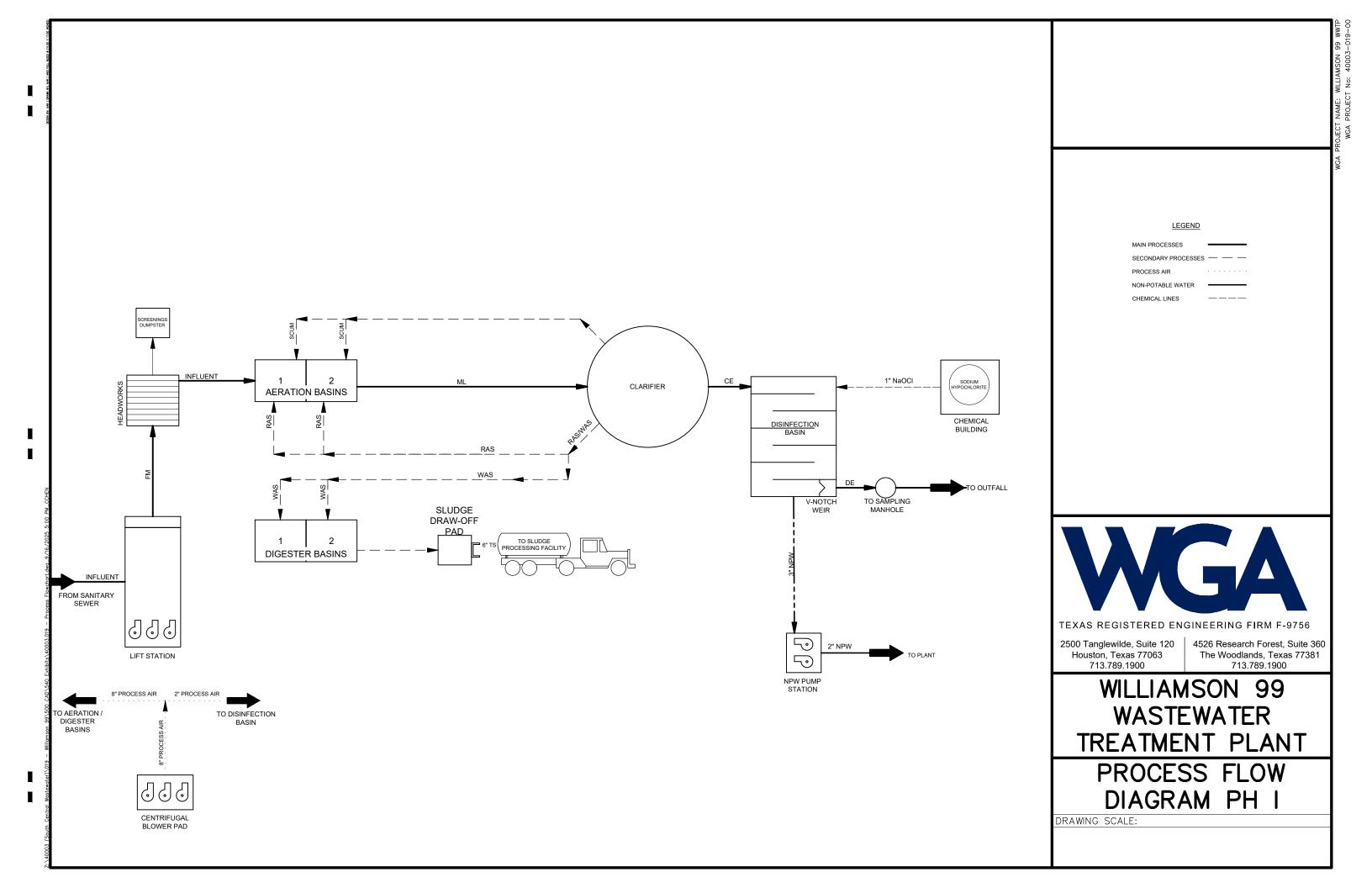
Phase I				
Treatment Unit	L x W x D x SWD	Total Volume (ft³)		
Aeration Basin 1	36'x12'x12.2'x10.2'	4,301		
Aeration Basin 2	36'x12'x12.2'x10.2'	4,301		
Total Ph I Aeratio	n Volume	8,602		
Digester Basin 1	24'x12'x12'x10.2'	2,928		
Digester Basin 2	24'x12'x12'x10.2'	2,928		
Total Ph I Digeste	er Volume	5,856		
Chlorine Contact Basin 1	15'x12'x12'x9.5'	1,710		
Total Ph I Disinfection	Total Ph I Disinfection Basin Volume			
Treatment Unit	Diameter (ft)	Surface Area (ft²)	SWD (ft)	Total Volume (ft³)
Clarifier 1	40	1,256.6	10	12,566
	Total Ph I Clarifier Surface Area	1,256.6	Total Ph I Clarifier Volume	12,566

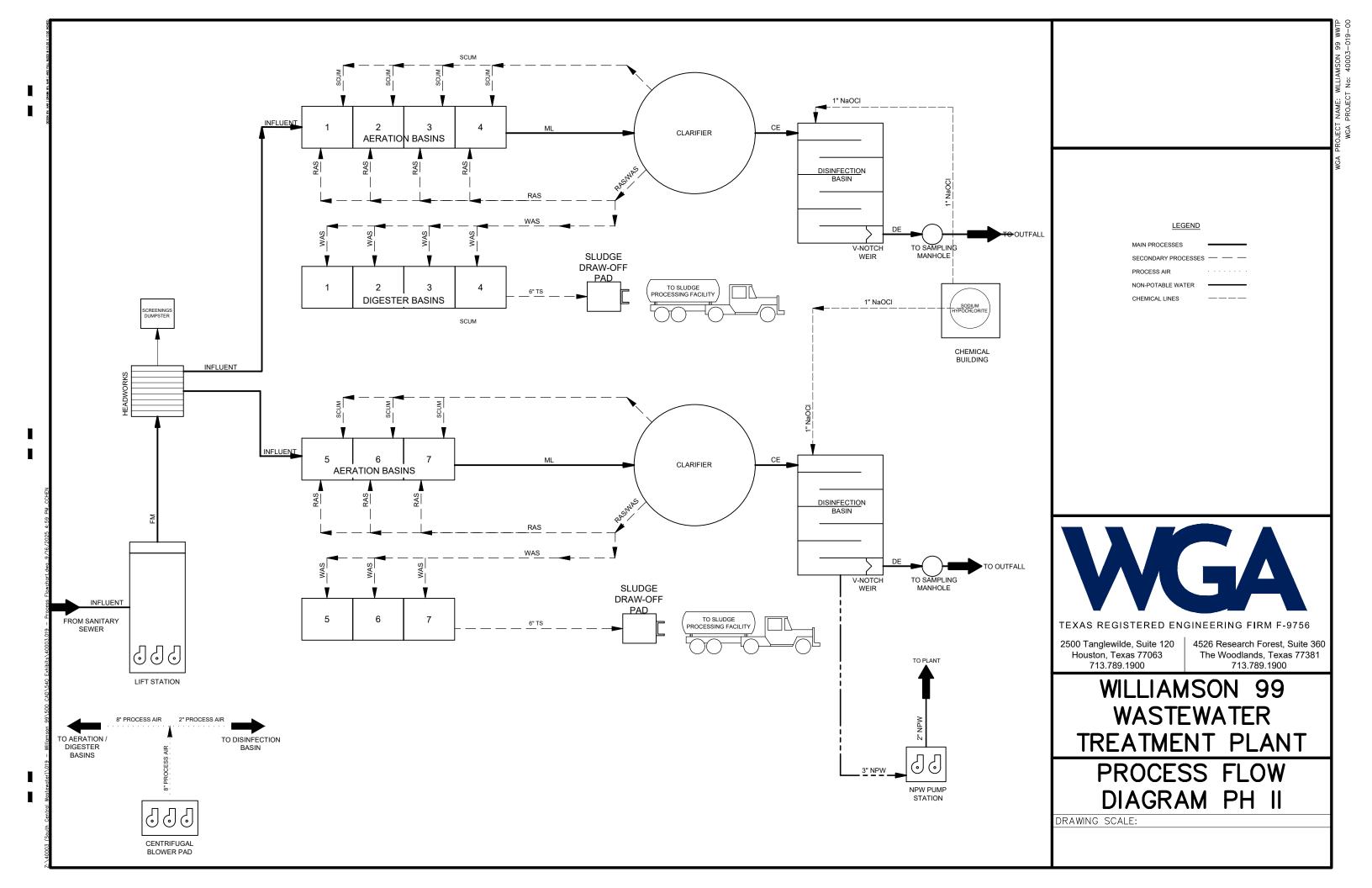
Phase II				
Treatment Unit	L x W x D x SWD	Total Volume (ft³)		
Aeration Basin 1	36'x12'x12.2'x10.2'	4,301		
Aeration Basin 2	36'x12'x12.2'x10.2'	4,301		
Aeration Basin 3	36'x12'x12.2'x10.2'	4,301		
Aeration Basin 4	36'x12'x12.2'x10.2'	4,301		
Aeration Basin 5	36'x12'x12.2'x10.2'	4,301		
Aeration Basin 6	36'x12'x12.2'x10.2'	4,301		
Aeration Basin 7	36'x12'x12.2'x10.2'	4,301		
Total Ph II Aerat	on Volume	30,107		
Digester Basin 1	24'x12'x12'x10.2'	2,928		
Digester Basin 2	24'x12'x12'x10.2'	2,928		
Digester Basin 3	24'x12'x12'x10.2'	2,928		
Digester Basin 4	24'x12'x12'x10.2'	2,928		
Digester Basin 5	24'x12'x12'x10.2'	2,928		
Digester Basin 6	24'x12'x12'x10.2'	2,928		
Digester Basin 7	24'x12'x12'x10.2'	2,928		
Total Ph II Diges	ter Volume	20,496		
Chlorine Contact Basin 1	15'x12'x12'x9.5'	1,710		
Chlorine Contact Basin 2	15'x12'x12'x9.5'	1,710		
Total Ph II Disinfectio	n Basin Volume	3,420		
Treatment Unit	Diameter (ft)	Surface Area (ft²)	SWD (ft)	Total Volume (ft³)
Clarifier 1	40	1,256.6	10	12,566
Clarifier 2	40	1,256.6	10	12,566
	Total Ph II Clarifier Surface Area	2,513	Total Ph II Clarifier Volume	54,132

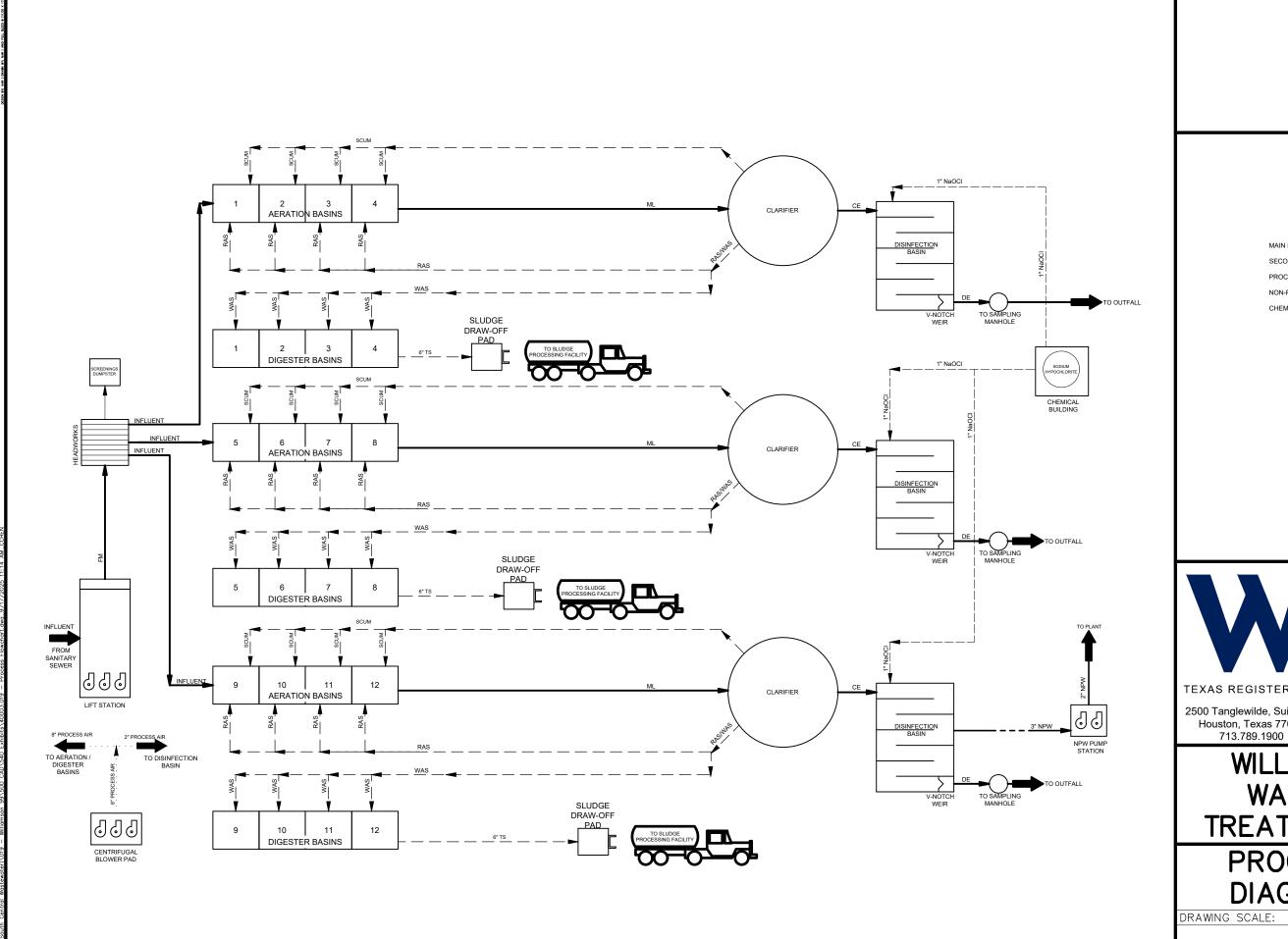
Phase III				
Treatment Unit	L x W x D x SWD	Total Volume (ft³)		
Aeration Basin 1 36'x12'x12.2'x10		4,301		
Aeration Basin 2	36'x12'x12.2'x10.2'	4,301		
Aeration Basin 3	36'x12'x12.2'x10.2'	4,301		
Aeration Basin 4	36'x12'x12.2'x10.2'	4,301		
Aeration Basin 5	36'x12'x12.2'x10.2'	4,301		
Aeration Basin 6	36'x12'x12.2'x10.2'	4,301		
Aeration Basin 7	36'x12'x12.2'x10.2'	4,301		
Aeration Basin 8	36'x12'x12.2'x10.2'	4,301		
Aeration Basin 9	36'x12'x12.2'x10.2'	4,301		
Aeration Basin 10	36'x12'x12.2'x10.2'	4,301		
Aeration Basin 11	36'x12'x12.2'x10.2'	4,301		
Aeration Basin 12	36'x12'x12.2'x10.2'	4,301		
Total Ph III Aerat	ion Volume	51,608		
Digester Basin 1	24'x12'x12'x10.2'	2,928		
Digester Basin 2	24'x12'x12'x10.2'	2,928		
Digester Basin 3	24'x12'x12'x10.2'	2,928		
Digester Basin 4	24'x12'x12'x10.2'	2,928		
Digester Basin 5	24'x12'x12'x10.2'	2,928		
Digester Basin 6	24'x12'x12'x10.2'	2,928		
Digester Basin 7	24'x12'x12'x10.2'	2,928		
Digester Basin 8	24'x12'x12'x10.2'	2,928		
Digester Basin 9	24'x12'x12'x10.2'	2,928		
Digester Basin 10	24'x12'x12'x10.2'	2,928		
Digester Basin 11	24'x12'x12'x10.2'	2,928		
Digester Basin 12	24'x12'x12'x10.2'	2,928		
Total Ph III Diges		35,137		
Chlorine Contact Basin 1	15'x12'x12'x9.5'	1,710		
Chlorine Contact Basin 2	15'x12'x12'x9.5'	1,710		
Chlorine Contact Basin 3	15'x12'x12'x9.5'	1,710		
Total Ph III Disinfection	on Basin Volume	5,400		
Treatment Unit	Diameter (ft)	Surface Area (ft²)	SWD (ft)	Total Volume (ft³)
Clarifier 1	40	1,256.6	10	12,566
Clarifier 2	40	1,256.6	10	12,566
Clarifier 3	40	1,256.6	10	12,566
	Total Ph III Clarifier Surface Area	3,769.8	Total Ph III Clarifier Volume	37,698

Appendix K

Flow Diagram







LEGEND

MAIN PROCESSES SECONDARY PROCESSES PROCESS AIR NON-POTABLE WATER CHEMICAL LINES



TEXAS REGISTERED ENGINEERING FIRM F-9756

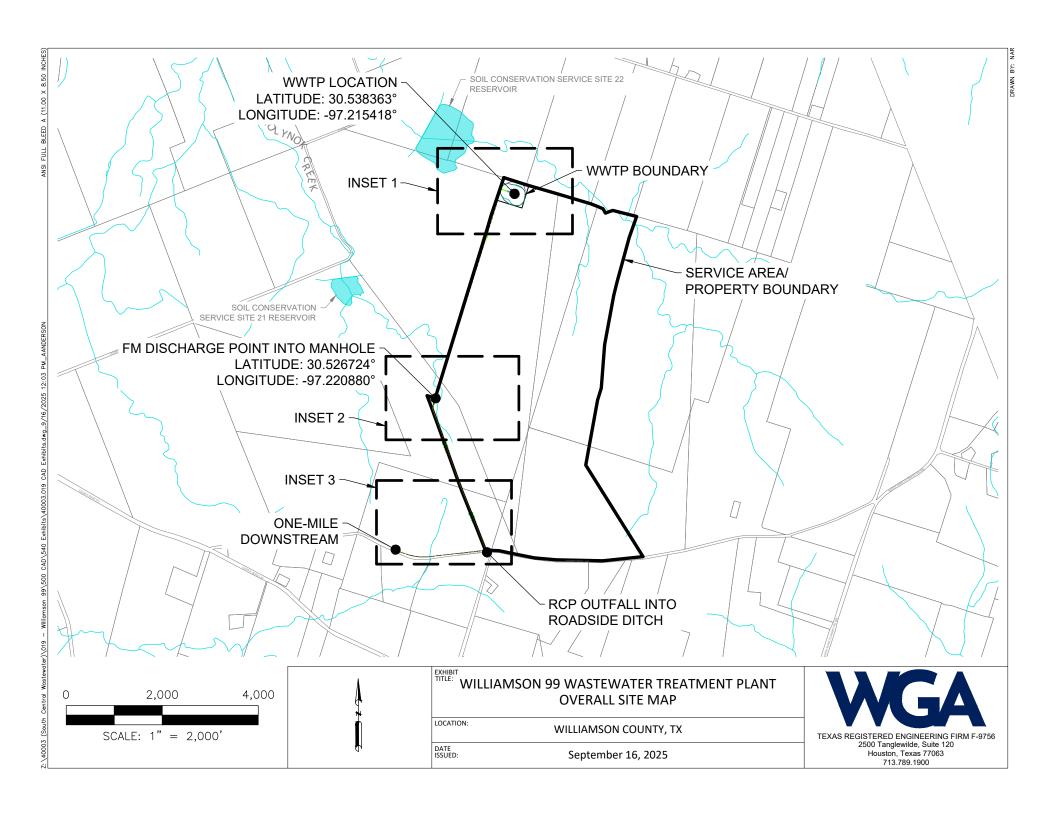
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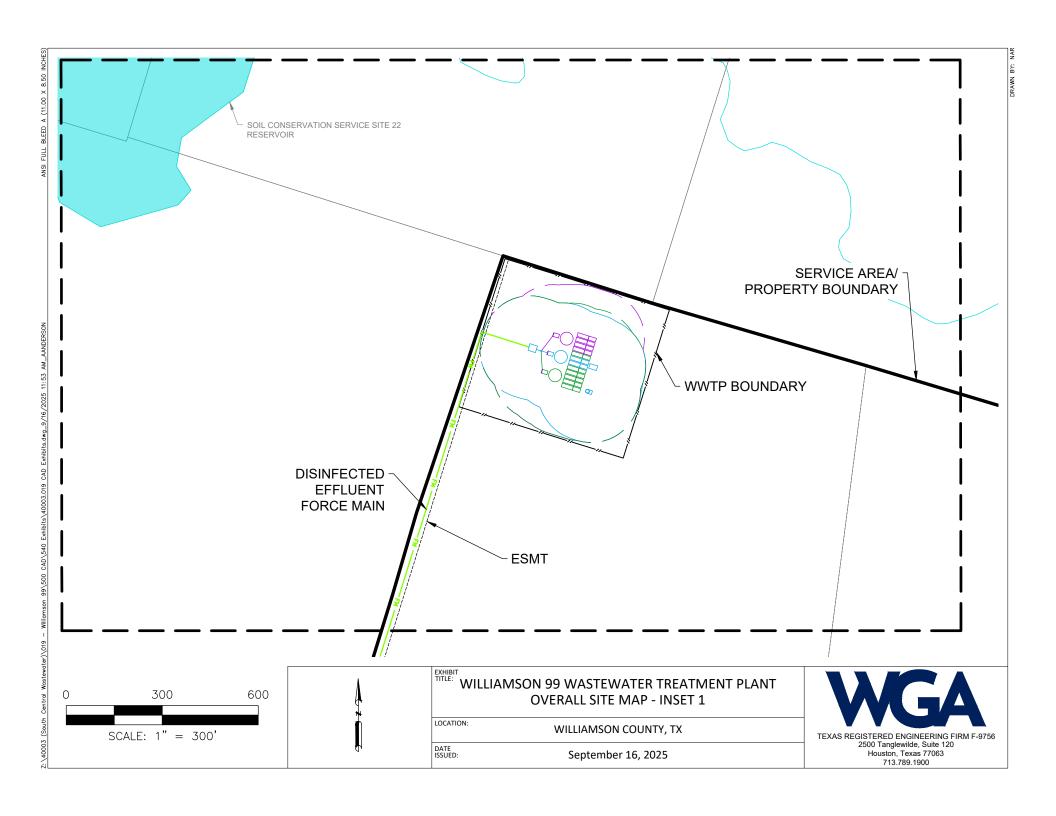
4526 Research Forest, Suite 360 The Woodlands, Texas 77381 713.789.1900

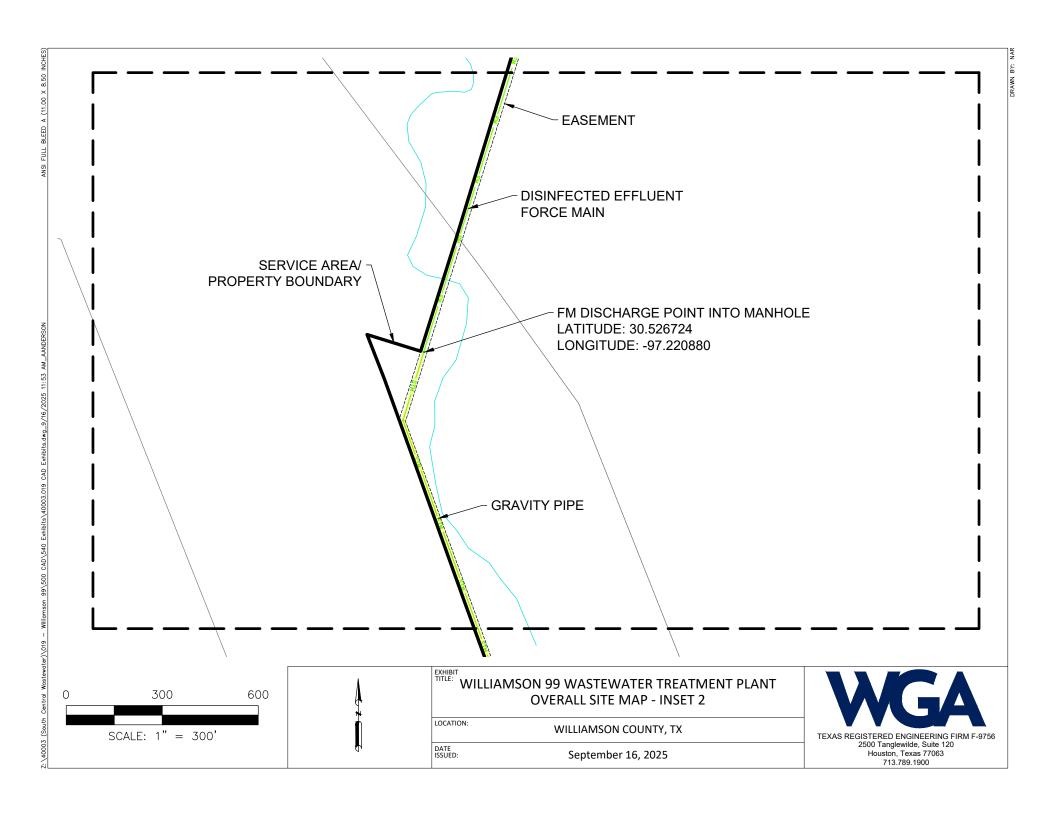
WILLIAMSON 99 **WASTEWATER** TREATMENT PLANT PROCESS FLOW DIAGRAM PH III

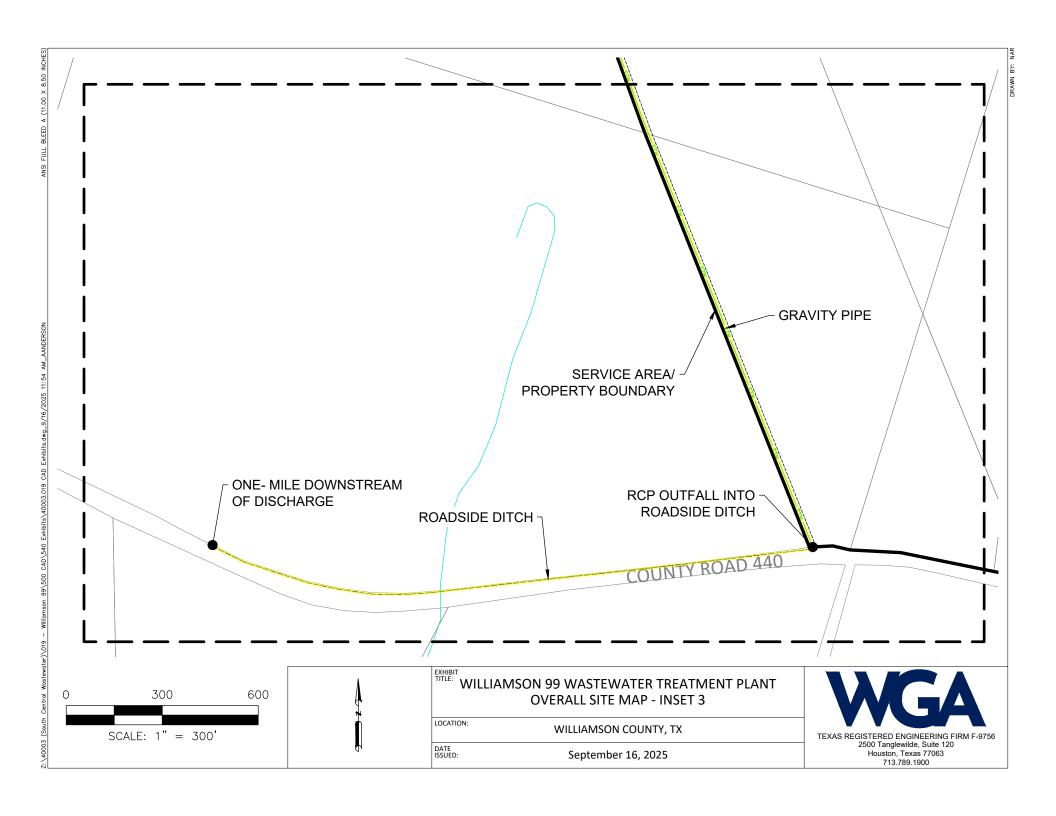
Appendix L

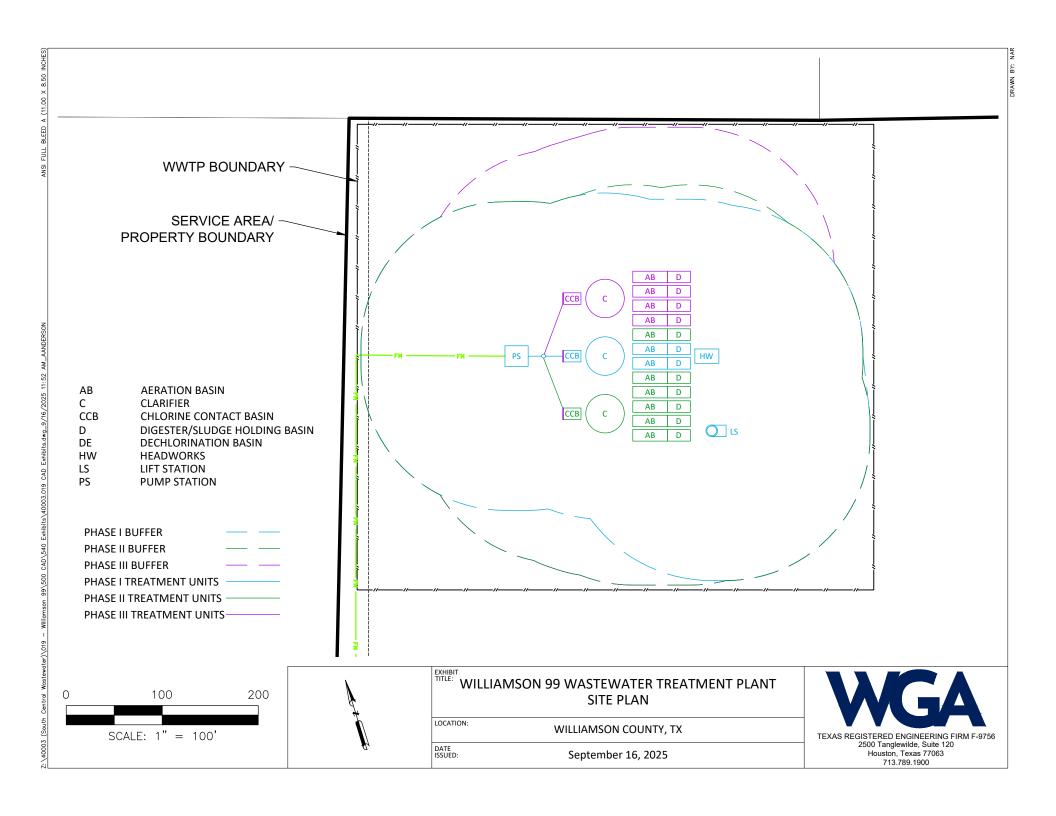
Site Drawing











Appendix M

Design Calculations

PROJECT NAME: WWTP EXP. PH I DATE: 7/30/2025

CLIENT: South Central BY: DDG
PROJECT NUMBER: 40003-019 QC: ENW

WASTEWATER AND PLANT CHARACTERIZATION

Flow Rates

Annual Average			0.1	MGD	69	GPM	0.16	CFS
Peak Month	Factor	1.5	0.2	MGD	104	GPM	0.23	CFS
Peak 2-Hour	Factor	4	0.4	MGD	278	GPM	0.62	CFS
Min. Month	Factor	0.5	0.1	MGD	35	GPM	0.08	CFS

Raw Wastewater Concentrations

BOD (total)
BOD (soluble)
TSS
VSS
TKN
NH3-N
TP

Avg.	2-Hour Peak	Peak Month	Min. Month	
300	100	250	200	mg/L
180				mg/L
300				mg/L
240				mg/L
50				mg/L
70				mg/L
				mg/L

Assumed

Effluent Requirements

BOD	10	mg/L
TSS	15	mg/L
NH3-N	2	mg/L
TP		mg/L
DO		mg/L

Select Treatment Processes from the List

Preliminary Treatment
Primary Treatment
Biological Treatment
Solids Treatment

Coarse Screening
None
Temp > 15°C
Aerobic Digestion + Dewatering

WASTEWATER CHARACTERISTICS		
INFLUENT MASS LOADING		
BOD5 (AVG)	250.2	lbs/day
BOD5 (2-HR PEAK)	333.6	lbs/day
BOD5 (PEAK MONTH)	312.8	lbs/day
BOD5 (MIN MONTH)	83.4	lbs/day
TSS	250.2	lbs/day
NH_3	58.4	lbs/day
TKN	41.7	lbs/day
EFFLUENT COMPOSITION (ASSUMED FOR CONSERVATIVE DESIGN)		
BOD5	10.0	mg/L
TSS	15.0	mg/L
NH_3	3.0	mg/L
TKN	0.0	mg/L
		Ç,
AERATION BASIN		
Conventional Activated Sludge w/ Nitrification, @ Min. Temp > 15°C		
Description	Value	Unit
AERATION BASIN CALCULATIONS - TCEQ TRADITIONAL DESIGN - TCEQ 217, SUBCHAPTER F		
Aeration Basin Maximum Organic Loading	35.0	lbs/day/1000 ft
Minimum Number of Basins (For Flow > 0.4 MGD)	2.0	EA
BOD Removal Credit for Preliminary and Primary Treatment (Optional)	0%	
Total Peak BOD Loading (Based on Design Flow)	250	lbs/day
Total Aeration Basin Volume Required	7,149	ft ³
AERATION BASIN SIZING		
AERATION BASIN SIZING Proposed Number of Basins	2.0	
Proposed Number of Basins	2.0 10.167	ft
Proposed Number of Basins Side Water Depth of Basins Freeboard		ft ft
Proposed Number of Basins Side Water Depth of Basins Freeboard	10.167	
Proposed Number of Basins Side Water Depth of Basins Freeboard Fotal Depth of Basin	10.167 2.0	ft ft ft
Proposed Number of Basins Greeboard Total Depth of Basin Diffuser Submergence	10.167 2.0 12.167	ft ft
Proposed Number of Basins Gide Water Depth of Basins Freeboard Fotal Depth of Basin Diffuser Submergence Required Volume of Each Aeration Basin	10.167 2.0 12.167 9.167	ft ft ft
Proposed Number of Basins Gide Water Depth of Basins Freeboard Fotal Depth of Basin Diffuser Submergence Required Volume of Each Aeration Basin Surface Area of Each Basin	10.167 2.0 12.167 9.167 3,575	ft ft ft ft
Proposed Number of Basins Gide Water Depth of Basins Freeboard Fotal Depth of Basin Diffuser Submergence Required Volume of Each Aeration Basin Surface Area of Each Basin Width to Length Ratio (1:X)	10.167 2.0 12.167 9.167 3,575 352	ft ft ft ft
Proposed Number of Basins Gide Water Depth of Basins Freeboard Fotal Depth of Basin Diffuser Submergence Required Volume of Each Aeration Basin Surface Area of Each Basin Width to Length Ratio (1:X) Required Width of Each Basin	10.167 2.0 12.167 9.167 3,575 352 3.0	ft ft ft ft ft²
	10.167 2.0 12.167 9.167 3,575 352 3.0 12.0	ft ft ft ft ft² ft²

WASTEWATER CHARACTERISTICS	WASTEWATER CHARACTERISTICS					
Description	Value	Unit				
Influent BOD ₅	300.0	mg/L				
Influent TSS	300.0	mg/L				
Influent NH ₃	70.0	mg/L				
Daily Flow (Q _{AVE})						
	100,000.0	gpd				
Daily Flow (Q _{AVE})	69.4	gpm				
Daily Flow (Q _{AVE})	0.155	cfs				
2-hr Peak Flow (Q _{PK})	400,000	gpd				
2-hr Peak Flow (Q _{PK})	277.8	gpm				
2-hr Peak Flow (Q _{PK})	0.620	cfs				
NH ₃	58.5	lbs/day				
BOD ₅	250.8	lbs/day				
TSS	250.8	lbs/day				
		•				
Description						
Conventional Activated Sludge w/ Nitrification, @ Min. Temp > 15°C						
SECONDARY CLARIFIER						
Description	Value	Unit				
Number of Clarifiers	1.0	Ea				
Average Flow Per Clarifier	0.10	MGD				
Peak Flow Per Clarifier	0.40	MGD				
Clarifier Shape (Round, Octagonal, Square) Design Weir Shape (Round, Segmented)	Round Round					
Design Number of Segments (Leave Blank If Designed Round)	Rouliu					
Design Number of Segments (Leave Blank ii Designea Nouna)						
SURFACE AREA DESIGN - TCEQ 217.154 (c)(1)						
TCEQ Max Surface Loading (Q _{AVG}) TCEQ 317.4 (d)(5)	700	gal/day/ft ²				
TCEQ Max Surface Loading (Q _{PK}) TCEQ 217.154 (c)(1)	1,200	gal/day/ft ²				
Design Diameter	40.0	ft				
Surface Area Required at Peak Flow Per Clarifier	333.3	ft ²				
Surface Area Required for All Clarifiers at Peak Flow	333.3	ft ²				
Proposed Surface Area Per Clarifier	1,256.6	ft ²				
Total Proposed Surface Area for All Clarifiers	1,256.6	ft ²				
Actual Design Surface Loading at Design Flow (Q _{avr})	79.6	gal/day/ft ²				
Actual Design Surface Loading at Peak Flow (Q _{PK})	318.3	gal/day/ft ²				
Actual Design Surface Educating at Fear Flow (April)	310.3	gai/uay/it				
SIDE WATER DEPTH - TCEQ 217.152 (g)						
Side Water Depth For Clarifier Surface Area Greater Than 300 sqft.	10	ft				
Side Water Depth For Clarifier Surface Area Equal To Or Less Than 300 sqft.	8	ft				
Controlling Minimum Depth Requirement	10.0	ft				
Proposed Clarifier Side Water Depth (Not Total Depth)	10.0	ft				
Design Floor Slope (1:X)	12.0					
Design Overall Depth (Including 1:12, sloped bottom)	11.7	ft				
HYDRAULIC DETENTION TIME - TCEQ 217.154 (c)(1)						

WASTEWATER CHARACTERISTICS		
Description	Value	Unit
TCEQ Min Detention Time (Q _{AVE})	2.6	hours
TCEQ Min Detention Time (Q _{PK})	1.8	hours
Recycle Ratio at Design Flow (200 gpd/sf) Per Clarifier	0.25	MGD
Recycle Ratio at Peak Flow (400 gpd/sf) Per Clarifier	0.50	MGD
Flow per Clarifier for Hydraulic Detention Time @ Design Flow (w/ Recycle)	0.35	MGD
Flow per Clarifier for Hydraulic Detention Time @ Peak Flow (w/ Recycle)	0.90	MGD
Required Treatment Volume At Design Flow for Each Clarifier	5,088.3	ft ³
Required Treatment Volume At Peak Flow for Each Clarifier	9,050.7	ft ³
Proposed Treatment Volume for Each Clarifier	12,566.4	ft ³
Actual Hydraulic Detention Time at Design Flow	6.4	hours
Actual Hydraulic Detention Time at Peak Flow	2.5	hours
Total Tryandano Determent Time at Feat Total	2.0	
SOLIDS LOADING RATE - TCEQ 317.4 (d)(5)		
Totals Solids to Clarifier	10,008.0	lbs/day
Proposed Surface Area of Clarifier	1.256.6	ft ²
Loading Rate of Solids to Clarifier	8.0	lbs/day/ft ²
TCEQ Maximum Loading Rate	50.0	lbs/day/ft ²
TCLQ Maximum Loading Nate	30.0	ibs/day/it
EFFLUENT WEIR DESIGN - TCEQ 217.152 (d)		
Weir loading (For Plants with Design Flows 1.0 MGD or less)	20,000	gal/day/ft ²
Weir loading (For Plants with Design Flows Over 1.0 MGD)	30,000	gal/day/ft ²
,	·	
Controlling Weir Loading Criteria	20,000.0	gal/day/ft ²
Total Length of Weir Required Per Clarifier @ Peak Flow	20.0	ft
Total Length of Weir Required For All Clarifiers @ Peak Flow	20.0	ft
Proposed Weir Distance from Wall Diameter of Effluent Weir	1.0 38.0	ft ft
Design Weir Length Per Clarifier	119.4	ft
Total Design Weir Length	119.4	ft
Actual Surface Area Loading @ Peak Flow	3,350.6	gal/day/ft ²
	-	
Actual Surface Area Loading @ Average Flow	837.7	gal/day/ft ²
TORQUE RATINGS OF DRIVES AND RAKES		
Resistive Force of Secondary Sludge (W)	6.0	lb/ft
Running Torque (Wr²)	2,400.0	ft-lbs
Training Forque (WF)	2,400.0	10 103
RETURN ACTIVATED SLUDGE FLOW RATES - TCEQ 217.152 (j)		
Lower Limit Underflow Rate - TCEQ 217.152(j)	200	gpd/ft²
Minimum RAS Flow Rate (per clarifier)	174.5	gpm
Upper Limit Underflow Rate - TCEQ 217.152(j)	400	gpd/ft²
Maximum RAS Flow Rate (per clarifier)	349.1	gpm
Combined Upper Limit RAS Underflow Rate for Plant	349.1	gpm
CTILLING WELL DECICAL		
STILLING WELL DESIGN	0.45	f. /
Maximum Stilling Well Velocity (@ Peak Flow) TCEQ 217.152 (a)(4)	0.15	ft/sec
Peak Flow For Individual Clarifier	0.4	MGD
Total Area Required	4.1	ft ²
Diameter of Each Stilling Well	3.0	ft
Area of Each Stilling Well	7.1	ft ²

TCEQ DESIGN CRITERIA (CHAPTER 317.5 (B))		
Minimum Detention Time	15.0	days
Volume Requirement	20.0	ft ³ /lb BOD ₅ /day
Aeration Requirement	30.0	scfm/1000 ft ³
If Mechanical Aeration is Used	1.5	HP/1000 ft ³
TCEQ DESIGN CRITERIA (CHAPTER 217, SUBCHAPTER J)	
Minimum Temperature	15.0	deg C
Required Minimum Detention Time	60.0	days
Minimum Volatile Solids Loading Rate	100.0	lb/1000 ft ³ /day
Maximum Volatile Solids Loading Rate	200.0	lb/1000 ft ³ /day
Aeration Requirement	20.0	SCFM/1000 ft ³
NOTE: Aerobic digester has to be sized for average day fl	ow	-
Biodegradable Volatile Solids in WAS	0.7	lb VS/BOD removed
Destruction	0.3	lb VS/BOD removed
Note: Typical minimum Solids Retention Time (SRT) maintained in WWTPs is 8 days. Seco	ondary solids prod	uction is typically
Influent Solids	250	lbs/day
Digested Solids Production	198	lbs/day
Average Digested Solids Production	224	lbs/day
Total Sludge Production, lbs/day	224	lbs/day
Assumed Average Dig. Conc., mg/l	15,000.0	mg/l
Total Sludge to Aerobic Digester	1,790.00	gal/d
Volume Required Based on Min. Detention Time @ 60 Days	14,358.29	ft ³
Volume Required Based on Min. Detention Time @ 15 Days	3,589.57	ft ³
CHECK IF CHAPTER 217 VOLATILE SOLIDS LOADING RATE REQUIREMENT	NTS CAN BE MET	
Volatile Suspended Solids Loading	175	lbs/day
Volatile Solids Loading Tate for 60 Days Storage Volume	0.00073	lb/1000 ft ³
Volatile Solids Loading Rate	ERROR!	
Note: It is not possible to meet both the min. required detention time and min. required VS significant thickening before the sludge is stabilized in the digester. Hence, it is prudent to justime alone. Also, if the sludge is to be disposed of in a landfill, sludge stabilization will not be not necessary. When a full dettention time is not provided, the basin will not be a true aerob reconfigured as a sludge holding tank.	st meet the require required and a ful	ed min. detention I detention time is
SLUDGE HOLDING TANK DESIGN		
Number of Basins	2.0	Ea
Side Water Depth	10.167	ft
Width	12.0	ft
Length	24	ft
Design Volume	5,856	ft ³
DESIGN CHECK		

24.47

23.41

days ft³/lb BOD₅/day

Detention Time

Design Volume to Loading Ratio

WASTEWATER CHARACTERISTICS					
Design Flow Rate (Average Daily Flow)	0.1	MGD			
Design Flow Rate (2-Hour Peak Flow)	0.4	MGD			
CHLORINE CONTACT CHAMBER					
Description	Value	Unit			
TCEQ Min Detention Time (Q _{PK}) (TCEQ217.281(b)(1)	20.0	min			
TCEQ Required Minimum Volume	742.7	ft ³			
TCEQ Required Minimum Volume	5,555.6	gal			
Chlorine Contact Basin Sizing (Excluding Chlorine Mixing Chamber)					
Design Number of Trains	1.0				
Design Side Water Depth at Peak Flow	9.5	ft			
Design Width of Basin	12.0	ft			
Design Channel Width	2.5	ft			
Design Channel Length (Assumes 40:1 L:W ratio per TCEQ 217.281(a)(2))	100.0	ft			
Number of Partition	5.0	ea			
DESIGN LENGTH OF BASIN	15.0	ft			
PROPOSED VOLUME	2,375.0	ft ³			
ACTUAL CCB VOLUME	1,710.0	ft ³			
Actual Detention Time at Peak Flow	46.0	min			
ACTUAL CHANNEL LENGTH	72.0	ft			

PROJECT NAME: WWTP EXP. PH II DATE: 7/30/2025

CLIENT: South Central BY: DDG
PROJECT NUMBER: 40003-019 QC: ENW

WASTEWATER AND PLANT CHARACTERIZATION

Flow Rates

Annual Average			0.35	MGD	243	GPM	0.54	CFS
Peak Month	Factor	1.5	0.5	MGD	365	GPM	0.81	CFS
Peak 2-Hour	Factor	4	1.4	MGD	972	GPM	2.17	CFS
Min. Month	Factor	0.5	0.2	MGD	122	GPM	0.27	CFS

Raw Wastewater Concentrations

BOD (total)
BOD (soluble)
TSS
VSS
TKN
NH3-N
TP

Avg.	2-Hour Peak	Peak Month	Min. Month
300	100	250	200
180			
300			
240			
50			
70			

Effluent Requirements

BOD	10	mg/L
TSS	15	mg/L
NH3-N	2	mg/L
TP		mg/L
DO		mg/L

Select Treatment Processes from the List

Preliminary Treatment
Primary Treatment
Biological Treatment
Solids Treatment

Coarse Screening
None
Conventional Activated Sludge w/ Nitrification, @ Min.
Aerobic Digestion + Dewatering

Assumed

WASTEWATER CHARACTERISTICS		
INFLUENT MASS LOADING		
BOD5 (AVG)	875.7	lbs/day
BOD5 (2-HR PEAK)	1,167.6	lbs/day
BOD5 (PEAK MONTH)	1,094.6	lbs/day
BOD5 (MIN MONTH)	291.9	lbs/day
TSS	875.7	lbs/day
NH ₃	204.3	lbs/day
TKN	146.0	lbs/day
EFFLUENT COMPOSITION (ASSUMED FOR CONSERVATIVE DESIGN)		
BOD5	10.0	mg/L
TSS	15.0	mg/L
NH ₃	3.0	mg/L
TKN	0.0	mg/L
AERATION BASIN		
Conventional Activated Sludge w/ Nitrification, @ Min. Temp > 15°C		
Description	Value	Unit
AERATION BASIN CALCULATIONS - TCEQ TRADITIONAL DESIGN - TCEQ 217, SUBCHAPTER F		
Aeration Basin Maximum Organic Loading	35.0	lbs/day/1000 ft ³
Minimum Number of Basins (For Flow > 0.4 MGD)	2.0	EA
BOD Removal Credit for Preliminary and Primary Treatment (Optional)	0%	
Total Peak BOD Loading (Based on Design Flow)	876	lbs/day
Total Aeration Basin Volume Required	25,020	ft ³
AERATION BASIN SIZING		
Proposed Number of Basins	7.0	
Side Water Depth of Basins	10.167	ft
Freeboard Table Double of Books	2.0	ft
Total Depth of Basin	12.2	ft
Diffuser Submergence	9.167	ft n3
Required Volume of Each Aeration Basin	3,574	ft ³
Surface Area of Each Basin	352	ft ²
	2.0	
Width to Length Ratio (1:X)	3.0	
Width to Length Ratio (1:X) Required Width of Each Basin	12.0	ft
Width to Length Ratio (1:X) Required Width of Each Basin Required Length of Each Basin	12.0 36	ft
Width to Length Ratio (1:X) Required Width of Each Basin	12.0	

WASTEWATER CHARACTERISTICS		
Description	Value	Unit
Influent BOD ₅	300.0	mg/L
Influent TSS	300.0	mg/L
Influent NH ₃	70.0	mg/L
Daily Flow (Q _{AVE})		
	350,000.0	gpd
Daily Flow (Q _{AVE})	243.1	gpm
Daily Flow (Q _{AVE})	0.543	cfs
2-hr Peak Flow (Q _{PK})	1,400,000	gpd
2-hr Peak Flow (Q _{PK})	972.2	gpm
2-hr Peak Flow (Q _{PK})	2.170	cfs
NH ₃	204.8	lbs/day
BOD ₅	877.8	lbs/day
TSS	877.8	lbs/day
Description		
Conventional Activated Sludge w/ Nitrification, @ Min. Temp > 15°C		
SECONDARY CLARIFIER		
Description	Value	Unit
11 1 10 10		
Number of Clarifiers	2.0	Ea
Average Flow Per Clarifier	0.18	MGD
Peak Flow Per Clarifier Clarifier Shape (Round, Octagonal, Square)	0.70 Round	MGD
Design Weir Shape (Round, Segmented)	Round	
Design Number of Segments (Leave Blank If Designed Round)	Round	
2008. Hamson of 808. Henri (20010 200 Min 200 M		
SURFACE AREA DESIGN - TCEQ 217.154 (c)(1)		
TCEQ Max Surface Loading (Q _{AVG}) TCEQ 317.4 (d)(5)	700	gal/day/ft ²
TCEQ Max Surface Loading (Q _{PK}) TCEQ 217.154 (c)(1)	1,200	gal/day/ft ²
Design Diameter	40.0	ft
Surface Area Required at Peak Flow Per Clarifier	583.3	ft ²
Surface Area Required for All Clarifiers at Peak Flow	1,166.7	ft ²
Proposed Surface Area Per Clarifier	1,256.6	ft ²
Total Proposed Surface Area for All Clarifiers	2,513.3	ft ²
Actual Design Surface Loading at Design Flow (Q _{avr})	139.3	gal/day/ft ²
Actual Design Surface Loading at Peak Flow (Q _{PK})	557.0	gal/day/ft ²
Actual Design surface counting at Fear How (Apr)	337.0	gai/uay/it
SIDE WATER DEPTH - TCEQ 217.152 (g)		
Side Water Depth For Clarifier Surface Area Greater Than 300 sqft.	10	ft
Side Water Depth For Clarifier Surface Area Equal To Or Less Than 300 sqft.	8	ft
Controlling Minimum Depth Requirement	10.0	ft
Proposed Clarifier Side Water Depth (Not Total Depth)	10.0	ft
Design Floor Slope (1:X)	12.0	
Design Overall Depth (Including 1:12, sloped bottom)	11.7	ft
HYDRAULIC DETENTION TIME - TCEQ 217.154 (c)(1)		

WASTEWATER CHARACTERISTICS		
Description	Value	Unit
TCEQ Min Detention Time (Q _{AVE})	2.6	hours
TCEQ Min Detention Time (Q _{PK})	1.8	hours
Recycle Ratio at Design Flow (200 gpd/sf) Per Clarifier	0.25	MGD
Recycle Ratio at Peak Flow (400 gpd/sf) Per Clarifier	0.50	MGD
Flow per Clarifier for Hydraulic Detention Time @ Design Flow (w/ Recycle)	0.43	MGD
Flow per Clarifier for Hydraulic Detention Time @ Peak Flow (w/ Recycle)	1.20	MGD
Required Treatment Volume At Design Flow for Each Clarifier	6,174.5	ft ³
Required Treatment Volume At Peak Flow for Each Clarifier	12,058.7	ft ³
Proposed Treatment Volume for Each Clarifier	12,566.4	ft ³
Actual Hydraulic Detention Time at Design Flow	5.3	hours
Actual Hydraulic Detention Time at Peak Flow	1.9	hours
Actual Hydraulic Determion Time at Feak How	1.3	110013
SOLIDS LOADING RATE - TCEQ 317.4 (d)(5)		
Totals Solids to Clarifier	17,514.0	lbs/day
Proposed Surface Area of Clarifier	1,256.6	ft ²
Loading Rate of Solids to Clarifier	13.9	lbs/day/ft ²
	50.0	
TCEQ Maximum Loading Rate	50.0	lbs/day/ft ²
EFFLUENT WEIR DESIGN - TCEQ 217.152 (d)		
Weir loading (For Plants with Design Flows 1.0 MGD or less)	20,000	gal/day/ft ²
Weir loading (For Plants with Design Flows Over 1.0 MGD)	30,000	gal/day/ft ²
Controlling Weir Loading Criteria	20,000.0	gal/day/ft ²
Total Length of Weir Required Per Clarifier @ Peak Flow	35.0	ft
Total Length of Weir Required For All Clarifiers @ Peak Flow	70.0	ft
Proposed Weir Distance from Wall Diameter of Effluent Weir	1.0 38.0	ft ft
Design Weir Length Per Clarifier	119.4	ft
Total Design Weir Length	238.8	ft
Actual Surface Area Loading @ Peak Flow	5,863.6	gal/day/ft ²
	1	
Actual Surface Area Loading @ Average Flow	1,465.9	gal/day/ft ²
TORQUE RATINGS OF DRIVES AND RAKES		
Resistive Force of Secondary Sludge (W)	6.0	lb/ft
Running Torque (Wr²)	2,400.0	ft-lbs
Numming Forque (WF)	2,400.0	11-103
RETURN ACTIVATED SLUDGE FLOW RATES - TCEQ 217.152 (j)		
Lower Limit Underflow Rate - TCEQ 217.152(j)	200	gpd/ft²
Minimum RAS Flow Rate (per clarifier)	174.5	gpm
Upper Limit Underflow Rate - TCEQ 217.152(j)	400	gpd/ft²
Maximum RAS Flow Rate (per clarifier)	349.1	gpm
Combined Upper Limit RAS Underflow Rate for Plant	698.1	gpm
STILLING WELL DESIGN		
Maximum Stilling Well Velocity (@ Peak Flow) TCEQ 217.152 (a)(4)	0.15	ft/sec
Peak Flow For Individual Clarifier	0.7	MGD
Total Area Required	7.2	ft ²
Diameter of Each Stilling Well	4.0	ft
Area of Each Stilling Well	12.6	ft ²

TCEQ DESIGN CRITERIA (CHAPTER 317.5 (B))		
Minimum Detention Time	15.0	days
Volume Requirement	20.0	ft ³ /lb BOD ₅ /day
Aeration Requirement	30.0	scfm/1000 ft ³
If Mechanical Aeration is Used	1.5	HP/1000 ft ³
TCEQ DESIGN CRITERIA (CHAPTER 217, SUBCHAPTER J)		
Minimum Temperature	15.0	deg C
Required Minimum Detention Time	60.0	days
Minimum Volatile Solids Loading Rate	100.0	lb/1000 ft ³ /day
Maximum Volatile Solids Loading Rate	200.0	lb/1000 ft ³ /day
Aeration Requirement	20.0	SCFM/1000 ft ³
NOTE: Aerobic digester has to be sized for average day flow		
Biodegradable Volatile Solids in WAS	0.7	lb VS/BOD removed
Destruction	0.3	lb VS/BOD removed
Note: Typical minimum Solids Retention Time (SRT) maintained in WWTPs is 8 days. Second	ary solids prod	uction is typically
Influent Solids	876	lbs/day
Digested Solids Production	692	lbs/day
Average Digested Solids Production	784	lbs/day
Total Sludge Production, lbs/day	784	lbs/day
Assumed Average Dig. Conc., mg/l	15,000.0	mg/l
Total Sludge to Aerobic Digester	6,265.00	gal/d
Volume Required Based on Min. Detention Time @ 60 Days	50,254.01	ft ³
Volume Required Based on Min. Detention Time @ 15 Days	12,563.50	ft ³
CHECK IF CHAPTER 217 VOLATILE SOLIDS LOADING RATE REQUIREMENTS	CAN BE MET	
Volatile Suspended Solids Loading	613	lbs/day
Volatile Solids Loading Tate for 60 Days Storage Volume	0.00073	lb/1000 ft ³
Volatile Solids Loading Rate	ERROR!	
Note: It is not possible to meet both the min. required detention time and min. required VS solid	ds loading rate	requirements withou
significant thickening before the sludge is stabilized in the digester. Hence, it is prudent to just m	neet the require	ed min. detention
time alone. Also, if the sludge is to be disposed of in a landfill, sludge stabilization will not be rec	quired and a ful	I detention time is
not necessary. When a full dettention time is not provided, the basin will not be a true aerobic d	ligester; instead	d, it will be
reconfigured as a sludge holding tank.		
SLUDGE HOLDING TANK DESIGN		
Number of Basins	7.0	Ea
Side Water Depth	10.167	ft
Width	12.0	ft
1 1	2.4	r.

SLUDGE HOLDING TANK DESIGN		
Number of Basins	7.0	Ea
Side Water Depth	10.167	ft
Width	12.0	ft
Length	24	ft
Design Volume	20,497	ft ³
DESIGN CHECK		
Detention Time	24.47	days
Design Volume to Loading Ratio	23.41	ft ³ /lb BOD ₅ /day

WASTEWATER CHARACTERISTICS					
Design Flow Rate (Average Daily Flow)	0.4	MGD			
Design Flow Rate (2-Hour Peak Flow)	1.4	MGD			
CHLORINE CONTACT CHAMBER					
Description	Value	Unit			
TCEQ Min Detention Time (Q _{PK}) (TCEQ217.281(b)(1)	20.0	min			
TCEQ Required Minimum Volume	2,599.5	ft ³			
TCEQ Required Minimum Volume	19,444.4	gal			
Chlorine Contact Basin Sizing (Excluding Chlorine Mixing Chamber)					
Design Number of Trains	2.0				
Design Side Water Depth at Peak Flow	9.5	ft			
Design Width of Basin	12.0	ft			
Design Channel Width	2.5	ft			
Design Channel Length (Assumes 40:1 L:W ratio per TCEQ 217.281(a)(2))	100.0	ft			
Number of Partition	5.0	ea			
DESIGN LENGTH OF BASIN	15.0	ft			
PROPOSED VOLUME	4,750.0	ft ³			
ACTUAL CCB VOLUME	3,420.0	ft ³			
Actual Detention Time at Peak Flow	26.3	min			
ACTUAL CHANNEL LENGTH	72.0	ft			

PROJECT NAME: WWTP EXP. PH III DATE: 7/30/2025

CLIENT: South Central BY: DDG
PROJECT NUMBER: 40003-019 QC: ENW

WASTEWATER AND PLANT CHARACTERIZATION

Flow Rates

Annual Average			0.70	MGD	486	GPM	1.09	CFS
Peak Month	Factor	1.5	1.1	MGD	729	GPM	1.63	CFS
Peak 2-Hour	Factor	4	2.8	MGD	1,944	GPM	4.34	CFS
Min. Month	Factor	0.5	0.4	MGD	243	GPM	0.54	CFS

Raw Wastewater Concentrations

BOD (total)
BOD (soluble)
TSS
VSS
TKN
NH3-N
TP

Avg.	2-Hour Peak	Peak Month	Min. Month	
300	100	250	200	mg/L
180				mg/L
300				mg/L
240				mg/L
50				mg/L mg/L mg/L
70				mg/L mg/L
				mg/L

Effluent Requirements

BOD	10	mg/L
TSS	15	mg/L
NH3-N	2	mg/L
TP		mg/L
DO		mg/L

Select Treatment Processes from the List

Preliminary Treatment
Primary Treatment
Biological Treatment
Solids Treatment

Coarse Screening
None
Conventional Activated Sludge w/ Nitrification, @ Min.
Aerobic Digestion + Dewatering

Assumed

WASTEWATER CHARACTERISTICS		
INFLUENT MASS LOADING		
BOD5 (AVG)	1,751.4	lbs/day
BOD5 (2-HR PEAK)	2,335.2	lbs/day
BOD5 (PEAK MONTH)	2,189.3	lbs/day
BOD5 (MIN MONTH)	583.8	lbs/day
TSS	1,751.4	lbs/day
NH ₃	408.7	lbs/day
TKN	291.9	lbs/day
EFFLUENT COMPOSITION (ASSUMED FOR CONSERVATIVE DESIGN)		
BOD5	10.0	mg/L
TSS	15.0	mg/L
NH ₃	3.0	mg/L
TKN	0.0	mg/L
AERATION BASIN		
Conventional Activated Sludge w/ Nitrification, @ Min. Temp > 15°C		
Description	Value	Unit
AERATION BASIN CALCULATIONS - TCEQ TRADITIONAL DESIGN - TCEQ 217, SUBCHAPTER F		2
Aeration Basin Maximum Organic Loading	35.0	lbs/day/1000 ft ³
Minimum Number of Basins (For Flow > 0.4 MGD)	2.0	EA
BOD Removal Credit for Preliminary and Primary Treatment (Optional)	0%	
Total Peak BOD Loading (Based on Design Flow)	1,751	lbs/day
Total Aeration Basin Volume Required	50,040	ft ³
AERATION BASIN SIZING		
Proposed Number of Basins	12.0	
Side Water Depth of Basins	10.167	ft
Freeboard	2.0	ft
		ft
	1//	
Total Depth of Basin	9.167	
Total Depth of Basin Diffuser Submergence	9.167	ft
Total Depth of Basin Diffuser Submergence Required Volume of Each Aeration Basin		ft ft³
Total Depth of Basin Diffuser Submergence Required Volume of Each Aeration Basin Surface Area of Each Basin	9.167 4,170 410	ft
Total Depth of Basin Diffuser Submergence Required Volume of Each Aeration Basin Surface Area of Each Basin Width to Length Ratio (1:X)	9.167 4,170 410 3.0	ft ft ³ ft ²
Total Depth of Basin Diffuser Submergence Required Volume of Each Aeration Basin Surface Area of Each Basin Width to Length Ratio (1:X) Required Width of Each Basin	9.167 4,170 410 3.0 12.0	ft ft ³ ft ²
Total Depth of Basin Diffuser Submergence Required Volume of Each Aeration Basin Surface Area of Each Basin	9.167 4,170 410 3.0	ft ft ³ ft ²

WASTEWATER CHARACTERISTICS		
Description	Value	Unit
Influent BOD ₅	300.0	mg/L
Influent TSS	300.0	mg/L
Influent NH ₃	70.0	mg/L
Daily Flow (Q _{AVE})	700,000.0	gpd
Daily Flow (Q _{AVF})	486.1	gpm
Daily Flow (Q _{AVE})	1.085	cfs
2-hr Peak Flow (Q _{PK})	2,800,000	gpd
2-hr Peak Flow (Q _{PK})		
	1,944.4	gpm
2-hr Peak Flow (Q _{PK})	4.340	cfs
NH ₃	409.6	lbs/day
BOD₅	1,755.6	lbs/day
TSS	1,755.6	lbs/day
Description (ANN 16 of the Control o		
Conventional Activated Sludge w/ Nitrification, @ Min. Temp > 15°C		
SECONDARY CLARIFIER Description	Value	Unit
Description	Value	Oiiit
Number of Clarifiers	3.0	Ea
Average Flow Per Clarifier	0.23	MGD
Peak Flow Per Clarifier	0.93	MGD
Clarifier Shape (Round, Octagonal, Square)	Round	
Design Weir Shape (Round, Segmented)	Round	
Design Number of Segments (Leave Blank If Designed Round)		
SURFACE AREA DESIGN - TCEQ 217.154 (c)(1)		
TCEQ Max Surface Loading (Q _{AVG}) TCEQ 317.4 (d)(5)	700	gal/day/ft ²
TCEQ Max Surface Loading (Q _{PK}) TCEQ 217.154 (c)(1)	1,200	gal/day/ft ²
Design Diameter	40.0	ft
Surface Area Required at Peak Flow Per Clarifier	777.8	ft ²
Surface Area Required for All Clarifiers at Peak Flow	2,333.3	ft ²
Proposed Surface Area Per Clarifier	1,256.6	ft ²
Total Proposed Surface Area for All Clarifiers	3,769.9	ft ²
Actual Design Surface Loading at Design Flow (Q _{AVE})	185.7	gal/day/ft ²
Actual Design Surface Loading at Peak Flow (Q _{PK})	742.7	gal/day/ft ²
	772.7	gai/uay/it
SIDE WATER DEPTH - TCEQ 217.152 (g)		
Side Water Depth For Clarifier Surface Area Greater Than 300 sqft.	10	ft
Side Water Depth For Clarifier Surface Area Equal To Or Less Than 300 sqft.	8	ft
Controlling Minimum Depth Requirement	10.0	ft
Proposed Clarifier Side Water Depth (Not Total Depth)	10.0	ft
Design Floor Slope (1:X)	12.0	
Design Overall Depth (Including 1:12, sloped bottom)	11.7	ft
HYDRAULIC DETENTION TIME - TCEQ 217.154 (c)(1)		

WASTEWATER CHARACTERISTICS		
Description	Value	Unit
TCEQ Min Detention Time (Q _{AVE})	2.6	hours
TCEQ Min Detention Time (Q _{PK})	1.8	hours
Recycle Ratio at Design Flow (200 gpd/sf) Per Clarifier	0.25	MGD
Recycle Ratio at Peak Flow (400 gpd/sf) Per Clarifier	0.50	MGD
Flow per Clarifier for Hydraulic Detention Time @ Design Flow (w/ Recycle)	0.48	MGD
Flow per Clarifier for Hydraulic Detention Time @ Peak Flow (w/ Recycle)	1.44	MGD
Required Treatment Volume At Design Flow for Each Clarifier	7,019.4	ft ³
Required Treatment Volume At Peak Flow for Each Clarifier	14,398.3	ft ³
Proposed Treatment Volume for Each Clarifier	12,566.4	ft ³
Actual Hydraulic Detention Time at Design Flow	4.7	hours
Actual Hydraulic Detention Time at Peak Flow	2.4	hours
,		
SOLIDS LOADING RATE - TCEQ 317.4 (d)(5)		
Totals Solids to Clarifier	23,352.0	lbs/day
Proposed Surface Area of Clarifier	1,256.6	ft ²
Loading Rate of Solids to Clarifier	18.6	lbs/day/ft ²
TCEQ Maximum Loading Rate	50.0	lbs/day/ft ²
TOLIQ Maximum Loading Nate	50.0	ibs/uay/it
EFFLUENT WEIR DESIGN - TCEQ 217.152 (d)		
Weir loading (For Plants with Design Flows 1.0 MGD or less)	20,000	gal/day/ft ²
Weir loading (For Plants with Design Flows Over 1.0 MGD)	30,000	gal/day/ft ²
	·	
Controlling Weir Loading Criteria	20,000.0	gal/day/ft ²
Total Length of Weir Required Per Clarifier @ Peak Flow	46.7	ft
Total Length of Weir Required For All Clarifiers @ Peak Flow Proposed Weir Distance from Wall	140.0	ft ft
Diameter of Effluent Weir	1.0 38.0	ft
Design Weir Length Per Clarifier	119.4	ft
Total Design Weir Length	358.1	ft
Actual Surface Area Loading @ Peak Flow	7,818.1	gal/day/ft ²
Actual Surface Area Loading @ Average Flow	1,954.5	gal/day/ft ²
TOROUG DATINGS OF DRIVES AND DAVES		
TORQUE RATINGS OF DRIVES AND RAKES Posietivo Force of Secondary Slydge (W)	6.0	lb/ft
Resistive Force of Secondary Sludge (W) Running Torque (Wr²)	2,400.0	ft-lbs
Running Forque (WF)	2,400.0	11-105
RETURN ACTIVATED SLUDGE FLOW RATES - TCEQ 217.152 (j)		
Lower Limit Underflow Rate - TCEQ 217.152(j)	200	gpd/ft²
Minimum RAS Flow Rate (per clarifier)	174.5	gpm
Upper Limit Underflow Rate - TCEQ 217.152(j)	400	gpd/ft²
Maximum RAS Flow Rate (per clarifier)	349.1	gpm
Combined Upper Limit RAS Underflow Rate for Plant	1,047.2	gpm
		<u>.</u>
STILLING WELL DESIGN		
Maximum Stilling Well Velocity (@ Peak Flow) TCEQ 217.152 (a)(4)	0.15	ft/sec
Peak Flow For Individual Clarifier	0.9	MGD
Total Area Required	9.6	ft ²
Diameter of Each Stilling Well	4.0	ft
Area of Each Stilling Well	12.6	ft ²

TCEQ DESIGN CRITERIA (CHAPTER 317.5 (B))						
Minimum Detention Time	15.0	days				
Volume Requirement	20.0	ft ³ /lb BOD ₅ /day				
Aeration Requirement	30.0	scfm/1000 ft ³				
If Mechanical Aeration is Used	1.5	HP/1000 ft ³				
TCEQ DESIGN CRITERIA (CHAPTER 217, SUBCHAPTER J)						
Minimum Temperature	15.0	deg C				
Required Minimum Detention Time	60.0	days				
Minimum Volatile Solids Loading Rate	100.0	lb/1000 ft ³ /day				
Maximum Volatile Solids Loading Rate	200.0	lb/1000 ft ³ /day				
Aeration Requirement	20.0	SCFM/1000 ft ³				
NOTE: Aerobic digester has to be sized for average day flow	1					
Biodegradable Volatile Solids in WAS	0.7	lb VS/BOD removed				
Destruction	0.3	lb VS/BOD removed				
Note: Typical minimum Solids Retention Time (SRT) maintained in WWTPs is 8 days. Secondary solids production is typically						
Influent Solids	1,751	lbs/day				
Digested Solids Production	1,384	lbs/day				
Average Digested Solids Production	1,568	lbs/day				
Total Sludge Production, lbs/day	1,568	lbs/day				
Assumed Average Dig. Conc., mg/l	15,000.0	mg/l				
Total Sludge to Aerobic Digester	12,530.00	gal/d				
Volume Required Based on Min. Detention Time @ 60 Days	100,508.02	ft ³				
Volume Required Based on Min. Detention Time @ 15 Days	25,127.01	ft ³				
CHECK IF CHAPTER 217 VOLATILE SOLIDS LOADING RATE REQUIREMENTS	CAN BE MET					
Volatile Suspended Solids Loading	1,226	lbs/day				
Volatile Solids Loading Tate for 60 Days Storage Volume	12.2	lb/1000 ft ³				
Volatile Solids Loading Rate	ERROR!					
Note: It is not possible to meet both the min. required detention time and min. required VS solic	ls loading rate r	equirements without				
significant thickening before the sludge is stabilized in the digester. Hence, it is prudent to just m	eet the require	d min. detention				
time alone. Also, if the sludge is to be disposed of in a landfill, sludge stabilization will not be rec	uired and a full	detention time is				
not necessary. When a full dettention time is not provided, the basin will not be a true aerobic d	igester; instead	l, it will be				
reconfigured as a sludge holding tank.						
SLUDGE HOLDING TANK DESIGN						
Number of Basins	12.0	Ea				
Side Water Depth	10.167	ft				
Width	12.0	ft				
Length	24	ft				
Design Volume	35,137	ft ³				
DESIGN CHECK						
Detection Time	20.00	1 .				

20.98

20.06

days ft³/lb BOD₅/day

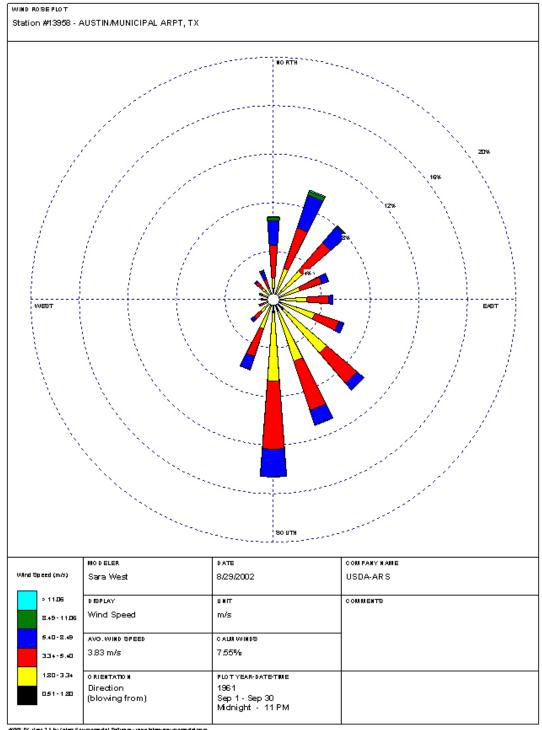
Detention Time

Design Volume to Loading Ratio

WASTEWATER CHARACTERISTICS				
Design Flow Rate (Average Daily Flow)	0.7	MGD		
Design Flow Rate (2-Hour Peak Flow)	2.8	MGD		
CHLORINE CONTACT CHAMBER				
Description	Value	Unit		
TCEQ Min Detention Time (Q _{PK}) (TCEQ217.281(b)(1)	20.0	min		
TCEQ Required Minimum Volume	5,199.0	ft ³		
TCEQ Required Minimum Volume	38,888.9	gal		
Chlorine Contact Basin Sizing (Excluding Chlorine Mixing Chamber)				
Design Number of Trains	3.0			
Design Side Water Depth at Peak Flow	10.0	ft		
Design Width of Basin	12.0	ft		
Design Channel Width	2.5	ft		
Design Channel Length (Assumes 40:1 L:W ratio per TCEQ 217.281(a)(2))	100.0	ft		
Number of Partition	5.0	ea		
DESIGN LENGTH OF BASIN	15.0	ft		
PROPOSED VOLUME	7,500.0	ft ³		
ACTUAL CCB VOLUME	5,400.0	ft ³		
Actual Detention Time at Peak Flow	20.8	min		
ACTUAL CHANNEL LENGTH	72.0	ft		

Appendix N

Wind Rose



MSPC SY May 3.5 by Calest Environmental Software - very bless-environmental com-

EXHIBIT TITLE:	WIND ROSE
LOCATION:	WILLIAMSON 99 WWTP
DATE ISSUED:	9/16/2025



Appendix O

Solids Management Plan

WILLIAMSON 99 40003-019

SLUDGE MANAGEMENT PLAN PH I - 0.1 MGD

I.PARAMETERS

% CAPACITIES	100%	75%	50%	25%
AVG. FLOW (MGD)	0.100	0.075	0.0375	0.009

CBOD ₅ REMOVAL			
Influent Concentration	300	mg/l	
Effluent Concentration	0	mg/l	
Net Removal	300	mg/l	

DIGESTER VOLUME		
	Vol. (cu. ft.)	Vol. (Gal)
Digester No. 1	2,928	21,902
Digester No. 2	2,928	21,902
Total	5,856	43,804

II. DAILY SLUDGE PRODUCTIONS

CAPACITY	100%	75%	50%	25%
BOD REMOVED (LBS)	250	188	125	63
DRY SLUDGE PRODUCED ⁽¹⁾	79	59	39	20
(LBS)	, 5	33	33	
WET SLUDGE			4.070	-0-
PRODUCED ⁽²⁾ (LBS)	3,941	2,955	1,970	985
VOL WET SLUDGE	470	254	226	440
PRODUCED (GPD)	473	354	236	118
REMOVAL SCHEDULE	0.2	400	405	270
(DAYS)	92	123	185	370

(1) Assuming 0.315 lbs of dry sludge produced per pound of BOD5 removed (2) Assuming 2% Solids

Sludge will be removed from digester when digester is full of thickened solids. Sludge will be removed by a registered transporter and hauled to a permitted disposal site.

At 100% Capacity, sludge shall be removed from basins every 92 days

	PROJECT NAME: WILLIAMSON 99 A PROJECT NO: 40003-019			
SLUDGE MAN	AGEMENT P	LAN PH I -	0.35 MGD	
	I.PARAMET	ERS		
% CAPACITIES	100%	75%	50%	25%
AVG. FLOW (MGD)	0.350	0.2625	0.13125	0.033
CBOD ₅ RE	MOVAL			
Influent Concentration	300	mg/l		
Effluent Concentration	0	mg/l		
Net Removal	300	mg/l		
DIGESTER VOLUME		•		
	Vol. (cu. ft.)	Vol. (Gal)		
Digester No. 1	2,928	21,902		
Digester No. 2	2,928	21,902		
Digester No. 3	2,928	21,902		
Digester No. 4	2,928	21,902		
Digester No. 5	2,928	21,902		
Digester No. 6	2,928	21,902		
Digester No. 7	2,928	21,902		
Total	20,497	153,315		
II. DAI	LY SLUDGE PF	ODUCTION	<u>s</u>	
CAPACITY	100%	75%	50%	25%
BOD REMOVED (LBS)	876	657	438	219
DRY SLUDGE PRODUCED ⁽¹⁾ (LBS)	276	207	138	69
WET SLUDGE PRODUCED ⁽²⁾ (LBS)	13,792	10,344	6,896	3,448
VOL WET SLUDGE PRODUCED (GPD)	1654	1240	827	413
REMOVAL SCHEDULE (DAYS)	92	123	185	370
(1) Assuming 0.315 lbs of dry sl	udge produce	d per pound	of BOD5 rem	noved

(1) Assuming 0.315 lbs of dry sludge produced per pound of BOD5 removed (2) Assuming 2% Solids

Sludge will be removed from digester when digester is full of thickened solids.
Sludge will be removed by a registered transporter and hauled to a permitted disposal site.

At 100% Capacity, sludge shall be removed from basins every 92 days

SLUDGE MANAGEMENT PLAN PH I - 0.7 MGD

I.PARAMETERS

% CAPACITIES	100%	75%	50%	25%
AVG. FLOW (MGD)	0.700	0.525	0.2625	0.066

CBOD5 REMOVAL			
Influent Concentration	300	mg/l	
Effluent Concentration	0	mg/l	
Net Removal	300	mg/l	

DIGESTER VOLUME				
	Vol. (cu. ft.)	Vol. (Gal)		
Digester No. 1	2,928	21,902		
Digester No. 2	2,928	21,902		
Digester No. 3	2,928	21,902		
Digester No. 4	2,928	21,902		
Digester No. 5	2,928	21,902		
Digester No. 6	2,928	21,902		
Digester No. 7	2,928	21,902		
Digester No. 8	2,928	21,902		
Digester No. 9	2,928	21,902		
Digester No. 10	2,928	21,902		
Digester No. 11	2,928	21,902		
Digester No. 12	2,928	21,902		
Total	35,137	262,826		

II. DAILY SLUDGE PRODUCTIONS

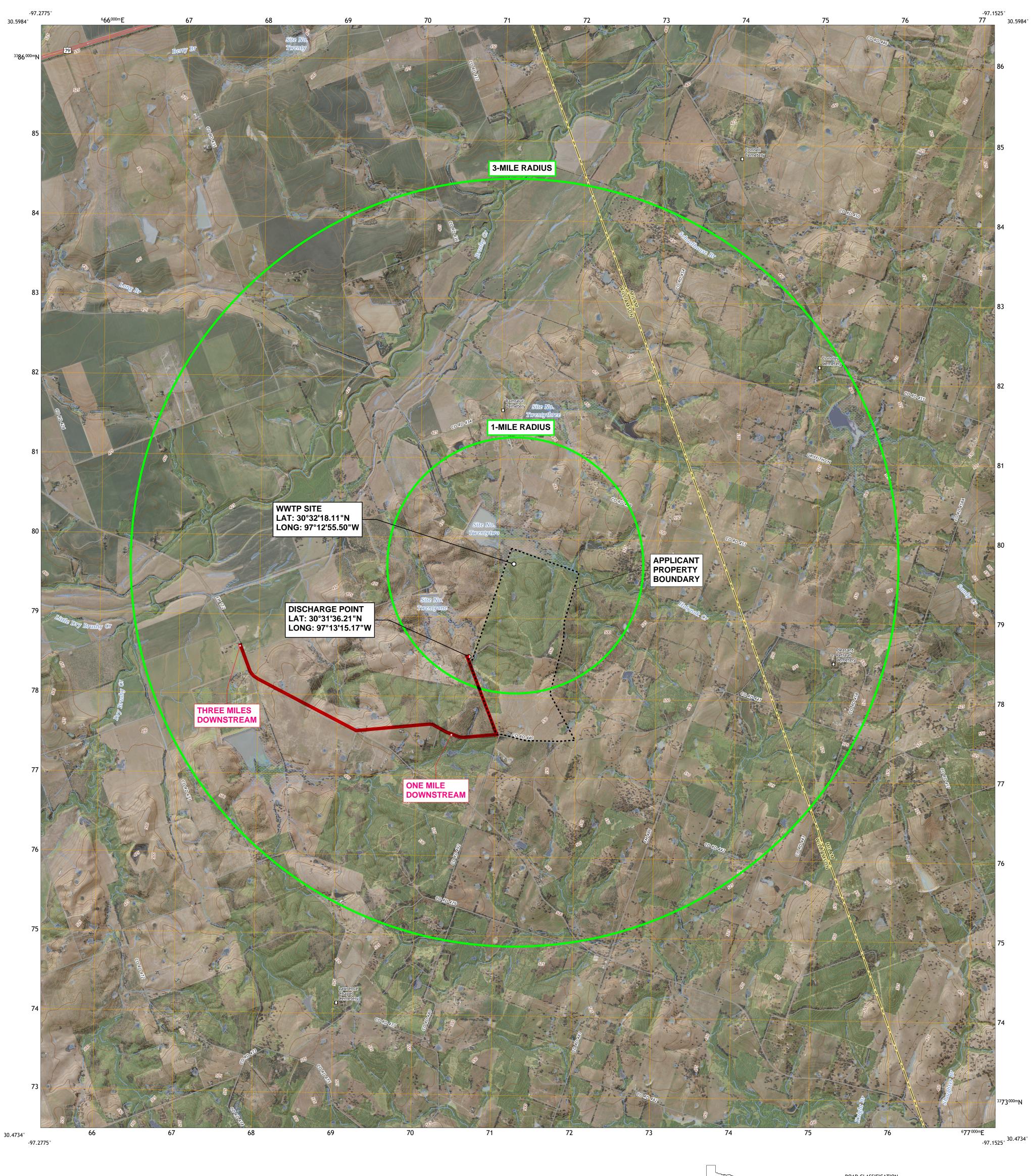
CAPACITY	100%	75%	50%	25%
BOD REMOVED (LBS)	1751	1314	876	438
DRY SLUDGE PRODUCED ⁽¹⁾ (LBS)	552	414	276	138
WET SLUDGE PRODUCED ⁽²⁾ (LBS)	27,585	20,688	13,792	6,896
VOL WET SLUDGE PRODUCED (GPD)	3308	2481	1654	827
REMOVAL SCHEDULE (DAYS)	79	105	158	317

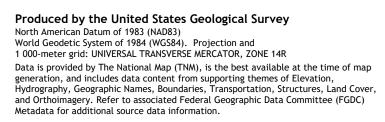
(1) Assuming 0.315 lbs of dry sludge produced per pound of BOD5 removed (2) Assuming 2% Solids

Sludge will be removed from digester when digester is full of thickened solids. Sludge will be removed by a registered transporter and hauled to a permitted disposal site.

At 100% Capacity, sludge shall be removed from basins every 79 days

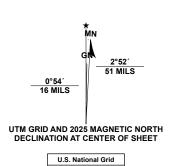






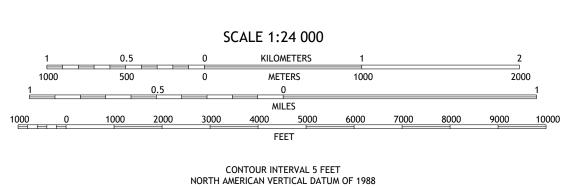
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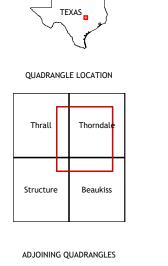


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CONTOUR SMOOTHNESS = Medium





7.5-MINUTE TOPO, TX 2025

COOK GLEN E & SUSAN ROOKE RIEGER JASON MENZEL JOHN 900 COUNTY ROAD 439 PO BOX 293 PO BOX 860 THORNDALE TX 76577 THORNDALE TX 76577-0293 THORNDALE TX 76577-8773 ANDERSON BOBBY & SHEILA WARNER PHILIP PAUL WARNER PHILIP PAUL 1400 COUNTY ROAD 439 2361 COUNTY ROAD 440 2361 COUNTY ROAD 440 THORNDALE TX 76577-8739 THORNDALE TX 76577-8720 THORNDALE TX 76577-8720 SHARP SARA D SHARP SARA D TODD KIMBERLY ANN 1850 COUNTY ROAD 440 8104 CHARDONNAY CV 8104 CHARDONNAY CV THORNDALE TX 76577 AUSTIN TX 78750-7854 AUSTIN TX 78750-7854 GAVENDA RACHEL LOUISE & VOIGT. MARCUS TY KRISTAPONIS EDWARD V **STEVE** 115 COUNTY ROAD 492 7105 WHISPERING CREEK CT 1101 QUAIL PARK DR THRALL TX 78578 AUSTIN TX 78736 **AUSTIN TX 78758**

DRAYER, JOSEPH & ANNA

2303 HARTFORD RD

AUSTIN TX 78703-2436

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