Texas Commission on Environmental Quality

Construction Notice of Intent

Site Information (Regulated Entity)

What is the name of the site to be authorized?

Does the site have a physical address?

No

CR 404 at FM 973

Physical Address

Because there is no physical address, describe how to locate this site:

FM 973 from CR 404 to FCR

City State Taylor TX

ZIP

76574

County

WILLIAMSON

 30.53462

_ . _ . _ .

-97.44642

Primary SIC Code

1611

Secondary SIC Code Primary NAICS Code

Secondary NAICS Code

Regulated Entity Site Information

What is the Regulated Entity's Number (RN)?

CR 404 at FM 973

What is the name of the Regulated Entity (RE)?

Does the RE site have a physical address?

No

Physical Address

Because there is no physical address, describe how to locate this site:

FM 973 from CR 404 to FCR

City State Taylor TX

ZIP

76574 WILLIAMSON

County
Latitude (N) (##.#####)

30.53462

Longitude (W) (-###.#####)

-97.44642

Facility NAICS Code

What is the primary business of this entity?

Government

Customer (Applicant) Information

How is this applicant associated with this site?

Operator CN600897888

What is the applicant's Customer Number (CN)?

County Government

Type of Customer

Legal Name

Full legal name of the applicant:

Williamson County

Texas SOS Filing Number

Federal Tax ID

746000978

State Franchise Tax ID

State Sales Tax ID

Local Tax ID

Local lax ID

DUNS Number

Number of Employees

Independently Owned and Operated?

No

I certify that the full legal name of the entity applying for this permit has been

provided and is legally authorized to do business in Texas.

Yes

Responsible Authority Contact

Organization Name Williamson County

Prefix THE HONORABLE

First

Middle

Last Gravell
Suffix JR

Credentials

Title County Judge

Responsible Authority Mailing Address

Enter new address or copy one from list:

Address Type Domestic

Mailing Address (include Suite or Bldg. here, if applicable) 101 E OLD SETTLERS BLVD # 225

Routing (such as Mail Code, Dept., or Attn:)

City ROUND ROCK

 State
 TX

 ZIP
 78664

 Phone (###-###)
 5125348178

Extension

Alternate Phone (###-###-###)

Fax (###-###-###)

E-mail aschiele@wilco.org

Application Contact

Person TCEQ should contact for questions about this application:

Same as another contact?

Organization Name HNTB

Prefix

First Julissa

Middle

Last Vasquez

Suffix

Credentials

Title Construction Contract Administrator

Enter new address or copy one from list: CN600897888, Williamson County

Mailing Address

Address Type Domestic

Mailing Address (include Suite or Bldg. here, if applicable)

101 E OLD SETTLERS BLVD # 225

Routing (such as Mail Code, Dept., or Attn:)

City ROUND ROCK

 State
 TX

 ZIP
 78664

 Phone (###-####)
 5125348178

Extension

Alternate Phone (###-###-###)

Fax (###-###-###)

E-mail juvasquez@hntb.com

CNOI General Characteristics

Is the project located on Indian Country Lands?

| Application Summar | yrteport | |
|---|--------------|--|
| Is your construction activity associated with an oil and gas exploration, production, processing, or treatment, or transmission facility? | No | |
| What is the Primary Standard Industrial Classification (SIC) Code that best describes the construction activity being conducted at the site? | 1611 | |
| If applicable, what is the Secondary SIC Code(s)? | | |
| What is the total number of acres disturbed? | 8.61 | |
| Is the project site part of a larger common plan of development or sale? | No | |
| What is the estimated start date of the project? | 12/27/2022 | |
| What is the estimated end date of the project? | 11/20/2023 | |
| Will concrete truck washout be performed at the site? | Yes | |
| What is the name of the first water body(s) to receive the stormwater runoff or potential runoff from the site? | Brushy Creek | |
| What is the segment number(s) of the classified water body(s) that the discharge will eventually reach? | 1244 | |
| Is the discharge into a Municipal Separate Storm Sewer System (MS4)? | No | |
| Is the discharge or potential discharge within the Recharge Zone, Contributing Zone, or Contributing Zone within the Transition Zone of the Edwards Aquifer, as defined in 30 TAC Chapter 213? | No | |
| I certify that a stormwater pollution prevention plan has been developed, will be implemented prior to construction, and to the best of my knowledge and belief is compliant with any applicable local sediment and erosion control plans, as required in the general permit TXR150000. Note: For multiple operators who operate under a shared SWP3, the confirmation of an operator may be limited to its obligations under the SWP3 provided all obligations are confirmed by at least one operator. | Yes | |
| I certify that I have obtained a copy and understand the terms and conditions of the Construction General Permit (TXR150000). | Yes | |
| I understand that a Notice of Termination (NOT) must be submitted when this authorization is no longer needed. | Yes | |