

Texas Commission on Environmental Quality

Construction Notice of Intent Renewal

TXR1581LH

Site Information (Regulated Entity)

What is the name of the site to be authorized? CR 366

Does the site have a physical address? No

Physical Address

Because there is no physical address, describe how to locate this site: FROM MALLARD LANE TO CHANDLER ROAD

City TAYLOR

State TX

ZIP 76574

County WILLIAMSON

Latitude (N) (##.#####) 30.609806

Longitude (W) (-###.#####) -97.452044

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)? RN111615027

What is the name of the Regulated Entity (RE)? CR 366

Does the RE site have a physical address? No

Physical Address

Because there is no physical address, describe how to locate this site: FROM MALLARD LANE TO CHANDLER ROAD

City TAYLOR

State TX

ZIP 76574

County WILLIAMSON

Latitude (N) (##.#####) 30.609806

Longitude (W) (-###.#####) -97.452044

Facility NAICS Code

What is the primary business of this entity? GOVERNMENT

Customer (Applicant) Information

How is this applicant associated with this site? Operator

What is the applicant's Customer Number (CN)? CN600897888

Type of Customer County Government

Full legal name of the applicant:

Legal Name Williamson County

Texas SOS Filing Number

Federal Tax ID 746000978

State Franchise Tax ID

State Sales Tax ID

Local Tax ID

DUNS Number

Number of Employees 501+

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
Prefix
First
Middle
Last
Suffix
Credentials
Title

Williamson County
THE HONORABLE
BILL

GRAVELL
JR

COUNTY JUDGE

Responsible Authority Mailing Address

Enter new address or copy one from list:

Address Type
Mailing Address (include Suite or Bldg. here, if applicable)
Routing (such as Mail Code, Dept., or Attn:)
City
State
ZIP
Phone (###-###-####)
Extension
Alternate Phone (###-###-####)
Fax (###-###-####)
E-mail

Domestic
101 E OLD SETTLERS BLVD # 225

ROUND ROCK
TX
78664
5125348178

ASCHIELE@WILCO.ORG

Application Contact

Person TCEQ should contact for questions about this application:

Same as another contact?

Organization Name
Prefix
First
Middle
Last
Suffix
Credentials
Title

HNTB

JULISSA

VASQUEZ

CONSTRUCTION CONTRACT
ADMINISTRATOR

Enter new address or copy one from list:

Mailing Address

Address Type
Mailing Address (include Suite or Bldg. here, if applicable)
Routing (such as Mail Code, Dept., or Attn:)
City
State
ZIP
Phone (###-###-####)
Extension
Alternate Phone (###-###-####)
Fax (###-###-####)
E-mail

Domestic
101 E OLD SETTLERS BLVD # 225

ROUND ROCK
TX
78664
5125348178

JUVASQUEZ@HNTB.COM

CNOI-R General Characteristics

1	Is the project or site located on Indian Country Lands?	No
2	Is the project or site associated to a facility that is licensed for the storage of high-level radioactive waste by the United States Nuclear Regulatory Commission under 10 CFR Part 72?	No
3	Is your construction activity associated with an oil and gas exploration, production, processing, or treatment, or transmission facility?	No
4	What is the Primary Standard Industrial Classification (SIC) Code that best describes the construction activity being conducted at the site?	1611
5	If applicable, what is the Secondary SIC Code(s)?	
6	What is the total number of acres that the construction project or site will disturb under the control of the primary operator?	41.95
7	What is the construction project or site type?	Highway or Road
8	Is the project part of a larger common plan of development or sale?	No
9	What is the estimated start date of the project?	01/02/2023
10	What is the estimated end date of the project?	12/20/2024
11	Will concrete truck washout be performed at the site?	Yes
12	What is the name of the first water body(s) to receive the stormwater runoff or potential runoff from the site?	BULL BRANCH
13	What is the segment number(s) of the classified water body(s) that the discharge will eventually reach?	1244
14	Is the discharge into a Municipal Separate Storm Sewer System (MS4)?	Yes
14.1	What is the name of the MS4 Operator?	CITY OF TAYLOR, WILLIAMSON COUNTY, TXDOT AUSTIN DISTRICT
15	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
16	I certify that a stormwater pollution prevention plan (SWP3) 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 prepare 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
17	I certify that I have obtained a copy and understand the terms and conditions of the Construction General Permit (TXR150000).	Yes
18	I understand that a Notice of Termination (NOT) must be submitted when this authorization is no longer needed.	Yes