

Texas Commission on Environmental Quality

Construction Notice of Termination

TXR1581KE

Site Information (Regulated Entity)

What is the name of the site to be authorized?	SOUTHWEST BYPASS EXTENSION
Does the site have a physical address?	No
Because there is no physical address, describe how to locate this site:	WOLF RANCH PARKWAY TO SH 29
City	GEORGETOWN
State	TX
ZIP	78628
County	WILLIAMSON
Latitude (N) (##.#####)	30.626258
Longitude (W) (-###.#####)	-97.720324
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)?	RN111555355
What is the name of the Regulated Entity (RE)?	SOUTHWEST BYPASS EXTENSION
Does the RE site have a physical address?	No

Physical Address

Because there is no physical address, describe how to locate this site:	WOLF RANCH PARKWAY TO SH 29
City	GEORGETOWN
State	TX
ZIP	78628
County	WILLIAMSON
Latitude (N) (##.#####)	30.626258
Longitude (W) (-###.#####)	-97.720324
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.

Responsible Authority Contact

Organization Name	Williamson County
Prefix	THE HONORABLE
First	BILL
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 STE 225
Routing (such as Mail Code, Dept., or Attn:)	
City	ROUND ROCK
State	TX
ZIP	78664
Phone (###-###-####)	5129431577
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 COMPANIES
Prefix	
First	JULISSA
Middle	
Last	VASQUEZ
Suffix	
Credentials	
Title	CONSTRUCTION CONTRACT ADMINISTRATOR

Enter new address or copy one from list:

Mailing Address

Address Type	Domestic
Mailing Address (include Suite or Bldg. here, if applicable)	101 E OLD SETTLERS BLVD STE 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

Construction Notice of Intent - Termination Reason

1) What is the reason for terminating this authorization? (See instructions for descriptions of reasons.)	Final stabilization has been achieved.
2) Enter the authorization number to be terminated:	TXR1581KE