

Notice of Intent (NOI) for Stormwater **Discharges Associated with Construction Activity under TPDES General Permit** (TXR150000)

TCEQ	Office	Use	Only
Permit	No · 1	'YR	15

RN:

CN:

Ref No:



Sign up now for ePermits NOI at https://www6.tceq.state.tx.us/steers/ Get Instant Permit Coverage and only pay a \$225 application fee.

If filing a paper NOI you can pay the application fee on line? Go to https://www6.tceq.texas.gov/epay/

IMPORTA	NT:				
•Use the INSTRUCTIONS to fill out each question in this form.					
•Use the attached CUSTOMER CHECKLIST to make certain all you filled out all required information.					
	e applications WILL delay app	roval or result in au	tomatic Denial.		
	f General Permit				
	to renew an ACTIVE permit?	_			
	es - What is your permit numb		KR15		
✓ N	o - a permit number will be is	ssued.			
Application	n Fee if mailing a paper NOI:			_	
You must p	ay the \$325 Application Fee to	TCEQ for the appli	cation to be considered complete.		
Payment an	d NOI must be mailed to separa	ate addresses. See i	nstructions for correct mailing addresses.		
Provide yo			payment of the application fee:		
Mailed:	Check/Money Order No.:		lame on checking account:		
EPAY:	Voucher No.:	Is the Paym	ent Voucher copy attached? Yes		
A. OPER	ATOR (applicant)				
1. If the ap	plicant is currently a customer	with TCEQ, what is	the Customer Number (CN) issued to this entity?	_	
CN 600	. Ti	arch Central Registry)			
2. What is	the Legal Name of the entity (a	pplicant) applying f	or this permit?		
Williams	on County				
(The legal name	must be spelled exactly as filed with the To	exas Secretary of State, Cou	unty, or in the legal document forming the entity.)		
3. What is	the name and title of the person	signing the applica	tion?	_	
(The person n	nust be an official meeting signatory re	equirements in TAC 305	.43(a).)		
Name: Da	Name: Dan A. Gattis Title: County Judge		Title: County Judge	_	
4. What is	the Operator's (applicant) maili	ng address as recog	nized by the US Postal Service? (verify at USPS.com)	_	
Address:	14 Galloping Rd.		e No./Bldg. No./Mail Code:	_	
	and Rock	State: TX	ZIP Code: 78681		
	ailing Information (if outside USA).	Сог	intry Code: Postal Code:	_	
5. Phone N	o.: (512) 943-1550		Extension:		
6. Fax No.: (512) 943-1662			E-mail Address: roads@wilco.org		
7. Indicate	the type of Customer:			_	
☐ Individual ☐ Sole Proprietorship-D.B.A. ☐ Limited Partnership					
Corporation Federal Government General Partnership					
State Government County Government City Government					
	Other Government	Other (describe	e):		
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8. Independent Operator:	No (If governmental entity, subsidiary, or part of a larger corporation, check "No".	
9. Number of Employees:0-20;21-100	0;	
10. Customer Business Tax and Filing Numbers (This item	is not applicable to Individuals, Government, GP or Sole Proprietor.)	
REQUIRED for Corporations and Limited Partnership State Franchise Tax ID Number:	(Verify the entity's status and filing no. with TX SOS at 512/463-5555) Federal Tax ID:	
TX SOS Charter (filing) Number:	DUNS Number (if known):	
	DUNS Number (11 known):	
B. APPLICATION CONTACT		
If TCEQ needs additional information regarding this appl		
	Administrator Company: HNTB Corporation	
2. Phone No.: (512) 744-9082	Extension:	
3. Fax No.: 512 248-9940	E-mail Address: tmcconnell@hntb.com	
C. REGULATED ENTITY (RE) INFORMATION ON	PROJECT OR SITE	
1. TCEQ Issued RE Reference Number (RN): RN		
(Search Central Registry)		
2. Name of Project or Site (the name as known by the con	nmunity where this facility/project is located):	
CR 108 (Project No. 13IFB00118)		
(example: phase and name of subdivision or name of project that's union	que to the site)	
3. Does the site have a physical address?		
If Yes, complete Section A for a physical address.		
If No, complete Section B for site location information.		
Section A: Enter the physical address for the site. (verify it with US	PS.com or other delivery source)	
Street Number:	Street Name:	
City:	ZIP Code:	
Section B: Enter the site location information.		
If no physical address (Street Number & Street Name), provide a writte (Ex.: phase I of Woodland subdivision located 2 miles west from in From US 79 to North of Limmer Loop (CR 164)	ntersection of Hwy 290 & IH35 accessible on Hwy 290 South)	
City where the site is located or nearest city to site:	ZIP Code where site is located:	
Hutto, TX	78634	
4. Identify the county where the site is located: Williams	son	
5. Latitude: 30° 32' 44" N	Longitude: -97° 33' 59" W	
6. What is the primary business of this entity? In your own (Do not repeat the SIC and NAICS code) Reconstruction or	words, briefly describe the primary business of the Regulated Entity: f existing roadway.	
7. What is the mailing address for the regulated entity?		
Is the RE mailing address the same as the Operator?	ddress is the same as Operator No, provide the address	
Street Number:	treet Name:	
City: State:	ZIP Code:	
D. GENERAL CHARACTERISTICS		
 Is the site located on Indian Country Lands? If the site is on Indian country lands, you must obtain authorization What is the Standard Industrial Classification (SIC) cod 		
Primary: 1611 Secondary:		

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3(a) What is the total number of acres disturbed? 18.0
3(b) Is the project site part of a larger common plan of development or sale?
If Yes, the total number of acres disturbed can be less than 5 acres.
If No , the total number of acres disturbed must be 5 or more. If the total number of acres disturbed is less than 5 then the project site does not qualify for coverage through this Notice of Intent. Coverage will be denied. See the requirements in the general permit for small construction sites.
4. Discharge Information (all information MUST be provided or the permit will be denied)
4(a) What is the name of the water body(s) to receive the stormwater runoff or potential runoff from the site?
Brushy Creek
4(b) What is the segment number(s) of the classified water body(s) that the discharge or potential discharge will eventually
reach? 1244
4(c) Are any of the surface water bodies receiving discharges from the construction site on the latest EPA-approved CWA 303(d) list of impaired waters?
Yes No
If Yes, provide the name of the impaired water body(s). Brushy Creek, San Gabriel River, Little River 4(d) Is the discharge into an MS4? Yes No
If Yes, what is the name of the MS4 Operator?
Note: The general permit requires you to send a copy of the NOI to the MS4 Operator.
4(e) Is the discharge or potential discharge within the Recharge Zone, Contributing Zone, or Contributing Zone within the Transition Zone of the Edwards Aquifer?
Yes No
If the answer is Yes, please note that a copy of the agency approved Plan required by the Edwards Aquifer Rule (30 TAC Chapter 213) me be included or referenced in the Stormwater Pollution Prevention Plan.
E. CERT IFICATION
Check "Yes" to the certifications below. Failure to certify to all items will result in denial.
Yes I certify that I have obtained a copy and understand the terms and conditions of the general permit (TXR150000
Yes I certify that the full legal name of the entity (Operator) applying for this permit has been provided and is legall
authorized to do business in Texas. Yes I understand that a Notice of Termination (NOT) must be submitted when this authorization is no longer needed
Yes I certify that a stormwater pollution prevention plan has been developed and will be implemented prior to
construction, and that is compliant with any applicable local sediment and erosion control plans, as required in the general permit TXR150000.
Operator Certification:
Typed or printed name (Required & must be legible) Title (Required & legible)
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.
Signature:
(Use blue ink)