|  |  |
| --- | --- |
| The TCEQ Blue and Green Logo   | **TEXAS COMMISSION ON ENVIRONMENTAL QUALITY**ELECTRONIC WAIVER REQUEST FOR A CONCENTRATED ANIMAL FEEDING OPERATION (CAFO) |

A Large CAFO, as defined in the CAFO rules at 30 TAC 321.32(14)(A), must request a waiver from e-reporting requirements codified in 40 Code of Federal Regulations §127.15 OR be required to submit CAFO annual reports electronically.

Are you requesting a waiver from e-reporting requirements?

[ ]  Yes, Indicate the type of waiver below.

[ ]  Temporary Waiver

[ ]  Permanent Waiver (available to facilities and entities owned or operated by members of religious communities that choose not to use certain modern technologies (e.g., computers, electricity))

[ ]  No, you must submit your application electronically through TCEQ ePermits system (STEERS) at <https://www3.tceq.texas.gov/steers/index.cfm>. Check [How to Apply through STEERS](https://www.tceq.texas.gov/assets/public/assistance/sblga/How_to_Create_a_STEERS_Account.pdf).

If an electronic waiver request is granted, the Applicant(s) seeking authorization, or an authorized permittee(s) may continue to submit CAFO annual reports to TCEQ in a paper format.

Note:

* An approved waiver is not transferrable.
* Each Owner or Operator must request his own waiver.
* Temporary waiver will not extend beyond five years. However, permittees may re-apply for a new temporary waiver, if needed.

**State Only CAFOs are exempt from this requirement.**

|  |  |
| --- | --- |
| The TCEQ Blue and Green Logo   | **TEXAS COMMISSION ON ENVIRONMENTAL QUALITY****INDIVIDUAL PERMIT APPLICATION FOR A CONCENTRATED ANIMAL FEEDING OPERATION (CAFO)** |

If you have questions about completing this form, please contact the Applications Review and Processing Team at 512-239-4671.

# SECTION 1. APPLICATION FEE

Minor Amendment - $150.00

Renewal - $315.00

New or Major Amendment - $350.00

Mailed Check/Money Order Number: Click here to enter text.

 Check/Money Order Amount: Click here to enter text.

 Name Printed on Check: Click here to enter text.

EPAY Voucher Number: Click here to enter text.

 Copy of Payment Voucher enclosed? Yes [ ]

# SECTION 2. TYPE OF APPLICATION

1. Coverage: State Only [ ]     TPDES [ ]
2. Media Type: Water Quality [ ]     Air and Water Quality [ ]
3. Application Type: New [ ]     Major Amendment [ ]

 Renewal [ ]     Minor Amendment [ ]

1. For amendments, describe the proposed changes: Click here to enter text.
2. For existing permits:

What is the permit number? Click here to enter text.

What is the EPA I.D. Number? TX Click here to enter text.

# SECTION 3. FACILITY OWNER (APPLICANT) INFORMATION

1. What is the legal name of the facility owner?

Click here to enter text.

1. If the applicant is an existing TCEQ customer, provide the Customer Number (CN) issued to this entity? CN Click here to enter text.
2. What is the contact information for the owner?

Mailing Address: Click here to enter text.

City, State and Zip Code: Click here to enter text.

Phone Number: Click here to enter text. Fax Number: Click here to enter text.

E-mail Address: Click here to enter text.

1. Indicate the type of customer:

[ ]    Individual

[ ]    Limited Partnership

[ ]    General Partnership

[ ]    Trust

[ ]    Sole Proprietorship (D.B.A.)

[ ]    Corporation

[ ]    Estate

[ ]    Federal Government

[ ]    County Government

[ ]    State Government

[ ]    City Government

[ ]    Other Government

[ ]    Other, specify: Click here to enter text.

1. If the customer type is individual, complete Attachment 1.
2. Is this customer an independent entity?

[ ]  Yes [ ]  No government, subsidiary, or part of a larger corporation

1. Number of employees:

[ ]  0-20    [ ]  21-100    [ ]  101-250   [ ]  251-500    [ ]  501 or higher

1. For Corporations and Limited Partnerships:

What is the Tax Identification Number issued by the State Comptroller: Click here to enter text.

What is the Charter Filing Number issued by the Texas Secretary of State: Click here to enter text.

# SECTION 4. CO-APPLICANT INFORMATION

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

1. What is the legal name of the co-applicant?

Click here to enter text.

1. If the applicant is an existing TCEQ customer, provide the Customer Number (CN) issued to this entity? CN Click here to enter text.
2. What is the contact information for the co-applicant?

Mailing Address: Click here to enter text.

City, State and Zip Code: Click here to enter text.

Phone Number: Fax Number: Click here to enter text.

E-mail Address: Click here to enter text.

1. Indicate the type of customer:

[ ]    Individual

[ ]    Limited Partnership

[ ]    General Partnership

[ ]    Trust

[ ]    Sole Proprietorship (D.B.A.)

[ ]    Corporation

[ ]    Estate

[ ]    Federal Government

[ ]    County Government

[ ]    State Government

[ ]    City Government

[ ]    Other Government

[ ]    Other, specify: Click here to enter text.

1. If the customer type is individual, complete Attachment 1.
2. Is this customer an independent entity?

[ ]    Yes [ ]    No government, subsidiary, or part of a larger corporation

1. Number of employees:

[ ]  0-20    [ ]  21-100    [ ]  101-250   [ ]  251-500    [ ]  501 or higher

1. For Corporations and Limited Partnerships:

What is the Tax Identification Number issued by the State Comptroller: Click here to enter text.

What is the Charter Filing Number issued by the Texas Secretary of State: Click here to enter text.

# SECTION 5. APPLICATION CONTACT INFORMATION

This is the person TCEQ will contact if additional information is needed about this application.

Prefix (Mr., Ms., Miss): Click here to enter text.

Application Contact First and Last Name: Click here to enter text.

Title: Click here to enter text. Credentials: Click here to enter text.

Company Name: Click here to enter text.

Mailing Address: Click here to enter text.

City, State and Zip Code: Click here to enter text.

Phone Number: Click here to enter text. Fax Number: Click here to enter text.

E-mail Address: Click here to enter text.

# SECTION 6. PERMIT CONTACT INFORMATION

Provide two names of individuals that TCEQ can contact during the term of the permit.

**A.** Prefix (Mr., Ms., Miss): Click here to enter text.

Permit Contact First and Last Name: Click here to enter text.

Title: Click here to enter text. Credentials: Click here to enter text.

Company Name: Click here to enter text.

Mailing Address: Click here to enter text.

City, State and Zip Code: Click here to enter text.

Phone Number: Click here to enter text. Fax Number: Click here to enter text. E-mail Address: Click here to enter text.

**B.** Prefix (Mr., Ms., Miss): Click here to enter text.

Permit Contact First and Last Name: Click here to enter text.

Title: Click here to enter text. Credentials: Click here to enter text.

Company Name: Click here to enter text.

Mailing Address: Click here to enter text.

City, State and Zip Code: Click here to enter text.

Phone Number: Click here to enter text. Fax Number: Click here to enter text. E-mail Address: Click here to enter text.

# SECTION 7. ANNUAL BILLING CONTACT INFORMATION

Please identify the individual for receiving the annual fee invoices.

Is the billing contact and contact information the same as the Owner or the Co-Applicant identified in Section 3) or Section 4) above?

[ ]   Yes, specify which applicant on the line below and go to Section 8)

Click here to enter text.

[ ]   No, complete this section

Prefix (Mr., Ms., Miss): Click here to enter text.

First and Last Name: Click here to enter text.

Title: Click here to enter text. Credentials: Click here to enter text.

Company Name: Click here to enter text.

Mailing Address: Click here to enter text.

City, State and Zip Code: Click here to enter text.

Phone Number: Click here to enter text. Fax Number: Click here to enter text. E-mail Address: Click here to enter text.

# SECTION 8. LANDOWNER INFORMATION

**A. Landowner where the production area is or will be located**

Landowner Name: Click here to enter text.

**B. Landowner of the land management units (LMUs)**

Landowner Name: Click here to enter text.

# SECTION 9. PUBLIC NOTICE INFORMATION

1. **Individual responsible for publishing the notices in the newspaper**

Prefix (Mr., Ms., Miss): Click here to enter text. First and Last Name: Click here to enter text.

Title: Click here to enter text. Credentials: Click here to enter text.

Company Name: Click here to enter text.

Mailing Address: Click here to enter text.

City, State and Zip Code: Click here to enter text.

Phone Number: Click here to enter text. Fax Number: Click here to enter text. E-mail Address: Click here to enter text.

1. **Method for receiving the notice package for the Notice of Receipt and Intent**

[ ]     E-mail: Click here to enter text.

[ ]     Fax Number: Click here to enter text.

[ ]     Regular Mail:

Mailing Address: Click here to enter text.

City, State and Zip Code: Click here to enter text.

1. **Contact person to be listed in the notice**

Prefix (Mr., Ms., Miss): Click here to enter text.

First and Last Name: Click here to enter text.

Title: Click here to enter text. Credentials: Click here to enter text.

 Company Name: Click here to enter text.

Phone Number: Click here to enter text.

1. **Public viewing location**

If the facility is located in more than one county, a public viewing location for each county must be provided.

Public Building Name: Click here to enter text.

Physical Address of Building: Click here to enter text.

City: Click here to enter text. County: Click here to enter text.

Phone Number: Click here to enter text.

1. **Bilingual Notice Requirement**

**For new, major amendment, and renewal applications.** This information can be obtained by contacting the bilingual/ESL coordinator at the nearest elementary or middle school.

**1.** Is a bilingual education program required by the Texas Education Code at the nearest elementary or middle school to the facility or proposed facility?

Yes [ ]    No [ ]

(**If No**, alternative language notice publication is not required; skip to Section 10. Regulated Entity (Site) Information.)

**2.** Are the students who attend either the elementary school or the middle school enrolled in a bilingual education program at that school?

Yes [ ]    No [ ]

**3.** Do the students at these schools attend a bilingual education program at another location?

Yes [ ]    No [ ]

**4.** Would the school be required to provide a bilingual education program but the school has waived out of this requirement under 19 TAC §89.1205(g)?

Yes [ ]    No [ ]

**5.** If the answer is yes to 1, 2, 3, or 4, public notice in an alternative language is required. Which language is required by the bilingual program? Click here to enter text.

**6.** Complete the [CAFO Plain Language Summary Template](https://www.tceq.texas.gov/permitting/wastewater/review/maintenance_forms.html) (English) for CAFO Permit Applications for a new, renewal, major or minor amendment and submit with this application.

If a bilingual education program is required by the Texas Education Code at the nearest elementary or middle school to the facility or proposed facility, also complete the [CAFO Plain Language Summary Template](https://www.tceq.texas.gov/permitting/wastewater/review/maintenance_forms.html) (Spanish) or provide a translated copy of the completed English plain language summary in the appropriate alternative language if different from Spanish.

1. **Public Involvement Plan Form**

Complete and attach one Public Involvement Plan (PIP) Form (TCEQ Form 20960) for each application for a new permit or major amendment to a permit.

# SECTION 10. REGULATED ENTITY (SITE) INFORMATION

1. Site Name as known by the local community: Click here to enter text.
2. If this is an existing permitted site, provide the Regulated Entity Number (RN) issued to this site? RN Click here to enter text.
3. Site Address/Location:

If the site has a physical address such as 12100 Park 35 Circle, Austin, TX 78753, complete Item 1.

If the site does not have a physical address, provide a location description in Item 2. Example: located on the north side of FM 123, 2 miles west of the intersection of FM 123 and Highway 1.

**Item 1: Physical Address of Project or Site:**

Street Number and Name: Clihbck here to enter text.

City, State and Zip Code: Click here to enter text.

**Item 2: Site Location Description:**

Location description:Click here to enter text.

City where the site is located or, if not in a city, what is the nearest city: Click here to enter text.

Zip Code where the site is located: Click here to enter text.

1. County or counties if more than 1: Click here to enter text.
2. Latitude: Click here to enter text. Longitude: Click here to enter text.
3. Animal Type:

[ ]     Dairy-0241

[ ]     Beef Cattle- 0211

[ ]     Swine-0213

[ ]     Broiler-0251

[ ]     Laying Hens-0252

[ ]     Sheep/Goats-0214

[ ]     Auction-5154

[ ]     Other, specify: Click here to enter text.

1. Existing Maximum Number of Animals: Click here to enter text.

Proposed Maximum Number of Animals: Click here to enter text.

1. What is the total LMU acreage? Click here to enter text.

# SECTION 11. MISCELLANEOUS INFORMATION

1. Did any person who was formerly employed by the TCEQ represent your company and get paid for service regarding this application? Yes [ ]    No [ ]

If yes, provide the name(s) of the former TCEQ employee(s): Click here to enter text.

1. Is the facility located on Indian Country Lands? Yes [ ]    No [ ]

If yes, do not submit this application. You must obtain authorization through EPA Region 6.

1. Is the production area located within the protection zone of a sole source drinking water supply? Yes [ ]    No [ ]
2. Is any permanent school fund land affected by this application? Yes [ ]    No [ ]

If yes, provide the location and foreseeable impacts and effects this application has on the land(s). Click here to enter text.

1. Delinquent Fees and Penalties:

Do you owe fees to the TCEQ? Yes [ ]    No [ ]

Do you owe any penalties to the TCEQ? Yes [ ]    No [ ]

If you answered yes to either of the above questions, provide the amount owed, the type of fee or penalty, and an identifying number.

Click here to enter text.

# SECTION 12. AFFECTED LANDOWNER INFORMATION

This section must be completed if the application type is new or major amendment. If the application type is renewal or minor amendment, skip to Section 13.

1. Landowner map. Attach a landowner map or drawing, with scale, that includes the following. Each landowner should be designated by a letter or number on both the list and the map.
* The applicant’s property boundaries, including onsite and offsite LMUs; and
* The property boundaries of all landowners within 500 feet of the applicant’s property.
1. Landowner list. Attach a separate list of the landowners' names and mailing addresses. The list must be cross-referenced to the landowners map.
2. Landowner list media. Indicate the format of the landowners list.

[ ]    Read/Writeable CD

[ ]    4 sets of mailing labels

1. Landowner data source. Provide the source of the landowners' names and mailing addresses.

Click here to enter text.

# SECTION 13. ATTACHMENTS

1. **All applications**
* Supplemental Permit Information Form, if required by instructions on that form
* Current copy of tax records or deed showing ownership of the land
* Lease agreement, if LMUs are not owned by the applicant or co-applicant
1. **New, Major amendment, or Renewal**
* Completed Technical Information Packet (TCEQ-00760).
1. **New and Major amendment**
* Public Involvement Plan Form (TCEQ-20960)
1. **Minor Amendment**

Attach the following items if applicable:

* Current vicinity map, site map, runoff control map, and LMU map
* RCS design calculations
* Nutrient Management Plan or Land application rate calculations
* Other technical documents affected by the proposed amendment

# SIGNATURE PAGE

**If co-applicants are required, each co-applicant must submit an original, separate signature page.**

Permit Number: Click here to enter text.

Applicant: Click here to enter text.

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: Click here to enter text.

Title: Click here to enter text.

Signature: Date:

SUBSCRIBED AND SWORN to before me by the said on

this day of , 20

My commission expires on the day of , 20

(Seal) Notary Public

County, Texas

Attachment 1

Individual Information

Complete this attachment if the facility owner or co-applicant is an individual. Make additional copies of this attachment if both are individuals.

Prefix (Mr., Ms., Miss): Click here to enter text.

Full Legal Name, including middle name: Click here to enter text.

Driver's License or State Identification Number: Click here to enter text.

State that Issued the License or Identification Number: Click here to enter text.

Date of Birth: Click here to enter text.

Mailing Address: Click here to enter text.

City, State and Zip Code: Click here to enter text.

Phone Number: Click here to enter text. Fax Number: Click here to enter text.

E-mail Address: Click here to enter text.

For TCEQ Use Only

Customer Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Regulated Entity Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Permit Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TCEQ USE ONLY

Application type: Renewal Major Amendment Minor Amendment New

County: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Admin Complete Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Agency Receiving SPIF: Texas Historical Commission U.S. Fish and Wildlife

 Texas Parks and Wildlife Army Corps of Engineers

SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

**This form is required for all TPDES applications**

1. Applicant: Click here to enter text.
2. Permit Number: Click here to enter text. EPA ID Number: Click here to enter text.
3. Address of the project (location description that includes street/highway, city/vicinity, and county). Click here to enter text.
4. Provide the name, address, telephone and fax number of an individual that can be contacted to answer specific questions about the property.

First and Last Name: Click here to enter text.

Company Name: Click here to enter text.

Mailing Address: Click here to enter text.

City, State, and Zip Code: Click here to enter text.

Phone Number: Click here to enter text. Fax Number: Click here to enter text.

1. County where the facility is located: Click here to enter text.
2. If the property is publicly owned and the owner is different than the permittee/applicant, please identify the owner. Click here to enter text.
3. Identify the name of the water body (receiving waters) and TCEQ segment number that will receive the discharge. Click here to enter text.
4. Provide a 7.5-minute USGS quadrangle map with the project boundaries plotted and a general location map showing the project area. (This map is required in addition to the map in the administrative report.)
5. Provide photographs of any structures 50 years or older on the property.
6. Does your project involve any of the following? Select all that apply.

[ ]     Proposed access roads, utility lines, and construction easements

[ ]     Visual effects that could damage or detract from a historic property’s integrity

[ ]     Vibration effects during construction or as a result of project design

[ ]     Additional phases of development that are planned for the future

[ ]     Sealing of caves, fractures, sinkholes, or 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): Click here to enter text.
2. Describe existing disturbances, vegetation & land use (plowing, other ground disturbances): Click here to enter text.

**The following applies to New TPDES and Major Amendment to TPDES Permits:**

1. List construction dates of any buildings or structures on the property: Click here to enter text.
2. Provide a brief history of the property, and name of the architect/builder, if known: Click here to enter text.

**The following applies to New, Amended and Renewal TPDES applications:**

1. List each Retention Control Structure and its required capacity (Acre Feet). Click here to enter text.
2. Provide the location and number of acres where wastewater and manure are land applied: Click here to enter text.
3. List the maximum number of head to be permitted. Click here to enter text.

This is the end of the form Instructions begin on the next page.

WATER QUALITY PERMIT

# PAYMENT SUBMITTAL FORM

**Use this form to submit you APPLICATION FEE, if you are mailing your payment.**

* Complete items 1 through 5 below:
* Staple your check in the space provided at the bottom of this document.
* Do not mail this form with your application form.
* Do not mail this form to the same address as your application.
* Do not submit a copy of the application with this form as it could cause duplicate permit entries.

**Mail this form and your check to:**

*BY REGULAR U.S. MAIL*

Texas Commission on Environmental

Quality

Financial Administration Division

Cashier’s Office, MC-214

P.O. Box 13088

Austin, TX 78711-3088

*BY OVERNIGHT/EXPRESS MAIL*

Texas Commission on Environmental

Quality

Financial Administration Division

Cashier’s Office, MC-214

12100 Park 35 Circle

Austin, TX 78753

Fee Code: WQP Wastewater Permit Number: WQ000Click here to enter text.

1. Check / Money Order Number: Click here to enter text.
2. Amount of Check/Money Order: Click here to enter text.
3. Date of Check or Money Order: Click here to enter text.
4. Name on Check or Money Order: Click here to enter text.
5. APPLICATION INFORMATION

If the check is for more than one application, attach a list of each Project/Site (RE) Name and Physical Address exactly as provided on the application.

Project/Site (RE) Name: Click here to enter text.

Project/Site (RE) Physical Address: Click here to enter text.

Staple Check in This Space

TCEQ - 20134

# INSTRUCTIONS FOR CAFO INDIVIDUAL PERMIT APPLICATION

# Request for Electronic Reporting Waiver- Applicable to TPDES Large CAFOs Only.

Indicate if you want a waiver, temporary or permanent. If a waiver request is granted, the Applicant(s) seeking authorization or permittees that are authorized may continue to submit annual reports to TCEQ in paper format.

If you select “No”, you must submit your and annual reports to TCEQ) electronically through STEERS.

**Temporary Waivers**

The final rule has the following requirements for temporary waivers from NPDES electronic reporting. The final rule outlines a process for these temporary waiver requests [see 40 CFR 127.15(b)].

1. It is the duty of the owner, operator, or duly authorized representative of the TPDES-regulated entity to initiate the process by submitting a temporary waiver request.
2. Each temporary waiver must not extend beyond five years. However, TPDES-regulated entities may re-apply for a new temporary waiver.
3. An approved temporary waiver is not transferrable to another owner or operator (as defined in 40 CFR 122.2)

**Permanent Waivers**

The final rule has the following requirements for permanent waivers from TPDES electronic reporting. The final rule outlines a process for these permanent waiver requests [see 40 CFR 127.15(c)].

1. It is the duty of the owner, operator, or duly authorized representative of the TPDES-regulated entity to initiate the process by submitting a permanent waiver request.
2. Permanent waivers are only available to facilities and entities owned or operated by members of religious communities that choose not to use certain modern technologies (e.g., computers, electricity).
3. An approved permanent waiver is not transferrable to another owner or operator (as defined in 40 CFR 122.2).

This application applies to CAFO facilities authorized under 30 TAC Chapter 321.

# Who Should Apply?

The owner of the facility must be the applicant. If the owner of the land is a separate entity or individual, then the owner of the land must be included as the co-applicant. For all TPDES applications, the operator must be listed as a co-applicant. A Signature Page must be completed for each applicant.

A permit must be transferred when a change in ownership or operator occurs. A transfer application (TCEQ-20031) must be submitted at least 30 days before the proposed transfer date.

# When Is the Application Submitted?

For **new and amendment** applications, the completed application must be submitted at least 180 days before the date of the proposed discharge or disposal. The discharge cannot begin until a permit is issued.

For **renewal** applications, the completed application must be submitted at least 180 days before the expiration date of the current permit.

# Where to Send the Application Form

**One original and two copies** of the application, including attachments, must be provided to the address below.

Also submit **one copy** of the application to the appropriate **TCEQ Regional Office**. Regional office addresses may be obtained on the TCEQ website at [www.tceq.texas.gov](http://www.tceq.texas.gov). If information is submitted at a later date in response to a TCEQ request for further information, please forward a copy of the requested information to the TCEQ regional office as well.

# Regular U.S. Mail:

Texas Commission on Environmental Quality

Applications Review and Processing Team, MC 148

PO Box 13087

Austin TX 78711-3087

# For Express Mail or Hand Delivery:

Texas Commission on Environmental Quality

Applications Review and Processing Team, MC 148

Building F Room 2101

12100 Park 35 Circle

Austin TX 78753

# TCEQ Contact List

Permit Information and Application Forms: 512-239-4671

Technical Information 512-239-4671

Environmental Law Division: 512-239-0600

Copies of records on file with the TCEQ may be obtained for a minimal fee from the Records Management Office at 512-239-2900.

# Section 1. Application Fee

Minor Amendment - $150.00

Renewal - $315.00

New or Major Amendment - $350.00

You must pay the Application Fee to TCEQ for the application to be complete.

Payment and application must be mailed to separate addresses.

Mail the application fee to:

Texas Commission on Environmental Quality

Revenues Section, MC 214

PO Box 13088

Austin TX 78711-3088

You can pay online at <http://www.tceq.texas.gov/goto/epay>

Select Fee Type: Water Quality

To verify receipt of payment or any other questions you may have regarding payment of fees to the TCEQ, you may call the Revenues Section, Cashiers Office at (512) 239-0357.

# Section 2. Type of Application

1. COVERAGE: Texas Pollutant Discharge Elimination System (TPDES) applies to a facility that meets the definition of a Large CAFO as defined in 30 Texas Administrative Code (TAC) §321.32(14)(A). State Only applies to a facility that meets the definition of State-only CAFO, as defined in 30 TAC §321.32(14)(B)-(D). Select the appropriate type of coverage for your facility.
2. MEDIA TYPE: Each authorization may be issued to provide coverage under the Texas Water Code (TWC) and the Texas Health and Safety Code. Select the appropriate media type for your facility.

Water Quality: All CAFOs are required to seek and obtain authorization under a water quality permit, except for dry litter poultry CAFOs. Select this option if your facility has a separate air quality authorization through a Chapter 116 permit or Chapter 106 Standard Exemption.

Air and Water Quality: Select this option if you are requesting air quality authorization under the air quality standard permit in lieu of separate air quality authorization through a Chapter 116 permit or Chapter 106 Standard Exemption. The air quality standard permit requirements are described in 30 TAC §321.43.

1. APPLICATION TYPE: There are four alternatives available to the applicant: new applications, major amendments to existing authorizations, minor amendments or modifications to existing authorizations, or renewals of existing authorizations. Each type is described below. Select the appropriate application type for your facility.

New: For applicants requesting written authorization to operate a CAFO.

Major Amendment: For applicants that currently operate under written authorization and are requesting to change a substantive term, provision, requirement, or a limiting parameter of the authorization such as to change animal type or head count; add a new RCS; add or increase the acreage of LMUs; change or add crops or yield goals that are not currently authorized.

Minor Amendment: For applicants that currently operate under written authorization and are requesting to improve or maintain the permitted quality or method of disposal of waste if there is neither a significant increase of the quantity of waste nor a material change in the pattern or place of disposal.

Renewal: For applicants that currently operate under written authorization and are requesting to renew that authorization.

1. For amendment applications, describe the proposed changes.
2. For renewal and amendment applications, provide the TCEQ permit number and for TPDES Large CAFO, the EPA I.D. number.

# Section 3. Facility Owner (Applicant) Information

1. Provide the full legal name of the facility owner. It is the responsibility of the **Facility Owner** to apply for the permit. For all TPDES applications, the **operator** must be listed as a co-applicant.
2. If the facility owner is an existing TCEQ customer, provide the customer number (CN) for the facility owner. The Customer Number is available at the following website: <http://www15.tceq.texas.gov/crpub/>. If the facility owner is not an existing TCEQ customer, leave blank.
3. Provide the following contact information for the facility owner: mailing address, phone number, fax number, and email address. The mailing address provided by the applicant should also be an address where permit correspondences can be received. The mailing address provided will be used on the permit.
4. Select the entity type for the facility owner. Identify the number of employees that work for the facility owner.
5. If the facility owner is an individual, complete Attachment 1: Individual Information.

F-H. If the facility owner is a corporation or limited partnership, provide the Tax ID number and Charter number. This information must show the applicant is in good standing with the Comptroller. If the applicant is not registered with the Texas Secretary of State or is not an individual, a copy of the agreement which formed the entity must be submitted. The agreement must be recorded in the county where the project is located. The application cannot be further processed unless the applicant is authorized to do business in the state of Texas. To obtain the certification, applicants may contact the Office of the State Comptroller of Public Accounts at www.cpa.state.tx.us or at 800-252-5555.

# Section 4. Co-Applicant Information

1. Provide the full legal name of the co-applicant.
2. If the co-applicant is an existing TCEQ customer, provide the customer number (CN) for the co-applicant. The Customer Number is available at the following website: <http://www15.tceq.texas.gov/crpub/>. If the co-applicant is not an existing TCEQ customer, leave blank.
3. Provide the following contact information for the co-applicant: mailing address, phone number, fax number, and email address.
4. Select the entity type for the co-applicant. Identify the number of employees that work for the co-applicant.

If the co-applicant is an individual, complete Attachment 1: Individual Information.

F-H. If the co-applicant is a corporation or limited partnership, provide the Tax ID number and Charter number. This information must show the co-applicant is in good standing with the Comptroller. If the applicant is not registered with the Texas Secretary of State or is not an individual, a copy of the agreement which formed the entity must be submitted. The agreement must be recorded in the county where the project is located. The application cannot be further processed unless the applicant is authorized to do business in the state of Texas. To obtain the certification, applicants may contact the Office of the State Comptroller of Public Accounts at www.cpa.state.tx.us or at 800-252-5555.

**Section 5. Application Contact Information**

Provide the following information regarding the person that TCEQ will contact if additional information is needed about this application: first and last name, company name, mailing address, phone number, fax number, and email address.

# Section 6. Permit Contact Information

Provide the following information for two individuals that TCEQ will contact if additional information is needed during the permit term (after the permit is issued): first and last name, company name, mailing address, phone number, fax number, and email address.

# Section 7. Annual Billing Contact Information

Provide the following information regarding the person that TCEQ will send annual fee invoices: first and last name, company name, mailing address, phone number, fax number, and email address.

The water quality fee is assessed annually for each permit that is active on September 1.

Pursuant to 30 TAC, Section 305.66, failure to pay fees is good cause for permit denial or revocation. If an applicant has outstanding fees, a proposed permit application will not be considered for approval by the Commission or Executive Director. For account balance information, contact the Financial Administration Division, Revenue Section, at (512) 239-0344.

# Section 8. Landowner Information

Provide the name of the landowner of the production area and the land management units.

# Section 9. Notice Information

The applicant will be required to publish 2 public notices in a newspaper of largest general circulation in the county where the facility is or will be located (not applicable for minor amendments applications; however, completion of **9.C. Contact in the Notice** is still required). Detailed information may be obtained by referring to TCEQ’s web site and 30 TAC Chapters 39, 50, 55, and 281regarding notice, public comments, and response to comment procedures.

The first notice, the “Notice of Receipt of Application and Intent to Obtain a Water Quality Permit” (NORI) must be published within 30 days of the application being declared Administratively Complete.

The second notice, “Notice of Application and Preliminary Decision” (NAPD) must be published within 30 days of a draft permit being filed with the Office of Chief Clerk (OCC). All information necessary to publish the second notice, as well as proof of publication, will be mailed by the OCC. The address to mail the required information back to the TCEQ will be included in the information from the OCC.

1. Provide the following information for the person that will publish the public notices: first and last name, company name, mailing address, phone number, fax number, and email address. This individual may be contacted by the public to answer general and specific questions about all aspects of the permit application.
2. Select the preferred method for receiving the public notice package for the Notice of Receipt and Intent. Options include email, fax, overnight or priority mail, or regular mail. The day the application is declared Administratively Complete the notice package will be sent to person identified in Section 9.A. via the method selected. The notice package includes the TCEQ declaration of completeness, a notice ready for publication, instructions for publishing the notice, and a publication affidavit.
3. Provide the following information for the person that will be identified in the public notice for the public to contact if they have questions about the permit application: first and last name, company name, and phone number.
4. Identify the public facility (library, courthouse, city hall) where the complete application, draft permit, and Fact Sheet must be made available for viewing and copying by the general public by the date the first notice is published. A location must be identified for each county where the facility is located. *(Note: This site must be in the county where the proposed activity is or will be located.)* Provide the building name, building address, city, county, and phone number for the public location where the application can be reviewed by the public.
5. For the Bilingual Notice Requirement Section, answer the questions in order to determine if the public notice must be published in an alternative language. Bilingual notice may be required for new, major amendment and renewal applications. Bilingual notice is not required for minor amendment applications.

Complete the Template and Instructions for the Plain Language Summary for a Concentrated Animal Feeding Operation (CAFO) Permit Application and submit with this application. This template is a guide for developing a plain language summary for a CAFO permit application as required by the TCEQ Public Participation Plan and Language Access Plan. 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 site or facility; (2) the expected output of the proposed site or facility; (3) the expected pollutants that may be emitted or discharged by the proposed site or facility; and (4) how the applicant will control those pollutants, so that the proposed or existing CAFO facility will not have an adverse impact on human health or the environment.

If a bilingual education program is required by the Texas Education Code at the nearest elementary or middle school to the facility or proposed facility also complete the Plain Language Summary Template (Spanish) or provide a translated copy of the completed English plain language summary in the appropriate alternative language if different from Spanish for new, renewal, major and minor amendments.

Download a copy of the template from the TCEQ website at <https://www.tceq.texas.gov/permitting/wastewater/review/maintenance_forms.html>.

1. Complete and attach one Public Involvement Plan (PIP) Form (TCEQ Form 20960) for each application for a new permit or major amendment to a permit. This form is not required for renewal or minor amendment applications. Download a copy of this form using the TCEQ Form Lookup feature at

<https://www.tceq.texas.gov/publications/search_forms.html>

# Section 10. Regulated Entity (Site) Information

1. Provide the name of the site as known by the public in the area where the facility is located.
2. If the site is currently regulated by TCEQ, provide the regulated entity reference number (RN) for the site. The RN is available at the following website: <http://www15.tceq.texas.gov/crpub/>. If the site is not currently regulated by TCEQ, leave blank.
3. Provide the physical address of the site. If a physical address is not available, provide a location description, the city or nearest city, and zip code where the site is located. An example location description is provided in the application form.
4. Provide the county or counties in which the site is located.
5. Provide the latitude and longitude for the production area.
6. Select the type or types of animals at the site.
7. Provide the maximum number of animals currently authorized at the site and the proposed maximum number of animals that will be authorized at the site. For a new application, provide the maximum number of animals to be authorized.
8. Provide the total acreage of all land management units.

# Section 11. Miscellaneous Information

1. Provide the name of each person that was previously employed by TCEQ and who was paid for services regarding this application.
2. Identify if the facility is located on Indian Country Lands. If the answer is yes, TCEQ does not have jurisdiction to process this application. Do not submit this application to TCEQ. Contact EPA Region 6 to obtain authorization.
3. Identify if the production area is located within the protection zone of a sole source drinking water supply.
4. Identify if any permanent school fund land is affected by this application. If yes, provide the location and potential impacts on the school fund land.
5. Indicate if the facility owner or co-applicant(s) owe fees or penalties to TCEQ. If yes, provide the amount owed, the type of fee or penalty, and the account number for fees or the TCEQ Docket number for penalties. Please note: The TCEQ will not issue, amend, or renew permits, registrations, certifications, or licenses to an entity or person who is delinquent on a penalty or fee owed to the TCEQ. The TCEQ will not declare any application administratively complete that is submitted by a person or entity who is delinquent on a fee or penalty until the fee or penalty is paid, or if on an approved installment plan, that payments under the plan are current. The TCEQ will withhold final action on an application until the fee or penalty is paid and the account is current, if after the application is considered administratively complete, we discover that the owner or entity who submitted the application is delinquent on a fee or penalty.

The following TCEQ website will help you determine if you owe any fees or penalties to the TCEQ and how to make a payment: <https://www.tceq.texas.gov/agency/fees/delin/index.html>. For questions about delinquent fees and penalties, contact the Financial Administration Division, Revenue Section, at 512-239-0354.

# Section 12. Affected Landowner Information

This section is only required for new and major amendment applications. If the application is for a renewal or minor amendment, skip to Section 13.

1. Attach a landowner map or drawing, with scale, that shows the applicant’s property boundaries, including onsite and offsite LMUs; and the property boundaries of all landowners within 500 feet of the applicant’s property. Each landowner should be designated by a letter or number on both the list and the map.
2. Attach a separate list of the landowners' names and mailing addresses. The list must be cross-referenced to the landowners map.
3. Provide the mailing list in one of the following formats: either 1) submit the mailing list electronically on a readable/writeable compact disk (CD-RW) using Microsoft Word or 2) provide four sets of pre-printed labels of the list. Each name and corresponding address must appear only once on the mailing labels or compact disk even if the entity owns more than one tract of land identified on the landowners map.

If providing the mailing labels on CD-RW, please ensure the names and mailing addresses are in Avery 5160 label format. Please label the CD-RW with the applicant’s name and permit number. Within the file stored on the CD-RW, identify the permit number and applicant’s name on the top of the document. The mailing list should be the only item on the CD-RW.

If providing the mailing list on pre-printed labels, it must be on Avery 5160 label format (3 columns across, 10 columns down, for a total of 30 labels per page). Provide four (4) complete sets of labels.

Names and addresses must be typed in the format indicated below according to US Postal Service regulations for machine readability. Each letter in the name and address must be capitalized, contain no punctuation, and the appropriate two-character abbreviation must be used for the state. Each entity listed must be blocked and spaced consecutively as shown below.

EXAMPLES:

JANE SMITH MR AND MRS JOHN DOE

1405 APPLE LN PO BOX 249

SEA TX 76724 1405 SEA TX 76710-0249

Provide the source of the landowners' names and mailing addresses.

# Section 13. Attachments

Provide the attachments based on the application type.

# Signature Page

A separate signature page must be provided for the facility owner and each co-applicant. The signature page must bear an original signature and the seal of a notary public. The date signed by the applicant must be the same as the date notarized. The signature page will not be acceptable if the dates are different.

In accordance with 30 Texas Administrative Code §305.44 relating to Signatories to Applications, all applications shall be signed as follows:

For a corporation, the application shall be signed by a responsible corporate officer. For purposes of this paragraph, a responsible corporate officer means a president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy or decision-making functions for the corporation; or the manager of one or more manufacturing, production, or operating facilities employing more than 250 persons or having gross annual sales or expenditures exceeding $25 million (in second-quarter 1980 dollars), if authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures. Corporate procedures governing authority to sign permit or post-closure order applications may provide for assignment or delegation to applicable corporate positions rather than to specific individuals.

For a partnership or sole proprietorship, the application shall be signed by a general partner or the proprietor, respectively.

For a municipality, state, federal, or other public agency, the application shall be signed by either a principal executive officer or a ranking elected official. For purposes of this paragraph, a principal executive officer of a federal agency includes the chief executive officer of the agency, or a senior executive officer having responsibility for the overall operations of a principal geographic unit of the agency (e.g., regional administrator of the EPA).

# Attachment 1. Individual Information

If the facility owner or co-applicant is an individual, provide the prefix, full legal name (including first, middle, and last name), driver's license number or state identification number, the state that issued the license or identification number, date of birth, mailing address, phone number, fax number, and email address.

# Supplemental Permit Information Form

This form, located after the signature page, must be completed and submitted with all TPDES applications. This form will be sent to other agencies. Answers cannot simply refer to information provided on the application form.is

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