



BIGGS & MATHEWS ENVIRONMENTAL, INC

TBPE No. F-256 TBPG No. 50222

September 18, 2023

Arten Avakian, P.G.
Project Manager
Municipal Solid Waste Permits – MC 124
Texas Commission on Environmental Quality
P.O. Box 13087
Austin, Texas 78711-3087

Re: City of Stephenville Landfill – Erath County
Municipal Solid Waste (MSW) – MSW Permit No. 664
Type IV Limited Scope Permit Amendment
Tracking No. 28474610; RN102214566/CN600627814

Dear Mr. Avakian:

Attached are the Core Data and Part I forms per your email request, dated September 13, 2023.

Sincerely,

BIGGS & MATHEWS ENVIRONMENTAL
TBPE No. F-256 ♦ TBPG No. 50222

A handwritten signature in blue ink, reading "Felipe A. Wescoup".

Felipe A. Wescoup, P.E.
Senior Engineer

Attachments: Forms TCEQ-10400 and TCEQ-00650

cc: Mr. Nick Williams, P.E., Director of Public Works, City of Stephenville
Mr. Doug Svien, Mayor, City of Stephenville

Permit or Approval	Received	Pending	Not Applicable
Ocean Dumping Permits under Marine Protection Research and Sanctuaries Act			X
Dredge or Fill Permits under Clean Water Act			X
Licenses under the Texas Radiation Control Act			X
Other (describe):			
Other (describe):			

12. Facility General Information

Facility Name: City of Stephenville Landfill

Contact Name: Nick Williams, P.E. Title: Director of Public Works

MSW Authorization Number (if existing): _____

Regulated Entity Reference Number: **RN** 102214566

Physical or Street Address (if available): 669 Co Rd 385

City: Stephenville County: Erath State: TX Zip Code: 76401

Phone Number: 254-918-1223

Latitude (Degrees, Minutes Seconds): 32° 10' 53.23"

Longitude (Degrees, Minutes Seconds): 98° 17' 22.30"

Benchmark Elevation (above mean sea level): 1477.54 feet

Description of facility location with respect to known or easily identifiable landmarks:

The facility entrance is located approximately 1,400 feet north-northwest of the intersection of County Road 351 and County Road 385.

Access routes from the nearest United States or state highway to the facility:

From the intersection of US Highway 377 and County Road 351, proceed east-southeast approximately 1.8 miles to County Road 385. Proceed north-northwest approximately 1,400 feet to the site entrance on the west side of the road.

Coastal Management Program

Is the facility within the Coastal Management Program boundary?

Yes No

13. Facility Types

- Type I Type IV Type V
 Type IAE Type IVAE Type VI

14. Activities Conducted at the Facility

- Storage Processing Disposal

15. Facility Waste Management Units

Check the box for each type of waste management unit proposed.

- | | |
|--|---|
| <input checked="" type="checkbox"/> Landfill Unit(s) | <input type="checkbox"/> Container(s) |
| <input type="checkbox"/> Incinerator(s) | <input type="checkbox"/> Roll-off Boxes |
| <input type="checkbox"/> Class 1 Landfill Unit(s) | <input type="checkbox"/> Surface Impoundment |
| <input type="checkbox"/> Process Tank(s) | <input type="checkbox"/> Autoclave(s) |
| <input type="checkbox"/> Storage Tank(s) | <input type="checkbox"/> Refrigeration Unit(s) |
| <input type="checkbox"/> Tipping Floor | <input type="checkbox"/> Mobile Processing Unit(s) |
| <input type="checkbox"/> Storage Area | <input type="checkbox"/> Compost Pile(s) or Vessel(s) |
| <input checked="" type="checkbox"/> Other (specify): | |

Transfer Station: MSW Registration No. 40193

16. Description of Proposed Facility or Changes to Existing Facility

Provide a brief description of the proposed activities if application is for a new facility, or the proposed changes to an existing facility or permit conditions if the application is for an amendment.

This limited scope permit amendment is requested to reclaim airspace from the previously approved Pre-Subtitle D area of the facility for Type IV waste disposal; providing for ongoing waste disposal needs of individuals, businesses, and communities in Erath County and the surrounding areas.

Signature Page

Site Operator or Authorized Signatory

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.

Name: Nick Williams Title: Director of Public Works

Email Address: nwilliams@stephenvilletx.gov

Signature: [Handwritten Signature] Date: 9-18-2023

Operator or Principal Executive Officer Designation of Authorized Signatory

To be completed by the operator if the application is signed by an authorized representative for the operator.

I hereby designate _____ as my representative and hereby authorize said representative to sign any application, submit additional information as may be requested by the Commission; and/or appear for me at any hearing or before the Texas Commission on Environmental Quality in conjunction with this request for a Texas Water Code or Texas Solid Waste Disposal Act permit. I further understand that I am responsible for the contents of this application, for oral statements given by my authorized representative in support of the application, and for compliance with the terms and conditions of any permit which might be issued based upon this application.

Operator or Principal Executive Officer Name: _____

Email Address: _____

Signature: _____ Date: _____

Notary

SUBSCRIBED AND SWORN to before me by the said Nick Williams

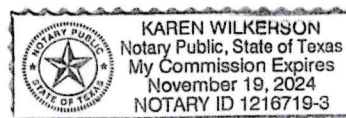
On this 18 day of September, 2023

My commission expires on the 19 day of November, 2024

[Handwritten Signature]

Notary Public in and for

ERATH County, Texas



Note: Application Must Bear Signature & Seal of Notary Public

Part I Attachments

Refer to instruction document 00650-instr for professional engineer seal requirements.

Attachments Table 1. Required attachments.

Required Attachments	Attachment Number
Supplementary Technical Report	Attachment 1
Property Legal Description	Appendix ID
Property Metes and Bounds Description	Appendix ID
Facility Legal Description	Appendix IC
Facility Metes and Bounds Description	Appendix IC
Metes and Bounds Drawings	Appendix IC
On-Site Easements Drawing	Appendix IC
Land Ownership Map	Appendix IB
Landowners List	Appendix IB
Mailing Labels (printed and electronic)	CD
Texas Department of Transportation (TxDOT) County Map	Appendix IA
General Location Map	Appendix IA
General Topographic Map	Appendix IA
Verification of Legal Status	Appendix IE
Property Owner Affidavit	Appendix ID
Evidence of Competency	Appendix IF

Attachments Table 2. Additional attachments as applicable.

Additional Attachments as Applicable (select all that apply and add others as needed)	Attachment Number
<input checked="" type="checkbox"/> TCEQ Core Data Form(s)	Part I
<input type="checkbox"/> Signatory Authority Delegation	
<input type="checkbox"/> Fee Payment Receipt	
<input type="checkbox"/> Confidential Documents	
<input type="checkbox"/> Waste Storage, Processing and Disposal Ordinances	
<input type="checkbox"/> Final Plat Record of Property	



TCEQ Use Only

TCEQ Core Data Form

For detailed instructions on completing this form, please read the Core Data Form Instructions or call 512-239-5175.

SECTION I: General Information

1. Reason for Submission (If other is checked please describe in space provided.) <input type="checkbox"/> New Permit, Registration or Authorization (Core Data Form should be submitted with the program application.) <input type="checkbox"/> Renewal (Core Data Form should be submitted with the renewal form)			<input checked="" type="checkbox"/> Other LTD SCOPE P. AMENDMENT		
2. Customer Reference Number (if issued) CN 600627814		Follow this link to search for CN or RN numbers in Central Registry**	3. Regulated Entity Reference Number (if issued) RN 102214566		

SECTION II: Customer Information

4. General Customer Information		5. Effective Date for Customer Information Updates (mm/dd/yyyy)			
<input type="checkbox"/> New Customer <input checked="" type="checkbox"/> Update to Customer Information <input type="checkbox"/> Change in Regulated Entity Ownership <input type="checkbox"/> Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)					
<i>The Customer Name submitted here may be updated automatically based on what is current and active with the Texas Secretary of State (SOS) or Texas Comptroller of Public Accounts (CPA).</i>					
6. Customer Legal Name (If an individual, print last name first: eg: Doe, John)				<i>If new Customer, enter previous Customer below:</i>	
City of Stephenville					
7. TX SOS/CPA Filing Number		8. TX State Tax ID (11 digits)		9. Federal Tax ID (9 digits)	10. DUNS Number (if applicable)
11. Type of Customer:		<input type="checkbox"/> Corporation <input type="checkbox"/> Individual Partnership: <input type="checkbox"/> General <input type="checkbox"/> Limited		<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Other:	
Government: <input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Federal <input type="checkbox"/> Local <input type="checkbox"/> State <input type="checkbox"/> Other					
12. Number of Employees				13. Independently Owned and Operated?	
<input checked="" type="checkbox"/> 0-20 <input type="checkbox"/> 21-100 <input checked="" type="checkbox"/> 101-250 <input type="checkbox"/> 251-500 <input type="checkbox"/> 501 and higher				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
14. Customer Role (Proposed or Actual) – as it relates to the Regulated Entity listed on this form. Please check one of the following					
<input type="checkbox"/> Owner <input type="checkbox"/> Operator <input checked="" type="checkbox"/> Owner & Operator <input type="checkbox"/> Other: <input type="checkbox"/> Occupational Licensee <input type="checkbox"/> Responsible Party <input type="checkbox"/> VCP/BSA Applicant					
15. Mailing Address:		298 W Washington St			
City		Stephenville	State	TX	ZIP
				76401	ZIP + 4
16. Country Mailing Information (if outside USA)			17. E-Mail Address (if applicable)		
			nwilliams@stephenvilletx.gov		
18. Telephone Number		19. Extension or Code		20. Fax Number (if applicable)	

SECTION III: Regulated Entity Information**21. General Regulated Entity Information** (If 'New Regulated Entity' is selected, a new permit application is also required.)

New Regulated Entity Update to Regulated Entity Name Update to Regulated Entity Information

The Regulated Entity Name submitted may be updated, in order to meet TCEQ Core Data Standards (removal of organizational endings such as Inc, LP, or LLC).

22. Regulated Entity Name (Enter name of the site where the regulated action is taking place.)

City of Stephenville Landfill

23. Street Address of the Regulated Entity:

669 CO RD 385

(No PO Boxes)

City	Stephenville	State	TX	ZIP	76401	ZIP + 4	
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24. County

Erath

If no Street Address is provided, fields 25-28 are required.

25. Description to**Physical Location:****26. Nearest City****State****Nearest ZIP Code**

Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).

27. Latitude (N) In Decimal:

6749021.98

28. Longitude (W) In Decimal:

2033620.06

Degrees

Minutes

Seconds

Degrees

Minutes

Seconds

32

10

53.23

98

17

22.30

29. Primary SIC Code**30. Secondary SIC Code****31. Primary NAICS Code****32. Secondary NAICS Code**

(4 digits)

(4 digits)

(5 or 6 digits)

(5 or 6 digits)

4953

562212

33. What is the Primary Business of this entity? (Do not repeat the SIC or NAICS description.)

Municipal Solid Waste Disposal

34. Mailing

298 W Washington St

Address:

City	Stephenville	State	TX	ZIP	76401	ZIP + 4	
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35. E-Mail Address:

nwilliams@stephenvilletx.gov

36. Telephone Number**37. Extension or Code****38. Fax Number** (if applicable)

(254) 918-1223

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39. TCEQ Programs and ID Numbers Check all Programs and write in the permits/registration numbers that will be affected by the updates submitted on this form. See the Core Data Form instructions for additional guidance.


<input type="checkbox"/> Dam Safety	<input type="checkbox"/> Districts	<input type="checkbox"/> Edwards Aquifer	<input type="checkbox"/> Emissions Inventory Air	<input type="checkbox"/> Industrial Hazardous Waste
<input checked="" type="checkbox"/> Municipal Solid Waste	<input type="checkbox"/> New Source Review Air	<input type="checkbox"/> OSSF	<input type="checkbox"/> Petroleum Storage Tank	<input type="checkbox"/> PWS
MSW Permit 664, MSW Registration 40193				
<input type="checkbox"/> Sludge	<input checked="" type="checkbox"/> Storm Water	<input type="checkbox"/> Title V Air	<input type="checkbox"/> Tires	<input type="checkbox"/> Used Oil
	TXR05FG05			
<input type="checkbox"/> Voluntary Cleanup	<input type="checkbox"/> Wastewater	<input type="checkbox"/> Wastewater Agriculture	<input type="checkbox"/> Water Rights	<input checked="" type="checkbox"/> Other:
				PBR 106.534

SECTION IV: Preparer Information

40. Name:	Felipe A. Wescoup, P.E.	41. Title:	Senior Engineer
42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Mail Address
(817) 563-1144		() -	faw@biggsandmathews.com

SECTION V: Authorized Signature

46. By my signature below, I certify, to the best of my knowledge, that the information provided in this form is true and complete, and that I have signature authority to submit this form on behalf of the entity specified in Section II, Field 6 and/or as required for the updates to the ID numbers identified in field 39.

Company:	City of Stephenville	Job Title:	Director of Public Works
Name (In Print):	Nick Williams, P.E.	Phone:	(254) 917- 1223
Signature:		Date:	09/18/2023