



# Notification of Completion of Wastewater Treatment Facility

If you have questions about completing this form or about the Water Quality Permit program, please contact the Applications Review and Processing Team at 512/239-4671.

## PERMIT INFORMATION

TCEQ Water Quality Permit No.: \_\_\_\_\_ EPA I.D. No.: TX \_\_\_\_\_

## FACILITY INFORMATION

Permitted Flow (MGD): \_\_\_\_\_ Phase of Operation (*check one*):  Interim  Final

Estimated or Actual Date of Operation (Month/Day/Year): \_\_\_\_\_

## OPERATOR INFORMATION

Name: \_\_\_\_\_

Class of Operator Certification: \_\_\_\_\_ Operator Certification Number: \_\_\_\_\_

Employed By: \_\_\_\_\_

## RESPONSIBLE OFFICIAL

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Street No. \_\_\_\_\_ Street name: \_\_\_\_\_

OR P.O. Box \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

This form should be completed when a facility is placed operational or goes into a new phase of operation. The completed form should be returned at least 45 days before you plan to bring the facility on line.

Mail completed form to: Texas Commission on Environmental Quality  
Customer Information and Applications Processing Section  
Applications Review and Processing Team (MC-148)  
PO Box 13087  
Austin TX 78711-3087

OR

Fax completed form to: 512/239-0884 "ATTENTION: APPLICATIONS REVIEW AND PROCESSING TEAM"