



Environmental Services
Department
Environmental Quality Division

Municipal Setting Designation Application

1. APPLICANT INFORMATION

Applicant's name: _____

Address: _____

Type of Organization (*check one*):

Corporation

Partnership

Sole Proprietor

Individual

Local Government

Other: _____

Interest in Property: _____

Name of Contact: _____

Title of Contact: _____

Address: _____

Telephone: _____

Email: _____

2. GENERAL SITE INFORMATION

Site name: _____

Site size (acres): _____

Site address: _____

Attach a legal description of the proposed outer boundaries of the proposed Municipal Setting Designation.

3. CURRENT SITE OWNER (if different from applicant)

Owner: _____

Owner Address: _____

Contact Person: _____

Title: _____

Organization: _____

Telephone: _____

Email: _____

4. MSD Application to Texas Commission on Environmental Quality

An application for a Municipal Setting Designation for this location has been filed with the Executive Director of the Texas Commission on Environmental Quality (*check one*):

Yes No If yes, attach a copy of that application.

5. Voluntary Cleanup Program

The property for which this Municipal Setting Designation is sought is in the Texas Voluntary Cleanup Program (*check one*):

Yes (VCP# _____) No

Attach a summary of: environmental site assessment activities that have been completed or that are ongoing at the site; reports that have been filed with the TCEQ regarding environmental conditions on the site; and cleanup activities that have been completed, are planned, or that are ongoing.

6. Public Drinking Water Supply System

A public drinking water supply system exists that satisfies the requirements of Texas Health and Safety Code Chapter 341, and that supplies or is capable of supplying drinking water to the property for which the Municipal Setting Designation is sought and property within one-half mile of the property for which the Municipal Setting Designation is sought (*check one*):

Yes No

7. Description of Groundwater

Attach a description of the groundwater sought to be restricted, including the identified chemicals of concern therein and the levels of contamination known to applicant, and the identified vertical and horizontal area of the contamination. If applicant has not documented groundwater contamination offsite that originates from the property for which a Municipal Setting Designation is sought, provide a statement as to whether contamination more likely than not exceeds a residential assessment level offsite and the basis for that statement.

8. Responsible Party Information

If known, identify all persons responsible for the contamination of the groundwater:

9. Affected Parties

Include the following information in separate tables:

- (a) all owners of real property lying within one-half mile of the subject property, as the ownership appears on the last approved city tax roll;
- (b) all state-registered private water wells within five miles from the boundary of the property for which the designation is sought, including a notation of those wells that are used for potable water purposes (if known), and a statement as to whether applicant has provided the owners with notice as provided in Texas Health and Safety Code Section 361.805;
- (c) of each retail public utility that owns or operates a groundwater supply well located not more than five miles from the property for which the Municipal Setting Designation is sought, and a statement as to whether applicant has provided the utilities with notice as provided in Texas Health and Safety Code Section 361.805; and
- (d) each municipality, other than the City of Fort Worth, with a boundary located not more than one-half mile from the property for which the Municipal Setting Designation is sought; or that owns or operates a groundwater supply well located not more than five miles from the property for which the MSD is sought; and a statement as to whether applicant has provided the municipalities with notice as provided in Texas Health and Safety Code Section 361.805.

One electronic version of these attachments shall be included with the application.

**NOTICE: THE CITY OF FORT WORTH MAILS NOTIFICATIONS
USPS FIRST CLASS MAIL**

**CERTIFIED RETURN RECEIPT MAILINGS, NOTICES FOR TEXAS HEALTH AND SAFETY
CODE §361.805, AND ANY OTHER REQUIREMENTS
ARE THE RESPONSIBILITY OF THE APPLICANT**

10. Posted Notice.

By submitting this application, you agree to allow the City access to the site for the purpose of posting notice of the application, as required by the ordinance. If the site is fenced, signs will be attached to the fence. If it is not fenced, signs will be attached to posts set in the ground. If applicant is not the current property owner, a letter signed by the owner and consenting to the City's access for this purpose must be attached to the application. The City reserves the right to post signs both ways.

The site is fenced (*check one*): Yes No If yes, indicate type and location below:

11. Attachments

Attach a site map, **drawn to scale**, including a metes and bounds description of the property, the boundary of the proposed Municipal Setting Designation, the location of groundwater on the property, and the extent of groundwater contamination to the limits that it has been defined. The map shall include a statement by a professional land surveyor registered by the Texas Board of Professional Surveying attesting to the accuracy of the metes and bounds property description.

12. Application Fee

Include the application fee of \$7,500 (*make checks payable to the City of Fort Worth*).

CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in a manner designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or 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 that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signed this _____ day of _____, 20_____

Signature of Authorized Representative: _____

Printed or Typed Name: _____

Title: _____