



May 2, 2022

Mr. Keiandré McGruder
License and Permits Specialist
Waste Permits Division
Texas Commission on Environmental Quality
12100 Park 35 Circle, Building F (MC-126)
Austin, TX 78753

Re: Response to Administrative Notice of Deficiency Letter
City of Victoria Landfill (Type I)
Victoria, Victoria County, Texas
CN600243257/RN100212968
Proposed TCEQ Permit Number MSW-1522B
Major Amendment Permit Application

Dear Mr. McGruder:

On behalf of the City of Victoria, Burns & McDonnell is submitting the enclosed one original and three copies of the replacement pages for the Major Permit Amendment application for the City of Victoria Landfill. The attached replacement pages were developed to incorporate comments included in your letter dated April 28, 2022.

The responses to each comment are provided in the NOD table in a separate column including both the response and the location in the permit application where the comment was addressed. A redline/strikeout version could not be provided as the Form TCEQ-0650 (Part I Form) does not allow for tracked changes formatting.

We appreciate your review of the enclosed materials and look forward to your comments. If you have any questions, please do not hesitate to contact me.

Sincerely,

A handwritten signature in blue ink, appearing to read "SAM", with a circular stamp or seal partially visible behind it.

Scott Martin, PE
Project Engineer

SAM/dlk

Copies submitted: 1 original and 3 copies

cc: Darryl Lesak, City of Victoria
Jeffrey Reed, Lloyd, Gosselink Rochelle & Townsend, P.C.

Mr. Keiandré McGruder
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ID ¹	App. Part	App. Section	Location ²	Citation	Error Type ³	Deficiency Description/Resolution	Deficiency Response
A1	I	17	Pg. 6	-	Typo	Please correct the typo in the consultant's mailing address. The correct spelling is "Capital".	TCEQ-0650 (Part I Form) page 6 has been revised to correct the typo.
A2	I	20	Pg. 7	30 TAC 39.103(c)	Incorrect	<p>Please verify and correct the name and mailing address for the Victoria County Health Authority. The Victoria County Health Department website lists:</p> <p>Mr. David Gonzales 2805 N. Navarro Street Victoria, Texas 77901</p> <p>Please provide Mr. Gonzales email address which is a requirement of the public notice process.</p>	<p>TCEQ-0650 (Part I Form) information for the County Health Authority has been revised to include the verified and corrected mailing address.</p> <p>The contact information/email address for Mr. Gonzales has been added.</p>
A3	I	20	Pg. 8	30 TAC 39.103(b)(c)	Omitted	<p>Please submit the email addresses Texas State Representative The Honorable Geanie W. Morrison and State Senator The Honorable Lois Kolkhorst.</p> <p>This is information is a requirement of the public notice process.</p>	TCEQ-0650 (Part I Form) page 8 has been updated to include the contact information/email address for Texas State Representative The Honorable Geanie W. Morrison and State Senator The Honorable Lois Kolkhorst.

¹Deficiency ID - Key: A#=Administrative deficiency (ex. A12); T#=Technical deficiency (ex. T10); C#=Comment only (ex. C1); Number in parenthesis (n) = nth instance of same deficiency (ex. T1(2) is the second instance of deficiency T1 originally identified in previous NOD).²Location of deficiency in submittal/application. Items in square brackets [] refer to applicant's supplemental information submitted as attachments to the application form. ³Possible Error Types, one of: Ambiguous, Incomplete, Inconsistent, Incorrect, Omitted, Typo, or Wrong Format.

Facility Name: City of Victoria Landfill
Permittee/Registrant Name: City of Victoria
MSW Authorization #:1522-A
Initial Submittal Date: 3/28/2022
Revision Date: 5/2/2022



Texas Commission on Environmental Quality
Part I Application Form for New Permit, Permit
Amendment, or Registration for a
Municipal Solid Waste Facility

1. Reason for Submittal

☐ Initial Submittal ☒ Notice of Deficiency (NOD) Response

2. Authorization Type

☒ Permit ☐ Registration

3. Application Type

☐ New Permit ☒ Permit Major Amendment ☐ Permit Major Amendment (Limited Scope)
☐ New Registration

4. Application Fees

Amount

☒ \$2,050 for Permits and Permit Amendments ☐ \$150 for Registrations

Payment Method

☐ Check ☒ Online through ePay portal <<https://www3.tceq.texas.gov/epay/>>

If paid online, enter ePay Trace Number:

5. Application URL

Is the application submitted for a Type I Arid Exempt (AE) or Type IV AE facility?

☐ Yes ☒ No

If the answer is "No", provide the URL address of a publicly accessible internet web site where the application and all revisions to that application will be posted.
<http://info.burnsmcd.com/tceq-permits-city-of-victoria-landfill>

6. Application Publishing

Party Responsible for Publishing Notice:

☒ Applicant ☐ Agent in Service ☐ ConsultantContact Name: **Darryl Lesak**Title: **Director of Environmental Services****7. Alternative Language Notice**

Is an alternative language notice required for this application? (For determination refer to Alternative Language Checklist on the Public Notice Verification Form TCEQ-20244-Waste)

☐ Yes ☒ No**8. Public Place Location of Application**Name of the Public Place: **Victoria Public Library**Physical Address: **302 N Main St**City: **Victoria** County: **Victoria** State: **Texas** Zip Code: **77901**(Area code) Telephone Number: **(361) 485-3301****9. Consolidated Permit Processing**

Is this submittal part of a consolidated permit processing request, in accordance with 30 TAC Chapter 33?

☐ Yes ☒ No ☐ Not Applicable

If "Yes", state the other TCEQ program authorizations requested:

10. Confidential Documents

Does the application contain confidential documents?

☐ Yes ☒ No

If "Yes", cross-reference the confidential documents throughout the application and submit as a separate attachment in a binder clearly marked "CONFIDENTIAL."

11. Permits and Construction Approvals

Permit or Approval	Received	Pending	Not Applicable
Hazardous Waste Management Program under the Texas Solid Waste Disposal Act	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Underground Injection Control Program under the Texas Injection Well Act	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
National Pollutant Discharge Elimination System Program under the Clean Water Act and Waste Discharge Program under Texas Water Code, Chapter 26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prevention of Significant Deterioration Program under the Federal Clean Air Act (FCAA). Nonattainment Program under the FCAA	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
National Emission Standards for Hazardous Air Pollutants Preconstruction Approval under the FCAA	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Ocean Dumping Permits under the Marine Protection Research and Sanctuaries Act	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Dredge or Fill Permits under the CWA	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Licenses under the Texas Radiation Control Act	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Other (describe)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (describe)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (describe)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (describe)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12. General Facility Information

Facility Name: City of Victoria Landfill

Contact Name: **Darryl Lesak**Title: **Director of Environmental Services**MSW Authorization No. (if available): **1522A**Regulated Entity Reference No. (if issued)*: **RN100212968**Physical or Street Address (if available): **18545 FM 1686**City: **Victoria** County: **Victoria** State: **TX** Zip Code: **77905**(Area Code) Telephone Number: **361-897-1622**Latitude (Degrees, Minutes Seconds): **28° 41' 36" North**Longitude (Degrees, Minutes Seconds): **96° 54' 23" West**Benchmark Elevation (above mean sea level): **64.97** ft.

Provide a description of the location of the facility with respect to known or easily identifiable landmarks: **The Landfill site entrance is located 0.75 miles east of the intersection of FM 1686 and State Highway 185 in Victoria County, Texas.**

Detail access routes from the nearest United States or state highway to the facility: **The Landfill is located along FM 1686 and can be accessed via State Highway 185 or US-85. From the intersection of SH-185 and FM 1686, vehicles will travel east and the site entrance is approximately 1.5 miles on FM 1686. From the intersection of US-85 and FM 1686, vehicles will travel west and the site entrance is approximately 2.5 miles on FM 1686.**

*If this number has not been issued for the facility, complete a TCEQ Core Data Form (TCEQ-10400) and submit it with this application. List the Facility as the Regulated Entity.

13. Facility Type(s)

- | | | |
|--------------------------------------------|-------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Type I | <input type="checkbox"/> Type IV | <input type="checkbox"/> Type V |
| <input type="checkbox"/> Type I AE | <input type="checkbox"/> Type IV AE | <input type="checkbox"/> Type VI |

14. Activities Conducted at the Facility

- | | | |
|----------------------------------|-------------------------------------|----------------------------------------------|
| <input type="checkbox"/> Storage | <input type="checkbox"/> Processing | <input checked="" type="checkbox"/> Disposal |
|----------------------------------|-------------------------------------|----------------------------------------------|

15. Facility Waste Management Unit(s)

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

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.

Lateral and vertical expansion of the Landfill, including the addition of the option for below-grade disposal of Class 1 non-hazardous industrial waste in the lateral expansion area. This expansion is requested to extend landfill life. The City of Victoria landfill is the only permitted Type I MSW landfill located in the County and the Regional Planning Commission.

17. Facility Contact Information

Site Operator (Permittee/Registrant) Name: City of Victoria

Customer Reference No. (if issued)*: **CN600243257**

Contact Name: **Darryl Lesak**
Services

Title: **Director of Environmental**

Mailing Address: **700 Main Center, Suite 124**

City: **Victoria** County: **Victoria** State: **TX** Zip Code: **77902**

(Area Code) Telephone Number: **361-485-3381**

Email Address: **dlesak@victoriatx.gov**

TX Secretary of State (SOS) Filing Number: **N/A**

*If the Site Operator (Permittee/Registrant) does not have this number, complete a TCEQ Core Data Form (TCEQ-10400) and submit it with this application. List the Site Operator (Permittee/Registrant) as the Customer.

Operator Name¹: Republic Waste Service of Texas, LtdCustomer Reference No. (if issued)*: **600132534**Contact Name: **Scott**Title: **Trebus**Mailing Address: **10554 Tanner Road**City: **Houston** County: **Harris** State: **TX** Zip Code: **77041**(Area Code) Telephone Number: **713-849-0400**Email Address: **STrebus@republicservices.com**TX SOS Filing Number: **0155761000**¹If the Operator is the same as Site Operator/Permittee type "Same as "Site Operator (Permittee/Registrant)".

*If the Operator does not have this number, complete a TCEQ Core Data Form (TCEQ-10400) and submit it with this application. List the Operator as the customer.

Consultant Name (if applicable): Burns & McDonnell EngineeringTexas Board of Professional Engineers Firm Registration Number: **120819**Contact Name: **Scott A. Martin**Title: **Project Manager**Mailing Address: **8911 N Capital of TX Hwy, Building 3, Suite 3100**City: **Austin** County: **Travis** State: **TX** Zip Code: **78759**(Area Code) Telephone Number: **816-333-9400**Email Address: **samartin@burnsmcd.com****Agent in Service Name (required only for out-of-state):**

Mailing Address:

City: County: State: Zip Code:

(Area Code) Telephone Number:

Email Address:

18. Facility Supervisor's License

Select the Type of License that the Solid Waste Facility Supervisor, as defined in 30 TAC Chapter 30, Occupational Licenses and Registrations, will obtain prior to commencing facility operations.

☒ Class A ☐ Class B**19. Ownership Status of the Facility**☐ Corporation☐ Limited Partnership☐ Federal Government☐ Individual☒ City Government☐ Other Government☐ Sole Proprietorship☐ County Government☐ Military☐ General Partnership☐ State Government☐ Other (specify):

Does the Site Operator (Permittee/Registrant) own all the facility units and all the facility property?

☒ Yes ☐ No

If "No", provide the information requested below for any additional ownership.

Owner Name:

Street or P.O. Box:

City: County: State: Zip Code:

(Area Code) Telephone Number:

Email Address:

20. Other Governmental Entities Information

Texas Department of Transportation District: Yoakum

District Engineer's Name: **Valente Olivarez Jr., P.E. (interim)**

Street Address or P.O. Box: **1701 S. Padre Island Drive**

City: **Corpus Cristi** County: **Nueces** State: **Texas** Zip Code: **78416**

(Area Code) Telephone Number: **361-808-2275**

Email Address: **Valente.Olivarez@txdot.gov**

The Local Governmental Authority Responsible for Road Maintenance (if applicable): N/A

Contact Person's Name:

Street Address or P.O. Box:

City: County: State: Zip Code:

(Area Code) Telephone Number:

Email Address:

City Mayor Information

City Mayor's Name: **Jeff Bauknight**

Office Address: **P.O. Box 1758**

City: **Victoria** County: **Victoria** State: **Texas** Zip Code: **77902**

(Area Code) Telephone Number: **(361) 485-3030**

Email Address: **jbauknight@victoriatx.gov**

City Health Authority: See County Health Authority

Contact Person's Name:

Street Address or P.O. Box:

City: County: State: Zip Code:

(Area Code) Telephone Number:

Email Address:

County Judge Information

County Judge's Name: **Ben Zeller**

Street Address or P.O. Box: **101 N Bridge Street, Suite 102**

City: **Victoria** County: **Victoria** State: **TX** Zip Code: **77901**

(Area Code) Telephone Number: **361-575-4558**

Email Address: **bzeller@vctx.org**

County Health Authority: Victoria County Public Health Department

Contact Person's Name: **David Gonzales, Public Health Director**

Street Address or P.O. Box: **2805 N. Navarro Street**

City: **Victoria** County: **Victoria** State: **Texas** Zip Code: **77901**

(Area Code) Telephone Number: **(361) 578-6281**

Email Address: **dgonzales@vctx.org**

State Representative Information

District Number: **30**

State Representative's Name: **Geanie W. Morrison**

District Office Address: **1908 N Laurent Suite 500**

City: **Victoria** County: **Victoria** State: **Texas** Zip Code: **77901**

(Area Code) Telephone Number: **(361) 572-0196**

Email Address: **geanie.morrison@house.texas.gov**

State Senator Information

District Number: **18**

State Senator's Name: **Lois Kolkhorst**

District Office Address: **5606 North Navaro #300M**

City: **Victoria** County: **Victoria** State: **Texas** Zip Code: **77904**

(Area Code) Telephone Number: **(361) 573-7300**

Email Address: **lois.kolkhorst@senate.state.tx**

Council of Government (COG) Name: Golden Crescent Regional Planning Commission

COG Representative's Name: **Joe Brannan**

COG Representative's Title: **Executive Director**

Street Address or P.O. Box: **120 S Main, Suite 210**

City: **Victoria** County: **Victoria** State: **Texas** Zip Code: **77907**

(Area Code) Telephone Number: **(361)-578-1587**

Email Address: **jbrannan@gcrpc.org**

River Basin Authority Name: Guadalupe-Blanco River Authority

Contact Person's Name: **Charles M Hickman, PE**

Watershed Sub-Basin Name: **Guadalupe-Lavaca**

Street Address or P.O. Box: **1064 TX-316**

City: **Port Lavaca** County: **Calhoun** State: **Texas** Zip Code: **77979**

(Area Code) Telephone Number: **(361) 552-9751**

Email Address: **chickman@gbra.org**

Coastal Management Program

Is the facility within the Coastal Management Program boundary?

☐ Yes ☒ No

U.S. Army Corps of Engineers

The facility is located in the following District of the U.S. Army Corps of Engineers:

☐ Albuquerque, NM ☒ Galveston, TX
☐ Ft. Worth, TX ☐ Tulsa, OK

Local Government Jurisdiction

Within City Limits of: **None**

Within Extraterritorial Jurisdiction of: **None**

Is the facility located in an area in which the governing body of the municipality or county has prohibited the storage, processing or disposal of municipal or industrial solid waste?

☐ Yes ☒ No

If "Yes", provide a copy of the ordinance or order as an attachment.

Signature Page

I, Jesús A. Garza, City Manager,
(Site Operator (Permittee/Registrant)'s Authorized Signatory) (Title)

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.

Signature: [Signature]

Date: 05-02-22

TO BE COMPLETED BY THE OPERATOR IF THE APPLICATION IS SIGNED BY AN AUTHORIZED REPRESENTATIVE FOR THE OPERATOR

I, _____, hereby designate _____
(Print or Type Operator Name) (Print or Type Representative Name)

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.

Printed or Typed Name of Operator or Principal Executive Officer

Signature

SUBSCRIBED AND SWORN to before me by the said Jesús A. Garza

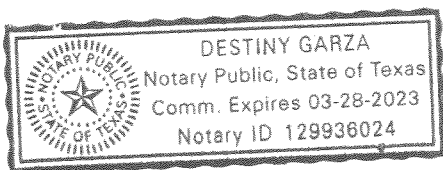
On this 2 day of May, 2022

My commission expires on the 28 day of March, 2023

Destiny Garza
Notary Public in and for

Victoria County, Texas

(Note: Application Must Bear Signature & Seal of Notary Public)



Part I Attachments

(See Instructions for P.E. seal requirements.)

Required Attachments

	Attachment No.
Supplementary Technical Report	Application Part I/II Report
Property Legal Description	Part I/II- Appendix D
Property Metes and Bounds Description	Part I/II- Appendix D
Facility Legal Description	Part I/II- Appendix D
Facility Metes and Bounds Description	Part I/II- Appendix D
Metes and Bounds Drawings	Part I/II- Appendix D
On-Site Easements Drawing	Part I/II- Appendix A, Drawing C001-A
Land Ownership Map	Figure A-6 in Appendix I/II-A
Land Ownership List	Appendix I/II-A
Electronic List or Mailing Labels	Labels in Part I/II Application
Texas Department of Transportation (TxDOT) County Map	Part I/II Appendix A, Fig A-1
General Location Map	Part I/II Appendix A, Fig A-1
General Topographic Map	Part I/II Appendix A, Fig A-2a and 2b
Verification of Legal Status	Part I/II- Section 5.0
Property Owner Affidavit	Part I/II- Appendix E
Evidence of Competency	Part I/II- Section 6.0

Additional Attachments as Applicable- Select all those apply and add as necessary

- ☐ TCEQ Core Data Form(s)
- ☐ Signatory Authority Delegation
- ☒ Fee Payment Receipt
- ☐ Confidential Documents
- ☐ Waste Storage, Processing and Disposal Ordinances
- ☐ Final Plat Record of Property
- ☐ Certificate of Fact (Certificate of Incorporation)
- ☐ Assumed Name Certificate

Copy of Check 113979 provided in binder