

Facility Name:  
Permittee/Registrant Name:  
MSW Authorization #:  
Initial Submittal Date:  
Revision Date:



# Texas Commission on Environmental Quality

## Part I Form

New Permit/Registration and Amendment Applications for an MSW Facility

### 1. Reason for Submittal

- Initial Submittal                       Notice of Deficiency (NOD) Response

### 2. Authorization Type

- Permit     Registration

### 3. Application Type

- New     Major Amendment  
 Major Amendment (Limited Scope)

### 4. Application Fees

- Pay by Check                                       Online Payment

If paid online, e-Pay Confirmation Number:

### 5. Application URL

Is the application submitted for Type I Arid Exempt (AE) and/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://

### 6. Application Publishing

Party Responsible for Publishing Notice:

- Applicant                                       Agent in Service                                       Consultant

Facility Name:  
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<b>7. Alternative Language Notice</b>	
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)	
<input type="checkbox"/> Yes	<input type="checkbox"/> No

<b>8. Public Place Location of Application</b>			
Name of the Public Place:			
Physical Address:			
City:	County:	State:	Zip Code:
(Area code) Telephone Number:			

<b>9. Consolidated Permit Processing</b>		
Is this submittal part of a consolidated permit processing request, in accordance with 30 TAC Chapter 33?		
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not Applicable
If "Yes", state the other TCEQ program authorizations requested:		

<b>10. Confidential Documents</b>	
Does the application contain confidential documents?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No
If "Yes", cross-reference the confidential documents throughout the application and submit as a separate attachment in a binder clearly marked "CONFIDENTIAL."	

<b>11. Permits and/or Construction Approvals</b>			
Select all that apply	Received	Pending	Not Applicable
Hazardous Waste Management Program under the Texas Solid Waste Disposal Act	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Underground Injection Control Program under the Texas Injection Well Act	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
National Pollutant Discharge Elimination System Program under the Clean Water Act and Waste Discharge Program under Texas Water Code, Chapter 26	<input 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 type="checkbox"/>
National Emission Standards for Hazardous Air Pollutants Preconstruction Approval under the FCAA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>





Facility Name:  
MSW Authorization #:

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Revision Date:

**Operator Name<sup>1</sup>:**

Customer Reference No. (if issued)\*:

Mailing Address:

City: County: State: Zip Code:

(Area Code) Telephone Number:

E! mail Address:

TX SOS Filing Number:

<sup>1</sup>If 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):**

Texas Board of Professional Engineers Firm Registration Number:

Mailing Address:

City: County: State: Zip Code:

(Area Code) Telephone Number:

E-Mail Address:

**Agent in Service Name (required only for out-of-state):**

Mailing Address:

City: County: State: Zip Code:

(Area Code) Telephone Number:

E-Mail 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**

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Corporation         | <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Federal Government |
| <input type="checkbox"/> Individual          | <input type="checkbox"/> City Government     | <input type="checkbox"/> Other Government   |
| <input type="checkbox"/> Sole Proprietorship | <input type="checkbox"/> County Government   | <input type="checkbox"/> Military           |
| <input type="checkbox"/> General Partnership | <input type="checkbox"/> State Government    | <input type="checkbox"/> Other (Specify):   |

Facility Name:  
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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:

E! mail Address (optional):

**20. Other Governmental Entities Information**

**Texas Department of Transportation District:**

District Engineer's Name:

Street Address or P.O. Box:

City:                                      County:                                      State:                                      Zip Code:

(Area Code) Telephone Number:

E-Mail Address (optional):

**The Local Governmental Authority Responsible for Road Maintenance (if applicable):**

Contact Person's Name:

Street Address or P.O. Box:

City:                                      County:                                      State:                                      Zip Code:

(Area Code) Telephone Number:

E-Mail Address (optional):

**City Mayor Information**

City Mayor's Name:

Office Address:

City:                                      County:                                      State:                                      Zip Code:

(Area Code) Telephone Number:

E-Mail Address (optional):

Facility Name:  
MSW Authorization #:

Initial Submittal Date:  
Revision Date:

**City Health Authority:**

Contact Person's Name:

Street Address or P.O. Box:

City: County: State: Zip Code:

(Area Code) Telephone Number:

E-Mail Address (optional):

**County Judge Information**

County Judge's Name:

Street Address or P.O. Box:

City: County: State: Zip Code:

(Area Code) Telephone Number:

E-Mail Address (optional):

**County Health Authority:**

Contact Person's Name:

Street Address or P.O. Box:

City: County: State: Zip Code:

(Area Code) Telephone Number:

E-Mail Address (optional):

**State Representative Information**

District Number:

State Representative's Name:

District Office Address:

City: County: State: Zip Code:

(Area Code) Telephone Number:

E-Mail Address (optional):

**State Senator Information**

District Number:

State Senator's Name:

District Office Address:

City: County: State: Zip Code:

(Area Code) Telephone Number:

E-Mail Address (optional):

Facility Name:  
MSW Authorization #:

Initial Submittal Date:  
Revision Date:

**Council of Government (COG) Name:**

COG Representative's Name:

COG Representative's Title:

Street Address or P.O. Box:

City: County: State: Zip Code:

(Area Code) Telephone Number:

E-Mail Address (optional):

**River Basin Authority Name:**

Contact Person's Name:

Watershed Sub-Basin Name:

Street Address or P.O. Box:

City: County: State: Zip Code:

(Area Code) Telephone Number:

E-Mail Address (optional):

**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:

Within Extraterritorial Jurisdiction of:

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):

Facility Name:  
MSW Authorization #:

Initial Submittal Date:  
Revision Date:

### Signature Page

I, \_\_\_\_\_,  
(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: \_\_\_\_\_ Date: \_\_\_\_\_

-----  
**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 \_\_\_\_\_

On this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

My commission expires on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
Notary Public in and for

\_\_\_\_\_ County, Texas  
(Note: Application Must Bear Signature & Seal of Notary Public)

Facility Name:  
MSW Authorization #:

Initial Submittal Date:  
Revision Date:

## Part I Attachments

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

### Required Attachments

Attachment No.

Supplementary Technical Report

Property Legal Description

Property Metes and Bounds Description

Facility Legal Description

    Facility Metes and Bounds Description

    Metes and Bounds Drawings

    On-Site Easements Drawing

Land Ownership Map

Land Ownership List

    Electronic List or Mailing Labels

Texas Department of Transportation (TxDOT) County Map

General Location Map

General Topographic Map

Verification of Legal Status

Property Owner Affidavit

Evidence of Competency

### 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

# Instructions

## Part I Form

### New Permit/Registration and Amendment Applications for a Municipal Solid Waste (MSW) Facility

#### Form Availability

This form, as well as other MSW documents and rules are available on the TCEQ Internet site at [http://www.tceq.texas.gov/search\\_forms.html](http://www.tceq.texas.gov/search_forms.html). The number for this form is 0650. For further instructions regarding completion of this form, send an e mail to [mswper@tceq.texas.gov](mailto:mswper@tceq.texas.gov) or call 512-239-2335.

The original application and all copies for New Applications and Major Amendments should be submitted to:

Municipal Solid Waste Permits Section, MC 124  
Waste Permits Division  
Texas Commission on Environmental Quality  
P. O. Box 13087  
Austin, Texas 78711-3087

#### Application Submittal

See 30 Texas Administrative Code (30 TAC) Section (§)305.43(c) for who can submit the application.

The complete application should be typewritten or printed neatly in black ink.

For a new permit/registration and major amendment to a permit application, submit:

1. The original application plus three (3) complete copies (prepared in accordance with 30 TAC §330.57) which includes:
  - a. the TCEQ Core Data Form (See Attachment as applicable);
  - b. the Application Table of Contents and Title Pages for Parts I, II, III, and IV shall be signed and sealed in accordance with 30 TAC §330.57(g)(2) & (3);
  - c. the Application Part I Form;
  - d. the Application Part I Form Attachments; and
  - e. Parts II through IV
2. If fee is paid by check, a check for payment of application fees transmitted directly to the TCEQ Financial Administration Division with a photocopy of the check included in the original application; and
3. Pre-printed mailing labels of the adjacent landowners or an electronic mailing list on a CD in Microsoft Word compatible format.

For all submittals, provide the Facility Name, Permittee/Registrant Name, MSW Authorization No., and dates in the form header. For initial submittals, leave "MSW Authorization No." in the form header blank.

For all notice of deficiency responses (NODs), (administrative and/or technical), submit the original plus three (3) copies of the response package which includes:

1. page 1 of this form to indicate that the submittal is for "Notice of Deficiency Response";
2. all revised pages of this form and/or attachments to Part I;
3. a new Signature Page; and
4. revised pages of Parts II through IV; and
5. marked (redline/strikeout) copy of the revised pages.

**1. Reason for Submittal**

Select **ONE** box that indicates if this form is being submitted in conjunction with an initial application or as part of an NOD response.

**2. Authorization Type**

Select **ONE** box that indicates the type of authorization sought.

**3. Application Type**

Select **ONE** box that indicates the application type for the submittal.

**4. Application Fees**

For a new permit, registration or an amendment application, the application fee is \$150. Select **ONE** box that indicates the method of payment of application fee for the submittal.

Payment may be made online using TCEQ e-Pay at <https://www3.tceq.texas.gov/epay/>. If payment is made online, enter the e-Pay confirmation number.

If fee is paid by check, send payment directly to the following address:

Financial Administration Division, MC 214  
Texas Commission on Environmental Quality  
P. O. Box 13087  
Austin, Texas 78711-3087

In addition, include a photocopy of the check in the original application submitted to the MSW Permits Section.

**5. Application URL**

If the application is for a Type I AE and/or Type IV AE landfill, the URL address of a publicly accessible internet web site is **not** required.

For any other application and/or facility type, provide the URL address of a publicly accessible internet web site where the application and all revisions to that application will be posted.

**6. Application Publishing**

Select **ONE** box that indicates the party responsible for publishing all public notices for this application.

**7. Alternative Language Notice**

For certain permit, registration and amendment applications, public notice in an alternate language is required. If an elementary school or middle school nearest to the facility offers a bilingual program, notice may be required to be published in an alternative language. The Texas Education Code, upon which the TCEQ alternative language notice requirements are based, trigger a bilingual education program to apply to an entire school district should the requisite alternative language speaking student population exist. However, there may not exist any bilingual students at a particular school within a district which is required to offer the bilingual education program. For this reason, the requirement to publish notice in an alternative language is triggered if the nearest elementary or middle school, as a part of a larger school district, is required to make a bilingual education program available to qualifying students and either the school has students enrolled at such a program onsite, or has students who attend such a program at another location in satisfaction of the school's obligation to provide such a program as a member of a triggered district.

It is the burden of the applicant to demonstrate compliance with alternative language notice requirements. To assist you in meeting these requirements, the TCEQ Office of Chief Clerk will provide a Public Notice Verification Form (TCEQ-20244-Waste). You must follow instructions provided by the Office of Chief Clerk regarding completion and submittal of the Public Notice Verification Form indicating your compliance with the requirements regarding publication in an alternative language.

If it is determined that an alternative language notice is required, the applicant is responsible for ensuring that the publication in the alternate language is complete and accurate in that language. Electronic versions of the Spanish template examples are available from the TCEQ to help the applicant complete the publication in the alternative language.

More information about the Alternative Language Notice requirement and the Public Notice Verification Form are available on the TCEQ internet site at:

[http://www.tceq.texas.gov/permitting/waste\\_permits/msw\\_permits/msw\\_notice.html](http://www.tceq.texas.gov/permitting/waste_permits/msw_permits/msw_notice.html).

### **8. Public Place Location of Application**

Identify a public place in the county in which the facility is located or proposed to be located, at which a copy of the application will be available for review and copying (e.g. Public Library, Courthouse, City Hall).

### **9. Consolidated Permit Processing**

For consolidated permit process, refer to 30 TAC Chapter 33.

### **10. Confidential Documents**

The Commission has a responsibility to provide a copy of each application to other agencies and to interested persons upon request and to safeguard confidential material from becoming public knowledge. Thus, the Commission requests that the applicant (1) be prudent in the designation of material as confidential and (2) submit such material only when it might be essential to the staff in their development of a recommendation.

The Commission suggests that the applicant **NOT** submit confidential information as part of the permit or registration application. However, if this cannot be avoided, the confidential information should be described in non-confidential terms throughout the application, cross-referenced, and submitted as a separate document or binder, and clearly marked "CONFIDENTIAL."

Reasons of confidentiality include the concept of trade secrecy and other related legal concepts which give a business the right to preserve confidentiality of business information to obtain or retain advantages from its right in the information. This includes authorizations under, 18 U.S.C. 1905 and special rules cited in 40 CFR Chapter I, Part 2, Subpart B.

The applicant may elect to withdraw any confidential material submitted with the application. However, the permit cannot be issued, amended, or modified if the application is incomplete.

### **11. Permits and/or Construction Approvals**

Select **ALL** permits or construction approvals received or applied for under any of the programs listed in this Section.

### **12. General Facility Information**

Provide general facility information as listed under this Section. Facility name provided in this Section should match the Regulated Entity Name (Item #23) in the TCEQ Core Data Form.

If the Regulated Entity Reference Number has not been issued for the facility, complete a TCEQ Core Data Form and submit it with this application.

### **13. Facility Type**

Select **ALL** boxes that apply to the facility. For facility types, refer to 30 TAC §330.5.

### **14. Activities Conducted at the Facility**

Select **ALL** boxes that apply to the facility. For definitions of "storage, processing and disposal", refer to 30 TAC §330.3.

### **15. Facility Waste Management Units**

Select **ALL** boxes that best describe the waste management units that will be authorized at the facility. If you are including other unit types, select "Other" and list them.

### **16. Description of the Revisions to the Facility**

This section is only applicable for permit amendments. If the submittal is an amendment application, provide a brief description of the specific revisions to the permit conditions and supporting documents referenced by the permit. Also, provide an explanation of why the amendment is requested.

### **17. Facility Contact Information**

#### **Site Operator (Permittee/Registrant) Name**

Enter Site Operator (Permittee/Registrant) information. Site Operator is defined in 30 TAC §330.3(142).

If the Site Operator (Permittee/Registrant) has filed with the Texas Secretary of State (SOS) as a Corporation, Limited Partnership or non-profit organization it will have been issued an SOS filing number which may be entered here. If the Site Operator (Permittee/Registrant) has not filed with the SOS, leave blank. Search for the SOS Filing number at: <http://www.sos.state.tx.us/corp/sosda/index.shtml>.

#### **Operator Name**

Enter Operator information. Operator is defined in 30 TAC §330.3(101).

If the Operator has filed with the SOS as a Corporation, Limited Partnership or non-profit organization it will have been issued an SOS filing number which may be entered here. If the Operator has not filed with the SOS, leave blank. Search for the SOS Filing number at: <http://www.sos.state.tx.us/corp/sosda/index.shtml>.

#### **Consultant Name**

Enter the consultant company's name and contact information responsible for the preparation of the application on behalf of the facility.

#### **Agent in Service Name**

If the application is submitted by a corporation or by a person residing out of state, the applicant must register an Agent in Service or Agent of Service with the Texas SOS office and provide a complete mailing address for the agent. The agent must be a Texas resident and the address provided for them should be within the State of Texas. Provide information if this is applicable for the facility. If not, enter "Not Applicable".

## **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 (Figure 30 TAC §30.213(a)), will obtain prior to commencing facility operations. Include the rest of the Evidence of Competency information as an attachment (See List of Attachments).

## **19. Ownership Status of the Facility**

### **Corporation**

The Customer meets all of the following:

- Is legally incorporated under the laws of any state or country
- Is recognized as a corporation by the Texas SOS
- Has proper operating authority to operate in Texas

### **Sole Proprietorship**

This is a business that is owned by only one person and has not been incorporated. This business may:

- Be under the person's name
- Have its own name ("doing business as", or DBA)
- Have any number of employees
- Customers must register assumed names with the county

### **Government**

City, County, State or Federal: This is either an agency of one of these levels of government or the governmental body itself (ex. Blanco County, City of Houston)

### **General Partnership**

A general partnership is created when two or more persons associate to carry on a business for profit. A partnership generally operates in accordance with a partnership agreement, but there is no requirement that the agreement be in writing and no state-filing requirement.

### **Limited Partnership (LP & LLP)**

This is a partnership formed by two or more persons, having one or more general partners and one or more limited partners. The limited partnership operates in accordance with a partnership agreement, written or oral, of the partners as to the affairs of the limited partnership and the conduct of its business. While the partnership agreement is not filed for public record, the limited partnership must file a certificate of limited partnership with the Texas SOS. The Texas SOS provides a form for the certificate of limited partnership which meets minimum state law requirements.

### **Government – Other**

This is a utility district, water district, tribal government, college district, council of governments or river authority (ex. Lower Colorado River Authority).

### **Other**

Fits none of the above descriptions.

## 20. Other Governmental Entities Information

### **Texas Department of Transportation (TxDOT) District**

Enter the district name and contact information for the district in which the facility is/will be located. TxDOT's District information can be found at

<http://www.txdot.gov/inside-txdot/district.html>.

### **The Local Governmental Authority Responsible for Road Maintenance**

Enter the local authority name (e.g. local TxDOT maintenance office, city or county road maintenance authority) and contact information responsible for road maintenance. As required in 30 TAC §330.145 and §330.235, on days when the facility is in operation, the Site Operator (Permittee/Registrant) or Operator shall be responsible for at least once per day cleanup of waste materials spilled along and within the right-of-way of public access roads serving the facility for a distance of two miles in either direction from any entrances used for the delivery of waste to the facility. The facility operator shall consult with the TxDOT, county, and/or local governments with maintenance authority over the roads concerning cleanup of public access roads and rights-of-way.

### **City Mayor Information**

Enter the Mayor's name and contact information for the city in which the facility is/will be located.

### **City Health Authority**

Enter the Health Authority's name and contact information for the city in which the facility is/will be located.

### **County Judge Information**

Enter the Judge's name and contact information for the county in which the facility is/will be located.

### **County Health Authority**

Enter the Health Authority's name and contact information for the county in which the facility is/will be located.

### **State Representative Information**

Enter the District Number, State Representative's name and District Office information for the district in which the facility is/will be located. State Representative's information can be found at:

<http://www.house.state.tx.us/members/find-your-representative/> .

### **State Senator Information**

Enter District Number, State Senator's name and District Office information for the district in which the facility is/will be located. State Senator's information can be found at:

<http://www.house.state.tx.us/members/find-your-representative/> .

### **Council of Government (COG) Name**

Enter the COG name and COG Office information for the COG area in which the facility is/will be located. COG information can be found at:

[http://www.txregionalcouncil.org/display.php?page=regions\\_map.php](http://www.txregionalcouncil.org/display.php?page=regions_map.php).

**River Basin Authority Name**

Enter the River Basin Authority name and contact information for the river basin area in which the facility is/will be located. River Basin Authority information can be found at:

<http://www.tpwd.state.tx.us/landwater/water/habitats/rivers/authorities.phtml>.

**Coastal Management Program**

The boundary is established in Texas Natural Resources Code, §33.2053(k), as defined in Title 31, Texas Administrative Code, §503.1 (relating to Coastal Management Program Boundary).

**U.S. Army Corps of Engineers**

Select the box representing the District of the U.S. Army Corps of Engineers in which the facility is located.

**Local Government Jurisdiction**

Enter the name of the city or extraterritorial jurisdiction where the facility is located. If the facility is located in an area in which the governing body of the municipality or county has prohibited the disposal or processing of municipal or industrial solid waste, provide a copy of the ordinance and add it to the Additional Attachments list with the Attachment number provided.

## **Instructions - ATTACHMENTS**

### **Supplementary Technical Report**

Provide information about the facility as required under 30 TAC §305.45(a)(8). The report should be signed and sealed by a PE.

### **Property Legal Description, Property Metes and Bounds Description, Facility Legal Description, Facility Metes and Bounds Description, On-Site Easements, and Metes and Bounds Drawings**

Provide a legal description of the facility including the following information, as required by 30 TAC §330.59(d)(1).

- a. The abstract number, as maintained by the Texas General Land Office, for the surveyed tract of land.
- b. A legal description of the property and the county, book, and page number or other generally accepted identifying reference of the current ownership record.
- c. For property that is platted, the county, book, and page number or other generally accepted identifying reference of the final plat record that includes the acreage encompassed in the application and a copy of the **Final Plat Record of Property**.
- d. A boundary metes and bounds description of the property signed and sealed by a registered professional land surveyor.
- e. A boundary metes and bounds description and drawing for the facility signed and sealed by a registered professional land surveyor.
- f. A drawing showing any on-site easements at the facility.

If the facility and property boundaries are identical, one metes and bounds description and drawing is sufficient. Refer to the same attachment number for above items (d) and (e).

### **Land Ownership Map**

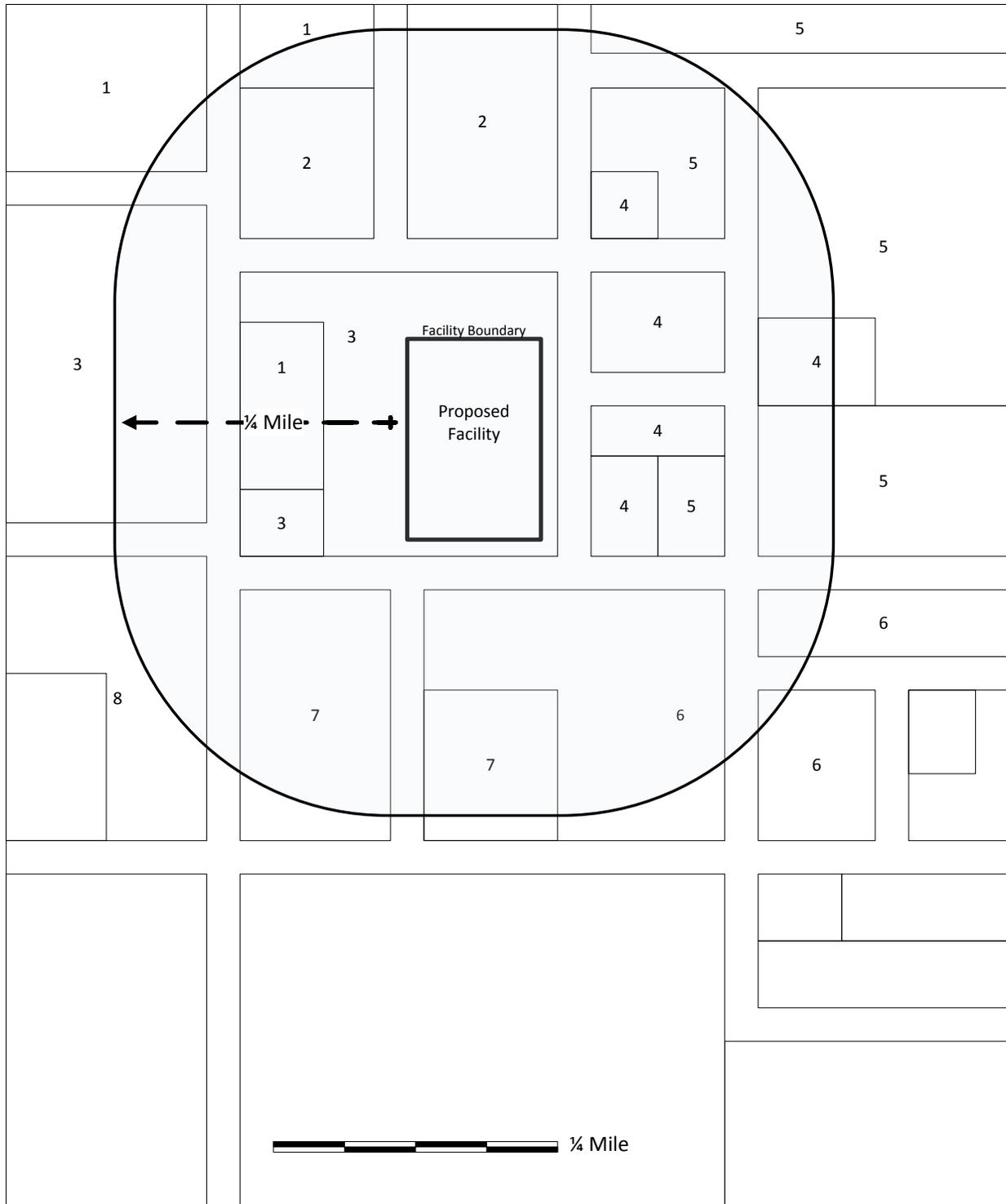
Provide a map that locates the property owned by adjacent and potentially affected landowners. The maps should show all property ownership within 1/4 mile of the facility, on-site facility easement holders, and all mineral interest ownership under the facility.

### **Land Ownership List**

Provide the adjacent and potentially affected landowners' list, keyed to the land ownership map with each property owner's name and mailing address. The list shall include all property owners within 1/4 mile of the facility, easement holders, and all mineral interest ownership under the facility. Provide the property, easement holders', and mineral interest owners' names and mailing addresses derived from the real property appraisal records as listed on the date that the application is filed.

Do not include elected officials and other interested parties that are not adjacent landowners on the landownership map, list and labels.

# Sample Land Ownership Map



### Landowners Cross-Referenced To Landowners Map

The persons identified below would be considered as affected persons.

- |   |   |
|---|---|
| 1. MR & MRS SAMUEL L DAVIS<br>11901 STAR BLVD<br>AUSTIN, TX 78759 | 5. JAXSON BREWING CO<br>4240 KNIGHTS BRIDGE<br>DALLAS TX 77640  |
| 2. MR & MRS EDWARD SANCHEZ<br>1405 LINE ROAD<br>WACO TX 76710     | 6. PLAINVIEW COMPANY<br>6647 CRAIGMONT LANE<br>HOUSTON TX 77590 |
| 3. TEX-LINK CORP<br>8411 NW HWY<br>HOUSTON TX 77590               | 7. ABC CHEMICALS INC<br>1212 ZIP STREET<br>DALLAS TX 77640      |
| 4. MR & MRS TED GOLDSBY<br>3210 LEON BLVD<br>WACO TX 76724        | 8. BIG-C BOTTLE CO<br>10024 REGIONAL BLVD<br>BOVINA TX 79402    |

### Mineral Interest Ownership Under The Facility\*

- |  |   |
|--|---|
| 1. BOB SANDERS<br>867 HOLLOWBEND ROAD<br>SEGUIN TX 78155 | 3. CAROL SANDERS<br>5309 MAPLE LANE<br>GAUSE TX 77857 |
| 2. TED HENDERSON<br>459 MAGUIRE AVE<br>HARPER TX 78631   | 4. ALICE HENDERSON<br>2222 LONGWAY<br>HDOOLE TX 76836 |

### Facility Easement Holders\*

- |  |  |
|--|--|
| 1. GULF PIPELINE<br>11200 S FANNIN<br>HOUSTON TX 77002 | 2. TEXAS STAR UTILITIES<br>8100 COMMERCE ST<br>DALLAS TX 75230 |
|--|--|

\*If available in Real Property Appraisal records as listed on the date that the application is filed.

In accordance with 30 TAC §39.5(b), submit this mailing list electronically. The electronic list must contain only the name, mailing address, city, state, and zip code with no reference to the lot number or lot location.

As an alternative to an electronic list, the applicant may elect to submit pre-printed mailing labels of this mailing list with the application. If you elect to provide the pre-printed mailing labels, use a label format that has 30 labels to a page (e.g. AVERY 5160). 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. Provide four complete sets of labels of the landowner list. Do not include elected officials and other interested parties that are not adjacent landowners on the landownership map, list and labels.

**Maps (Texas Department of Transportation (TxDOT) County Map, General Location Map and General Topographic Map**

Submit at least one general location map at a scale of one-half inch equals one mile. This map shall be all or a portion of a county map prepared by TxDOT. If TxDOT publishes more detailed maps of the proposed facility area, the more detailed maps shall also be included in Part I. Use the latest revision of all maps.

Submit a topographic map, ownership map, county highway map, or a map prepared by a registered professional engineer or a registered surveyor which shows the facility and each of its intake and discharge structures and any other structure or location regarding the regulated facility and associated activities. The maps must be of material suitable for a permanent record, and shall be no larger than 11 inches by 17 inches and shall be on a scale of not less than one inch equals one mile.

The map shall depict the approximate boundaries of the tract of land owned or to be used by the applicant and shall extend at least one mile beyond the tract boundaries sufficient to show the following:

- each well, spring, and surface water body or other water in the state within the map area;
- the general character of the areas adjacent to the facility, including public roads, towns and the nature of development of adjacent lands such as residential, commercial, agricultural, recreational, undeveloped, etc.;
- the location of any waste disposal activities conducted on the tract not included in the application; and
- the ownership of tracts of land adjacent to the facility and within a reasonable distance from the proposed point or points of discharge, deposit, injection, or other place of disposal or activity.

**Verification of Legal Status (30 TAC §218.5 and §330.59(e))**

Provide verification of legal status. **Normally**, this is a one-page certificate of incorporation (Certificate of Fact) issued by the Texas SOS (see additional Attachments List). If you choose to provide a verification of the legal status by another mechanism, provide it under this Attachment. Also, provide a list of all persons having over a 20% ownership in the proposed facility. See example table provided below:

**List of All Persons Having Over 20% Ownership in the Facility:**

Name	Title	Contact Information

SAMPLE

**Property Owner Affidavit**

Provide a Property Owner Affidavit by using the appropriate format provided below.

**Signatory Name**

The name of the individual signing the affidavit. If the individual signing the affidavit is the property owner of record, enter the name on "Printed Signatory Name" line only and omit the "Signatory Capacity" and "Printed Name of Property Owner of Record" lines. Otherwise, provide all information requested below.

**Signatory Capacity**

Indicate under what authority the Signatory is signing on behalf of the property owner of record.

**Property Owner Of Record**

The person(s) who, according to public records, is/are the owner(s) of a particular property.

**For Landfills:**

<b>Property Owner Affidavit</b>	
"I/We, _____, (Printed Signatory Name)	as _____, (Signatory Capacity)
As authorized signatory for _____ (Printed Name of Property Owner of Record)	
<p>acknowledge that the State of Texas may hold me either jointly or severally responsible for the operation, maintenance, and closure and post-closure care of the facility. For a facility where waste will remain after closure, I acknowledge that I have a responsibility to file with the county deed records an affidavit to the public advertising that the land will be used for a solid waste facility prior to the time that the facility actually begins operating as a municipal solid waste landfill facility, and to file a final recording upon completion of disposal operations and closure of the landfill units in accordance with Title 30 Texas Administrative Code §330.19, Deed Restriction. I further acknowledge that I or the operator and the State of Texas shall have access to the property during the active life and post-closure care period."</p>	
_____ (Property Owner's Signature)	_____ (Date)

**For Processing Facilities:**

<b>Property Owner Affidavit</b>	
"I/We, _____, (Printed Signatory Name)	as _____, (Signatory Capacity)
As authorized signatory for _____ (Printed Name of Property Owner of Record)	
<p>acknowledge that the State of Texas may hold me either jointly or severally responsible for the operation, maintenance, and closure of the facility. I further acknowledge that I or the operator and the State of Texas shall have access to the property during the active life, and after closure for the purpose of inspection and maintenance, if required.</p>	
_____ (Property Owner's Signature)	_____ (Date)

**Evidence of Competency**

At a minimum, provide the information listed below to comply with 30 TAC §330.59(f) as applicable to the facility type for which the application is submitted:

List of all Texas solid waste sites that the owner and operator have owned or operated within the last ten years.

Site Name	Site Type	Permit/Reg. No.	County	Dates of Operation

List of all solid waste sites in all states, territories, or countries in which the owner and operator have a direct financial interest.

Site Name	Location	Dates of Operation	Regulatory Agency (Name & Address)

Names of the principals and supervisors of the owner’s and operator’s organization, together with previous affiliations with other organizations engaged in solid waste activities.

Name	Previous Affiliation	Other Organization

For landfill permit applications only, evidence of competency to operate the facility shall also include landfilling and earthmoving experience if applicable, and other pertinent experience, or licenses as described in 30 TAC Chapter 30 possessed by key personnel. The number and size of each type of equipment to be dedicated to facility operation should be specified in greater detail on Part IV of the application within the site operating plan.

Landfilling/Earthmoving Equipment Types	Personnel Experience or Licenses

For mobile liquid waste processing units, submit a list of all solid waste, liquid waste, or mobile waste units that the owner and operator have owned or operated within the past five years. Submit a list of any final enforcement orders, court judgments, consent decrees, and criminal convictions of this state and the federal government within the last five years relating to compliance with applicable legal requirements relating to the handling of solid or liquid waste under the jurisdiction of the commission or the United States Environmental Protection Agency. Applicable legal requirement means an environmental law, regulation, permit, order, consent decree, or other requirement.

Solid waste, liquid waste, or mobile waste units owned or operated within past 5 years	Texas and federal final enforcement orders, court judgments, consent decrees, and criminal convictions

## **Additional Attachments (as applicable)**

### **TCEQ Core Data Form(s)**

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

If Regulated Entity Reference Number (RN 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.

If the Operator does not have a Customer Reference Number (CN Number), complete another TCEQ Core Data Form (TCEQ-10400) for the "Operator" and submit it with this application. List the Operator as the customer.

Only under the following circumstances should a TCEQ Core Data Form be submitted:

- Your information is not yet in the Central Registry database or is incomplete
- Your information has changed from what is currently in the Central Registry database
- It is requested by the agency. You can check the status of your information in Central Registry on-line at <http://www12.tceq.state.tx.us/crpub/>.

### **Signatory Authority Delegation**

Provide documentation that the person signing the application meets the requirements of 30 TAC §305.44, Signatories to Applications. If the authority has been delegated, provide a copy of the document issued by the governing body of the Site Operator (Permittee/Registrant) or Operator authorizing the person that signed the application to act as agent for the owner or operator.

### **Fee Payment Receipt**

As indicated in the "Application Fees" section, include a photocopy of the check in the initial application submitted to the MSW Permits Section.

### **Confidential Documents**

The confidential information should be described in non-confidential terms throughout the application, cross-referenced, and submitted as a separate document or binder, and clearly marked "CONFIDENTIAL." Refer to Instructions, Section "Confidential Documents" for further detail.

### **Waste Storage, Processing and Disposal Ordinances**

If the facility is located in an area in which the governing body of the municipality or county has prohibited the disposal or processing of municipal or industrial solid waste, provide a copy of the ordinance.

### **Final Plat Record of Property**

For the property that is platted, provide the county, book, and page number or other generally accepted identifying reference of the final plat record that includes the acreage encompassed in the application and a copy of the final plat (30 TAC §330.59(d)(1)(B)).

**Certificate of Fact (Certificate of Incorporation)**

The Site Operator/ (Permittee/Registrant) or Operator shall provide verification of their legal status. If you choose to provide a one-page certificate of incorporation (Certificate of Fact) issued by the secretary of state, provide it as an attachment here.

**Assumed Name Certificate**

If the Site Operator/ (Permittee/Registrant) or Operator is an individual and/or partnership doing business under an assumed name, it must attach to the application an assumed name certificate.