| The COMMISSION OF | Underground & Aboveground Petroleum Storage Tank Construction Notification | | | | | | |
|--|---|----------------------------|-------------------------|--------------------------------|--|--|--|
| THE NAMENTAL QUALT | <u>Submit using STEERS ePermits to print an acknowledgement instantly.</u> | | | | | | |
| Submit this form 30 days prior to any construction activity. Bold items required for all notifications. Print clearly or type. | | | | | | | |
| New facilit | y Update exis | ting facility, no owner ch | ange Update existing f | acility, owner change on 00724 | | | |
| Facility ID#: | 0 | wner ID#: | Regulated Entity Num | nber: RN | | | |
| Part A: Facili | ty Information | (refers to the location | of the storage tank) | | | | |
| 1. Facility/Store Name: | | | | | | | |
| 2. Street Address: | | | | | | | |
| or (provide Site Location Description in #3 only if the site does not have a street address) | | | | | | | |
| 3. Site Locati | on Description: | | | | | | |
| and | L | | | | | | |
| 4. City: | | , TX | 5. Zip+4: | | | | |
| 6. County: _ | | | 7. Telephone: | | | | |
| Part B: Const | truction Inform | ation | | | | | |
| | | dicate all that apply) | | | | | |
| UST: | Repair | Installation | Removal | Return to Service | | | |
| | Stage I | Abandonment | Tank Replacement | Improvement | | | |
| | | | Tank capacity is greate | | | | |
| 9. Schedule | d start date for | proposed construction | n: (mm/dd/yyyy) | | | | |
| | | | | | | | |
| 11. Descript | ion of proposed | UST or AST activity: | | | | | |
| | | | | | | | |
| | | | | | | | |
| Part C: Tank | Owner Informa | tion | | | | | |
| • | | the owner 13. (| Customer number: CN | | | | |
| | lame:a | ed with the Secretary of | Stato's office) | | | | |
| | | ual ownership type, go | , | | | | |
| | • | aarownersnip type, go |) (0 #18) | | | | |
| | | | | | | | |
| | 16. TX State Franchise Tax ID: 17. Texas Secretary of State Filing Number: | | | | | | |
| | only: Remarks: | | | | | | |
| Logged by: | onyi Nemanoi | NOC ID | | Region: | | | |
| _03300 071 | | | | | | | |

| For ¹ | TCEQ | use | only: | PST/ |
|------------------|------|-----|-------|------|
|------------------|------|-----|-------|------|

| Part | D: Owner s Representative Contact Information | | | |
|--|---|-------------------|--|--|
| 18. | First name: | 19. Last name: | | |
| 20. | Owner Mailing Address: | | | |
| 21. | City: | | | |
| 22. | State: | 23. Zip+4: | | |
| 24. | Telephone: | 25. Fax: | | |
| 26. | Email: | | | |
| Part | E: Contractor Information | | | |
| 27. | First name: | 28. Last name: | | |
| | Company Name: | | | |
| | CR/CRP License #: | | | |
| | Mailing Address: | | | |
| 32. | City: | | | |
| 33. | State: | 34. Zip+4: | | |
| 35. | Telephone: | 36. Fax: | | |
| 37. | Email: | | | |
| Part | F: Installer (On-Site Supervisor) Information | | | |
| 38. | First name: | 39. Last name: | | |
| 40. | ILP/US License #: | | | |
| 41. | Telephone: | 42. Fax: | | |
| 43. | Email: | | | |
| Part | G: Consultant Information | | | |
| 44. | First name: | 45. Last name: | | |
| | Company Name: | | | |
| 47. | Telephone: | 48. Fax: | | |
| 49. | Email: | | | |
| Part | H: Submitter Information | | | |
| Nan | ne: | | | |
| | : | | | |
| | pany: | | | |
| | phone: | Fax: | | |
| Ema | | | | |
| For USTs, provide an original signature. We do not accept documents that have digital or stamped signatures. | | | | |
| | | | | |
| Sigr | nature: | Date: | | |

Mail completed form to:

Texas Commission on Environmental Quality PST Registration Team MC-138 PO Box 13087 Austin, TX 78711-3087

Please use the following address for any submissions sent via overnight services:

Texas Commission on Environmental Quality PST Registration Team MC-138 12100 Park 35 Circle Bldg D Austin, TX 78753

Or fax to (512) 239-3398 or (512) 239-3399.

For construction notifications for *aboveground storage tanks only*, you can email this form to <u>pstreg@tceq.texas.gov</u>. Construction notifications for underground storage tanks sent via email cannot be processed due to EPA regulations.

To verify if the PST Registration Team has received this form, visit <u>www.tceq.texas.gov/goto/docsearch</u> or scan the QR code to the right.



Individuals are entitled to request and review their personal information the agency gathers on its forms. They may also have any errors in their information corrected. To review such information, please contact the TCEQ Public Information Section at (512) 239-3282.

