



Texas Commission on Environmental Quality
Texas Low Emission Diesel (TxLED) Producer
Alternative Diesel Fuel Formulation
Quarterly Reporting Form

This form is to be used by TxLED producers who are producing TxLED by an TCEQ-approved **Alternative Diesel Fuel Formulation** in compliance with Title 30 Texas Administrative Code (30 TAC) 114.312(d) (relating to Low Emission Diesel Standards).

For assistance in completing this form, refer to the *Instructions for the TxLED Quarterly Reporting Forms*, as well as the rules governing the TxLED Program in 30 TAC 114.312 – 114.319. For additional assistance, call the TxLED Program at 512-239-1438.

Complete all fields unless noted; if completing electronically use tab key to move between fields.

Section 1. Reporting Quarter

1. Calendar quarter being reported (*check the appropriate box*):

a. First quarter (Jan 1 – Mar 31)

b. Second quarter (Apr 1 – Jun 30)

c. Third quarter (Jul 1 – Sep 30)

d. Fourth quarter (Oct 1 – Dec 31)

2. Reporting year (*yyyy*):

Section 2. Producer Information

1. Company Name:

2. TxLED Registration Number:

3. TCEQ-assigned Customer Number (CN):

4. TxLED Production Facility Name:

5. TxLED Production Facility's Regulated Entity Number (RN):

Section 3. Designated Company Contact

1. Name of Contact:

2. Salutation: Mr. Mrs. Ms. Dr. Other:

3. Title:

4. Mailing Address:

5. City, State, Zip:

6. Phone Number:

7. Fax Number:

8. Email Address:

Section 5. Certification Statement

Must be signed by responsible corporate officer or designated representative.

I certify that the information supplied here is true and accurate to the best of my knowledge. I am duly authorized to submit this form to the TCEQ and hereby accept the standards and enforcement provisions of 30 TAC 114.312–114.319 and consent that all pertinent documentation and records, including samples of the diesel fuel produced or imported by this company, shall be made available, upon request, to representatives of the TCEQ or any air pollution control agency having jurisdiction.

Printed Name:

Salutation: Mr. Mrs. Ms. Dr. Other:

Title:

Phone Number:

Email Address:

Signature: _____

Date:

Quarterly Report Submission

Send the completed TxLED Quarterly Reporting Form to:

U.S. Mail

TxLED Program, MC 206
TCEQ
PO Box 13087
Austin TX 78711-3087

Physical Address

TxLED Program, MC 206
Building F
TCEQ
12100 Park 35 Circle
Austin TX 78753

If possible, also e-mail a signed copy of the completed reporting form and any attachments as needed to michael.regan@tceq.texas.gov.