

Steven Piper

From: Steven Piper
Sent: Thursday, August 14, 2025 2:26 PM
To: OCC-NSR; R6AirPermitsTX@epa.gov; CREZNICEK@LIVEOAKLUBBOCK.COM; Liveoaksouth
Cc: RFCAIR2
Subject: INITIAL, Live Oak Crematorium, LLC, Project: 396417, Permit(s): 181050,
Attachments: LIVE OAK PN.docx

Please see Public Notice attached.

Brooke T. Paup, *Chairwoman*
Bobby Janecka, *Commissioner*
Catarina R. Gonzales, *Commissioner*
Kelly Keel, *Executive Director*



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

Protecting Texas by Reducing and Preventing Pollution

August 14, 2025

MR CHRIS REZNICEK
OWNER
LIVE OAK CREMATORIUM LLC
5214 98TH ST STE 100
LUBBOCK TX 79424-4647

Re: Declaration of Administrative Completeness
Animal Carcass Incinerator Registration for an Air Quality Standard Permit
Air Quality Registration Number: 181050
Animal Carcass Incinerator
Lubbock, Lubbock County
Customer Reference Number: CN606394104
Regulated Entity Number: RN112226774

Dear Mr. Reznicek:

The Texas Commission on Environmental Quality (TCEQ) has declared the above-referenced application, received on August 5, 2025, administratively complete on August 14, 2025.

You are now required to publish notice of your proposed activity no later than the 30th day after the executive director received the application, which is September 4, 2025. To help you meet the regulatory requirements associated with this notice, we have included the following items:

- Notice for Newspaper Publication
- Instructions for Public Notice
- Affidavits of Publication
- Notification List

Please note that it is very important that you follow all directions in the enclosed instructions. If you do not, you may be required to republish the notice. Some common errors are the unauthorized changing of notice wording or font, omission of air contaminants, and inaccurate plant site location information represented in the application. Additional information can be found at www.tceq.texas.gov/permitting/air/bilingual/how1_2_pn.html or **if you have any questions, please contact us before you proceed with publication.**

The following items and time limitations are also described in the enclosed instructions. However, due to their importance we want to highlight them for you. **The processing of your application may be delayed if these time limitations are not met.**

1. Publish the enclosed notice no later than the 30th day after the date the executive director received the application, which is September 4, 2025 (see this letter's first paragraph for the application received date).
2. You may also be required to publish notice in an alternate language (refer to the enclosed *Instructions for Public Notice*). The Spanish notice templates are available at:

Mr. Chris Reznicek
Page 2
August 14, 2025

Re: Registration: 181050

www.tceq.texas.gov/permitting/air/nav/air_publicnotice.html

3. Ensure a copy of your application is provided to the TCEQ Regional Office that has oversight for the county in which you intend to operate your plant. This copy must be in place at the TCEQ Regional Office for the entire public comment period and be accessible to the public for review and copying.
4. Mail or email proof of publication of the notices, which show publication date and newspaper name, to the TCEQ Office of the Chief Clerk and mail copies to those on the enclosed *Notification List* within **10 business days** after the notice is published.
5. Return the *Affidavit of Publication for Air Permitting* (enclosed) and, if applicable, *Alternative Language Affidavit of Publication for Air Permitting* (enclosed) and the **Public Notice Verification (Form TCEQ-20546)** to the Office of the Chief Clerk and copies to those on the enclosed *Notification List* within **10 business days** after the notice is published in the newspaper. **The public notice verification form is available at www.tceq.texas.gov/permitting/air/nav/air_publicnotice.html.**

If you do not comply with **all** requirements described in the instructions, the TCEQ cannot continue processing the application and may take other actions.

If you have any questions regarding publication requirements, please contact the Office of the Chief Clerk at (512) 239-3300. If you have any other questions, please contact Mr. Steven Piper at (512) 239-1589.

Sincerely,



Nancy Birdsong, Team Leader
Air Permits Initial Review Team
Air Permits Division
Texas Commission on Environmental Quality

Enclosure

cc: Air Section Manager, Region 2 - Lubbock

Project Number: 396417

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY



NOTICE OF APPLICATION FOR AN AIR QUALITY STANDARD PERMIT FOR AN ANIMAL CARCASS INCINERATOR

PROPOSED AIR QUALITY REGISTRATION NUMBER 181050

APPLICATION. Live Oak Crematorium Llc, 5214 98th St Ste 100, Lubbock, TX 79424-4647 has applied to the Texas Commission on Environmental Quality (TCEQ) for an Air Quality Standard Permit, Registration Number 181050, which would authorize construction of an animal carcass incinerator. The facility is proposed to be located at 1224 e cr 7275, Lubbock, Lubbock County, Texas 79404. This link to an electronic map of the site or facility's general location is provided as a public courtesy and not part of the application or notice. For exact location, refer to application. <https://gisweb.tceq.texas.gov/LocationMapper/?marker=-101.820628,33.49204&level=13>. This application was submitted to the TCEQ on August 5, 2025. The primary function of this facility is to properly dispose of animal carcasses through incineration. The executive director has determined the application was administratively complete on August 13, 2025.

PUBLIC COMMENT. Public written comments about this application may be submitted at any time during the public comment period. The public comment period begins on the first date notice is published and extends to 30 days from the publication date. Public comments may be submitted either in writing to Texas Commission on Environmental Quality, Office of the Chief Clerk, MC-105, P.O. Box 13087, Austin, Texas 78711-3087, or electronically at www14.tceq.texas.gov/epic/eComment/. Please be aware that any contact information you provide, including your name, phone number, email address and physical address will become part of the agency's public record.

RESPONSE TO COMMENTS. A written response to all relevant comments will be prepared by the executive director after the comment period closes. The response, along with the executive director's decision on the application, will be mailed to everyone who submitted public comments and requested to be added to the mailing list. The response to comments will be posted in the permit file for viewing.

The executive director shall approve or deny the application not later than 30 days after the end of the public comment period, considering all comments received within the comment period, and base this decision on whether the application meets the requirements of the standard permit.

CENTRAL/REGIONAL OFFICE. The application will be available for viewing and copying at the TCEQ Central Office and the TCEQ Lubbock Regional Office, located at 5012 50th Street, Suite 100, Lubbock, Texas 79414-3426, during the hours of 8:00 a.m. to 5:00 p.m., Monday through Friday, beginning the first day of publication of this notice. The application, including any updates, is available electronically at the following webpage: <https://www.tceq.texas.gov/permitting/air/airpermit-applications-notices>.

INFORMATION. For more information about the permitting process, please call the TCEQ Public Education Program, Toll Free, at 1-800-687-4040 or visit their website at www.tceq.texas.gov/goto/pep. Si desea información en Español, puede llamar al 1-800-687-4040. You can also view our website for public participation opportunities at www.tceq.texas.gov/goto/participation.

Further information may also be obtained from Live Oak Crematorium LLC, 5214 98th Street Suite 100, Lubbock, Texas 79424-4647, or by calling Dr. Shelli Wolfe, Owner at (806) 642-4010.

Notice Issuance Date: August 14, 2025

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY



Instructions for Public Notice For Air Quality Standard Permit for Animal Carcass Incinerators

Notice of Application

Your application has been declared administratively complete and now you must comply with the following instructions:

Please Review Notice

We have included in the notice all of the information which we believe is necessary. Please read it carefully and notify us immediately if it contains any errors or omissions. You are responsible for ensuring the accuracy of all information published. You may not change the text of the notice without prior approval from the TCEQ.

Newspaper Notice

- You must publish the enclosed Notice of Application no later than the 30th day after the date the executive director received the application, which is September 4, 2025 (see this letter's first paragraph for the application received date).
- You must publish the enclosed Notice of Application at your expense, in a newspaper of general circulation in the municipality in which the facility is proposed to be located or in the municipality nearest to the proposed location of the facility.
- You must publish this notice in one issue of any applicable newspaper.
- You will find an example notice enclosed in this package. This example must be published in the "public notice" section of the newspaper.

Alternate Language Notice

In certain circumstances, applicants for air permits must complete notice in alternate languages.

- Public notice rules require the applicant to determine whether a bilingual program is required at either the elementary or middle school nearest to the proposed facility location. Bilingual education programs are determined on a district-wide basis. When students who are required to attend either school are eligible to be enrolled in a bilingual education program, some alternative language notice is required (newspaper notice).
- Since the school district, and not the schools, must provide the bilingual education program, these programs do not have to be located at the above-mentioned schools to trigger the alternative language notice requirement. If there are students who would normally attend the nearest schools, but are eligible to be taught in a bilingual education program at a different location, alternative language notice is required.
- If triggered, publication of alternative language notices must be made in a newspaper or publication printed primarily in each language taught in the bilingual education program. This

notice is required if such a newspaper or publication exists in the municipality or the county where the facility is or will be located.

- The applicant must demonstrate a good faith effort to identify a newspaper or publication in the required language. If a general circulation newspaper or publication printed in such language cannot be found, publishing in that language is not required. Publication in an alternative language section or insertion within a large publication which is not printed primarily in that alternative language does not satisfy these requirements.
- It is suggested the applicant work with the local school district for the following:
 - (a) Determine if a bilingual program is required in the district;
 - (b) Determine which language is required by the bilingual program;
 - (c) Locate the nearest elementary and middle schools; and
 - (d) Determine if any students attending either school are eligible to be enrolled in a bilingual educational program.

Proof of Publication

- You must submit proof of publication that shows the notice, the date of publication, and the name of the newspaper to the Office of the Chief Clerk within **10 business days** after the date of publication. Acceptable proofs of publication are 1) copies of the published notice or 2) the newspaper clippings of the published notice. If you choose to submit copies of the published notice to the Office of the Chief Clerk, copies must be on standard-size 8½" x 11" paper and must show the actual size of the published notice (do not reduce the image when making copies). Published notices longer than 11" must be copied onto multiple 8½" x 11" pages. Please note, submitting a copy of your published notice could result in faster processing of your application. It is recommended that you maintain newspaper clippings or tear sheets of the notice for your records.
- You must submit the **affidavits of publication** and the **Public Notice Verification Form (Form TCEQ-20546)** with the proof of publication described above to the Office of the Chief Clerk. **You must use the enclosed affidavit.** The affidavit must clearly identify the applicant's name and TCEQ Registration Number. **The public notice verification form is available at http://www.tceq.texas.gov/permitting/air/nav/air_publicnotice.html.**
- The **affidavits of publication and acceptable proof of publication of the published notices** should be emailed to PROOFS@tceq.texas.gov or mailed to:

Texas Commission on Environmental Quality
Office of the Chief Clerk, MC-105
Attn: Notice Team
P.O. Box 13087
Austin, Texas 78711-3087

Please ensure that the affidavits you send to the Chief Clerk have all blanks filled in correctly.

- **Photocopies of newspaper clippings, affidavits, and verification form must also** be sent to those listed on the enclosed *Notification List* within the deadlines specified above.

Failure to Publish and Submit Proof of Publication

You must meet all publication requirements. **If you fail to publish the notice or submit proof of publication, on time, the TCEQ may suspend further processing on your application or take other actions.**

Application at the Regional Office

- You must provide a copy of the administratively complete application to the appropriate regional office that has jurisdiction over the county in which the plant is to be located. The application must be available for review and copying by the public.
- The administratively complete application must be available beginning the first day of newspaper publication and remain available until the end of the public hearing, which is the length of the public comment period.
- If the application is submitted to the TCEQ with information marked as confidential, you are required to indicate which specific portions of the application are not being made available to the public. These portions of the application must be accompanied with the following statement: "Any request for portions of this application that are marked as confidential must be submitted in writing, pursuant to the Public Information Act, to Texas Commission on Environmental Quality, Public Information Coordinator, MC-197, P.O. Box 13087, Austin, Texas 78711-3087."

General Information

When contacting the Commission regarding this application, please refer to the Registration Number at the top of the Notice of Application.

If you wish to obtain an electronic copy, please contact the technical reviewer who assisted in the preparation of this public notice package. The electronic copy will consist of the example notice, the equivalent in Spanish (if applicable), and the instructions. The electronic version is available in Microsoft Word format only and can be requested once your application has been declared administratively complete.

If you have questions or need assistance regarding publication requirements, please contact the Office of the Chief Clerk at (512) 239-3300 or the technical reviewer listed in the cover letter.

TCEQ-Office of the Chief Clerk
MC-105 Attn: Notice Team
P.O. Box 13087
Austin, Texas 78711-3087

Applicant Name: Live Oak Crematorium, LLC
Permit No.: 181050
Application Received Date: August 5, 2025

AFFIDAVIT OF PUBLICATION FOR AIR PERMITTING

STATE OF TEXAS §

COUNTY OF _____ §

BEFORE ME, the undersigned authority, on this day personally appeared

_____, who being by me duly sworn, deposes and says that (s)he is *(Name of Person Representing Newspaper)*

the _____ of the _____
(Title of Person Representing Newspaper) *(Name of the Newspaper)*

that said newspaper is generally circulated in _____, Texas;
(The municipality or nearest municipality to the location of the facility or the proposed facility)

that the enclosed notice was published in said newspaper on the following date(s):

(Newspaper Representative's Signature)

Subscribed and sworn to before me this the _____ day of _____, 20____
to certify which witness my hand and seal of office.

[Affix Seal]

Notary Public in and for the State of Texas

Print or Type Name of Notary Public

My Commission Expires

TCEQ-Office of the Chief Clerk
MC-105 Attn: Notice Team
P.O. Box 13087
Austin, Texas 78711-3087

Applicant Name: Live Oak Crematorium, LLC
Permit No.: 181050
Application Received Date: August 5, 2025

ALTERNATIVE LANGUAGE AFFIDAVIT OF PUBLICATION FOR AIR PERMITTING

STATE OF TEXAS §
COUNTY OF _____ §

BEFORE ME, the undersigned authority, on this day personally appeared

_____, who being by me duly sworn, deposes and says that (s)he is (*Name of Person Representing Newspaper*)

the _____ of the _____;
(*Title of Person Representing Newspaper*) (*Name of the Newspaper*)

that said newspaper is generally circulated in _____, Texas;
(*The **municipality or county** in which the facility or proposed facility is located*)

that the enclosed notice was published in said newspaper on the following date(s):

(*Newspaper Representative's Signature*)

Subscribe and sworn to before me this the _____ day of _____, 20_____
to certify which witness my hand and seal of office.

[Affix Seal]

Notary Public in and for the State of Texas

Print or Type Name of Notary Public

My Commission Expires

Notification List

It is the responsibility of the applicant to furnish the following offices with copies of the notices published, the *Affidavit of Publication for Air Permitting*, the *Alternative Language Affidavit of Publication for Air Permitting (if applicable)*, and a completed copy of the *Public Notice Verification Form (Form TCEQ-20546)*. Acceptable proof of publication and any affidavits and Form TCEQ-20546 should be emailed to PROOFS@tceq.texas.gov or mailed to the Texas Commission on Environmental Quality, Office of the Chief Clerk, MC-105, P.O. Box 13087, Austin, Texas 78711-3087.

Electronic copies should be submitted via email to the U.S. Environmental Protection Agency (EPA), **Region 6** at R6AirPermitsTX@EPA.gov. Please contact Ms. Aimee Wilson (wilson.aimee@epa.gov) at (214) 665-7596 if you have any questions pertaining to electronic submittals to the EPA.

Email copies to Mr. Joshua Wheatley at Joshua.Wheatley@tceq.texas.gov

Hard copies should be sent to the following:

Texas Commission on Environmental Quality
Lubbock Regional Office
5012 50th Street, Suite 100
Lubbock, Texas 79414-3426

For TCEQ Use Only

**Permit Application Routing and Summary Sheet
Air Permits**

This sheet should accompany all notices to be processed by the office of the chief clerk on the left side of the file folder.

Name of applicant: Live Oak Crematorium, LLC	
Facility/ Site name: Forever Loved Pets Crematorium	
TCEQ permit number: 181050	
Application received date: August 5, 2025	
Customer reference number: CN606394104	
Regulated entity number: RN112226774	
County: Lubbock	Region: 2
Local program 1:	Local program 2:
Permit type: Standard Permit Application	
Internal program routing	
Tech. team leader: Mr. Joshua Wheatley	Phone no. (512) 239-4343
APIRT team leader: Nancy Birdsong	Date: August 14, 2025
Administratively reviewed by: Steve Piper	Phone no. (512) 239-1589
Administratively complete date: August 14, 2025	
Public viewing location must have internet access: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is 2nd public notice required: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
*Other	

For TCEQ Use Only

Applicant and Contact Information

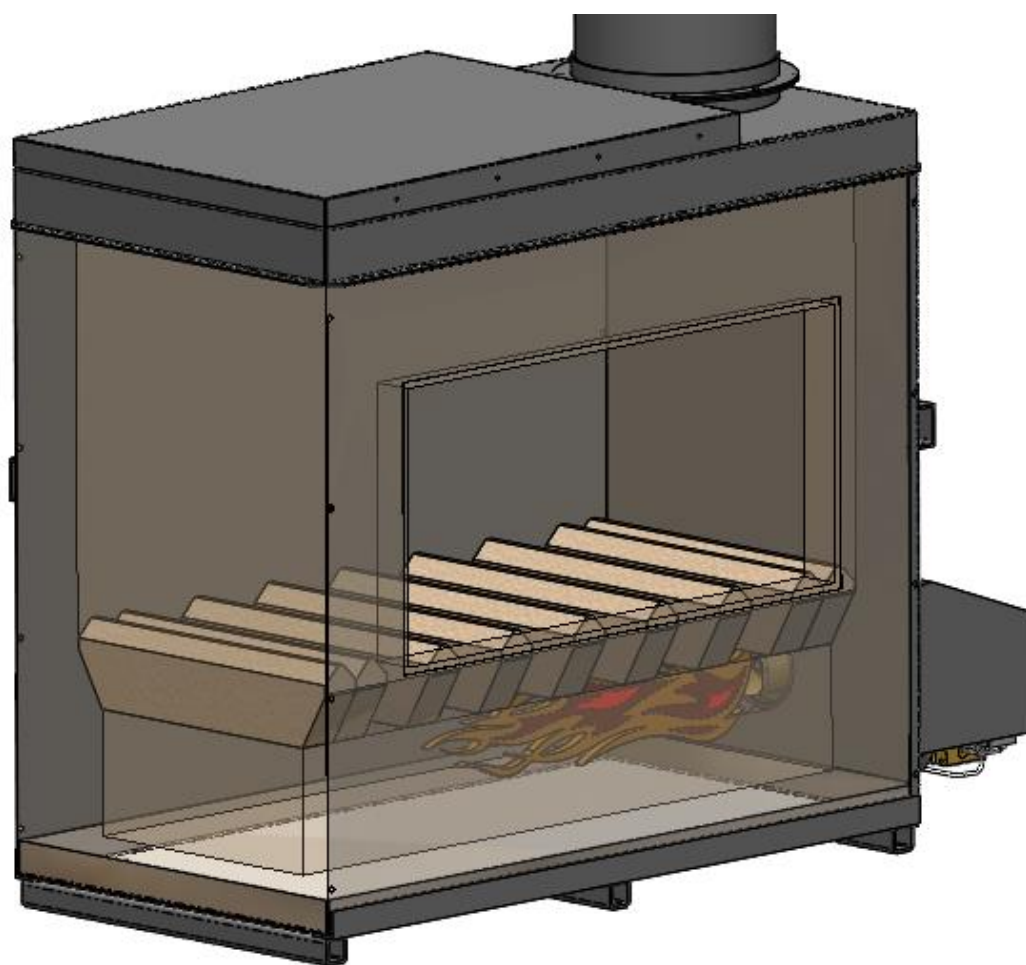
This sheet should accompany all notices to be processed by the office of the chief clerk on the right side of the file folder.

Applicant's main contact and address to be shown on permit:	
Name/Title: Chris Reznicek, Owner	
Company: Live Oak Crematorium Llc	
Street/Road: 5214 98th St Ste 100	
City/State/Zip: Lubbock, TX 79424-4647	
Telephone: (806) 794-9000	Fax: (806) 794-9001
Applicant's technical representative/ consultant:	
Name/Title: Shelli Wolfe, Owner	
Company: Live Oak Crematorium Llc	
Street/Road: 11302 Indiana Ave	
City/State/Zip: Lubbock, TX 79423-0894	
Phone: (806) 642-4010	Fax:
Person responsible for publishing notice:	
Name/Title: Chris Reznicek, Owner	
Company: Live Oak Crematorium Llc	
Street/Road: 5214 98th St Ste 100	
City/State/Zip: Lubbock, TX 79424-4647	
Telephone: (806) 794-9000	Fax: (806) 794-9001

PS16 Incinerator

Technical Specifications Manual

120V AND 220V



Your model and serial number are located on the lower burner cover.

www.firelakemfg.com

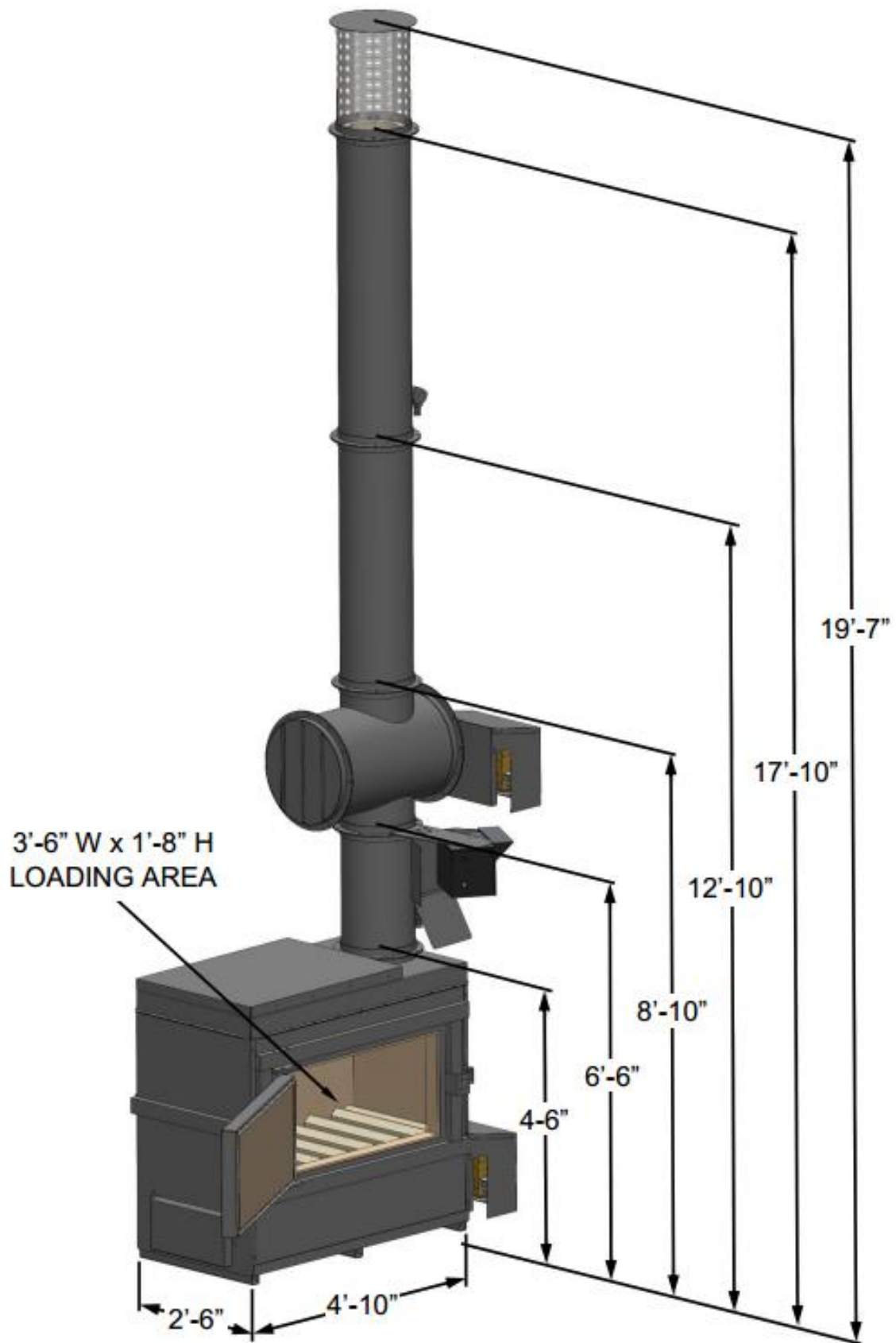
FIRELAKE MFG., LLC

373 Hwy MN-7 East

Hutchinson, MN 55350

(Tel.) 320-275-3391, (Fax) 320-275-2779

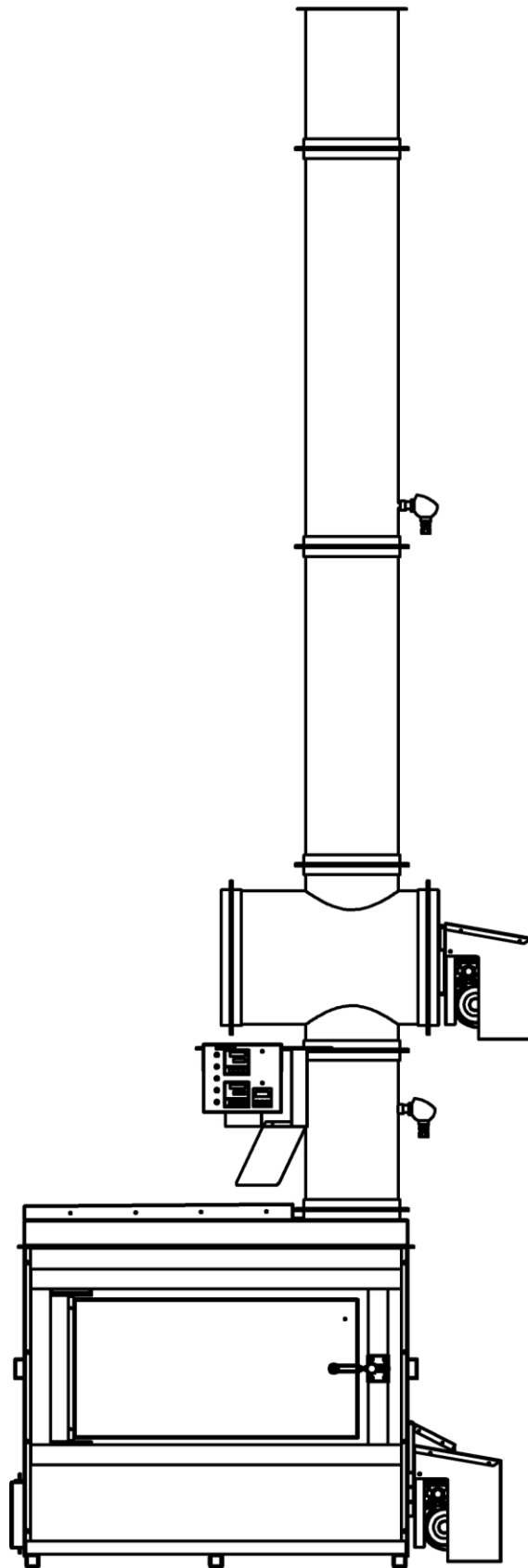
PS16-SC4



Standard Configuration shown.

Locations of control components and stacks may vary per setup ordered.

PS16-SC4



TYPICAL FINISHED SITE, SEE INSTRUCTIONS
Locations of control components may vary per setup ordered

PS16-SC4 SPECIFICATIONS

PRIMARY CHAMBER

CHAMBER CAPACITY	480 LBS WASTE AT 30 LB/FT ³
CHAMBER VOLUME	16.5 FT ³ ABOVE GRATES
DOOR DIMENSION	20" X 42"
REFRACTORY	3", 2,800°F, 126 LB/FT ³
JACKET MATERIAL	PAINTED STEEL
HEIGHT TO DOOR	20"
HEIGHT TO TOP OF CHAMBER	52"

SECONDARY CHAMBER

CHAMBER VOLUME	4 FT ³
HEIGHT TO TOP OF AFTERBURNER	8' 10"
REFRACTORY	3", 2,800°F, 126 LB/FT ³
JACKET MATERIAL	PAINTED STEEL
RETENTION AND TEMPERATURE LIMITS	UP TO ½ SECOND UP TO 1600°F (CONSULT FACTORY WITH APPLICATION DETAILS. DATA/DESIGN MAY CHANGE PER OPERATING NEEDS)

STACKS

STACK	(1) 14" DIA. 2' LONG STEEL CAST LINED (1) 14" DIA. 4' LONG STEEL CAST LINED (1) 14" DIA. 5' LONG STEEL CAST LINED
STACK CAP	(1) 14" DIA. STAINLESS STEEL

BURNERS

MODEL: GAS	(2) J83 W/ SAFETY CONTROLS (1 LOWER, 1 UPPER)
MODEL: OIL	(2) AF BECKETT BURNERS (1 LOWER, 1 UPPER)
OPERATION	DIGITAL TIMER AND TEMPERATURE CONTROLLED. CYCLES PRIMARY BURNER AS NEEDED.

GENERAL

EXTERNAL PRIMARY DIMENSIONS	2' 6" W X 4' 10" L X 4' 6" H
EXTERNAL OVERALL DIMENSIONS (STANDARD)	2' 6" W X 4' 10" L X 19' 7" H
ELECTRICAL SERVICE	STANDARD: 115 V, 60 HZ, 20 AMP EXPORT MODELS: 220 V, 50 HZ, 10 AMP
GAS SERVICE BASED ON MAXIMUM RATING OF BOTH BURNERS	1,600,000 BTU/HR NATURAL GAS 7" W.C. LIQUID PROPANE 11" W.C.
GAS/FUEL CONSUMPTION (IF CONSTANT OPERATION AND NO BURNER CYCLING ON AND OFF)	NATURAL GAS 684 CFH LIQUID PROPANE 7.19 GPH FUEL OIL 5.50 GPH
TOTAL WEIGHT	5,600 LBS (APPROXIMATELY)
PAD REQUIREMENTS (MINIMUM SUGGESTED OR CONSULT FACTORY)	12' W X 14' L X 4" THICK IF SHELTERED 6' W X 8' L X 4" THICK IF NOT SHELTERED
PAINT	1,200° PRIMER, 1,200° PAINT

CHARGING RATE

PATHOLOGICAL	VARIES BY WASTE PROPERTIES AND OPERATING METHODS. TYPICAL BURN RATE OF 45-75 LBS/HR
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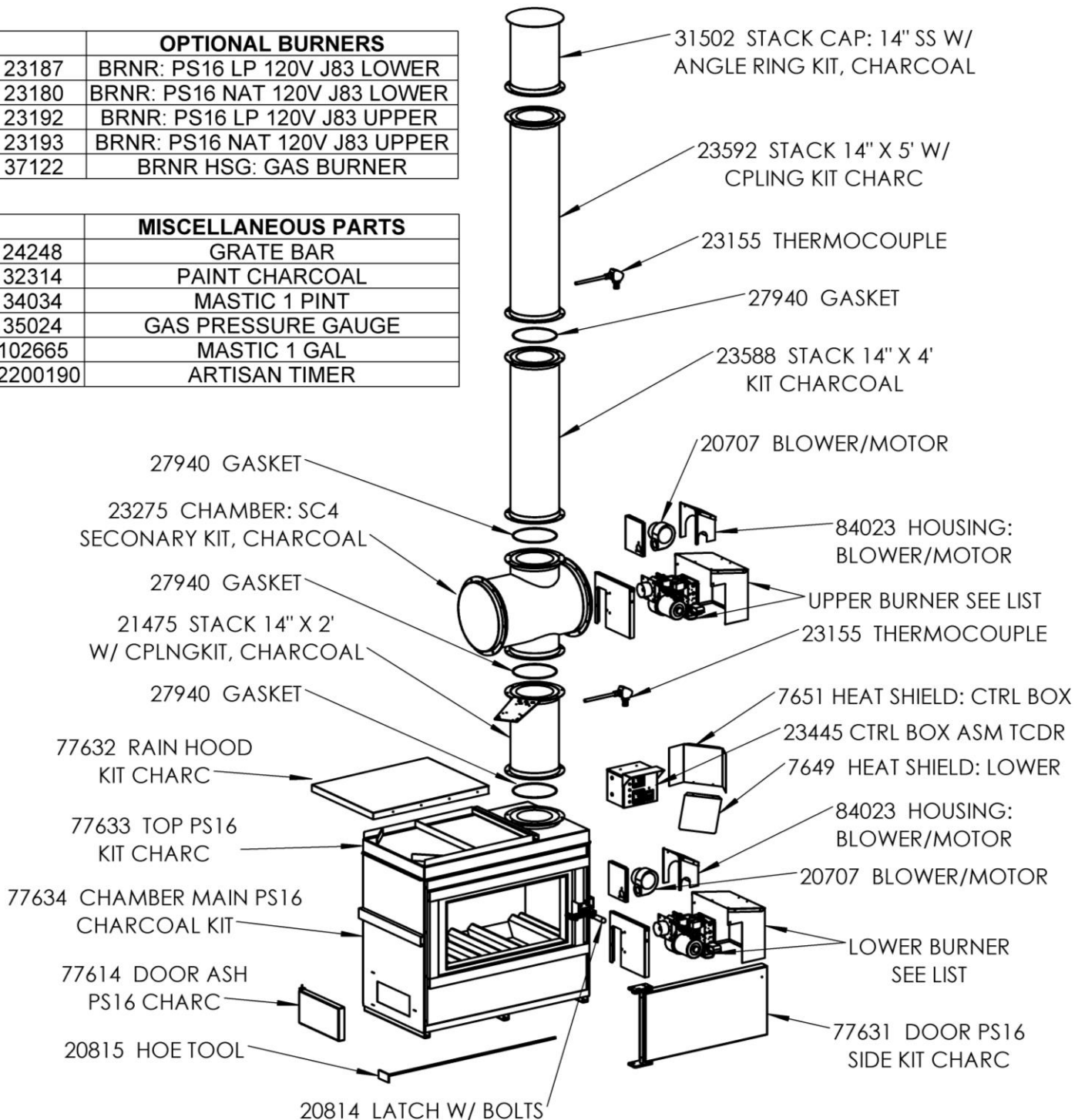
AIR FLOW

MINIMUM REQUIRED OPENING IN ENCLOSED BUILDING FOR AIR FLOW	22 FT ²
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PS16-SC4 PARTS LIST

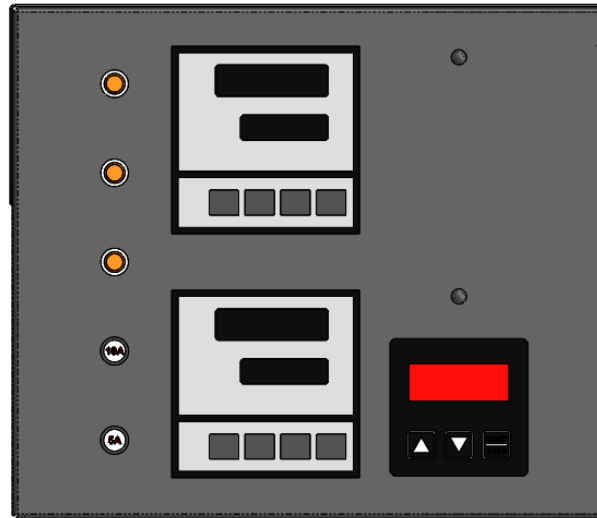
OPTIONAL BURNERS	
23187	BRNR: PS16 LP 120V J83 LOWER
23180	BRNR: PS16 NAT 120V J83 LOWER
23192	BRNR: PS16 LP 120V J83 UPPER
23193	BRNR: PS16 NAT 120V J83 UPPER
37122	BRNR HSG: GAS BURNER

MISCELLANEOUS PARTS	
24248	GRATE BAR
32314	PAINT CHARCOAL
34034	MASTIC 1 PINT
35024	GAS PRESSURE GAUGE
102665	MASTIC 1 GAL
42200190	ARTISAN TIMER



TC 12 CONTROL BOX

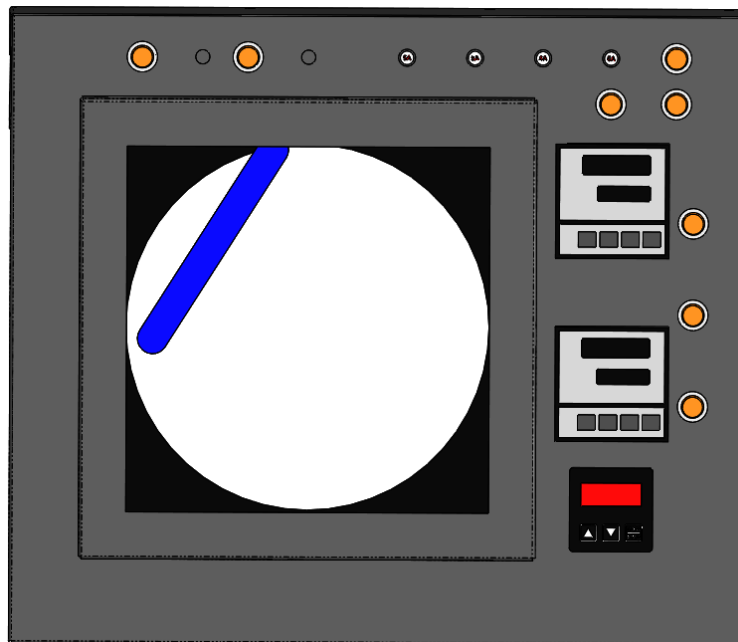
CONTAINS (2) 4100 FDC CONTROLLERS



- Bottom digital controller determines the lower/primary chamber settings.
- Top digital controller determines the upper/secondary chamber settings.

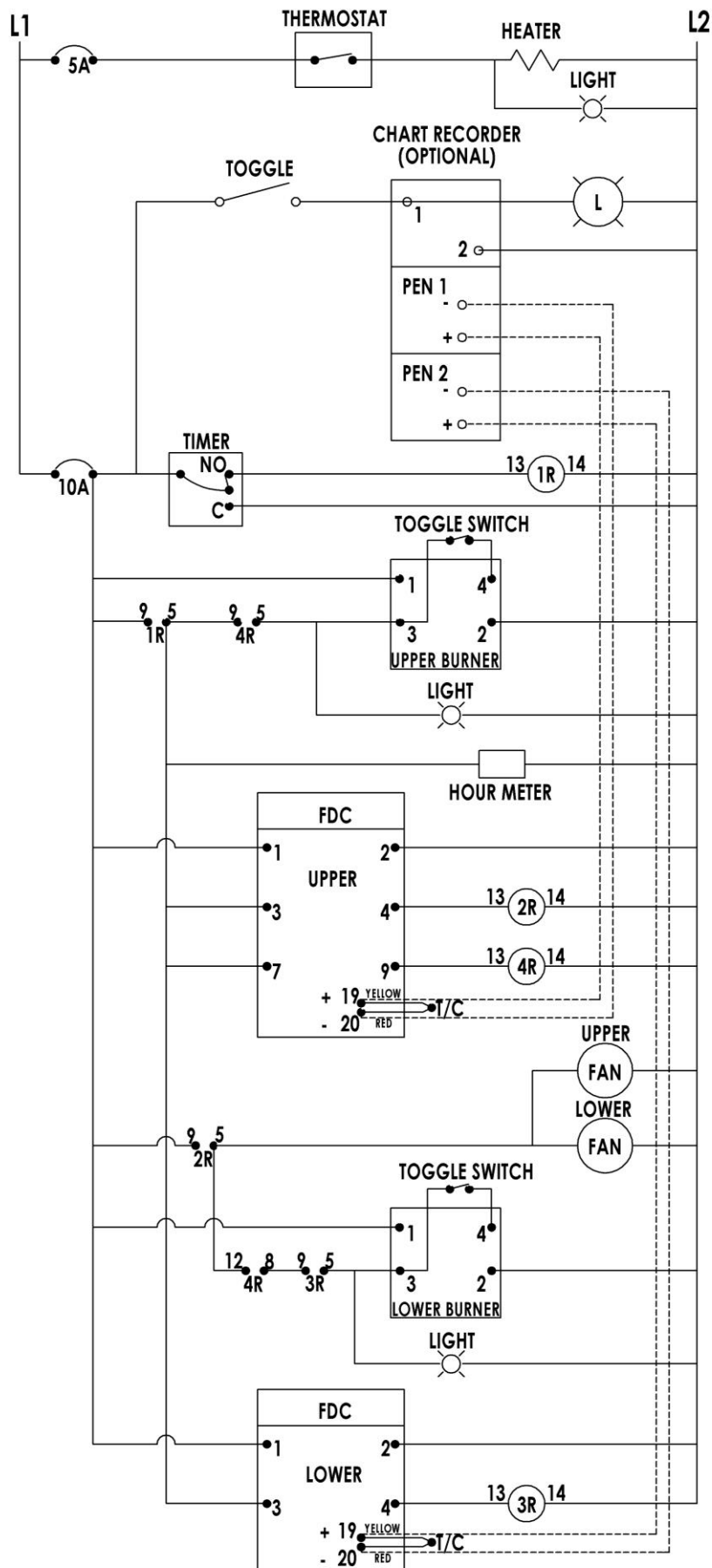
TC 21 CONTROL BOX

CONTAINS (2) 4100 FDC CONTROLLERS WITH A 2-PEN DATA CHART RECORDER

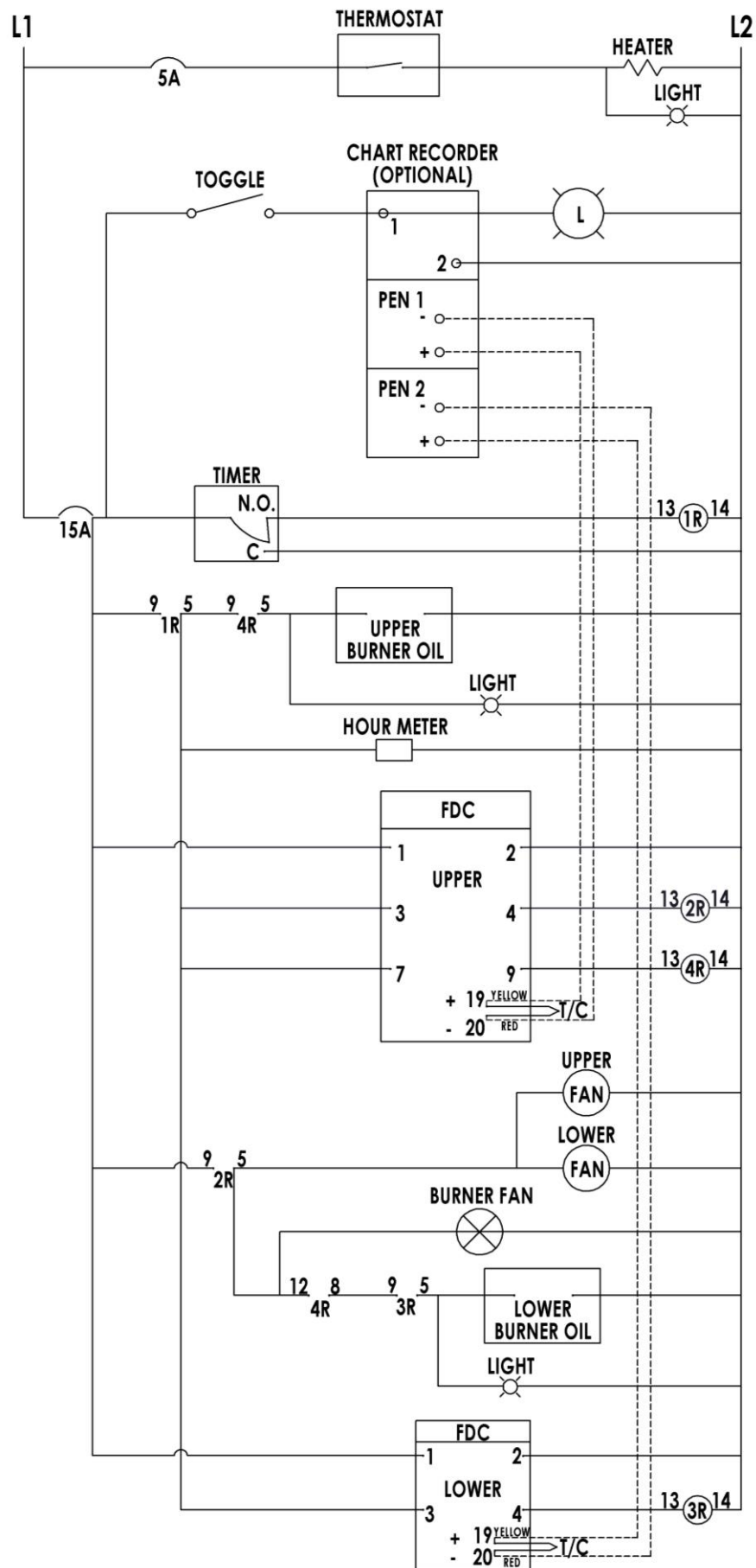


- Bottom digital controller determines the lower/primary chamber settings.
- Top digital controller determines the upper/secondary chamber settings.
 - The chart recorder records the temperatures during operation.

PS16-SC4 4100 FDC GAS WIRING DIAGRAM



PS16-SC4 4100 FDC OIL WIRING DIAGRAM



PS16-SC4 PROGRAMMING

UPPER 4100 FDC W/ PREHEAT

**NOTE: SP VALUES ARE FACTORY SET AND MAY BE ADJUSTED
FOR YOUR APPLICATION WITH QUALIFIED TECHNICAL HELP.**

	SP1	SP2	SP3
Factory Setting	600	N/A	2000
User Setting 1			
User Setting 2			

Set	=====	<Scroll>
Lock	nonE	<Scroll>
inPt	y_tC	<Scroll>
Unit	0F	<Scroll>
dP	no.dP	<Scroll>
SP1L	0	<Scroll>
SP1H	2498	<Scroll>
SHiF	0	<Scroll>
FiLt	0.5	<Scroll>
Pb	0	<Scroll>
out1	Dirt	<Scroll>
o1.tY	rELY	<Scroll>
o1.Ft	Off	<Scroll>
o1HY	90.0	GREATER VALUE LESSENS PREHEAT CYCLING <Scroll>
rAmP	nonE	<Scroll>
out2	nonE	<Scroll>
AL.Fn	PY.Hi	<Scroll>
AL.md	norm	<Scroll>
AL.HY	90	GREATER VALUE LESSENS HI LIMIT CYCLING <Scroll>
AL.Ft	oFF	<Scroll>
Comm	nonE	<Scroll>
SEL1	nonE	<Scroll>
SEL2	nonE	<Scroll>
SEL3	nonE	<Scroll>
SEL4	nonE	<Scroll>
SEL5	nonE	<Scroll>
SEL6	nonE	<Scroll>
SEL7	nonE	<Scroll>
SEL8	nonE	<Scroll>

PS16-SC4 PROGRAMMING

LOWER 4100 FDC – LOWER BURNERS OFF

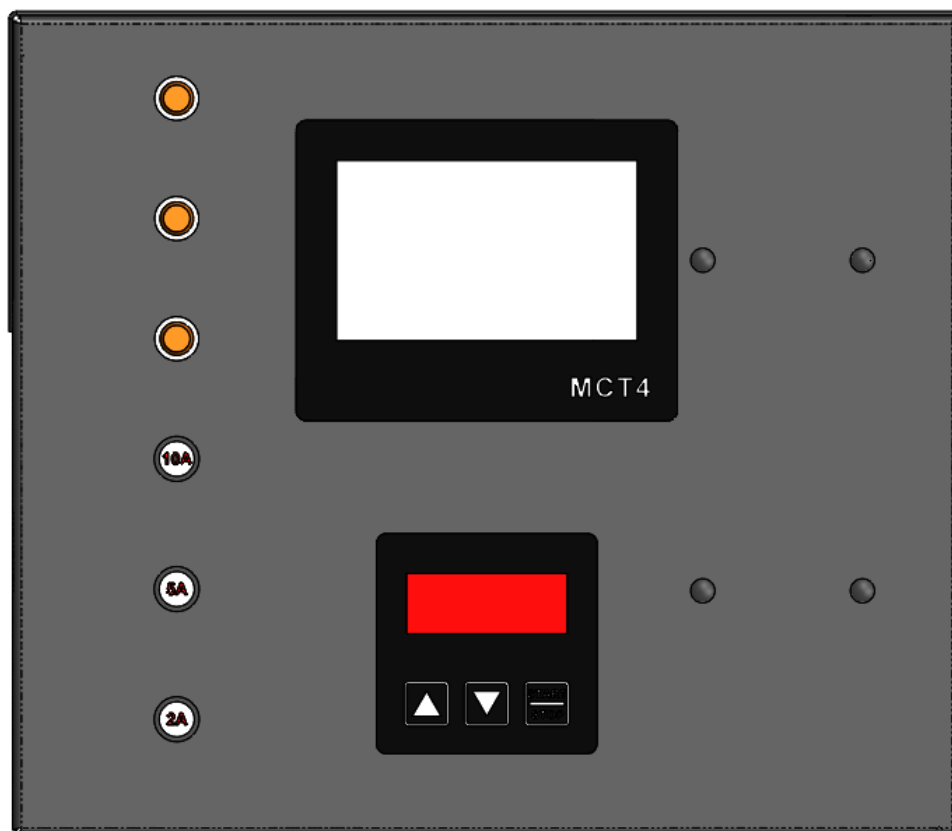
**NOTE: SP VALUES ARE FACTORY SET AND MAY BE ADJUSTED
FOR YOUR APPLICATION WITH QUALIFIED TECHNICAL HELP.**

	SP1	SP2	SP3
Factory Setting	1250	N/A	N/A
User Setting 1			
User Setting 2			

Set	— — — —	<Scroll>
Lock	nonE	<Scroll>
inPt	y_tC	<Scroll>
Unit	0F	<Scroll>
dP	no.dP	<Scroll>
SP1L	0	<Scroll>
SP1H	2498	<Scroll>
SHiF	0	<Scroll>
FiLt	0.5	<Scroll>
Pb	0	<Scroll>
out1	rEyr	<Scroll>
o1.tY	rELY	<Scroll>
o1.Ft	oFF	<Scroll>
o1HY	90.0	<Scroll>
rAmP	nonE	<Scroll>
out2	nonE	<Scroll>
AL.Fn	nonE	<Scroll>
Comm	nonE	<Scroll>
SEL1	nonE	<Scroll>
SEL2	nonE	<Scroll>
SEL3	nonE	<Scroll>
SEL4	nonE	<Scroll>
SEL5	nonE	<Scroll>
SEL6	nonE	<Scroll>
SEL7	nonE	<Scroll>
SEL8	nonE	<Scroll>

TCDR CONTROL BOX

CONTAINS (1) MCT4 CONTROLLER

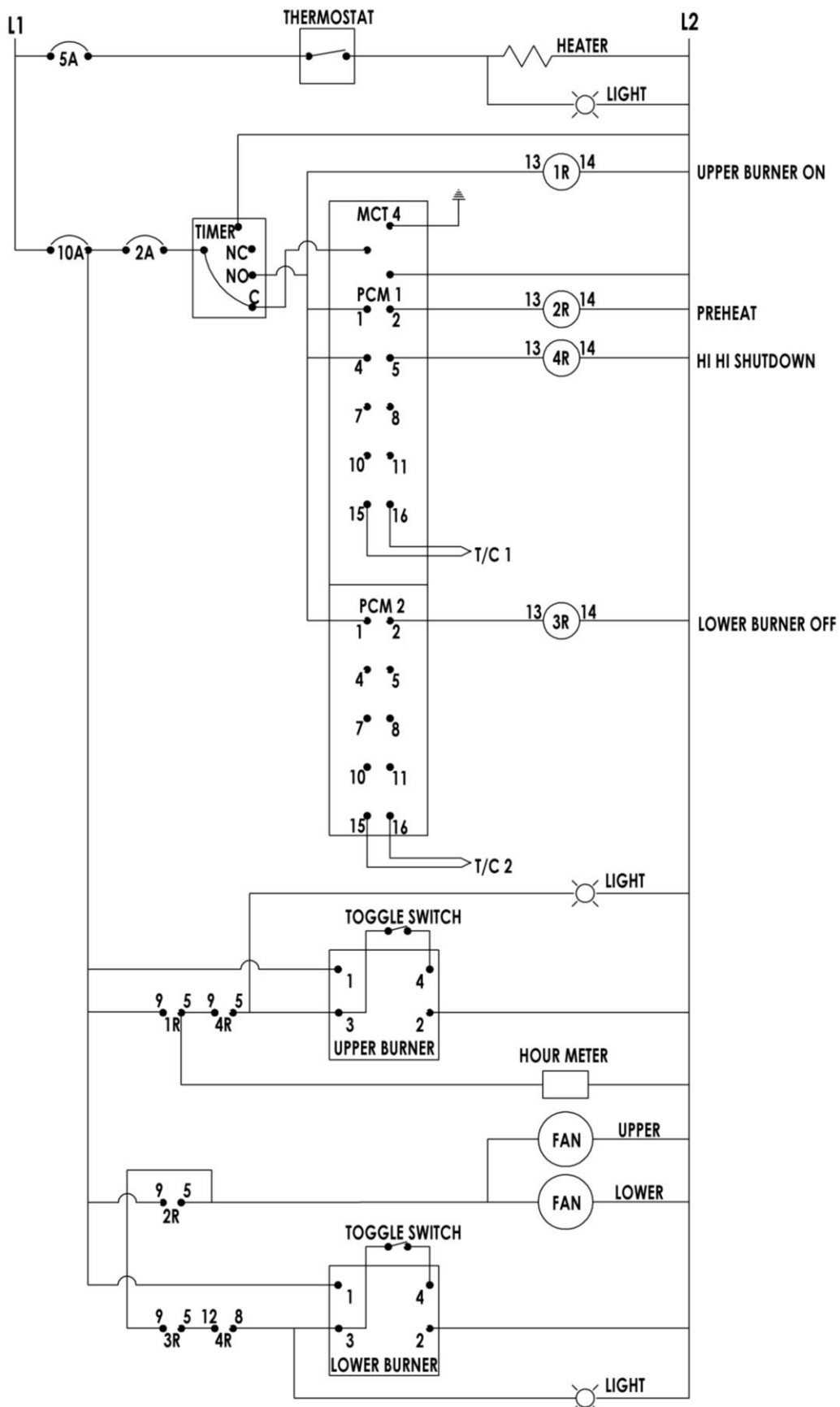


- The single digital controller determines both the lower/primary and the upper/secondary chamber settings.
- The controller can record both the set points temperatures as well as actual operating temperatures.
- The recorded data can be viewed on the controller screen, through a computer using a flash drive, or through a computer with a direct ethernet connection.

	UPPER	LOWER	ALARM
Factory Setting	600	1250	2000
User Setting 1			
User Setting 2			

Contact Factory for MCT4 Programming Instructions.

PS16-SC4 MCT4 GAS WIRING DIAGRAM



Contact Factory for MCT4 Programming Instructions.

- **Center of the 1st Incubator (located center of the nest and 1/3' from north property)**
 - UTM **eastimeter**
 - 14S 273947.14mE 3705569.16mN
 - MGRS
 - 14SKSC7941059569
 - Grid North
 - -1.6'
- **Baseline Point for East Incubator (Center of emission stack)**
 - UTM **eastimeter**
 - 14S 273941.12mE 3706049.56mN
 - MGRS
 - 14SKSC7941059569
 - Grid North
 - -1.6'
- -
- **Baseline Point for West Incubator (Center of emission stack)**
 - UTM **eastimeter**
 - 14S 273939.14mE 3705916.61mN
 - MGRS
 - 14SKSC7939595959
 - Grid North
 - -1.6'

ATTACHMENT G

Process Description For Incinerator 1 East and Incinerator 2 West.

A carcass is loaded in the primary chamber of either of the Firelake PS16-SC4 incinerators called Incinerator 1 East or Incinerator 2 West.

The Timer is turned ON.

The afterburner starts and heats the upper chamber with natural gas.

Once achieving preheat temperature in the upper chamber the lower burner starts.

The cremation process begins with a maximum burn rate of approximately 75lbs/hr.

The timer automatically stops the burners.

The chambers cool.

Remains are removed.

Attachment 1 – Supporting Documentation for PI-1S for Animal Carcass Incinerator

Facility: Forever Loved Pets Crematorium

Applicability and General Requirements in 30 TAC Sec. 116.610 and 116.615

- The included PI-1S and associated \$900 including a \$3,000 expedited fee have been submitted to TCEQ via STEER. The voucher number is 769779
- Owner/operator does not intend to commence construction of the new incinerator until the new registration has been issued by the executive director.
- Manufacturer's specification (attached) show the two new animal carcass incinerators have a maximum design rate that is less than 200 pounds per hour.
- A lot layout plan of the business park and a plot plan of lot 4 (attached) shows the proposed location of the new animal carcass incinerators is greater than 100 feet from the nearest property lines in all directions.
- Owner/operator intends to report to TCEQ: start of construction, construction interruptions exceeding 45 days, and the completion of construction (not later than 15 working days after the occurrence of the event).

Individual requirements of the Standard Permit for Animal Carcass Incinerators.

- A lot layout plan of the business park and a plot plan of lot 4 (attached) shows the proposed location of the new animal carcass incinerators is greater than 100 feet from the nearest property lines in all directions.
- Unit's maximum design cremation rate of 75 pounds per hour for each unit.
- Unit's primary chamber designed to operate between 1000 – 1800 degrees Fahrenheit for each individual unit.
- Unit's secondary chamber is designed to operate at 1600 degrees Fahrenheit throughout cremation for each unit.
- Secondary chamber flue gas residence time in excess of 1/2 second retention time for each unit.
- Both units will be fitted with a secondary chamber temperature chart recorder.
- Manufacturer's specifications (attached) show both animal carcass incinerators have a maximum design cremation rate less than 200 lbs. per hour.
- No loss stack rain collar does not obstruct stack flow for each incinerator.
- Exhaust stack height to be a minimum of 20 feet from the ground/finished floor elevation for each incinerator. The unit will be delivered from the factory at 19'7" and a 2 foot stack section will be added so that the unit is over 20 feet from the ground/finished floor.

Confidential Information – none

- This PI-1S registration (included) package does not contain any confidential information.

Process Flow Diagram

- Attached

Process Description

- Attached

Maximum Emissions Data and Calculations Chart

- Attached
- Each chart is per incinerator

Plot Plan

- Attached plot plan and lot plan

List of attachments to PI-1S

Attachment 1 – Supporting Document for PI-1S

Manufacture's Specifications

Site Plan

Lot Plan

Process Flow Diagram

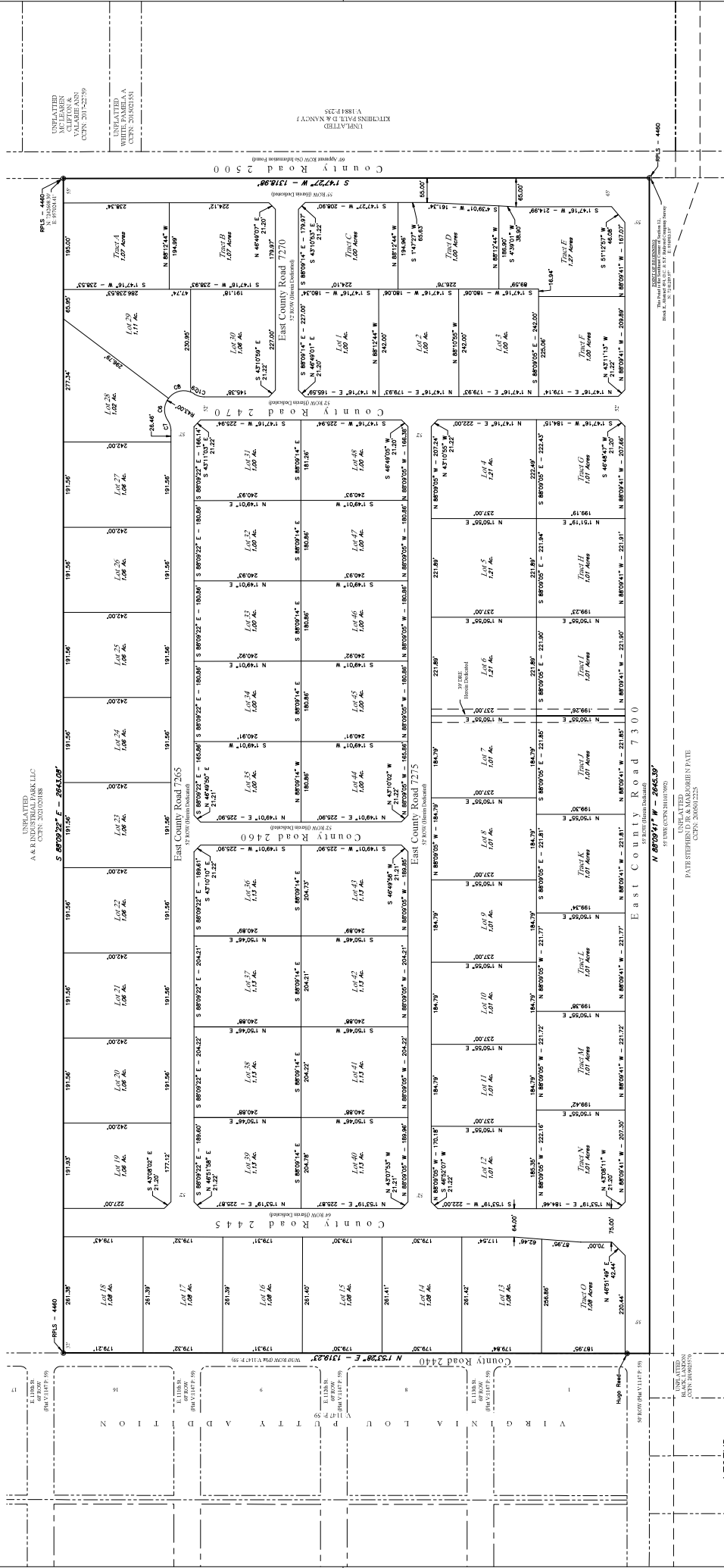
Process Description

Emissions Estimates Chart

TCEQ Core Data Form

Certificate of Stack Air Quality

Lots 1 thru 45, Tract A thru O 114th & MLK Addition, Lubbock County, Texas Total ±80.07



LEGEND

- Set Nail with Shiner - "C.E.C. 10194378"
- Set 1/2" Iron Rod with Red Cap - "C.E.C. 10194378"
- Found 3/8" Iron Rod - As Described
- Gas Meter
- Water Valve
- Power Pole
- Lot Line
- Adder Lot Line
- 6" Wood Fence
- Overhead Electrical/Utility
- Water Line
- Concrete

Lot Layout

Preliminary Lot Layout

Lots 1 thru 45, Tracts A - O
114th & MLK Estates Addition
Located in Section 12, Block E, Northeast 64th, of the G.C. & S.F.
County Survey, Lubbock County, Texas
November 29, 2021
Total ± 80.07 acres

UNPLATTED
CUTTING & MEASURING
CEN 20162259

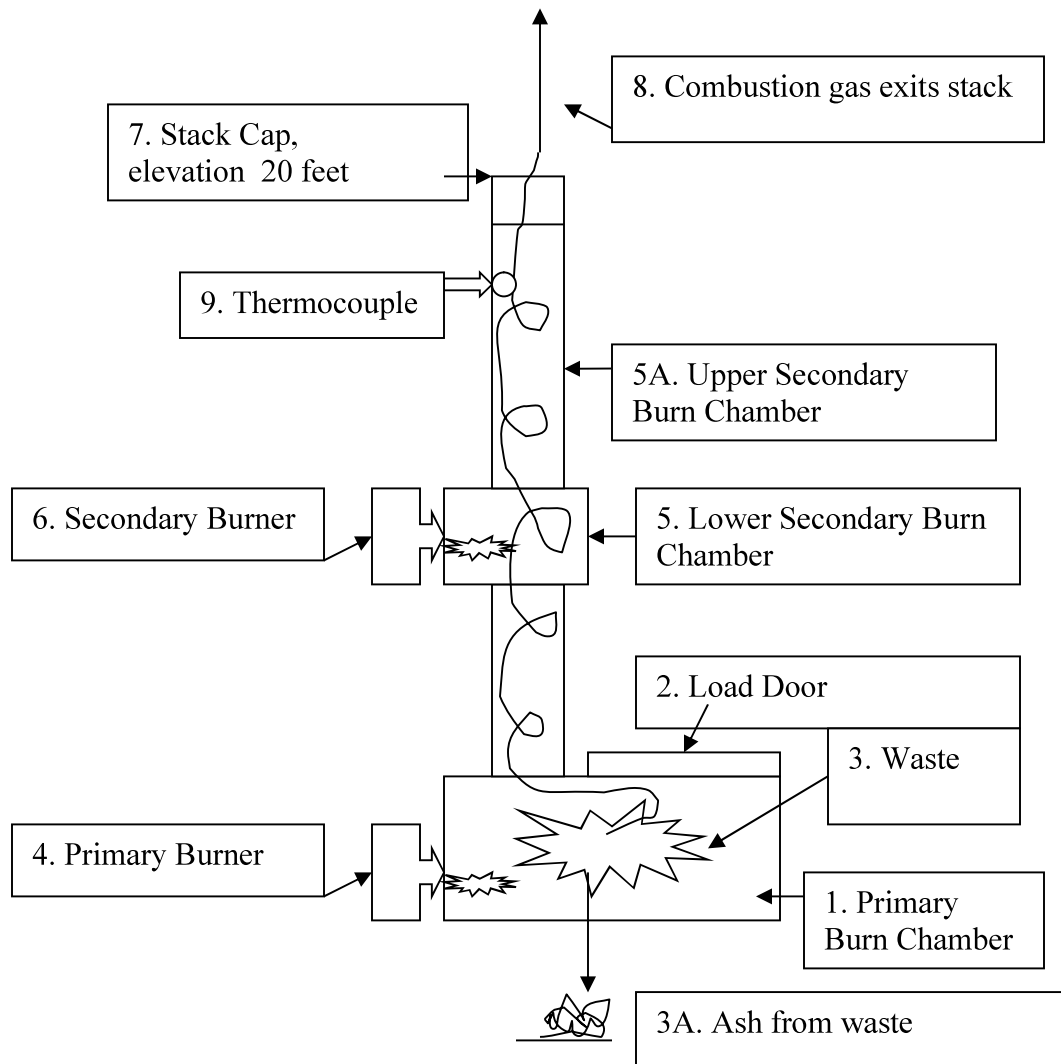
UNPLATTED
CUTTING & MEASURING
CEN 20162259

PROPERTY OWNERS
Diane Ashburn
Diane Ashburn

CONVEYANCE ENGINEERING & CONSULTING, LLC
1100 W. 11th St., Suite 100
Lubbock, TX 79409
CEN 20162259

for inspection purposes only and in no way official or approved for recording purposes

Typical Flow Diagram for Firelake Manufacturing P16 Incineration Models



Live Oak Animal Hospital South
Pollutant Emission Calculations for Proposed New Incinerator

Given:

Animal Carcass Incineration

Potential Average Operation: one hour after sunrise to one hour before sunset (~ 10 hours per day, avg., factoring in ash removal and loading times)
Emissions Factor (E.F.) Reference "a)" Cremation of Mixed Medical Waste

Crematory Unit: Firelake Manufacturing, Inc. Model PS16-2NG-SC4-TCDR

Table 1: Emissions Estimates for Firelake Manufacturing Crematory Unit

Pollutant	Cremation Rate	Cremation Rate Units	Emission Factor (E.F.)	E.F. Units	E.F. Reference
NOx	75	lbs/hr	0.1335	lbs/hr	a
CO	75	lbs/hr	0.110625	lbs/hr	a
SO2	75	lbs/hr	0.081375	lbs/hr	a
PM	75	lbs/hr	0.175125	lbs/hr	a
Lead	75	lbs/hr	0.00273	lbs/hr	a
TOC	75	lbs/hr	0.011212	lbs/hr	a
HCl	75	lbs/hr	1.25625	lbs/hr	a
PCB	75	lbs/hr	0.000002	lbs/hr	a
PM10	75	lbs/hr	0.175125	lbs/hr	a
PM2.5	75	lbs/hr	0.175125	lbs/hr	a
VOC	75	lbs/hr	0.001736111	lbs/hr	a

Notes:

a) EPA AP-42 Volume 1 Chapter 2 Solid Waste Disposal

<https://www.epa.gov/air-emissions-factors-and-quantification/ap-42-fifth-edition-volume-i-chapter-2-solid-waste-0>

Short-Term Emissions (lbs/hr)	Long-Term Emissions (lbs/yr)	Long-Term Emissions (tons/yr)
0.1335	485.94	0.24297
0.110625	402.675	0.201338
0.081375	296.205	0.148102
0.175125	637.455	0.318727
0.00273	9.9372	0.004969
0.011212	40.81168	0.020406
1.25625	4572.75	2.286375
0.000002	0.00728	0.000004
0.175125	637.455	0.318727
0.175125	637.455	0.318727
0.001736	6.319444	0.00316



FIRELAKE MFG., LLC

25 MICHIGAN ST SE SUITE B

HUTCHINSON, MN 55350 - USA

PH: (540) 437-1203 FAX: (320) 275-3391

January 31, 2020

**Certificate of Stack Air Quality,
Firelake C & P Series Incineration/Cremation Systems**

General:

The series offers multiple models which vary by the main burn chamber volume and secondary burn chamber volume. All models of the series use the same LP or Ng gas, or diesel burners and controls. Flow rates of combustion gas are proportional to the model sizes and contents of the exiting flue gas are similar. The following data is typical of the series. The data has been accumulated from various test reports.

Particulate 0.01 to 0.08 grains/dscf

CO 0 to 50 ppm

CO₂ 7 to 9% by volume dry

O₂ 9 to 12% by volume dry

Temperature 1200 to 1800F

Flow rate 1000 to 1100 acfm

Flow rate 220 to 280 dscfm

Average velocity 21 to 35 fps

Opacity 0 to 5%

Methods:

Tests incorporated waste comprised of various poultry, swine, or medical waste and followed EPA-CFR Method 2,3,4,5,9,10 and/or Ontario Canada MOE protocol for data collection and calculations.

References:

Test Report Model C6/200 by Entec Inc., test report #97-165 (job180)

Test Report Model C12/400 by ACG, llc., test report #V12966

Test Report Model P16 by AirSource Technologies, tests #P162GT

Test Report Model P25 by Air Monitoring Specialists, tests #P252GM1

Test Report Model P60, by Almega Corporation, test #I6957

Texas Commission on Environmental Quality

Standard Permit New Registration

Site Information (Regulated Entity)

What is the name of the site to be authorized?	Forever Loved Pets Crematorium
Does the site have a physical address?	Yes
Physical Address	
Number and Street	1224 E CR 7275
City	Lubbock
State	TX
ZIP	79404
County	LUBBOCK
Latitude (N) (##.#####)	
Longitude (W) (-###.#####)	
Primary SIC Code	4953
Secondary SIC Code	
Primary NAICS Code	
Secondary NAICS Code	
Regulated Entity Site Information	
What is the Regulated Entity's Number (RN)?	RN112226774
What is the name of the Regulated Entity (RE)?	LIVE OAK CREMATORIUM
Does the RE site have a physical address?	Yes
Physical Address	
Number and Street	5214 98TH ST STE 100
City	LUBBOCK
State	TX
ZIP	79424
County	LUBBOCK
Latitude (N) (##.#####)	
Longitude (W) (-###.#####)	
Facility NAICS Code	
What is the primary business of this entity?	

Customer (Applicant) Information

How is this applicant associated with this site?	Owner
What is the applicant's Customer Number (CN)?	CN606394104
Type of Customer	Corporation
Full legal name of the applicant:	
Legal Name	Live Oak Crematorium, LLC
Texas SOS Filing Number	805912469
Federal Tax ID	333598053
State Franchise Tax ID	32098911491
State Sales Tax ID	
Local Tax ID	
DUNS Number	
Number of Employees	

Independently Owned and Operated?	No
I certify that the full legal name of the entity applying for this permit has been provided and is legally authorized to do business in Texas.	Yes
Responsible Authority Contact	
Organization Name	Live Oak Crematorium, LLC
Prefix	
First	Chris
Middle	
Last	Reznicek
Suffix	
Credentials	
Title	Owner
Responsible Authority Mailing Address	
Enter new address or copy one from list:	RE Physical Address
Address Type	Domestic
Mailing Address (include Suite or Bldg. here, if applicable)	5214 98TH ST STE 100
Routing (such as Mail Code, Dept., or Attn:)	
City	LUBBOCK
State	TX
ZIP	79424
Phone (###-###-####)	8067949000
Extension	
Alternate Phone (###-###-####)	
Fax (###-###-####)	
E-mail	creznicek@liveoaklubbock.com

Responsible Official Contact

Person TCEQ should contact for questions about this application:	
Same as another contact?	CN606394104, Live Oak Crematorium, LLC
Organization Name	Live Oak Crematorium, LLC
Prefix	DR
First	Shelli
Middle	
Last	Wolfe
Suffix	
Credentials	
Title	Owner
Enter new address or copy one from list:	
Mailing Address	
Address Type	Domestic
Mailing Address (include Suite or Bldg. here, if applicable)	11302 INDIANA AVE
Routing (such as Mail Code, Dept., or Attn:)	
City	LUBBOCK
State	TX
ZIP	79423
Phone (###-###-####)	8066424010
Extension	

Alternate Phone (###-###-####)

Fax (###-###-####)

E-mail

swolfe@liveoaksouth.com

Technical Contact

Person TCEQ should contact for questions about this application:

Same as another contact?

Organization Name

Prefix

First

Middle

Last

Suffix

Credentials

Title

Enter new address or copy one from list:

Responsible Official Contact

Live Oak Crematorium, LLC

DR

Shelli

Wolfe

Owner

Mailing Address

Address Type

Mailing Address (include Suite or Bldg. here, if applicable)

Routing (such as Mail Code, Dept., or Attn:)

City

State

ZIP

Phone (###-###-####)

Extension

Alternate Phone (###-###-####)

Fax (###-###-####)

E-mail

Domestic

11302 INDIANA AVE

LUBBOCK

TX

79423

8066424010

swolfe@liveoaksouth.com

Standard Permit General Information- New Reg Sites

1) Is this facility permanent or temporary?

2) Will the proposed facility meet all of the requirements of the standard permit?

3) Select the type of unit that is being registered:

3.1) Select the rule associated to the unit specified.

3.2) Is the facility equal to or greater than 50 ft. from the nearest property line?

Permanent

Yes

ANIMAL CARCASS INCINERATORS

6009

Yes

Standard Permit Attachments

Please attach one PDF with the PI-1S and all required documents to complete the project.

[File Properties]

File Name

Hash

MIME-Type

Confidential

Completed Form PI-1S.pdf

F74C7CBAE5228BAD4A6447159B4B41DDC6ADE26F6BE5CF3179A6C4A179EF0C64

application/pdf

No

[File Properties]

File Name Coredatform.docx
Hash E1F148E2B458B1EE06DE1CF6E5CBB351437FFDB3FD3E5B3F4E3CB2E0AF8E8804
MIME-Type application/vnd.openxmlformats-officedocument.wordprocessingml.document
Confidential No

[File Properties]

File Name Emissionschart.pdf
Hash 421E4E69F9337A5B0B809F71C4FBE06D9CA7F0CE2B992A7516FCBB6F27B162C6
MIME-Type application/pdf
Confidential No

[File Properties]

File Name Attachment 1.docx
Hash EFADFB13DC03854DD7201A380EA26BAD423A82F643542B706A423EFB227D7D23
MIME-Type application/vnd.openxmlformats-officedocument.wordprocessingml.document
Confidential No

[File Properties]

File Name Attachment G Process Description.docx
Hash 0B779A63BAC69A85C7A9B664AB7F8A2B43FB132257016227DB94C444E416D7F1
MIME-Type application/vnd.openxmlformats-officedocument.wordprocessingml.document
Confidential No

[File Properties]

File Name CertificateofAirStackQuality.pdf
Hash DAF2A4CCABB69607AF7892E70CED11D61B19B1A559D62E52A12E38E9AF7D3677
MIME-Type application/pdf
Confidential No

[File Properties]

File Name LotLayout.pdf
Hash EDE26126CD5CE8D45CF2911453F788A3549DC07F8BDB985D254D8A1EAF2F1563
MIME-Type application/pdf
Confidential No

[File Properties]

File Name ProcessFlowDiagram.pdf
Hash E63F26183C1945102C3672F6773DD6800BFEBDD0F002BA90FF0E1CFB253BA5A7
MIME-Type application/pdf
Confidential No

[File Properties]

File Name PS16-SC4 Technical Specifications Manual (2).pdf
Hash 4E21952D967B0E8266D176E13240BF65535A22D252DF32B4ABD68D44FC34E29A
MIME-Type application/pdf
Confidential No

[File Properties]

File Name	SitePlan.pdf
Hash	467EE1803610F31A63520D24FA34B6B5AB7021D742D532655A549F01088A17C7
MIME-Type	application/pdf
Confidential	No

Please attach any other necessary information needed to complete the registration.

Expedite

Per Texas Health and Safety Code, Section 382.05155, does the applicant want to expedite the processing of this application?	Yes
Can the applicant demonstrate that the purpose of this application will benefit the economy of this state or an area of this state?	Yes

Certification

The electronic signature below indicates that the Responsible Official has knowledge of the facts herein set forth and that the same are true, accurate, and complete to the best of my knowledge and belief. By this signature, the maximum emission rates listed on this certification reflect the maximum anticipated emissions due to the operation of this facility and all representations in this certification of emissions are conditions upon which the facilities and sources will operate. It is understood that it is unlawful to vary from these representations unless the certification is first revised. The signature certifies that to the best of the Responsible Officials knowledge and belief, the project will satisfy the conditions and limitations of the indicated exemption or permit by rule and the facility will operated in compliance with all regulations of the Texas Commission on Environmental Quality and with Federal U.S. Environmental Protection Agency regulations governing air pollution. The signature below certifies that, based on information and belief formed after reasonable inquiry, the statements and information above and contained in the attached document(s) are true, accurate, and complete. If you questions on how to fill out this form or about air quality permits. Please call (512) 239-1250. Individuals are entitled to request and review their personal information that the agency gathers on its forms.

1. I am Chris Reznicek, the owner of the STEERS account ER113671.
2. I have the authority to sign this data on behalf of the applicant named above.
3. I have personally examined the foregoing and am familiar with its content and the content of any attachments, and based upon my personal knowledge and/or inquiry of any individual responsible for information contained herein, that this information is true, accurate, and complete.
4. I further certify that I have not violated any term in my TCEQ STEERS participation agreement and that I have no reason to believe that the confidentiality or use of my password has been compromised at any time.
5. I understand that use of my password constitutes an electronic signature legally equivalent to my written signature.
6. I also understand that the attestations of fact contained herein pertain to the implementation, oversight and enforcement of a state and/or federal environmental program and must be true and complete to the best of my knowledge.
7. I am aware that criminal penalties may be imposed for statements or omissions that I know or have reason to believe are untrue or misleading.
8. I am knowingly and intentionally signing Standard Permit New Registration.
9. My signature indicates that I am in agreement with the information on this form, and authorize its submittal to the TCEQ.

OWNER Signature: Chris Reznicek OWNER

Customer Number:	CN606394104
Legal Name:	Live Oak Crematorium, LLC
Account Number:	ER113671
Signature IP Address:	65.38.34.41
Signature Date:	2025-07-15
Signature Hash:	599B0528D2FA14886F1EAC26D46EEAA1CEF03A2AACB9BD7281AD36EE311DB1C0
Form Hash Code at time of Signature:	D552E48F602A4BE69579FFEA228DBFB9D90EA77D3CCAF9F5B92DCF712122C19B

Fee Payment

Transaction by:	The surcharge fee payment transaction was made by ER113671/Chris Reznicek
-----------------	---

Paid by:	The surcharge fee was paid by CHRIS REZNICEK
Fee Amount:	\$3000.00
Paid Date:	The surcharge fee was paid on 2025-08-04
Transaction/Voucher number:	The transaction number is 582EA000679443 and the voucher number is 777963

Fee Payment

Transaction by:	The application fee payment transaction was made by CHRIS REZNICEK
Paid by:	The application fee was paid by CHRIS REZNICEK
Fee Amount:	\$900.00
Paid Date:	The application fee was paid on 2025-06-01
Transaction/Voucher number:	The transaction number is 582EA000670453 and the voucher number is 769010

Submission

Reference Number:	The application reference number is 801090
Submitted by:	The application was submitted by ER113671/Chris Reznicek
Submitted Timestamp:	The application was submitted on 2025-08-05 at 17:55:24 CDT
Submitted From:	The application was submitted from IP address 65.38.34.41
Confirmation Number:	The confirmation number is 669344
Steers Version:	The STEERS version is 6.92

Additional Information

Application Creator: This account was created by Chris Reznicek



TCEQ Core Data Form

For detailed instructions on completing this form, please read the Core Data Form Instructions or call 512-239-5175.

SECTION I: General Information

1. Reason for Submission (If other is checked please describe in space provided.)		
<input checked="" type="checkbox"/> New Permit, Registration or Authorization (Core Data Form should be submitted with the program application.)		
<input type="checkbox"/> Renewal (Core Data Form should be submitted with the renewal form)	<input type="checkbox"/> Other	
2. Customer Reference Number (if issued)	Follow this link to search for CN or RN numbers in Central Registry**	3. Regulated Entity Reference Number (if issued)
CN		RN 112226774

SECTION II: Customer Information

4. General Customer Information		5. Effective Date for Customer Information Updates (mm/dd/yyyy)					
<input checked="" type="checkbox"/> New Customer		<input type="checkbox"/> Update to Customer Information					
<input type="checkbox"/> Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)		<input type="checkbox"/> Change in Regulated Entity Ownership					
<i>The Customer Name submitted here may be updated automatically based on what is current and active with the Texas Secretary of State (SOS) or Texas Comptroller of Public Accounts (CPA).</i>							
6. Customer Legal Name (If an individual, print last name first; eg: Doe, John) <i>If new Customer, enter previous Customer below:</i>							
Live Oak Crematorium LLC							
7. TX SOS/CPA Filing Number	8. TX State Tax ID (11 digits)	9. Federal Tax ID (9 digits)	10. DUNS Number (if applicable)				
805912469		33-3598053					
11. Type of Customer:	<input checked="" type="checkbox"/> Corporation	<input type="checkbox"/> Individual	Partnership: <input type="checkbox"/> General <input type="checkbox"/> Limited				
Government: <input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Federal <input type="checkbox"/> Local <input type="checkbox"/> State <input type="checkbox"/> Other	<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Other:					
12. Number of Employees		13. Independently Owned and Operated?					
<input checked="" type="checkbox"/> 0-20 <input type="checkbox"/> 21-100 <input type="checkbox"/> 101-250 <input type="checkbox"/> 251-500 <input type="checkbox"/> 501 and higher		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
14. Customer Role (Proposed or Actual) – as it relates to the Regulated Entity listed on this form. Please check one of the following							
<input checked="" type="checkbox"/> Owner <input type="checkbox"/> Operator <input type="checkbox"/> Owner & Operator <input type="checkbox"/> Other:							
<input type="checkbox"/> Occupational Licensee <input type="checkbox"/> Responsible Party <input type="checkbox"/> VCP/BSA Applicant							
15. Mailing Address:	5214 98 th St. Suite 100						
	City	Lubbock	State	TX	ZIP	79424	ZIP + 4
16. Country Mailing Information (if outside USA)				17. E-Mail Address (if applicable)			
				creznicek@liveoaksouth.com			
18. Telephone Number		19. Extension or Code		20. Fax Number (if applicable)			
(806) 794-9000				(806) 794-9001			

SECTION III: Regulated Entity Information

21. General Regulated Entity Information (If 'New Regulated Entity' is selected, a new permit application is also required.)	
<input checked="" type="checkbox"/> New Regulated Entity <input type="checkbox"/> Update to Regulated Entity Name <input type="checkbox"/> Update to Regulated Entity Information	
<i>The Regulated Entity Name submitted may be updated, in order to meet TCEQ Core Data Standards (removal of organizational endings such as Inc, LP, or LLC).</i>	
22. Regulated Entity Name (Enter name of the site where the regulated action is taking place.)	
Forever Loved Pets Crematorium	

23. Street Address of the Regulated Entity: <i>(No PO Boxes)</i>	1224 E CR 7275						
	City	Lubbock	State	TX	ZIP	79404	ZIP + 4
24. County	Lubbock						

If no Street Address is provided, fields 25-28 are required.

25. Description to Physical Location:											
26. Nearest City					State			Nearest ZIP Code			
<i>Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).</i>											
27. Latitude (N) In Decimal:						28. Longitude (W) In Decimal:					
Degrees		Minutes		Seconds		Degrees		Minutes		Seconds	
29. Primary SIC Code (4 digits)			30. Secondary SIC Code (4 digits)			31. Primary NAICS Code (5 or 6 digits)			32. Secondary NAICS Code (5 or 6 digits)		
4953						562213					
33. What is the Primary Business of this entity? <i>(Do not repeat the SIC or NAICS description.)</i>											
Animal Carcass Incineration											
34. Mailing Address:		5214 98 th St. Suite 100									
		City	Lubbock	State	TX	ZIP	79424	ZIP + 4			
35. E-Mail Address:		creznicek@liveoaksouth.com									
36. Telephone Number				37. Extension or Code				38. Fax Number <i>(if applicable)</i>			
(806) 794-9000								(806) 794-9001			

39. TCEQ Programs and ID Numbers Check all Programs and write in the permits/registration numbers that will be affected by the updates submitted on this form. See the Core Data Form instructions for additional guidance.

<input type="checkbox"/> Dam Safety	<input type="checkbox"/> Districts	<input type="checkbox"/> Edwards Aquifer	<input type="checkbox"/> Emissions Inventory Air	<input type="checkbox"/> Industrial Hazardous Waste
<input type="checkbox"/> Municipal Solid Waste	<input type="checkbox"/> New Source Review Air	<input type="checkbox"/> OSSF	<input type="checkbox"/> Petroleum Storage Tank	<input type="checkbox"/> PWS
<input type="checkbox"/> Sludge	<input type="checkbox"/> Storm Water	<input type="checkbox"/> Title V Air	<input type="checkbox"/> Tires	<input type="checkbox"/> Used Oil
<input type="checkbox"/> Voluntary Cleanup	<input type="checkbox"/> Wastewater	<input type="checkbox"/> Wastewater Agriculture	<input type="checkbox"/> Water Rights	<input type="checkbox"/> Other:

SECTION IV: Preparer Information

40. Name:	Shelli Wolfe		41. Title:	Owner
42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Mail Address	
(806) 642-4010		(806) 794-9001	swolfe@liveoaksouth.com	

SECTION V: Authorized Signature

46. By my signature below, I certify, to the best of my knowledge, that the information provided in this form is true and complete, and that I have signature authority to submit this form on behalf of the entity specified in Section II, Field 6 and/or as required for the updates to the ID numbers identified in field 39.

Company:	Live Oak Crematorium LLC	Job Title:	Owner
Name (In Print):	Shelli Wolfe	Phone:	(806) 642- 4010
Signature:		Date:	

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I.	Registrant Information
A. Company or Other Legal Customer Name: Live Oak Crematorium LLC.	
B. Company Official Contact Information: <input checked="" type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Other: _____	
Name: Chris Reznicek	
Title: Owner	
Mailing Address: 5214 98th St. Suite 100	
City: Lubbock	
State: TX	
ZIP Code: 79424	
Telephone Number: (806) 794-9000	
Fax Number: (806) 794-9001	
Email Address: creznicek@liveoaklubbock.com	
<i>All permit correspondence will be sent via email.</i>	
C. Technical Contact Information <input type="checkbox"/> Mr. <input checked="" type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Other: _____	
Name: Shelli Wolfe	
Title: Owner	
Company Name: Live Oak Animal Hospital South	
Mailing Address: 11302 Indiana Ave.	
City: Lubbock	
State: TX	
ZIP Code: 79423	

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I.	Registrant Information (<i>continued</i>)
C.	Technical Contact Information (<i>continued</i>)
	Telephone Number: (806) 642-4010
	Fax Number: (806) 642-4024
	Email Address: swolfe@liveoaksouth.com
II.	Facility and Site Information
A.	Name and Type of Facility
	Facility Name: Forever Loved Pets Crematorium
	Type of Facility:
	<input checked="" type="checkbox"/> Permanent
	<input type="checkbox"/> Temporary
	For portable units, please provide the serial number of the equipment being authorized below.
	Serial No(s):
B.	Facility Location Information
	Street Address: 1224 E CR 7275
	If there is no street address, provide written driving directions to the site and provide the closest city or town, county, and ZIP code for the site (attach description if additional space is needed).
	City: Lubbock
	County: Lubbock
	ZIP Code: 79404
C.	Core Data Form (required for Standard Permits 6006, 6007, and 6013).
	Is the Core Data Form (TCEQ Form 10400) attached?
	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Customer Reference Number (CN): 606394104
	Regulated Entity Number (RN): 112226774
D.	TCEQ Account Identification Number (if known):

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II. Facility and Site Information (continued)

E. Type of Action

- ☒ Initial Application
☐ Change to Registration
☐ Renewal
☐ Renewal Certification

For Change to Registration, Renewal, or Renewal Certification actions provide the following:

Registration Number:

Expiration Date:

F. Standard Permit Claimed:

G. Previous Standard Exemption or PBR Registration Number:

Is this authorization for a change to an existing facility previously authorized under a standard exemption or PBR?

☐ Yes ☒ No

If "Yes," enter previous standard exemption number(s) and PBR registration number(s) and associated effective date in the spaces provided below.

Standard Exemption Number(s):

PBR Registration Number(s):

H. Other Facilities at this Site Authorized by Standard Exemption, PBR, or Standard Permit

Are there any other facilities at this site that are authorized by an Air Standard Exemption, PBR, or Standard Permit?

☐ Yes ☒ No

If "Yes," enter standard exemption number(s), PBR registration number(s), Standard Permit Registration Number(s), and associated effective date in the spaces provided below.

Standard Exemption Number(s):

PBR Registration Number(s):

Standard Permit Registration Number(s):

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II. Facility and Site Information (continued)

I. Other Air Preconstruction Permits

Are there any other air preconstruction permits at this site?

☐ Yes ☒ No

If "Yes," enter permit number(s) in the spaces provided below.

J. Affected Air Preconstruction Permits

Does the standard permit directly affect any permitted facility?

☐ Yes ☒ No

If "Yes," enter permit number(s) in the spaces provided below.

K. Federal Operating Permit (FOP) Requirements

Is this facility located at a site that is required to obtain a FOP pursuant to 30 TAC Chapter 122?

☐ Yes ☒ No ☐ To Be Determined

Check the requirements of 30 TAC Chapter 122 that will be triggered if this standard permit is approved (check all that apply).

- ☐ Initial Application for a FOP
- ☐ Significant Revision for a SOP
- ☐ Minor Revision for a SOP
- ☐ Operational Flexibility/Off Permit Notification for a SOP
- ☐ Revision for a GOP
- ☐ To be Determined
- ☐ None

Identify the type(s) of FOP issued and/or FOP application(s) submitted/pending for the site. (check all that apply)

- ☐ SOP
- ☐ SOP application/revision (submitted or under APD review)
- ☐ GOP
- ☐ GOP application/revision (submitted or under APD review)
- ☐ N/A

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III.	Fee Information (go to www.tceq.texas.gov/epay to pay online)
A.	Fee Amount: \$900
B.	Voucher number from ePay: 769779
IV.	Public Notice (if applicable)
A.	Responsible Person
	<input type="checkbox"/> Mr.
	<input checked="" type="checkbox"/> Mrs.
	<input type="checkbox"/> Ms.
	<input type="checkbox"/> Other: _____
Name: Shelli Wolfe	
Title: Owner	
Company: Live Oak Animal Hospital South	
Mailing Address: 11302 Indiana Ave.	
City: Lubbock	
State: TX	
ZIP Code: 79423	
Telephone No.: (806) 642-4010	
Fax No.: (806) 642-4024	
Email Address: swolfe@liveoaksouth.com	
B.	Technical Contact
	<input type="checkbox"/> Mr.
	<input checked="" type="checkbox"/> Mrs.
	<input type="checkbox"/> Ms.
	<input type="checkbox"/> Other: _____
Name: Shelli Wolfe	
Title: Owner	
Company: Live Oak Animal Hospital South	
Mailing Address: 11302 Indiana Avenue	
City: Lubbock	
State: TX	
ZIP Code: 79423	

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IV. Public Notice (if applicable)
B. Technical Contact
Telephone Number: (806) 642-4010
Fax Number: (806) 642-4024
Email Address: swolfe@liveoaksouth.com
C. Bilingual Notice
Is a bilingual program required by the Texas Education Code in the School District? <div style="display: flex; justify-content: space-between; width: 100%;"><input type="checkbox"/> Yes<input checked="" type="checkbox"/> No</div>
Are the children who attend either the elementary school or the middle school closest to your facility eligible to be enrolled in a bilingual program provided by the district? <div style="display: flex; justify-content: space-between; width: 100%;"><input type="checkbox"/> Yes<input checked="" type="checkbox"/> No</div>
If "Yes," list which language(s) are required by the bilingual program below? Language(s): _____ Language(s): _____
D. Small Business Classification and Alternate Public Notice
Does this company (including parent companies and subsidiary companies) have fewer than 100 employees or less than \$6 million in annual gross receipts? <div style="display: flex; justify-content: space-between; width: 100%;"><input checked="" type="checkbox"/> Yes<input type="checkbox"/> No</div>
Is the site a major source under 30 TAC Chapter 122, Federal Operating Permit Program? <div style="display: flex; justify-content: space-between; width: 100%;"><input type="checkbox"/> Yes<input checked="" type="checkbox"/> No</div>
Are the site emissions of any individual regulated air contaminant equal to or greater than 50 tpy? <div style="display: flex; justify-content: space-between; width: 100%;"><input type="checkbox"/> Yes<input checked="" type="checkbox"/> No</div>
Are the site emissions of all regulated air contaminant combined equal to or greater than 75 tpy? <div style="display: flex; justify-content: space-between; width: 100%;"><input type="checkbox"/> Yes<input checked="" type="checkbox"/> No</div>

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V. Renewal Certification Option	
A.	Does the permitted facility emit an air contaminant on the Air Pollutant Watch List, and is the permitted facility located in an area on the watch list? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
B.	For facilities participating in the Houston/Galveston/Brazoria area (HGB) cap and trade program for highly reactive VOCs (HRVOCs), do the HRVOCs need to be speciated on the maximum allowable emission rates table (MAERT)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
C.	Does the company and/or site have an unsatisfactory compliance history? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
D.	Are there any applications currently under review for this standard permit registration? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
E.	Are scheduled maintenance, startup, or shutdown emissions required to be included in the standard permit registration at this time? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
F.	Are any of the following actions being requested at the time of renewal: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
1.	Are there any facilities that have been permanently shut down that are proposed to be removed from the standard permit registration? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2.	Do changes need to be made to the standard permit registration in order to remain in compliance? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
3.	Are sources or facilities that have always been present and represented, but never identified in the standard permit registration, proposed to be included with this renewal? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
4.	Are there any changes to the current emission rates table being proposed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<i>Note: If answers to all of the questions in Section V. Renewal Certification Option are "No," use the certification option and skip to Section VII. of this form. If the answers to any of the questions in Section V. Renewal Certification Option are "Yes," the certification option cannot be used.</i>	
*If notice is applicable and comments are received in response to the public notice, the application does not qualify for the renewal certification option.	

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VI. Technical Information Including State and Federal Regulatory Requirements

Place a check next to the appropriate box to indicate what you have included in your submittal.

Note: Any technical or essential information needed to confirm that facilities are meeting the requirements of the standard permit must be provided. Not providing key information could result in an automatic deficiency and voiding of the project.

A. Standard Permit requirements
(Checklists are optional; however, your review will go faster if you provide applicable checklists.)

Did you demonstrate that the general requirements in 30 TAC §§116.610 and 116.615 are met?

☒ Yes ☐ No

Did you demonstrate that the individual requirements of the specific standard permit are met?

☒ Yes ☐ No

B. Confidential Information (All pages properly marked "CONFIDENTIAL").

☒ Yes ☐ No

C. Process Flow Diagram.

☒ Yes ☐ No

D. Process Description.

☒ Yes ☐ No

E. Maximum Emissions Data and Calculations.

☒ Yes ☐ No

F. Plot Plan.

☒ Yes ☐ No

G. Projected Start of Construction Date, Start of Operation Date, and Length of Time at Site:

☒ Yes ☐ No

Projected Start of Construction (provide date): 09/01/2025

Projected Start of Operation (provide date): 11/01/2025

Length of Time at the Site:

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VII. Delinquent Fees and Penalties

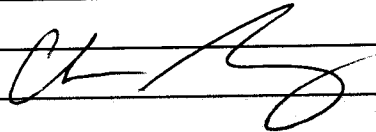
This form **will not be processed** until all delinquent fees and/or penalties owed to TCEQ or the Office of the Attorney General on behalf of TCEQ are paid in accordance with the Delinquent Fee and Penalty Protocol. For more information regarding Delinquent Fees and Penalties, go to the TCEQ website at:
www.tceq.texas.gov/agency/financial/fees/delin/index.html

VIII. Signature Requirements

The signature below confirms that I have knowledge of the facts included in this application and that these facts are true and correct to the best of my knowledge and belief. I further state that to the best of my knowledge and belief, the project for which application is made will not in any way violate any provision of the Texas Water Code (TWC), Chapter 7; the Texas Health and Safety Code (THSC), Chapter 382, the Texas Clean Air Act (TCAA) the air quality rules of the Texas Commission on Environmental Quality; or any local governmental ordinance or resolution enacted pursuant to the TCAA. I further state that I understand my signature indicates that this application meets all applicable nonattainment, prevention of significant deterioration, or major source of hazardous air pollutant permitting requirements. The signature further signifies awareness that intentionally or knowingly making or causing to be made false material statements or representations in the application is a criminal offense subject to criminal penalties.

Name (printed): Chris Reznicek

Signature (original signature required):



IX. Copies of the Registration

The Form PI-1S application must be submitted through ePermits. No additional copies need to be sent to the Regional Office or local Air Pollution Control Program(s). The link to ePermits can be found here:
www3.tceq.texas.gov/steers/