Texas Commission on Environmental Quality
Municipal Solid Waste
Notice of Intent to Operate a Citizens’ Collection Station

Instructions: Please fill out all sections. Use additional paper if necessary. If something is not applicable, please mark NA and explain why it is not applicable unless otherwise noted. All forms (initial notification, TCEQ Core Data Forms, and revisions) must be submitted at least in duplicate, with one copy going directly to the TCEQ Region Office for your county.

Applicant Information

Applicant Name: ________________________________________________________________

Customer Reference Number – if known (9 digits): CN ____________________________

*If you do not have a Customer Reference Number, complete the customer information section of the Core Data Form TCEQ-10400 and submit that form with this application.

Facility Information

Facility Name: ________________________________________________________________

Regulated Entity Reference Number – if known (9 digits): RN ______________________

*If the facility does not have a Regulated Entity Reference Number, complete the regulated entity information section of the Core Data Form TCEQ-10400 and submit that form with this application.

Property Owner Information

Name: _______________________________________________________________________

Customer Reference Number – if known (9 digits): CN ____________________________

*If the property owner does not have a Customer Reference Number, complete the customer information section of the Core Data Form TCEQ-10400 and submit that form with this application.

*If you are not the property owner, please provide a Core Data Form filled out by the property owner of record.

Operator Contact Information

Name: _______________________________________________________________________

Title: _______________________________________________________________________

Address: _____________________________________________________________________

City, State, Zip Code: ________________________________________________________

Phone Number: _____________________________________________________________

TCEQ MSW No. (if known): _______
General Information

Expected Start Date: ______________________________________________________

Operator on Site? □ YES □ NO

Minimum Waste Removal Frequency from Facility
(if collecting putrescibles, must be at least once per week) __________________________

Name of Landfill at which Waste will be Disposed, and TCEQ Permit Number

Landfill Name: ___________________________ Permit Number: ______

TCEQ Core Data Form

Please provide a TCEQ Core Data Form(s) with facility and customer information as an attachment to this application.

Site Location

Within a 100-year floodplain? □ YES □ NO

Within a Wetland? □ YES □ NO

Within Critical Habitat of Endangered or Threatened Species? □ YES □ NO

Site will manage run-on and runoff of peak discharge of the 25 year rainfall event? □ YES □ NO

1. Provide a description of how to get to the site from an intersection of major interstate or state roadways:

________________________________________________________________________

________________________________________________________________________

2. Provide an attachment with the information in the following list:
   a. A legible city or county roadway map with the site shown and labeled.
   b. A list of adjacent property owners and their mailing addresses.

Type of Wastes Accepted

List the types of wastes that may be accepted: ______________________________________________________

________________________________________________________________________

________________________________________________________________________
Types of Wastes Prohibited
List the types of wastes that are prohibited: ____________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

Screening Procedures for Excluding Prohibited Waste
Please describe screening procedures for excluding prohibited waste: _________________________
_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

Operation Process
Please briefly describe the operation process: _____________________________________________
_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________
Containers

Containers closed or covered? □ YES □ NO

Leakproof, durable, and designed for safe handling and easy cleaning? □ YES □ NO

Nonreusable containers? □ YES □ NO

If yes to nonreusable containers, are they of sufficient strength to minimize animal scavenging or rupturing? □ YES □ NO

Reusable containers? □ YES □ NO

Reusable containers clean? □ YES □ NO

Reusable containers create a nuisance? □ YES □ NO

Additional Requirements

1. The owner or operator is required to post rules governing the use of the facility. The rules must include who may use the facility, what may or may not be accepted, etc.

2. The owner or operator must post operating hours on the sign.

3. Sharps may be collected if they are only from single family or multi-family dwellings, hotels, motels, or other establishments and if they are not considered medical waste as defined in §330.3

4. Manually emptied reusable containers must be capable of being serviced without the collector coming into contact with the waste.

5. Mechanically handled containers must be designed to prevent spills or leaks during storage, handling or transport.

6. The facility must be maintained in a sanitary condition.

7. Please provide a drawing (see attached example) of the layout of the collection station (i.e. where bins are located, etc).

Closure Plan

In accordance with 30 TAC §330.21, owner or operator must perform closure activities as soon as the facility ceases to accept waste. The owner or operator will initiate closure activities as specified by 30 TAC Chapter 330, Subchapter K. The owner or operator will perform the following:

1. The executive director shall be notified 90 days prior to closure of the facility.

2. The owner or operator will remove all waste, waste residues, and any recovered materials. Facility units shall either be dismantled and removed off-site or decontaminated.

3. The owner or operator will evacuate all material on-site (feedstock, in process, and processed) to an authorized facility and disinfect all tipping areas, processing areas, and post-processing areas.

4. If there is evidence of a release from a municipal solid waste unit, the executive director may require an investigation into the nature and extent of the release and an assessment of measures necessary to correct an impact to groundwater.
Detail any additional information to ensure compliance with closure requirements for the facility:

________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

List of Included Attachments

Updated/Revised Core Data Form TCEQ-10400 □ YES □ NO
Legible county roadway map with site shown and labeled □ YES □ NO
Property lease or ownership information □ YES □ NO
Adjacent property owners list with mailing addresses □ YES □ NO

Other Authorizations

Please note, the owner or operator of this facility must acquire all applicable air and wastewater authorizations.

Compliance Advisory

Failure to comply with the requirements of 30 TAC Chapter 330 or any other applicable regulations, statutes, or ordinances may result, if the executive director so directs, in the owner or operator having to cease waste operations. The executive director may direct the owner or operator to apply for a permit or registration for the continued operation as a municipal solid waste facility under the provisions of 30 TAC Chapter 330.

Property Owner’s Affidavit (30 TAC §330.11(a))

The owner of the property must sign the following statement:

1. I acknowledge that the State of Texas may hold the property owner of record either jointly or severally responsible for the operation, maintenance, and closure or post-closure care of the facility.

2. I acknowledge that the facility owner or operator and the State of Texas shall have access to the property during the active life and post-closure care period, if required, after closure for the purpose of inspection and maintenance.

________________________________________________________________________________________
Signature of Owner Date
**Applicant’s Statement**

The applicant (owner or operator) must sign the following statement:

“I 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.” [30 TAC §305.44(b)]

________________________________________________________________________________________

**Signature of Applicant**  ________________________________________________________________

**Date**  ________________________________________________________________

________________________________________________________________________________________

**Printed Name**  ________________________________________________________________

________________________________________________________________________________________

**Title**  ________________________________________________________________

**Submitting an Application**

This form is required by 30 Texas Administrative Code §330.11(a) and §330.11(e)(1), and must be submitted prior to start up for citizens’ collection stations. Owners/operators are required to meet the provisions set forth in 30 TAC Chapter 330 Subchapter C, Subchapter E, 30 TAC §330.303, §330.459, §330.461, §330.547, §330.551, §330.553, and the reporting requirements of §330.675.

Subsequent forms shall be submitted to update or change any information within 90 days of the effective date of the change.

If you have any questions, please contact the TCEQ Municipal Solid Waste Permits Section at (512) 239-2334.

Please submit this completed form and one or more Core Data Form(s) (form TCEQ-10400) to:

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