Texas Commission on Environmental Quality
Petroleum Storage Tank Program

Aboveground Storage Tank Registration Form Instructions

WHAT IS THIS FORM? This form (form 0659) provides two functions for the agency: to report Aboveground Storage Tank (AST) registration information and to provide core data for the TCEQ’s Central Registry Program. The Central Registry maintains basic information about the people, businesses, and institutions that the TCEQ must regulate by law. Examples of “core data” are names, addresses, location information, and type of business.

WHEN MUST I COMPLETE THIS FORM? All tanks meeting the definition of an AST that contain or have contained a petroleum product, unless otherwise exempted or excluded (as described in §334.123-124), are required to be registered with this form. Any change of registration information requires the filing of an amended form. Please see the instructions below for each section of the form. If you have any questions concerning the form, or whether your tanks should be registered, please contact the Petroleum Storage Tank Registration Team at (512) 239-2160.

You must submit this form for Central Registry information in two situations only: You are not in our core database (the “Central Registry”’) yet; or if your core data has changed, and you need to update it with us. In completing this form for Central Registry, the facility where the tank is located is the "regulated entity." The owner of the facility is a "customer," as is the operator of the facility. For example, if the tank is located at a service station, then that service station is the regulated entity, and the owner and operator of the service station are customers.

GENERAL INSTRUCTIONS: You will complete different parts of this form depending on whether you are submitting tank registration information, or Central Registry core data. For the first time submittal of an original form for registration purposes, please complete the entire form so our records will be as current and accurate as possible.

Please mail the completed form to the address provided at the top center of the AST Registration Form.

LINE BY LINE INSTRUCTIONS

ID NUMBERS - These are TCEQ assigned numbers (except for the Tax ID No.) used to identify facilities, owners, and operators.

Customer Reference Number (CN): If this is the first time you have completed this form, you will not have this number yet, so you should leave this space blank. Do not enter a permit number, registration number, or license number here. This number always begins with CN. Regardless of how many regulated entities you are associated with, you will have only one customer reference number.

Regulated Entity Reference Number (RN): This unique number identifies the regulated entity and always begins with RN. Do not enter a permit number, registration number, or license number here. Enter only one regulated entity reference number here on each respective form.

Facility ID No. and Owner ID No.: These numbers are reported in the upper right hand corner of the form (except for operator ID). The facility ID number must be provided for all filings except for the original registration of a facility. The owner ID number must also be reported if the owner has been assigned an ID previously. The TCEQ will assign operator ID numbers after the initial filing, the operator ID number should be provided with all subsequent filings. The space for Operator ID number is located in top left corner of Section 3.

Federal Tax ID Number: All businesses, except for some small sole proprietors, should have a federal taxpayer identification number. Enter this number here. Use no prefixes, dashes, or hyphens.
1. TANK OWNER INFORMATION - This section contains basic information about the Owner of the ASTs. This entire section (Tank Owner Information) must be filled out whenever the form is submitted to TCEQ for any purpose.

**Tank Owner Business or last Name:** Enter the legal name of the owner or last name of individual. Include any abbreviations (LLC, Inc., etc.).

**Tank Owner First Name:** Enter the first name for individuals only.

**Owner Mailing Address:** Enter a central mailing address for the customer to receive mail from the TCEQ. For example, this address might be the corporate or regional headquarters of a large company.

**Country (Outside USA):** If the address is outside the United States, enter the country name.

**E-Mail Address:** This should be a general address that is appropriate for e-mail to your central or regional headquarters.

**Owner's Authorized Representative and phone number:** Enter information for a contact person at the central or regional headquarters, if applicable.

**State Franchise Tax ID Number:** Corporations and limited liability companies that operate in Texas are issued a franchise tax identification number. If the owner is a corporation or limited liability company, enter this number here.

**DUN Number:** Most businesses have a DUNS (Data Universal Numbering System) number issued by Dun and Bradstreet Corp. If the customer has one, enter it here.

**Type of Customer:** The type of tank owner identifies whether the owner is an individual, corporation, or government entity. Check one box.

**Location of Records:** The location of records indicates if this facility’s records are kept onsite or at an alternative location. If records are kept offsite, please indicate the location, contact person, and telephone number.

**Fax Number:** Enter owner’s fax number

**Independently Owned and Operated?:** Check “No” if the customer is a subsidiary or part of a larger company. Otherwise, check “Yes.”

**Number of Employees:** Enter the number of employees for the customer’s entire company, at all locations. This is not the number of employees at one facility.

2. FACILITY INFORMATION - General information about the AST facility, including facility name, location, and contact person. This entire section must be filled out whenever the form is submitted to TCEQ for any purpose.

**Facility Name:** This is the name by which you want the regulated entity to be known to the TCEQ.

**Physical Location:** Enter the physical address of the ASTs. A Post Office or Rural Route Box cannot be accepted for a facility address. Our staff should be able to use this address to find the facility.

**City:** Indicate the city/town or the nearest city/town where the ASTs are located.

**ZIP Code:** Enter the ZIP code for the area that includes the location of the ASTs.

**County:** Enter the name of the county in which the ASTs are located.

**On Site Contact Person:** Enter name, title, and phone number for a contact person at the facility.

**E-Mail Address:** As with the mailing address, this should be a general address that is appropriate for e-mail to the regulated entity’s main office, if applicable.

**Fax Number:** Enter information for contacting the regulated entity’s main office, if applicable.

**TYPE OF FACILITY:** Indicate activities commonly performed at the location. Check all boxes that apply.

**Number of regulated UST/ASTs at this facility:** For number of regulated USTs or ASTs at this facility, report the number of active and temporarily out-of-use USTs and the number of active ASTs at this facility.

**SIC and NAICS Codes:** All regulated entities, with the exception of occupational licensees, should have a Standard Industrial Classification (SIC) code and a North American Industrial Classification System (NAICS) code. These codes may or may not correspond to why the regulated entity is regulated by the TCEQ. When NAICS codes replace SIC codes, you will probably be asked to provide NAICS codes, if you are not providing them now. Enter the SIC code that best describes the main business activity at this regulated entity. Enter the SIC code that best describes the secondary business activity at this regulated entity. For a list of SIC codes on the Web, go to:

[www.osha.gov/oshstats/sicser.html](http://www.osha.gov/oshstats/sicser.html)

Enter the NAICS code that best describes the main business activities at this regulated entity. Enter the NAICS code that describes the secondary business activity at this regulated entity. For a list of NAICS codes on the Web, go to:

[www.census.gov/epcd/www/naicscod.htm](http://www.census.gov/epcd/www/naicscod.htm)
**Latitude and Longitude:** Enter this information if the regulated entity has a fixed location and the latitude and longitude are known.

**3. TANK OPERATOR INFORMATION** - This section is the name, mailing address, contact person and certain other basic information about the Operator of the ASTs. The operator is the person in day-to-day control of, and/or having responsibility for the daily operation of the AST system (excluding clerks, cashiers, or other employees of the operator). An operator’s employee may, however, be designated as the “operator’s authorized representative” on the form if the operator so desires. If tank operator information is identical to tank owner information, check the box at the top of the section marked “mark here if same as owner”. If you check this box, completion of Section 3 is not required; however, if the box is not checked, Section 3 must be completed in its entirety.

**TCEQ Operator ID:** This is a TCEQ assigned number used to identify operators.

**Operator’s Customer Number:** If this is the first time you have completed this form, you will not have this number yet, so you should leave this space blank. **Do not** enter a permit number, registration number, or license number here. This number always begins with CN. Regardless of how many regulated entities you are associated with, you will have only one customer reference number.

**Tank Operator Name:** Enter the legal name of the customer. Include any abbreviations (LLC, Inc., etc.).

**Mailing Address:** Enter a central mailing address for the customer to receive mail from the TCEQ. For example, this address might be the corporate or regional headquarters of a large company.

**Operator’s Authorized Representative:** Enter information for a contact person at the central or regional headquarters, if applicable.

**Type of tank operator:** Identifies whether the operator is an individual, corporation, or government entity. Please check only one.

**Date listed person became operator:** Is the date (month, day, and year) the operator assumed responsibility for the AST’s.

**4. REASON FOR FILING** - Complete this section to indicate the reason for submitting the form. TCEQ uses this information internally. Please mark all choices that apply.

**AST Registration Information** - This section is for registration information. Use it to indicate why the form was filed:

- **Box 1** - Initial Registration - the first time a AST system is being registered
- **Box 2** - Change in Ownership - please provide the effective date of the ownership change
- **Box 3** - Amendments - required reporting of changes to current registration information
- **Box 4** - Other - reasons other than those listed above

Check the appropriate box, explain “other” answers sufficiently, or use this space to provide additional comments, as necessary. For ownership changes the effective date of the ownership change is required.

**5. TANK OWNER/OPERATOR REGISTRATION** - In this section, the owner/operator is certifying that they are familiar with the information included on the form and are certifying that the information is true, accurate, and complete. This section must be filled out completely by the UST owner, operator, or their legally authorized representative when filing UST registration information. A signature and date are required or the form will be returned. If an ownership change is involved, only the signature of the current owner or the current owner’s legally authorized representative will be accepted.

**6. TCEQ PROGRAMS IN WHICH THIS REGULATED ENTITY PARTICIPATES:**
Check all that apply. If this regulated entity participates in a TCEQ program not shown on this list, enter that program in one of the blank spaces and check the corresponding box. Check “Unknown” only if you do not know any programs this regulated entity participates in.

**TCEQ AST GENERAL INFORMATION**
7. DESCRIPTION OF ABOVEGROUND STORAGE TANKS - This section contains descriptive and identifying information for each AST and must be completed with the first submission of the AST Registration form. Please fill out this portion of the form completely to ensure all ASTs are correctly identified. This section also must be used to update or amend the AST registration information. Mark all that apply, unless otherwise indicated.

**Tank ID** - Indicate individual tanks’ ID number, as assigned by the owner/operator

**Tank Installation Date** - Provide the date the AST was installed at its current location and fuel placed in AST.

**Tank Capacity** - Provide AST’s capacity in gallons. AST must be larger than 1100 gallons.

**Tank Status** - Enter the current status of the AST. Check the correct box or provide date where specified. When reporting out of use, please provide the date that the AST was emptied.

**Product Stored** - Enter the current substance stored in the AST.

**Material of Construction** - Indicate material of construction for tanks.

**Containment** - Indicate type of containment, if applicable.

**Stage I/Stage II Vapor Recovery** - Please indicate whether your system has Stage I and/or Stage II vapor recovery equipment and the installation date of the equipment. Applicable requirements may be found in 30 TAC, §115.221-229 and §115.241-249. **If your AST system is not located in a non-attainment county or one of the 95 covered attainment counties, completion of this section is not necessary.** For a complete list of covered attainment counties, please refer to 30 TAC, §115.10.

1. STAGE I - system used to capture vapors from the AST during deliveries. Stage I is required in non-attainment counties and in the 95 covered attainment counties if throughput is greater than 125,000 gallons.
2. STAGE II - system used to capture vapors from vehicle fuel tanks during refueling. Stage II is required only in the 16 non-attainment counties. The counties are: Brazoria, Chambers, Collin, Dallas, Denton, El Paso, Fort Bend, Galveston, Hardin, Harris, Jefferson, Liberty, Montgomery, Orange, Tarrant, and Waller.

If you have any questions concerning the completion of this form or about the information reported on the form, please contact the Petroleum Storage Tank Registration & Self-Certification Team at (512) 239-2160.


Other ways to obtain a copy of the rules, or of TCEQ publications, include the following:
- on the Internet, go to the TCEQ’s Web site at [www.tceq.state.tx.us](http://www.tceq.state.tx.us) and click on the link to “Rules, Policy & Legislation”;
- fax orders to (512) 239-4488, or order by voice at (512) 239-0028, the TCEQ's publications unit; or
- write to TCEQ Publications, MC 195, P.O. Box 13087, Austin, TX 78711-3087.

***MAKE A COPY OF YOUR COMPLETED FORM FOR YOUR RECORDS***