



Registration for Temporary Storage of Sludge Wastes

Sludge Transporter Registration Number: _____

Part A: Responsible Person

First Name: _____	Last Name: _____
Phone Number: _____	Fax Number: _____
Email: _____	

Part B: Physical Location of Temporary Storage (no PO Boxes)

Effective Date: _____

Street Address: _____

(Provide a description of the location if it does not have a street address associated to it)

City: _____, TX Zip: _____ - _____

Part C: Regulatory Requirements

I certify that, per Title 30 Texas Administrative Code (TAC) §312.147:

- I will not store waste longer than 30 days.
- I will not use lagoons or in-ground storage tanks.
- If I store waste in an open vessel, the storage site shall meet the buffer zone requirement in 30 TAC §312.44(d) (relating to Management Practices).
- I will not cause or contribute to the harm of a threatened or endangered species or result in the destruction or adverse modification of the critical habitat of a threatened or endangered species with the storage of waste.
- I will store the waste using a method and under conditions that prevent runoff and protect the quality of the surface water and groundwater.
- I will not locate the storage site within a designated base flood zone (100-year floodplain).
- I will operate the storage site in a manner to prevent public health nuisances. Where nuisance conditions exist, I shall take necessary action to abate such nuisances.

I will comply with the recordkeeping requirements of 30 TAC §312.147(c), which include keeping records of the following for five years:

- Date
- Volume
- Type of waste deposited into and removed
- Facility where waste removed was deposited

I also certify that, per 30 TAC §312.144(c), I will not mix incompatible wastes within the same container.

Part D: Certification

I certify under penalty of law that all information submitted is, to the best of my knowledge and belief, true, accurate and complete. I attest that I will conduct this Temporary Storage site by following the rules stated above. I am aware that there are significant penalties for falsification of information, including the possibility of fines, imprisonment for violations, and revocation of this registration.

Name: _____

Signature: _____

Mail completed form to:
 Texas Commission on Environmental Quality
 Registration and Reporting Section MC-129
 PO Box 13087
 Austin, TX 78711-3087

Please use the following address for any submissions sent via
 overnight services:
 Texas Commission on Environmental Quality
 Registration and Reporting Section MC-129
 12100 Park 35 Circle Bldg D
 Austin, TX 78753

Submit forms via fax to (512) 239-6410.

For any questions about filling out this form or for information about the Sludge Transporter Registration Program, please contact us at (512) 239-6413 or wasteval@tceq.texas.gov.

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