



# TCEQ Notice of Termination (NOT) for Concentrated Animal Feeding Operation Authorizations under the General Permit TXG920000

**ePERMITS: Sign up now for online NOT:** <https://www3.tceq.texas.gov/steers/>

**What is the permit number to be terminated?** Processing will be delayed without the permit number.

TXG92\_\_\_\_\_

## 1) OWNER (PERMITTEE)

Each Owner of the CAFO is required to complete this section to terminate coverage.

**a)** What is the Customer Number (CN) issued to this entity? You may search for your CN at: <http://www.tceq.texas.gov/goto/cr-customer>

CN\_\_\_\_\_

**b)** What is the Legal Name of the current permittee?

\_\_\_\_\_  
(This must be the current permittee of the permit to be terminated.)

**c)** What is the contact information for the Owner (Responsible Authority)? The mailing address must be recognized by the US Postal Service. You may verify the address at: <https://tools.usps.com/go/ZipLookupAction!input.action>

Prefix (Mr. Ms. Miss): \_\_\_\_\_

First/Last Name: \_\_\_\_\_ Suffix: \_\_\_\_\_

Title: \_\_\_\_\_ Credential: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Ext: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-mail: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Internal Routing (Mail Code, Etc.): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

If outside USA:

Territory: \_\_\_\_\_ Country Code: \_\_\_\_\_ Postal Code: \_\_\_\_\_

## 2) PERMITTEE

Complete this section if there is more than one permittee. Each permittee of the CAFO is required to complete this section to terminate coverage.

Is this permittee an Owner or Operator?                      OWNER                      OPERATOR

a) What is the Customer Number (CN) issued to this entity? You may search for your CN at: <http://www.tceq.texas.gov/goto/cr-customer>

CN \_\_\_\_\_

b) What is the Legal Name of the current permittee?

\_\_\_\_\_  
(This must be the current permittee of the permit to be terminated.)

c) What is the contact information for the Owner/Operator (Responsible Authority)? The mailing address must be recognized by the US Postal Service. You may verify the address at: <https://tools.usps.com/go/ZipLookupAction!input.action>

Prefix (Mr. Ms. Miss): \_\_\_\_\_

First/Last Name: \_\_\_\_\_ Suffix: \_\_\_\_\_

Title: \_\_\_\_\_ Credential: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Ext: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-mail: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Internal Routing (Mail Code, Etc.): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

If outside USA:

Territory: \_\_\_\_\_ Country Code: \_\_\_\_\_ Postal Code: \_\_\_\_\_

## 3) APPLICATION CONTACT

If TCEQ needs additional information regarding this application, who should be contacted?

Is the application contact the same as the permittee identified above?

Yes, specify which permittee on the line below and go to Section 4).

\_\_\_\_\_  
No, complete section below

Prefix (Mr. Ms. Miss): \_\_\_\_\_

First/Last Name: \_\_\_\_\_ Suffix: \_\_\_\_\_

Title: \_\_\_\_\_ Credential: \_\_\_\_\_

Organization Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Ext: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Internal Routing (Mail Code, Etc.): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Mailing Information if outside USA:

Territory: \_\_\_\_\_ Country Code: \_\_\_\_\_ Postal Code: \_\_\_\_\_

**4) REGULATED ENTITY (RE) INFORMATION ON PROJECT OR SITE**

a) TCEQ issued RE Reference Number (RN): RN \_\_\_\_\_

b) Name of project or site (the name known by the community where located):  
\_\_\_\_\_

c) County (or counties if > 1)

d) Does the site have a physical address?  
Yes, complete Section A for a physical address.

No, complete Section B for site location information.

**Section A: Enter the physical address for the site.**

Verify the address with USPS. If the address is not recognized as a delivery address, provide the address as identified for overnight mail delivery, 911 emergency or other online map tools to confirm an address.

Physical Address of Project or Site:  
Street Number: \_\_\_\_\_ Street Name: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

**Section B: Enter the site location information.**

If no physical address (Street Number & Street Name), provide a written location access description to the site. (Example: located 2 miles west from intersection of Hwy 290 & IH35 accessible on Hwy 290 South)

City where the site is located or, if not in a city, what is the nearest city:  
\_\_\_\_\_  
State: \_\_\_\_\_ ZIP Code where the site is located: \_\_\_\_\_

## 5) REASON FOR TERMINATION

Check the reason for termination:

There has been a change in permittee or co-permittee.

What is the name of the new permittee(s) submitting the new NOI?

What is the proposed date of the transaction or date of transfer?

Date: \_\_\_\_\_

Yes I understand that this permit will not be terminated until the new NOI is submitted and approved.

The facility is now authorized under an individual permit.

When was the individual permit application submitted?

Date: \_\_\_\_\_

Yes I understand that this permit will not be terminated until the new individual permit is approved.

The facility is no longer in use and has been closed in accordance with Part III (D) (3) of the general permit.

When was the certification by a Texas Professional Engineer certifying closure has been completed and submitted?

Date: \_\_\_\_\_

Yes I understand that this permit will not be terminated until the certification by a Texas Professional Engineer certifying closure has been completed and has been received.

Activity authorized by the permit never began. (Construction of the facility never began.)

Yes I certify that the activity authorized by the permit never began.

The facility will be operated as an AFO that is not defined or designed as a CAFO.

Yes I certify that the facility is now or will be operated as an AFO not defined or designed by the Executive Director as a CAFO.



# Notice of Termination (NOT) for Authorizations under CAFO General Permit (TXG920000)

## General Information and Instructions

### GENERAL INFORMATION

#### Where to Send the Notice of Termination (NOT):

##### BY REGULAR U.S. MAIL:

Texas Commission on Environmental Quality  
Applications Review and Processing Team  
(MC-148)  
P.O. Box 13087  
Austin, Texas 78711-3087

##### BY OVERNIGHT/EXPRESS MAIL:

Texas Commission on Environmental Quality  
Applications Review and Processing Team  
(MC-148)  
12100 Park 35 Circle  
Austin, TX 78753

#### TCEQ Contact List:

|                                              |                              |
|----------------------------------------------|------------------------------|
| Application – status and form questions:     | 512/239-4671                 |
| Technical questions:                         | 512/239-4671                 |
| Environmental Law Division:                  | 512/239-0600                 |
| Records Management - obtain copies of forms: | 512/239-0900                 |
| Reports from databases (as available):       | 512/239-DATA (3282)          |
| Cashier's office:                            | 512/239-0357 or 512/239-0187 |

#### Notice of Termination Process:

A Notice of Termination is **effective on the date postmarked for delivery to TCEQ.**

When your NOT is received by the program, the form will be processed as follows:

**1) Administrative Review:** The form will be reviewed to confirm the following:

- the permit number is provided
- the permit is active
- the entity terminating the permit is the current permittee(s)
- the site information matches the original permit record
- the form has the required original signature with title and date

Additional review based on the reason for termination will also be considered to ensure the facility qualifies for the termination.

**2) Notice of Deficiency:** If an item is incomplete or not verifiable as indicated above, a phone call will be made to the applicant to clear the deficiency.

**3) Confirmation of Termination:** A Notice of Termination Confirmation letter will be mailed to the permittee(s).

#### General Permit Forms

The Notice of Intent (NOI), Notice of Termination forms (NOT), and Notice of Change (NOC) (including instructions) are available in Adobe Acrobat PDF format on the TCEQ web site <http://www.tceq.texas.gov>.

#### Change in Permittee

Authorizations under the general permit are not transferrable. If the permittee or one of the co-permittees changes, the current permittee(s) must submit a Notice of Intent and the previous permittee(s) must submit a Notice of Termination. The forms must be submitted no later than 10 days prior to the change. Please note that a letter will not make a change in permittee(s) effective.

### **Annual Water Quality Fee**

This fee is assessed to permittees with an active authorization under the general permit on September 1 of each year. The designated billing contact will receive an invoice for payment of the annual fee in November of each year. The payment will be due 30 days from the invoice date. A 5% penalty will be assessed if the payment is received by TCEQ after the due date. Annual fee assessments cannot be waived as long as the authorization under the general permit is active on September 1.

It is important for the operator to submit a **Notice of Termination** (NOT) when coverage under the general permit is no longer required. A NOT is effective on the postmarked date of mailing the form to TCEQ. It is recommended that the NOT be mailed using a method that documents the date mailed and received by TCEQ.

## **INSTRUCTIONS FOR FILLING OUT THE NOT FORM**

### **1. and 2. PERMITTEE**

#### **a) Enter assigned Customer Number (CN)**

TCEQ's Central Registry assigns each customer a number that begins with CN, followed by nine digits. **This is not a permit number, registration number, or license number.**

#### **b) Legal Name of Permittee**

The operator must be the same entity as previously submitted on the original Notice of Intent for the permit number provided.

#### **c) Contact Information for the Operator/Owner (Responsible Authority)**

Provide information for person signing the NOT application in the Certification section. This person is also referred to as the Responsible Authority.

Provide a complete mailing address for receiving mail from the TCEQ. Update the address if different than previously submitted for the Notice of Intent or Notice of Change.

The area code and phone number should provide contact to the operator/owner. Leave Extension blank if not applicable.

The fax number and e-mail address are optional and should correspond to the operator/owner.

### **3. APPLICATION CONTACT**

Provide the name, title and contact information of the person that TCEQ can contact for additional information regarding this application.

### **4. REGULATED ENTITY (RE) INFORMATION ON PROJECT OR SITE**

#### **a) Regulated Entity Reference Number (RN)**

A number issued by TCEQ's Central Registry to sites (a location where a regulated activity occurs) regulated by TCEQ. This is not a permit number, registration number, or license number. If this regulated entity has not been assigned an RN, leave this space blank.

#### **b) Site/Project Name/Regulated Entity**

Provide the name of the site as known by the public in the area where the site is located. The name you provide on this application will be used in the TCEQ Central Registry as the Regulated Entity name.

**c) County**

Identify the county or counties in which the regulated entity is located.

**d) Site/Project (RE) Physical Address/Location Information**

Enter the complete address for the site in Section A if the address can be validated through the US Postal Service. If the physical address is not recognized as a USPS delivery address, you may need to validate the address with your local police (911 service) or through an online map site used to locate a site. Please confirm this to be a complete and valid address. Please do not use a rural route or post office box for a site location.

If a site does not have an address that includes a street (or house) number and street name, enter NO ADDRESS for the street name in Section A. In Section B provide a complete written location description. For example: "The site is located 2 miles west from intersection of Hwy 290 & IH35, located on the southwest corner of the Hwy 290 South bound lane."

Provide the city (or nearest city) and ZIP code of the facility location.

**5. REASON FOR TERMINATION**

Select the reason for the termination. The termination application will be reviewed for completeness and final action of approval or denied will be determined after this review.

- For a change in permittee, the new permittee(s) must submit a Notice of Intent which must be approved before this termination request can be approved.
- For a facility that is now authorized under an individual permit, the permit must be approved before the termination request can be approved. Provide the date the individual permit application was submitted to TCEQ. Certify that it is understood the permit remains in effect until the new permittee(s) are authorized to prevent a laps in coverage.
- For a facility that has been closed in accordance with Part III D (3), the closure plan must be approved before the termination can be approved. Provide the date the closure plan was submitted to TCEQ. Certify that it is understood the permit remains in effect until the closure plan is approved, to prevent a laps in coverage.
- If the reason for termination is the activity authorized by the permit never began (construction of the facility never began). This will be confirmed with the TCEQ Regional office before the termination will be approved. If the CAFO activity authorized by the permit never began the answer must be yes.
- If the reason for termination is that the facility is now operated as an AFO not defined or designated as a CAFO, the permit will be terminated. Certification that the CAFO is now operated as an AFO not defined or designated as a CAFO is required.

**6. CERTIFICATIONS**

The certification must bear an original signature of a person meeting the signatory requirements specified under 30 Texas Administrative Code (TAC) §305.44.

**IF YOU ARE A CORPORATION:**

The regulation that controls who may sign an NOI or similar form is 30 Texas Administrative Code §305.44(a)(see below). According to this code provision, any corporate representative

may sign an NOI or similar form so long as the authority to sign such a document has been delegated to that person in accordance with corporate procedures. By signing the NOI or similar form, you are certifying that such authority has been delegated to you. The TCEQ may request documentation evidencing such authority.

**IF YOU ARE A MUNICIPALITY OR OTHER GOVERNMENT ENTITY:**

The regulation that controls who may sign an NOI or similar form is 30 Texas Administrative Code §305.44(a) (see below). According to this code provision, only a ranking elected official or principal executive officer may sign an NOI or similar form. Persons such as the City Mayor or County Commissioner will be considered ranking elected officials. In order to identify the principal executive officer of your government entity, it may be beneficial to consult your city charter, county or city ordinances, or the Texas statute(s) under which your government entity was formed. An NOI or similar document that is signed by a government official who is not a ranking elected official or principal executive officer does not conform to §305.44(a) (3). The signatory requirement may not be delegated to a government representative other than those identified in the regulation. By signing the NOI or similar form, you are certifying that you are either a ranking elected official or principal executive officer as required by the administrative code. Documentation demonstrating your position as a ranking elected official or principal executive officer may be requested by the TCEQ.

If you have any questions or need additional information concerning the signatory requirements discussed above, please contact the Texas Commission on Environmental Quality's Environmental Law Division at 512/239-0600.

**30 Texas Administrative Code**

**§305.44. Signatories to Applications**

(a) All applications shall be signed as follows.

(1) For a corporation, the application shall be signed by a responsible corporate officer. For purposes of this paragraph, a responsible corporate officer means a president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy or decision-making functions for the corporation; or the manager of one or more manufacturing, production, or operating facilities employing more than 250 persons or having gross annual sales or expenditures exceeding \$25 million (in second-quarter 1980 dollars), if authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures. Corporate procedures governing authority to sign permit or post-closure order applications may provide for assignment or delegation to applicable corporate positions rather than to specific individuals.

(2) For a partnership or sole proprietorship, the application shall be signed by a general partner or the proprietor, respectively.

(3) For a municipality, state, federal, or other public agency, the application shall be signed by either a principal executive officer or a ranking elected official. For purposes of this paragraph, a principal executive officer of a federal agency includes the chief executive officer of the agency, or a senior executive officer having responsibility for the overall operations of a principal geographic unit of the agency (e.g., regional administrator of the EPA).