



# Application for a Certificate of Registration of a Livestock Trailer Cleaning Facility

This application is for a certificate of registration to authorize the removal, containment, treatment and disposal of wastes on agricultural land occurring at a livestock trailer cleaning facility, Title 30 TAC Chapter 321, Subchapter N, with no discharge allowed into water in the state.

### TCEQ Office Use Only

Permit No.: EN

RN: \_\_\_\_\_

CN: \_\_\_\_\_



**Did you know you can pay on line? Go to <https://www6.tceq.texas.gov/epay/>**

**Select Fee Type:** Permit By Rule (Ch 321 Subchapter N) Livestock Trailer Cleaning Authorization Application

**Application Fee:** You must pay the \$100 Application Fee to TCEQ for the application to be considered complete.  
How did you pay this fee?

Mailed:	Check/Money Order No.:	Name Printed on Check:
EPAY:	Voucher No.:	Is the Payment Voucher copy attached? <span style="float: right;">Yes</span>

Is the activity represented by this application currently authorized by a TCEQ individual wastewater permit?  
Yes If Yes, what is the permit number issued by TCEQ? Permit No.: \_\_\_\_\_  
No If No, a new registration number will be issued.

### A. APPLICANT

What is the role of the applicant? Owner Operator Owner & Operator

If the applicant is currently a customer with TCEQ, what is the Customer Number (CN) issued to this entity?

**CN** \_\_\_\_\_

Search for your CN at: <http://www12.tceq.texas.gov/crpub/index.cfm?fuseaction=cust.CustSearch>

What is the Legal Name of the entity (applicant) applying for this permit?

*(The legal name must be spelled exactly as filed with the Texas Secretary of State, County, or in the legal document forming the entity.)*

What is the name and title of the person signing the application?

*(The person must be an executive official meeting signatory requirements in TAC 305.43(a).)*

Prefix: \_\_\_\_\_ First/Last Name: \_\_\_\_\_ Suffix: \_\_\_\_\_  
(Mr. Ms, Miss)

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

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

What is the applicant's mailing address as recognized by the **US Postal Service**?

You may verify the address at: <http://zip4.usps.com/zip4/welcome.jsp>

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

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

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

Mailing Information if outside USA

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

Phone No.: \_\_\_\_\_ Extension: \_\_\_\_\_

Fax No.: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

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

1. Is the facility a commercial livestock trailer cleaning facility? Yes No

If the site of your business is part of a larger business site, a Regulated Entity Number (RN) may already be assigned for the larger site. Use the RN assigned for the larger site. Search TCEQ's Central Registry to see if the larger site may already be registered as a regulated site at: <http://www12.tceq.texas.gov/crpub/index.cfm?fuseaction=regent.RNSearch>

If the site is found, provide the assigned Regulated Entity Reference Number and provide the information for the site to be authorized through this application below. The site information for this authorization may vary from the larger site information.

TCEQ issued RE Reference Number (RN): **RN**

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

Does the site have a physical address? If <b>Yes</b> , complete Section A for a physical address. If <b>No</b> , complete Section B for site location information.			
<b>Section A:</b> 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:
County (or counties is > 1)			
<b>Section B:</b> Enter the site location information.			
If no physical address (Street Number & Street Name), provide a written location access description to the site: (Ex.: 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:			
ZIP Code where the site is located:			
Latitude:		Longitude:	
<b>C. FACILITY CONTACT:</b>			
Provide the name, complete mailing addresses and telephone number of a person familiar with facility operations to contact for additional information:			
Contact Name:			
Mailing Address:			
City:	State:		ZIP Code:
Phone No.:		Extension:	
Fax No.:		E-mail Address:	
<b>D. BILLING CONTACT:</b>			
Provide the name, complete mailing addresses and telephone number of the person to receive the billing invoice and for remission of annual fees.			
Contact Name:			
Mailing Address:			
City:	State:		ZIP Code:
Phone No.:		Extension:	
Fax No.:		E-mail Address:	
<b>E. GENERAL CHARACTERISTICS</b>			
1.	I certify that the project/site is <b>not</b> located on Indian Country Lands? If No, you must obtain authorization through EPA, Region VI.		Yes      No
2. The Standard Industrial Classification (SIC) code is (select or provide one):			
3. What is the primary business of this entity? In your own words, briefly describe the primary business of the Regulated Entity: <i>(Do not repeat the SIC and NAICS code)</i>			
4.	Is the facility a component of a feedlot or concentrated animal feeding operation that is regulated under the requirements of 30 TAC Chapter 321 or 305?      Yes      No <i>If yes, the facility may not require separate authorization under this subchapter.</i>		
5. If this is an existing facility, what date did the facility begin operation? _____			
6. Answer each of the following with respect to playa lakes and ponds.			
a.	Does the facility utilize evaporation ponds, storage ponds, or other ponds with land application as a means of treatment and disposal?      Yes      No		
b.	Is wastewater discharged to a playa lake?      Yes      No		
c.	Is your facility designed so that all solids and liquids removed from the trailers will be directed to a concrete area which is adequately curbed and sloped to allow for containment of all solids and liquids?      Yes      No		



7. Answer each of the following with respect to wastewater disposal and solids disposal practices.		
Is evaporation the only method of wastewater disposal?      Yes      No		
If "no," then provide specific information related to irrigation practices, including application method and rates, types of crops irrigated and the total acreage available for wastewater disposal, including buffer zones required under this rule ( <i>attach additional pages as necessary</i> ):		
Describe solid waste disposal practices:		
Please indicate whether you <u>own</u> , or <u>lease</u> the land used for disposal of liquids and/or solids.		
<b>F. CITY &amp; COUNTY CONTACT INFORMATION:</b>		
1. Is the site located within a city's corporate boundary?      Yes      No		
If "yes," provide the name of the city, the complete the name of the mayor and a complete mailing address for the city hall.		
City Name:		
Name of City Mayor:		
Mailing Address:		
City:	State:	ZIP Code:
2. Provide the complete name of the county judge and a complete mailing address for the county courthouse, of the county in which the facility is located.		
Name of County Judge:		
Mailing Address:		
City:	State:	ZIP Code:



**CERTIFICATION OF REQUIRED CORRESPONDENCE**

I, \_\_\_\_\_, certify:  
*Typed or Printed Name and Title*

a copy of this notice was sent via certified mail (return receipt requested) to:

Name of To the Honorable \_\_\_\_\_ County Judge of \_\_\_\_\_  
*(Insert County Judge Name) (Insert Name of County)*

*And if applicable*

To the Honorable \_\_\_\_\_, Mayor of \_\_\_\_\_  
*(Insert Name of City Mayor) (Insert Name of City)*

in whose county jurisdiction and corporate boundaries the activities will be conducted.

that **this is the original notice** and that proof of delivery is demonstrated by the submission of the attached photocopy of the return receipt acknowledgment from the U.S. Postal Service.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
*(Use blue ink)*

**Attach Return Receipt Acknowledgement Here**

## Customer Checklist

EN000000

This checklist is for use by the applicant to ensure a complete application. Missing information may result in denial of coverage under the permit by rule.

**An original and two legible copies of the application and attachments are included.**

Application Fee was sent to TCEQ's Cashiers's Office and the check information is listed, or the EPAY payment voucher is attached.

APPLICANT INFORMATION - Confirm each item is complete:

Type of Applicant (Entity Type)

Customer Number (CN) issued by TCEQ Central Registry

Legal Name as filed to do business in Texas (Call TX SOS 512/463-5555)

Applicant Mailing Address is complete & verifiable with USPS. [www.usps.com](http://www.usps.com)

Phone Numbers/E-mail Address

Independent Operator

Number of Employees

For Corporations or Limited Partnerships – Tax ID and SOS Filing numbers

REGULATED ENTITY (RE) INFORMATION ON PROJECT OR SITE - Confirm each item is complete:

Regulated Entity Reference Number (RN) (if site is already regulated by TCEQ)

Site/Project Name/Regulated Entity

Site/Project (RE) Physical Address Please do not use a rural route or post office box for a site location

Latitude and Longitude [www.tceq.texas.gov/gis/drghelp.html#Latlong](http://www.tceq.texas.gov/gis/drghelp.html#Latlong) or [www.teraserver.microsoft.com/advfind.aspx](http://www.teraserver.microsoft.com/advfind.aspx).

Business description

Site Mailing Address (checked same as Applicant & verifiable with USPS. [www.usps.com](http://www.usps.com))

FACILITY CONTACT - information is complete and address is verifiable with USPS. [www.usps.com](http://www.usps.com)

BILLING CONTACT - information is complete and address is verifiable with USPS. [www.usps.com](http://www.usps.com)

GENERAL CHARACTERISTICS - Confirm each item is complete:

Indian Country Lands –the facility is not on Indian Country Lands

Standard Industrial Classification (SIC) code [www.osha.gov/oshstats/sicser.html](http://www.osha.gov/oshstats/sicser.html)

Description of Primary Business

Facility a component of a CAFO or Feedlot?

If existing facility, provided date began operation?

Playa Lake & Pond Information

Wastewater and solids disposal practices

CITY AND COUNTY CONTACT - information is complete and address is verifiable with USPS. [www.usps.com](http://www.usps.com)

CERTIFICATION AND SIGNATURE

Publishers Affidavit

Sworn Statement that notice was mailed

USGS Topographic Map

Site Diagram

CERTIFICATION

Certification statements have been checked indicating "Yes"

SIGNATURE PAGE

Signature meets 30 Texas Administrative Code (TAC) §305.44 and is original.

**Application for a Certificate of Registration of a  
Livestock Trailer Cleaning Facility (EN000000)  
General Information and Instructions**

**GENERAL INFORMATION**

Where to Send the Application:

BY REGULAR U.S. MAIL  
Texas Commission on Environmental Quality  
Applications Review & Processing Team (MC148)  
P.O. Box 13087  
Austin, Texas 78711-3087

BY OVERNIGHT/EXPRESS MAIL  
Texas Commission on Environmental Quality  
Applications Review & Processing Team (MC148)  
12100 Park 35 Circle  
Austin, TX 78753

TCEQ Contact list:

Application Processing Questions relating to the status and form requirements:	512/239-4671
Technical Questions relating to the general permit:	512/239-4671
Environmental Law Division:	512/239-0600
Records Management for obtaining copies of forms submitted to TCEQ:	512/239-0900
Information Services for obtaining reports from program data bases (as available):	512/239-DATA (3282)
Financial Administration's Cashier's office:	512/239-0357 or 512/239-0187

Application Process:

When your Application is received by the program, the form will be processed as follows:

- Administrative Review:** Each item on the form will be reviewed for a complete response. In addition, the applicant's filing number must be verified with Texas Secretary of State as valid and active (if applicable). The address(s) on the form must be verified with the US Postal service as an address receiving regular mail delivery. Never give an overnight/express mailing address.
- Notice of Deficiency:** If an item is incomplete or not verifiable as indicated above, a notice of deficiency (NOD) will be mailed to the applicant. The applicant will have 30 days to respond to the NOD. The response will be reviewed for completeness.
- Administratively Complete:** Once the application is administratively complete the application will be sent to Industrial Permits Team for review.
- Technical Review:** If the technical review requires additional information, a notice of deficiency (NOD) will be mailed to the applicant. The applicant will have 30 days to respond to the NOD. The response will be reviewed for completeness.
- Acknowledgment of Coverage:** After the comment period, an Acknowledgment Certificate will be mailed to the applicant. This certificate acknowledges coverage under the permit by rule.  
-or-  
**Denial of Coverage:** If the applicant fails to respond to the NOD or the response is inadequate, coverage under the permit by rule may be denied. If coverage is denied, the applicant will be notified.

**TCEQ Central Registry Core Data Form**

The Core Data Form has been incorporated into this form. **DO NOT SEND A CORE DATA FORM TO TCEQ.**

After final acknowledgment of coverage under the permit by rule, the program will assign a Customer Number & Regulated Entity Number. You can find the information on the Central Registry web site at [www4.tceq.texas.gov/crpub](http://www4.tceq.texas.gov/crpub). You can search by the Regulated Entity (RN), Customer Number (CN) or Name (Permittee), or by your permit number under the search field labeled "Additional ID". Capitalize all letters in the permit number.

The Customer (Permittee) is responsible for providing consistent information to the TCEQ, and for updating all CN and RN data for all authorizations as changes occur.

**Fees are associated with this Permit by Rule**

The application refers to two different fees that apply to the Permit by Rule. Payment of the fees may be made by check or money order, payable to TCEQ, or through EPAY (electronic payment) through the web).

**Fees:**

- Application Fee:** This fee is required to be paid at the time the application is submitted. Failure to submit payment at the time the application is filed will cause delays in acknowledgment or denial of coverage under the permit by rule.
- Mailed Payments:**  
Payment must be mailed under separate cover at one of the addresses below using the attached Application Fee submittal form. (DO NOT SEND A COPY OF THE APPLICATION WITH THE APPLICATION FEE SUBMITTAL FORM)

*By regular U.S. mail*  
Texas Commission on Environmental Quality  
Financial Administration Division  
Cashier's Office, MC-214  
P.O. Box 13088  
Austin, TX 78711-3088

*By overnight/express mail*  
Texas Commission on Environmental Quality  
Financial Administration Division  
Cashier's Office, MC-214  
12100 Park 35 Circle  
Austin, TX 78753

- **ePAY Electronic Payment:**

Go to <https://www6.tceq.texas.gov/epay/>

When making the payment you must select Water Quality, and then select the fee category "General Permit Wastewater Discharge Application." You must include a copy of the payment voucher with your application. Your application will not be considered complete without the payment voucher.

**2. Annual Water Quality Fee:** This fee is assessed to applicant with an active authorization under the permit by rule on September 1st of each year. The applicant 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 permit by rule is active on September 1. It's important for the applicant to cancel coverage under the permit by rule, when coverage is no longer required.

- **Mailed Payments:**

You must return your payment with the billing coupon provided with the billing statement.

- **ePAY Electronic Payment:**

Go to <https://www6.tceq.texas.gov/epay/>

You must enter your account number provided at the top portion of your billing statement. Payment methods include MasterCard, Visa, and electronic check payment (ACH). A single transaction over \$500 can only be made by ACH.

## INSTRUCTIONS FOR FILLING OUT THE APPLICATION FORM

### A. APPLICANT

**1. TCEQ Issued Customer Number (CN)**

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

-If this customer has not been assigned a Customer Reference Number, leave the space for the Customer Reference Number blank.

-If this customer has already been assigned this number, enter the applicant's Customer Reference Number in the space provided.

**2. Legal Name**

Provide the legal name of the applicant, as authorized to do business in Texas. The name must be provided exactly as filed with the Texas Secretary of State (SOS), or on other legal documents forming the entity, that is filed in the county where doing business. You may contact the SOS at 512/463-5555, for more information related to filing in Texas.

**3. Mailing Address**

Provide a complete mailing address for receiving mail from the TCEQ. The address must be verifiable with the US Postal Service at [www.usps.com](http://www.usps.com), for regular mail delivery (not overnight express mail). If you find that the address is not verifiable using the USPS web search, please indicate the address is used by the USPS for regular mail delivery.

**4. Phone Number**

This number should correspond to this customer's mailing address given earlier. Enter the area code and phone number here. Leave Extension blank if not applicable.

**5. Fax Number and E-mail Address**

This number and E-mail address should correspond to applicant's mailing address provided earlier. (Optional Information)

**6. Type of Customer**

Check only one box that identifies the type of customer. Use the descriptions below to identify the appropriate entity type:

Individual - is a customer who has not established a business, but conducts an activity that needs to be regulated by the TCEQ.

Sole Proprietorship— D.B.A. - is a customer that is owned by only one person and has not been incorporated. This business may:

- be under the person's name
- have its own name ("doing business as," or d.b.a.)
- have any number of employees

Partnership - is a customer that is established as a partnership as defined by the Texas Secretary of State's Office.

Corporation - the customer meets all of these conditions:

- is a legally incorporated entity under the laws of any state or country
- is recognized as a corporation by the Texas Secretary of State
- has proper operating authority to operate in Texas.

Government – (Federal, state, county, or city government as appropriate)

- is either an agency of one of these levels of government or the governmental body itself.

**7. Independent Operator**

Check "No" if this customer is a subsidiary, part of a larger company, or is a governmental entity. Otherwise, check "Yes."

<p><b>8. Number of Employees</b> Check one box to show the number of employees for this customer's entire company, at all locations. This is not necessarily the number of employees at the site named in the application.</p>
<p><b>9. State Franchise Tax ID Number</b> Corporations and limited liability companies that operate in Texas are issued a franchise tax identification number. If this customer is a corporation or limited liability company, enter this number here.</p>
<p><b>Federal Tax ID</b> All businesses, except for some small sole proprietors, individuals, or general partnerships should have a federal taxpayer identification number (TIN). Enter this number here. Use no prefixes, dashes, or hyphens. Sole proprietors, individuals, or general partnerships do not need to provide a federal tax ID.</p>
<p><b>Texas SOS Charter (filing) Number</b> Corporations and Limited Partnerships required to register with the Texas Secretary of State are issued a charter or filing number. You may obtain further information by calling SOS at 512/463-5555.</p>
<p><b>DUNS Number</b> Most businesses have a DUNS (Data Universal Numbering System) number issued by Dun and Bradstreet Corp. If this customer has one, enter it here.</p>
<p><b>B. REGULATED ENTITY (RE) INFORMATION ON PROJECT OR SITE</b></p>
<p><b>1. Is the facility a Livestock Trailer Cleaning Operation</b></p>
<p><b>2. Regulated Entity Reference Number (RN)</b></p> <p>This is 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.</p> <p>-If this Regulated Entity has not been assigned a Regulated Entity Number, leave this space blank. -If this customer has been assigned this number, enter the applicant's Regulated Entity Number.</p>
<p><b>3. Site/Project Name/Regulated Entity</b></p> <p>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. A regulated entity number will be assigned by Central Registry, if this is a new site (not currently regulated by TCEQ).</p>
<p><b>4/5. Site/Project (RE) Physical Address</b></p> <p>Enter the complete address of where the site is located. This address must be validated through US Postal Service or your local police (911 service) as a valid address. Please confirm this to be a complete and valid address. In some rural areas, new addresses are being assigned to replace rural route addresses. Please do not use a rural route or post office box for a site location.</p> <p>If a site does not have an actual physical address that includes a street (or house) number and street name, enter NO ADDRESS for the street name. Then provide a complete written location access description. For example: "The site is located 2 miles west from intersection of Hwy 290 &amp; IH35, located on the southwest corner of the Hwy 290 South bound lane."</p> <p>Provide the city and ZIP code of the area where the facility is located. This information is required to complete the processing of your form.</p>
<p><b>6. Latitude and Longitude</b></p> <p>Enter the latitude and longitude of the site in either degrees, minutes, and seconds or decimal form. For help obtaining the latitude and longitude, go to: <a href="http://www.tceq.texas.gov/gis/drghelp.html#Latlong">www.tceq.texas.gov/gis/drghelp.html#Latlong</a> or <a href="http://www.terraserver.microsoft.com/advfind.aspx">www.terraserver.microsoft.com/advfind.aspx</a>.</p>
<p><b>7. Site Mailing Address</b></p> <p>Provide a complete mailing address to be used by TCEQ for receiving mail at the site. In most cases, the address is the same as the applicant. If so, simply place a check mark in the box. If you provide a different address, please verify the address with USPS as instructed above for the applicant address.</p>
<p><b>C. FACILITY CONTACT</b></p> <p>Provide the name, title and communication information of the person that TCEQ can contact for additional information regarding this application.</p>

**D. BILLING CONTACT**

An annual fee is assessed to each applicant holding an active authorization under the general permit on September 1 of each year. Provide the complete mailing address where the annual fee invoice should be mailed. Verify the address with the USPS. It must be an address for delivery of regular mail, not overnight express mail. Also, provide a phone number of the applicant's representative responsible for payment of the invoice.

**Country Mailing Information**

If this address is outside the United States, enter the territory name, country code, and any non-ZIP mailing codes or other non-U.S. Postal Service features here. If this address is inside the United States, leave these spaces blank.

**E. GENERAL CHARACTERISTICS**

## 1. Indian Country Lands

If your site is located on Indian Country Lands, the TCEQ does not have authority to process your application. You must obtain authorization through EPA, Region VI, Dallas. Do not submit this form to TCEQ.

## 2. Standard Industrial Classification (SIC) code

Provide the SIC code that best describes the activity at the site. You may determine the SIC code from the following web site: [www.osha.gov/oshstats/sicser.html](http://www.osha.gov/oshstats/sicser.html).

## 3. Description of Activity Regulated

In your own words, briefly describe the primary business being conducted at the site. (A description specific to what you are doing that requires this authorization - Do not repeat the SIC Code(s).)

## 4. Is the facility a component of a feedlot or CAFO that is regulated under the requirements of 30 TAC Chapter 321 or 305?

Check "Yes" if the facility is a component of a feedlot or concentrated animal feeding operation (CAFO) that is regulated under the requirements of 30 TAC 321 or 305. If the facility is not currently regulated by either of these rules check "No".

If the facility already has coverage for the disposal of its wastewater under a CAFO individual permit or 30 TAC Chapter 321 Subpart B, Concentrated Animal Feeding Operations, the facility may not require separate authorization under this subchapter.

## 5. If this is an existing facility, provide the date the facility began operation.

## 6. Answer each of the following with respect to playa lakes and ponds.

a. Check "Yes" if a pond and/or lagoon is used at any point in the wastewater treatment or storage process at the facility. If there are no ponds or lagoons used to manage wastewater at the facility then check "No".

b. Check "Yes" if wastewater is discharged to a playa lake, otherwise check "No". A playa lake is defined as a shallow (generally less than 1 meter deep), isolated naturally ephemeral circular lake located in an enclosed basin in the High Plains and West Central Plains areas of the state.

c. Check "Yes" if the facility has been designed (curbed and sloped) so that solids and liquids from the trailer cleaning operation will remain in the concrete containment area and not discharge to waters in the state, otherwise, check "No".

d. Provide a description of how all containment structures have been designed and constructed to protect from inundation by a 10-year, 24-hour rainfall event. Provide storage and design calculations used when constructing the ponds and/or information about any structures including but not limited to berms, dikes, curbs, run-off structures, and ditches which are used at the facility for this purpose. The 10-year, 24-hour rainfall event for your area may be obtained from Hershfield, *Rainfall Frequency Atlas of the United States*, U.S. Weather Bureau, Technical Paper No. 40, 1961, or the latest revision thereof.

e. Provide the pond number used to identify the pond at the facility, the dimensions in feet (length, width, and depth) of each individual pond, and the surface area of each individual pond in acres.

Provide the total surface area of all ponds combined in acres.

Check "Yes" if a gauge has been installed on each pond to ensure a minimum freeboard of 2 feet is maintained in each pond, otherwise, check "No". Freeboard is defined as the distance between the waterline and the top of the pond wall or berm.

f. Indicate whether the ponds at the facility were in existence prior to July 26, 1996.

For ponds that were in existence on or after July 26, 1996 please complete Item 1 and indicate what pond lining method the facility is proposing for its ponds to ensure protection of ground water. \*

For ponds that were in existence prior to July 26, 1996 please complete Item 2 and indicate what pond lining method the facility is proposing for its ponds to ensure protection of ground water. \*

If an alternate pond-lining method is being proposed by your facility please complete Item 3. Provide a detailed description of the lining method proposed. \*

\* A Texas licensed professional engineer must provide certification that the ponds meet one of the required lining methods. This certification must be sent to the TCEQ's Wastewater Permitting Section (MC-148) and the appropriate TCEQ regional office prior to utilization of the facilities.

**7. Answer each of the following with respect to wastewater disposal and solids disposal practices.**

Please check "Yes" if evaporation is the only method for disposing of the wastewater produced at the facility, otherwise, check "No".

If irrigation is used as a method of disposal check "No". For facilities which use irrigation as a method of disposal the following information is required:

Application method (ie. center pivot, spray, etc.), application rate (in acre-feet\*/acre/year), type of crop irrigated (ie. bermuda grass, alfalfa grass, wheat, etc.), and the total area available for irrigation (in acres).

\* 1 acre-foot equals 325,851 gallons.

Provide information regarding compliance with applicable buffer zone requirements for public and private drinking water wells found in 30 TAC 290.41 (relating to Water Sources) and 16 TAC 76.1000 (relating to Technical Requirements--Location and Standards of Completion for Wells).

Provide a detailed description of the solid waste disposal process at the facility. This information should include, but is not limited to the TCEQ registration number of the solid waste hauler the facility uses for off-site disposal of solid waste and/or provide a location description where the facility disposes of solid waste if it is land applied. The disposal of solid waste must be in accordance with 30 TAC 335.

**F. City & County Information**

1. Identify if the site is located within a city's corporate boundary. If so, you must provide the name and mailing address for the City Mayor.

2. Identify the county the site is located in and provide the name and mailing address for the County Judge.

**G. Signature page with Certification**

The application **must** be completed in its entirety, signed in blue ink, and submitted within 14 days following receipt of the later proof of newspaper publication or delivery of notice to the county judge and/or mayor. Submission of an incomplete application will result in its return. The format for the notice is included below. Required proof of notice is to be submitted with the application and include:

A signed affidavit from the publisher acknowledging that the notice was published, indicating the date of publication, and providing a copy of the newspaper clipping; and

A sworn statement, with an original signature, from the applicant that written notice was mailed to the appropriate entities, identified in items F.1 and F.2 of the application, along with a copy(s) of the return receipt acknowledgment from the U.S. Postal Service.

Submit a USGS Topographic or State Highway Map with the location of your facility clearly marked.

Include a site diagram with the application. The diagram should be oriented to the north direction and include all activities associated with the trailer washout facility identified on the diagram. If disposal of liquids and/or solids occur at another location, locate the site(s) on the required USGS Topographic or State Highway map.

**TCEQ APPROVED FORMAT FOR NEWSPAPER PUBLICATION**

NOTICE OF APPLICATION FOR A CERTIFICATE OF REGISTRATION  
PURSUANT TO TITLE 30 TEXAS ADMINISTRATIVE CODE (TAC), CHAPTER 321

**(Insert Applicant's Name)** whose mailing address is **(Insert Applicant's Mailing Address)** has applied to the Texas Commission on Environmental Quality (TCEQ) for authorization to manage waste and wastewater in accordance with Title 30, Texas Administrative Code (TAC) §§ 321.251-321.259 requirements for a livestock trailer cleaning facility. There shall be no discharge from the facility into waters of the state. These materials shall be retained and/or disposed of on agricultural land.

The site is located at **(Insert a Street Address & City or Provide Detailed Physical Location Description)**

Additional information concerning this application may be obtained from the applicant by contacting **(Insert Name of Contact Person)** at **(Insert Area Code & Telephone Number)**.

A public hearing will not be conducted on this application, however, any pertinent comments received by the executive director within 30 days of this publication will be considered as part of any decision to approve, deny, or modify a request for registration from the applicant.

Written public comments must be submitted to the Texas Commission on Environmental Quality, Attn: Tres Koenings, Wastewater Permitting Section (MC-148), P.O. Box 13087, Austin, Texas 78711-3087. Please include the name of the registrant and site location in any correspondence to the TCEQ. For information concerning technical requirements of the TCEQ applicable to this activity, please refer to the Texas Register dated July 16, 1996 or to Title 30 Texas Administrative Code, Chapter 321, Subchapter N.

**Texas Commission on Environmental Quality  
General Permit Payment Submittal Form**

Use this form to submit your Application Fee only if you are mailing your payment.

- Complete items 1 through 5 below:
- Staple your check in the space provided at the bottom of this document.
- Do not mail this form with your application form.
- Do not mail this form to the same address as your application.

**Mail this form and your check to:**

BY REGULAR U.S. MAIL

Texas Commission on Environmental Quality  
Financial Administration Division  
Cashier's Office, MC-214  
P.O. Box 13088  
Austin, TX 78711-3088

BY OVERNIGHT/EXPRESS MAIL

Texas Commission on Environmental Quality  
Financial Administration Division  
Cashier's Office, MC-214  
12100 Park 35 Circle  
Austin, TX 78753

Fee Code: **GPA**

Permit by Rule: EN000000

1. Check / Money Order No:

2. Amount of Check/Money Order:

3. Date of Check or Money Order:

4. Name on Check or Money Order:

**5. APPLICATION INFORMATION**

If the check is for more than one application, list each Project/Site (RE) Name and Physical Address exactly as provided on the application. DO NOT SUBMIT A COPY OF THE APPLICATION WITH THIS FORM AS IT COULD CAUSE DUPLICATE PERMIT ENTRIES.

See Attached List of Sites (If more space is needed, you may attach a list.)

Project/Site (RE) Name:

Project/Site (RE) Physical Address:

**Staple Check In This Space**