

# Respondent Compliance Supplemental Environmental Project ("SEP") Application

Phone (512) 239-2223

Fax (512) 239-3434

sepreports@tceq.texas.gov

PO Box 13087

SEP Coordinator, MC 175 Austin, Texas 78711-3087

Respond	ent Infor	mation
Respond		

Date

TCEQ Docket No.

Name of Respondent (Legal Name of Applicant or Organization)

Name of Facility

Street Address

City

Zip Code

County

Telephone

Email

Enforcement Coordinator or TCEQ Attorney

Telephone

# Nature Of Violation/Problem

**Nature of the Enforcement Action** (provide a summary of the enforcement action being taken against the facility so that TCEQ can evaluate the appropriateness of the SEP in relation to the violation.)

Penalty Amount \$

SEP Amount (expected cost of SEP) \$

# **Description of the Proposed SEP**

# SEP Name

**Description of the proposed SEP and How the SEP will be implemented** (Include photographs and maps, if needed; describe the need for the SEP and provide details on how the SEP will be implemented.)

#### Status of proposed SEP

□ Proposed □ In Progress □ Completed

If the proposed SEP is in progress or completed, please provide the following information.

Start Date

# **Completion Date**

Media, if known
air air water waste
Specific location of SEP (physical address)

**Ownership** (Please state who owns the property where the SEP will be conducted.)

**Does the proposed SEP relate in any way to the violation?** (Causal relationship between violation and the restoration.)

Will the SEP use contract labor? (Please specify.)

🗌 Yes 🗌 No

Will the respondent be willing to complete all portions of the SEP, regardless of whether the SEP costs more than anticipated?

🗌 Yes 🗌 No

#### **Expected Environmental Benefit**

**Explain in as much detail as possible the expected environmental benefit of this SEP and quantify the environmental benefit to the extent practical.** Even if the benefits seem obvious (e.g. reducing pollution), you still must clearly state how the implementation of the SEP will result in measurable environmental benefits.

**Geographical Area to Benefit** (Identify specific areas, cities, counties, and watersheds and /or nonattainment areas that would be affected by the SEP.)

#### **Proposed Budget Details**

Only actual cost will be given credit upon completion of the SEP. No credit will be given for volunteer labor, labor by respondent's employees, gratuities such as food, drinks, and t-shirts, or for administrative costs.

#### **Proposed Budget**

Enter the proposed budget below. If necessary, attach a separate budget to the application.

No.	Expense Item	Quantity	Price per Item	Total
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				
			Total Overall Budget	\$

## **Financial Gain**

#### Do you anticipate any financial return on the proposed SEP?

🗌 Yes 🗌 No

If you checked yes above, please provide details on the anticipated financial return.

# **SEP Implementation**

You may commence implementing the proposed before or after the Commission approves a final Agreed Order that includes the proposed SEP. However, if you implement or complete the proposed SEP prior to receiving Commission approval you will only receive credit for those expenditures that were made prior to Commission approval if they are subsequently within a final Agreed Order and approved by the Commission. \*

\*If you have implemented or are considering implementing the proposed SEP prior to Commission approval of a final Agreed Order, please contact the TCEQ SEP Program for information on what action or expenses may not be eligible to receive SEP credit.

# **Reporting Requirements**

Respondent is required to provide documentation to TCEQ to verify completion of the SEP. Respondent is required to provide progress reports, documentation and a final report of completion within specified deadlines as required and detailed within the final Agreed Order.

Required documents may include:

- Itemized list of expenditures
- Copies of invoices or receipts corresponding to the itemized list of expenditures
- Copies of cleared checks or payments records corresponding to the itemized list of expenditures
- Copies of proof of advertisement or publication (which must include a statement that the SEP was performed as a result of a TCEQ enforcement action)
- Dated photographs of SEP progress
- A certified/notarized statement of SEP completion
- Detailed map showing specific location of the SEP site(s)
- Copies of engineering plans
- A count of collected items (if applicable)
- A manifest showing proof of disposal and/or recycling of materials (if applicable)
- Equipment logs (if applicable)

# I agree to provide all report and documentation on a timely basis as required by the final Agreed Order

Name of person responsible for reporting to TCEQ.

Signature

Telephone

Email

Date

#### **Additional Requested Information**

- 1. Date of initial Notice of Violation (NOV) or Notice of Enforcement (NOE) received for the alleged violation(s).
- 2. Have you previously agreed to perform the project proposed in this application? (as an example: a grant or loan with the Texas Water Development Board or another state agency) □ Yes □ No
- 3. If you checked yes above, provide the following information.
  - a. Name of parties to the agreement
  - b. Date of agreement
  - c. Agreement details

# **Compliance SEP Application Certification**

I certify on behalf of the Respondent, that the SEP did not and/or will not receive duplicate funding by grants or donations from any source for the authorized SEP expenditures as detailed within the SEP Proposed Budget. In addition, I certify that all the information provided in its SEP application is true and accurate.

#### Signature

Date

Printed Name

Title