



Texas Commission on Environmental Quality
Plain Language Summary
Industrial and Hazardous Waste Permit Applications

Instructions: Complete this form and submit with any industrial hazardous waste, or industrial solid waste, permit application that is subject to 30 Texas Administrative Code §39.405(k) [applications for a Class 3 permit modification, permit amendment, permit renewals, and for a new permit]. Please be concise.

Application Information	
Purpose of application: <input type="checkbox"/> New <input type="checkbox"/> Renewal <input checked="" type="checkbox"/> Modification/Amendment	
Date Submitted to TCEQ: May 13, 2022	
Customer Name: Disposal Properties LLC	
Facility Name: Disposal Properties	
CN: 601481484	RN: 100622570
Permit Number: 50294	Solid Waste Registration Number: 31905
Facility Street Address: 4303 Profit Drive, San Antonio, TX 78219	
Weblink to Street Address: https://arcg.is/K1eDm	
Facility Information <i>(check all that apply)</i>	
What is the primary type of business?	<input type="checkbox"/> Chemical manufacturing <input type="checkbox"/> Oil refinery <input checked="" type="checkbox"/> Treatment, storage or disposal facility plant <input type="checkbox"/> Other If other, enter description:
What does the facility produce?	<input type="checkbox"/> Chemicals <input type="checkbox"/> Fuels / lubricants <input checked="" type="checkbox"/> No products <input type="checkbox"/> Other If other, enter description:
Waste Management Information <i>(check all that apply)</i>	
What types of wastes are managed?	<input checked="" type="checkbox"/> Nonhazardous industrial <input checked="" type="checkbox"/> Hazardous <input checked="" type="checkbox"/> Other If other, enter description: Regulated medical waste
Where does the waste come from?	<input checked="" type="checkbox"/> Off-site source <input type="checkbox"/> On-site source
How is the waste managed?	<input checked="" type="checkbox"/> Storage <input type="checkbox"/> Process / Treatment <input type="checkbox"/> Disposal <input type="checkbox"/> Other If other, enter description:
What type of units manage the waste?	<input checked="" type="checkbox"/> Active <input type="checkbox"/> Post-Closure Type and count:
What happens to waste managed at the facility?	<input checked="" type="checkbox"/> Transported off-site <input type="checkbox"/> Disposed on-site <input type="checkbox"/> Other If other, enter description:

Pollution Control Methods *(check all that apply)*

<p>How will the facility prevent spills, leaks, and releases?</p>	<p><input checked="" type="checkbox"/> Routine inspections <input type="checkbox"/> Engineered liner systems <input type="checkbox"/> Spill containment</p> <p><input checked="" type="checkbox"/> Proper waste handling <input type="checkbox"/> Operations in enclosed buildings <input type="checkbox"/> Groundwater monitoring</p> <p><input type="checkbox"/> Other If other, enter description:</p>
<p>How will the facility clean up spills, leaks, and releases?</p>	<p><input checked="" type="checkbox"/> Spill clean-up supplies <input checked="" type="checkbox"/> Decontamination equipment</p> <p><input type="checkbox"/> Other If other, enter description:</p>
<p>How will the facility prevent / minimize air emissions?</p>	<p><input type="checkbox"/> Air monitoring / control systems <input type="checkbox"/> Filters / scrubbers <input checked="" type="checkbox"/> Routine inspections</p> <p><input checked="" type="checkbox"/> Proper waste handling <input type="checkbox"/> Operations in enclosed buildings</p> <p><input type="checkbox"/> Other If other, enter description:</p>

Description of Update *(for Class 3 Modifications and Amendments only)*

List and explain any changes this modification or amendment would make to the two sections above—**Waste Management Information** and **Pollution Control Methods**.

Regulated medical waste is being added to this facility.

Regulated medical waste areas will have to be added to the routine facility inspection checklist.

Clear Form