



Texas Commission on Environmental Quality

Application for Scrap Tire Storage Site Registration

Additional information, documents, and drawings described in the checklist provided should be securely attached and labeled with the company/storage site name. Submit **one electronic copy** of the application to tires@tceq.texas.gov. Submit one **original** of the completed registration application by mail to: Business and Program Services Section, Scrap Tire Management Program, MC 126, TCEQ, P.O. Box 13087, Austin, TX 78711-3087. For additional information about scrap tire management requirements, please contact us by telephone at (512) 239-2335, or by e-mail tires@tceq.texas.gov.

1. Storage Site Name (same as Regulated Entity Name on Core Data Form)

2. Amendment to Existing Registration

Is this an amendment to an existing scrap tire storage site? Yes No

If yes, please provide the information below.

Registration Number:

Intent of amendment:

3. Enforcement Action

Is this registration application in response to an investigation or enforcement action? Yes No

If yes, provide the name of the TCEQ investigator or enforcement coordinator.

4. Storage Site Location and Address (if different from above)

Street Address

City, State Zip

Mailing Address

5. Contact Person

Identify the person to be contacted about the application and the storage site.

Name

Title

Phone Number

Email Address

6. Professional Engineer Information

Identify the professional engineer to be contacted about the storage site.

Name

Company

Phone

Number

Email

Address

7. Property Owner Information

Identify the property owner where the storage site will be located. Applicants must submit a Property Owner Affidavit (TCEQ-10299) signed by the owner of the property acknowledging notice of they type of business operating at the site. A template is provided in this document.

Name

Street Address

City, State, Zip

Phone Number

Email Address

8. On the Ground Storage (outdoors)

How many used or scrap tires will be stored outdoors?

How many tons of tire pieces will be stored outdoors? One passenger tire equals 20 lbs.

9. Enclosed Storage (trailer(s), warehouse, etc.)

How many used or scrap tires will be stored in enclosed storage?

How many tons of tire pieces will be stored in enclosed storage? One passenger tire equals 20lbs.

10. Maximum Number of Used/Scrap Tires On-site (The maximum number of tires should equal the totals from questions #8 and #9 combined)

What is the total maximum number of whole used or scrap tires stored on-site?

What is the maximum weight in tons of tire pieces stored on-site?

11. End Use of Used or Scrap Tires or Tire Pieces (check all that apply)

Identify the end use of the used or scrap tires or tire pieces. Provide the name and registration number if applicable. Not all tires must be delivered to a single location. Multiple types of facilities can be used.

Additional pages are included as attachment # _____. (if necessary)

Energy Recovery Facility

Name

Registration #

Scrap Tire Facility

Name

Registration #

Landfill

Name

Permit #

Land Reclamation Project Using Tires

Name

Registration #

Other (identify)

12. Vector Control Measures §328.60(b)(10)(E)(v), §328.61(e)

Describe the method for controlling vectors, such as mosquitos and rodents. Monitoring for vectors and appropriate vector control measures must be applied when needed, but no less than once every two weeks.

13. Maps §328.60(b)(9)(A)

Each map or plan drawing shall have a north arrow, a legend, and a reference to the base map information. Online mapping tools, such as Google Maps or MapQuest, are acceptable.

Maps are included as attachment # ____.

Provide the following maps:

- Location maps showing the location of facility in relation to a road intersection.
- Topographic map showing the storage site boundaries and roadway access.
- Land ownership map showing all property ownership within 500 feet of the site. Provide a list that gives each property owner's name and mailing address, keyed to the land ownership map.
- Floodplain map show the directional flow of water on site.

See §328.60(b)(9)(A) for a complete list of map requirements

14. Site Operating Plan §328.60(b)(10)(E)

Provide a site operating plan with specific instructions for the management and operation of the scraptire storage site.

Site operating plan is included as attachment # ____.

The site operating plan must include:

- Security information, signage information, and hours of operation
- Utilization of storage areas
- Control of loading and unloading
- Fire prevention and control plans
- Vector control plans
- Wet weather, dust, and mud control measures
- Preventative maintenance
- Record keeping requirements

See §328.60(b)(10)(E) for a complete list of requirements.

15. Site Layout Plan §328.60(b)(10)(A)

Provide a site layout plan that is signed by a local fire marshal with jurisdiction over the scrap tire storage site.

Site layout plan is included as attachment # ____.

The site layout plan must include:

- Site entrance, access roads, and fire lanes
- Security fencing, gates, and gatehouse
- Location of storage areas
- Location of fire lanes and fire control facilities
- Location of buildings
- Location and description of processing equipment (if applicable)

See §328.60(b)(10)(A) for a complete list of items of requirements.

16. Fire Plan §328.60(b)(10)(C)

Provide a fire plan to be kept on site and distributed to local fire departments and emergency response teams.

Fire Plan is included as Attachment # ____.

The fire plan must include:

- Roles and contact information for on-site personnel
- Evacuation routes from buildings and the site
- Locations of fire lanes and emergency equipment
- A narrative description of emergency response plan, location of emergency equipment, and how emergency equipment would be used

See §328.60(b)(10)(C) for a complete list of items to include.

17. Fire Marshal Approval §328.60(b)(9)(D)

Provide letter from a local fire marshal stating they have reviewed and approved the fire protection aspects of the application as well as the design of the all-weather roads to accommodate fire fighting vehicles.

Fire marshal response letter is included as Attachment # ____.

18. Emergency Response §328.60(b)(10)(C)(ii)

Provide a letter acknowledging receipt of, and agreement to participate in, the fire plan from local fire departments, police departments, and hospitals, nearby businesses, and state and local emergency response teams that can be called for assistance.

Emergency Response acknowledgement letter included as Attachment # ____

Name of Fire Department(s)

Name of Police Department(s)

Name of Hospital(s)

Names of nearby businesses (if applicable)

Name of state and local Emergency Response Teams (if applicable)

19. Financial Assurance Calculations §328.59 and §328.71

Provide financial assurance calculations from the financial assurance worksheet.

Financial Assurance Worksheet and supporting documentation are included as attachment # ____.

Cost of Loading

Cost of Hauling

Cost of Disposal

Contingency Amount

Total Estimated Site Cleanup Cost

20. Notification Requirements (Adjacent Property Owners) §328.60(b)(3)

Notify adjacent property owners of the scrap tire storage site. Complete the template below and send it, along with a copy of this application, by certified mail with a return receipt request.

Return Receipts for notifications to adjacent property owners are included as attachment # ____.

- Submit return receipts to the TCEQ Scrap Tire Program as part of the registration application.
- Provide a list of the property owners' names, mailing addresses, and the date the notice was mailed.
- Provide a Property Ownership map with a 500 ft boundary around the site, with a key related to the list of names.

21. Notification Requirements (Public: Newspaper Publication) §328.60(b)(3)

Notify the public of the scrap tire storage site registration application. Complete the template below and publish it in the local newspaper, preferably the Sunday edition, once a week for three consecutive weeks.

Submit documentation of the publications to TCEQ Scrap Tire Program as part of this application.

Proof of publication is included as attachment # ____.

22. Notification Requirements (Local Authorities) §328.63(d)(1) and §328.63(d)(2)

Notify local authorities of the scrap tire storage site registration application. Complete the template on the next page and send it with a copy of this application to local authorities by certified mail with a return receipt request.

Provide the name, mailing address, and date the notice was mailed for the required local authorities below.

Return receipts are included as Attachment # ____.

City storage site is located in

Check if facility is **not** located within city limits or extraterritorial jurisdiction

Name of City Mayor

Mailing Address

Date notice was received

Name of City Health Authorities

Mailing Address

Date notice was received

County storage site is located in

Name of County Judge

Mailing Address

Date notice was received

Name of County Health Authorities

Mailing Address

Date notice was received

Local Fire Authority

Name of Fire Marshal

Mailing Address

Date notice was received

Regional Council of Government (COG) *Find your regional council of government by visiting txregionalcouncil.org and searching by county.*

Name of COG

Mailing Address

Date notice was received

State Representative

Name of State Representative

Mailing Address

Date notice was received

State Senator

Name of State Senator

Mailing Address

Date notice was received

Signature Page

I, _____,
Site Operator (Registrant)'s Authorized Signatory Title

certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature

Date

TO BE COMPLETED BY THE OPERATOR IF THE APPLICATION IS SIGNED BY AN AUTHORIZED REPRESENTATIVE FOR THE OPERATOR

I, _____, hereby designate _____
Print or Type Operator Name Print or Type Representative Name

as my representative and hereby authorize said representative to sign any application, submit additional information as may be requested by the Commission; and/or appear for me at any hearing or before the Texas Commission on Environmental Quality in conjunction with this request for a Texas Water Code or Texas Solid Waste Disposal Act permit. I further understand that I am responsible for the contents of this application, for oral statements given by my authorized representative in support of the application, and for compliance with the terms and conditions of any permit which might be issued based upon this application.

Print or Type Name of Operator or Principal Executive Officer

Signature

Date



Texas Commission on Environmental Quality

Property Owner Affidavit

I, _____, the owner of record of the property herein described:
Name of Property Owner

Physical Address

have all rights and covenants to lease, rent, or assign to _____
Name of Applicant
the property described.

I acknowledge that _____ has, or intends to file for, a
Name of Applicant

registration to operate a solid waste (whole used or scrap tires) recycling, processing, and/or storage facility upon such property.

I acknowledge that the State of Texas may hold the undersigned and _____
Name of Applicant

either jointly or severally responsible for the operation, maintenance, closure and any required post-closure care of the site and facility.

I acknowledge my responsibility to file with the county deed records, upon closure of the site, an Affidavit to the Public advising that the land has been used for recycling, processing, and/or storage of waste tires.

I acknowledge the requirement that the site operator/registrant shall have access to the property described herein for a period of five years or until said registration expires, whichever period is shorter, for the purpose of operation and maintenance of the site and for the conduct of business.

WITNESS MY HAND on this _____ day of _____, _____.

Property Owner Signature _____

Subscribed and sworn to before me on this _____ day of _____, _____.

_____, for _____ County, Texas.
Notary Public Signature

My Commission Expires: _____



TCEQ Use Only

TCEQ Core Data Form

For detailed instructions regarding completion of this form, please read the Core Data Form Instructions or call 512-239-5175.

SECTION I: General Information

| | | |
|---------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|---------------------------------------------------------|
| 1. Reason for Submission (If other is checked please describe in space provided.) | | |
| <input type="checkbox"/> New Permit, Registration or Authorization (Core Data Form should be submitted with the program application.) | | |
| <input type="checkbox"/> Renewal (Core Data Form should be submitted with the renewal form) | <input type="checkbox"/> Other | |
| 2. Customer Reference Number (if issued) | Follow this link to search for CN or RN numbers in Central Registry** | 3. Regulated Entity Reference Number (if issued) |
| CN | | RN |

SECTION II: Customer Information

| | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|------------------------------------------------------------------------|--------------------------------------------------------------------------------|
| 4. General Customer Information | | 5. Effective Date for Customer Information Updates (mm/dd/yyyy) | |
| <input type="checkbox"/> New Customer | | <input type="checkbox"/> Update to Customer Information | |
| <input type="checkbox"/> Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts) | | <input type="checkbox"/> Change in Regulated Entity Ownership | |
| The Customer Name submitted here may be updated automatically based on what is current and active with the Texas Secretary of State (SOS) or Texas Comptroller of Public Accounts (CPA). | | | |
| 6. Customer Legal Name (If an individual, print last name first: eg: Doe, John) | | If new Customer, enter previous Customer below: | |
| | | | |
| 7. TX SOS/CPA Filing Number | 8. TX State Tax ID (11 digits) | 9. Federal Tax ID (9 digits) | 10. DUNS Number (if applicable) |
| | | | |
| 11. Type of Customer: | <input type="checkbox"/> Corporation | <input type="checkbox"/> Individual | Partnership: <input type="checkbox"/> General <input type="checkbox"/> Limited |
| Government: <input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> Other | <input type="checkbox"/> Sole Proprietorship | <input type="checkbox"/> Other: | |
| 12. Number of Employees | | 13. Independently Owned and Operated? | |
| <input type="checkbox"/> 0-20 <input type="checkbox"/> 21-100 <input type="checkbox"/> 101-250 <input type="checkbox"/> 251-500 <input type="checkbox"/> 501 and higher | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| 14. Customer Role (Proposed or Actual) – as it relates to the Regulated Entity listed on this form. Please check one of the following | | | |
| <input type="checkbox"/> Owner <input type="checkbox"/> Operator <input type="checkbox"/> Owner & Operator | | | |
| <input type="checkbox"/> Occupational Licensee <input type="checkbox"/> Responsible Party <input type="checkbox"/> Voluntary Cleanup Applicant <input type="checkbox"/> Other: | | | |
| 15. Mailing Address: | | | |
| | City | State | ZIP |
| 16. Country Mailing Information (if outside USA) | | 17. E-Mail Address (if applicable) | |
| | | | |
| 18. Telephone Number | 19. Extension or Code | 20. Fax Number (if applicable) | |
| () - | | () - | |

SECTION III: Regulated Entity Information

| | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| 21. General Regulated Entity Information (If 'New Regulated Entity' is selected below this form should be accompanied by a permit application) | | |
| <input type="checkbox"/> New Regulated Entity <input type="checkbox"/> Update to Regulated Entity Name <input type="checkbox"/> Update to Regulated Entity Information | | |
| The Regulated Entity Name submitted may be updated in order to meet TCEQ Agency Data Standards (removal of organizational endings such as Inc, LP, or LLC). | | |
| 22. Regulated Entity Name (Enter name of the site where the regulated action is taking place.) | | |
| | | |

| | | | | | | | |
|---------------------------------------------------------------------|------|--|-------|--|-----|--|---------|
| 23. Street Address of the Regulated Entity: <i>(No PO Boxes)</i> | | | | | | | |
| | City | | State | | ZIP | | ZIP + 4 |
| 24. County | | | | | | | |

Enter Physical Location Description if no street address is provided.

| | | | | | | | |
|-------------------------------------------------------------------------------------------------------|-----------------------------------|-----------------------|----------------------------------------|-------------------------------|------------------------------------------|------------------|---------|
| 25. Description to Physical Location: | | | | | | | |
| 26. Nearest City | | | | | State | Nearest ZIP Code | |
| | | | | | | | |
| 27. Latitude (N) In Decimal: | | | | 28. Longitude (W) In Decimal: | | | |
| Degrees | Minutes | Seconds | Degrees | Minutes | Seconds | | |
| | | | | | | | |
| 29. Primary SIC Code (4 digits) | 30. Secondary SIC Code (4 digits) | | 31. Primary NAICS Code (5 or 6 digits) | | 32. Secondary NAICS Code (5 or 6 digits) | | |
| | | | | | | | |
| 33. What is the Primary Business of this entity? <i>(Do not repeat the SIC or NAICS description.)</i> | | | | | | | |
| | | | | | | | |
| 34. Mailing Address: | | | | | | | |
| | City | | State | | ZIP | | ZIP + 4 |
| 35. E-Mail Address: | | | | | | | |
| 36. Telephone Number | | 37. Extension or Code | | | 38. Fax Number <i>(if applicable)</i> | | |
| () - | | | | | () - | | |

39. TCEQ Programs and ID Numbers Check all Programs and write in the permits/registration numbers that will be affected by the updates submitted on this form. See the Core Data Form instructions for additional guidance.

| | | | | |
|------------------------------------------------|------------------------------------------------|-------------------------------------------------|--------------------------------------------------|-----------------------------------------------------|
| <input type="checkbox"/> Dam Safety | <input type="checkbox"/> Districts | <input type="checkbox"/> Edwards Aquifer | <input type="checkbox"/> Emissions Inventory Air | <input type="checkbox"/> Industrial Hazardous Waste |
| <input type="checkbox"/> Municipal Solid Waste | <input type="checkbox"/> New Source Review Air | <input type="checkbox"/> OSSF | <input type="checkbox"/> Petroleum Storage Tank | <input type="checkbox"/> PWS |
| <input type="checkbox"/> Sludge | <input type="checkbox"/> Storm Water | <input type="checkbox"/> Title V Air | <input type="checkbox"/> Tires | <input type="checkbox"/> Used Oil |
| <input type="checkbox"/> Voluntary Cleanup | <input type="checkbox"/> Waste Water | <input type="checkbox"/> Wastewater Agriculture | <input type="checkbox"/> Water Rights | <input type="checkbox"/> Other: |
| | | | | |

SECTION IV: Preparer Information

| | | | | | |
|----------------------|---------------|----------------|--------------------|--|--|
| 40. Name: | | | 41. Title: | | |
| 42. Telephone Number | 43. Ext./Code | 44. Fax Number | 45. E-Mail Address | | |
| () - | | () - | | | |

SECTION V: Authorized Signature

46. By my signature below, I certify, to the best of my knowledge, that the information provided in this form is true and complete, and that I have signature authority to submit this form on behalf of the entity specified in Section II, Field 6 and/or as required for the updates to the ID numbers identified in field 39.

| | | | | | |
|--------------------------|--|--|------------|--------|-------|
| Company: | | | Job Title: | | |
| Name <i>(In Print)</i> : | | | | Phone: | () - |
| Signature: | | | | Date: | |



Texas Commission on Environmental Quality

Checklist for Scrap Tire Storage Site Registration Application

Submit the checklist below as part of your application. Applications will not be reviewed without documentation of notification to local authorities.

Required Documents

Each sheet of engineering plans, drawings, maps, calculations, computer models, cost estimates, and the title or contents page of the application signed and sealed by a professional engineer.

- Completed Scrap Tire Storage Site Registration Application (TCEQ-10297s)
- Property Owner Affidavit form (TCEQ-10299)
- TCEQ Core Data Form (TCEQ-10400)
- Financial Assurance Worksheet (TCEQ-10301)
- Maps (Attachment #___)
- Site Operating Plan (Attachment #___)
- Site Layout Plan (Attachment #___)
- Fire plan (Attachment #___)
- Fire Marshal Approval Letter (Attachment #___)
- Response letter from emergency response personnel (Attachment #___)
- Cost estimate for closure (Attachment #___)
- Return receipts for registered mail as proof of notification provided to (Attachment #___, #___, and #___).
- City Mayor
- County Judge
- Regional Council of Government
- Local Fire Authority
- City and County Health Authorities
- State Senator
- State Representative
- Adjacent Landowners
- Proof of Publication

Template to Notify Adjacent Landowners

Use the template provided to notify adjacent landowners and owners of property within 500 feet of the boundary of the proposed scrap storage site. The notice must be sent by certified mail with a return receipt request. Submit return receipts, a list of adjacent landowners and landowners within 500 feet, and a map with a 500 foot buffer around the proposed site to the TCEQ Scrap Tire Program as part of the registration application.

Scrap Tire Storage Site Registration – Notification to Adjacent Landowners

Notification Date (mailed or hand-delivered date): _____

Notification to: _____

Customer Legal Name

has applied to the Executive Director of the Texas Commission on Environmental Quality (TCEQ) for a Scrap Tire Storage Site Registration for a proposed scrap tire storage site to be located at:

Physical address of the facility

This notification is provided per the requirements of 30 TAC Chapter 328, Section 328.60(b)(3). Approval by the TCEQ Executive Director is required before the start of the proposed tire storage site operations at the above-referenced location or continuation of site operations if the applicant applied for a renewal.

The Executive Director shall, after review of the application for registration, determine if the application will be approved or denied. The Executive Director's final action on the application will be available to view at www.tceq.texas.gov/tires/pending-applications. The applicant or a person affected may file a motion to overturn the Executive Director's final action on this registration, which is a request that the commission review the Executive Director's action on an application. A motion to overturn must be filed no later than 23 days after the date of the final action. Information on how to file a motion to overturn is available at the above web page.

The applicant has filed registration documents with the county judge where they can be viewed.

Name and Office Address of County Judge

For more information about this application and/or to submit comments, please contact: Waste Permits Division, MC 126, Texas Commission on Environmental Quality, P.O. Box 13087, Austin, TX 78711-3087. The TCEQ staff can also be contacted via email to tires@tceq.texas.gov or by phone at (512) 239-2335.

Submitted by:

Name of Applicant or Authorized Representative

Mailing Address

Phone Number

Template for Newspaper Notices

The applicant is required to publish a notice once a week for three weeks in a newspaper of general circulation. The applicant should attempt to obtain publication in the Sunday edition of a newspaper. Use the template language provided for the published notice. Edit the language to include the required information in bold.

(Customer legal name, mailing address as identified in the TCEQ Core Data Form, and customer telephone number) has applied to the Executive Director of the Texas Commission on Environmental Quality (TCEQ) for a Scrap Tire Storage Site Registration for their proposed facility to be located at **(provide facility address)**. The application is submitted to comply with the requirements of Title 30 Texas Administrative Code (TAC) Chapter 328, Subchapter F.

This public notice is provided per the requirements of 30 TAC Section 328.60. Approval by the TCEQ Executive Director is required before the proposed storage site may begin storage activities. The applicant has filed registration documents with **(name and office address of County Judge)**, where they may be viewed by the public.

The TCEQ scrap tire management rules require the publication of this notice once a week for three weeks. This is the **(first/second/third)** publication of the notice. Comments on the application, if any, must be submitted to the TCEQ staff within 30 days of the third publication of this notice **(use this sentence for the first two notices)**. Comments on the application, if any, must be submitted to the TCEQ staff within 30 days of this notice **(use this sentence for the third and final notice publication)**.

For additional information about this application and/or to submit comments, please contact the TCEQ at: Waste Permits Division, MC 126, Texas Commission on Environmental Quality, P.O. Box 13087, Austin, TX 78711-3087. The TCEQ staff may also be contacted by phone at (512) 239-2335, or via email to tires@tceq.texas.gov.

Template to Notify Local Authorities

Use the template provided to notify local authorities (identified below) of the scrap tire storage site registration application to comply with the notification requirements of 30 Texas Administrative Code Chapter 328, Sections §328.60(b)(2) and §328.60(b)(3). The notice must be sent by certified mail with a return receipt request. Submit return receipts to the TCEQ Scrap Tire Program as part of the registration application. In addition to the notice, a copy of the application must be sent to the appropriate county judge.

- City mayor (if site is within the city/corporate limits or the city's extraterritorial jurisdiction)
- County judge
- Local city and county health authorities
- Regional council of government
- State representative
- State senator

Scrap Tire Storage Site Registration – Notification to Local Authorities

Notification Date (mailed or hand-delivered date): _____

Notification to: _____

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Physical address of the facility

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Submitted by:

Name of Applicant or Authorized Representative

Mailing Address

Phone Number