



Dry Cleaner Registration

Per 30 TAC 337.11(e)(3), **facilities and drop stations must renew** their registration by submitting this form for each location no later than **August 1st** of each year.

Bold items required for all initial submissions. * items required for renewals with no changes.
Print clearly or type. [Instructions for filling out this form](#)

Registration #:* DCR _____

Account#: _____ Regulated Entity Number: RN _____

Registration Type (Check one.)

Dry-Cleaning Facility Drop Station

Submission Reason (Check all that apply.)

Renewal with no changes (Sect. A & G) Renewal with changes Initial (all)

No longer in business effective: _____

Update: Site (Sect. A) Owner (Sect. B-C) Solvent (Sect. D) Machines (Sect. H-I)

Change from facility to drop station effective: _____

Change from drop station to facility effective: _____

Section A: Site Information (Required for all submissions. Refers to the location being registered.)

1. **Facility/Store Name*:** _____

2. **Street Address*:** _____

3. **City*:** _____, TX

4. **Zip+4*:** _____ - _____ 5. **County:** _____

6. Latitude: _____ degrees (to 6 decimal places. Do not provide minutes and seconds.)

7. Longitude: _____ degrees (to 6 decimal places. Do not provide minutes and seconds.)

8. NAICS Code _____ 9. SIC Code _____

10. Check here if this dry-cleaning facility *does not* accept payment directly from retail customers.

11. * Check the box next to the gross receipts amount reported to the Texas Comptroller of Public Accounts for the past consecutive 12 months.

\$150,000 or less More than \$150,000

This amount should match the "Total Sales" line on your Sales & Use Tax Return. The gross receipts should include all sources of income from this location, including laundry receipts. If this facility does not collect money from retail customers, use the gross receipts from all associated drop stations. TCEQ will verify the amount with the comptroller. If the information you provide does not match the amounts reports to the comptroller, your dry-cleaning registration certificate may be withheld or delayed.

12. Indicate the date dry-cleaning operations started at this location as mm/dd/yyyy: _____

13. * Has perchloroethylene ever been used as a dry-cleaning solvent at this location? Yes No

14. * Has the owner of this location ever used or allowed the use of the dry-cleaning solvent perchloroethylene at a dry-cleaning facility or drop station in this state? Yes No

For TCEQ use only: DCR/_____ /RE/_____

Section B: Owner Information

15. Customer number: CN _____ 16. Effective Date: _____

17. **Owner Name:** (business name or owner’s last name)

(If you check Corporation, General Partnership, or Limited Partnership in #19, list the legal business name as filed with the Secretary of State’s office or Comptroller of Public Accounts.)

18. **Owner First Name:** (required if you check Individual or Sole Proprietorship in #19.)

19. Type of Owner:

- Corporation
- Individual
- City Government
- County Government
- Federal Government
- State Government
- Other Government
- Other: _____
- Limited Partnership
- Sole Proprietorship
- General Partnership

Owner Tax Information (for individual ownership type, go to Section C)

20. Federal Tax ID: _____ 21. TX State Franchise Tax ID: _____

22. **Texas Secretary of State Filing Number:** _____

23. Independently Owned & Operated: Yes No 24. DUNS #: _____

25. # of Employees: 0-20 21-100 101-250 251-500 501 & higher

Section C: Owner's Representative Contact Information (The registration certificate and invoices will get mailed to the person and address provided in this section.)

26. **First name:** _____ 27. **Last name:** _____

28. **Title:** _____

29. **Owner Mailing Address:** _____

30. **City:** _____ 31. **State:** _____

32. **Zip+4:** _____ - _____ 33. **Telephone:** _____

34. **Email:** _____

Registrations have the option for quarterly fee invoices. This table shows the billing period and the dry cleaner registration certificate expiration dates for registrations that opt for quarterly billing. All registration fees must be paid in full prior to renewal.

Quarter	Billing Period:	Certificate Expires
Q1	Sept 1 – Nov 30	Mar 31
Q2	Dec 1 – Feb 28	June 30
Q3	Mar 1 – May 31	Sept 30
Q4	Jun 1 – Aug 31	Dec 31

Section D: Solvent Information (required for new dry cleaning facility or for any solvent changes)

35. List the distributors that you purchase solvent from:

Distributor Name:	Distributor RN:

36. Gallons of solvent purchased in the past 12 months:

Solvent	Gallons	Solvent	Gallons
Perc		Carbon Dioxide	
Petroleum		Other (specify)	
Silicone			

- 37. Check here if the facility receives deliveries of chlorinated dry-cleaning solvents by a closed, direct-coupled system.
- 38. Check here if the facility stores virgin (new) solvents in containers other than in the dry-cleaning machine.
 - 38.1 Check here if the storage area has secondary containment.
 - 38.2 Indicate the construction material of the secondary containment:
 Steel Epoxy Other (specify): _____
- 39. Check here if the facility uses chlorinated dry-cleaning solvents and any waste (muck, filter, etc) is stored in sealed containers marked "hazardous waste."

Section E: Associated Dry Cleaning Facilities (required for new drop station or for any changes)

40. List any dry-cleaning facilities that this drop station sends items to for cleaning.

Registration #:	Name:	Address
DCR		
DCR		
DCR		

For TCEQ use only: DCR/_____ /RE/_____

Section F: TCEQ Programs in Which This Site/Regulated Entity Participates
(Required for all submissions.)

Check the box next to all programs that your site participates in. Indicate the registration or permit number next to the program name. Programs tied to the regulated entity may use the information from Sections A-C to update other registrations or permits. If the regulated entity participates in a program not listed below, check "Other" and indicate the program and registration or permit number.

Stormwater: _____	PWS: _____
Industrial and Hazardous Waste: _____	Used Oil: _____
Tires: _____	Edwards Aquifer: _____
Air: Emissions Inventory _____	New Source Review _____
Municipal Solid Waste: _____	Title V _____
Wastewater: _____	OSSF: _____
Voluntary Cleanup: _____	Districts: _____
Dam Safety: _____	Other: _____
Sludge: _____	Water Rights: _____
	Wastewater Agriculture: _____

Section G: Certification (Required for all submissions.)

- You must sign this form in ink or use a verifiable electronic signature with a date and time stamp.
- TCEQ requires payment of all delinquent fees and penalties to process this form. Visit tceq.texas.gov/agency/financial/fees/delin for more information.
- Submit all renewals for active dry-cleaning facilities and drop stations that have the same owner listed in Section B together at the same time.

I certify under the penalty of law that:

- I have personally examined and am familiar with the information in all sections of this form.
- Based on my current knowledge and understanding, the submitted information is true, accurate, and complete as required by 30 TAC 337.10(c)(2). I understand that I will need to resubmit another form if this form has incomplete or inaccurate information per 30 TAC 337.10(c)(5).
- The owner indicated on this form has paid all outstanding fees owed to TCEQ. For ownership changes, the prior owner has also paid all outstanding fees.
- I have signature authority to submit this form on behalf of the entity in Section B. Only an owner or legally authorized representative of the owner of this facility may sign this form. I understand that that per 30 TAC 337.10(a)(3), the owner remains responsible for information provided on this form.
- I understand that any person who intentionally or knowingly submits false information on this form is subject to criminal prosecution and revocation of the facility's registration certificate under 30 TAC 337.11(f).

Name*: _____

Title: _____

Telephone*: _____

Email*: _____

Signature*: _____ Date*: _____

For TCEQ use only: DCR/_____ /RE/_____

Note: Submit Sections H-I only for new dry-cleaning facility, new machine, or machine update submissions.

If the facility has more than 4 machines, please submit an additional copy of Section H-I.

Section H: Dry Cleaning Machine Details				
Machine ID: (assigned by owner, such as 1, 2, 3)				
Installation Date (mm/dd/yyyy)				
Status: (select one status below and check the box next to "Empty" if the machine no longer contains solvent.)	Empty	Empty	Empty	Empty
Currently in use				
Temporarily out of use as of date (mm/dd/yyyy)				
Permanently out of use as of date (mm/dd/yyyy)				
Section I: Secondary Containment				
If the machine does not have secondary containment, skip this section. Check the boxes that apply to the secondary containment for the machine ID listed above.				
Machine has secondary containment				
Installation date of secondary containment				
Secondary containment capacity is 110% or greater				
Secondary containment material (check one)				
Steel				
Epoxy				
Other				

Submissions sent via email, postal mail, or overnight service will take approximately 8-20 business days to process. To verify if the DC Registration Team has received this form, visit www.tceq.texas.gov/goto/docsearch or scan the QR code to the right.



Submit this form using **one** of the following methods.

Email completed form as a single .pdf file to:

apodcsubmit@tceq.texas.gov with your registration number, facility name, and submission reason in the subject line.

Mail completed form to:

Texas Commission on Environmental Quality
 DC Registration Team MC-134
 PO Box 13087
 Austin, TX 78711-3087

Please use the following address for any submissions sent via overnight services:

Texas Commission on Environmental Quality
 DC Registration Team MC-134
 12100 Park 35 Circle Bldg A
 Austin, TX 78753

For any questions about filling out this form not covered in the instructions or for information about the Petroleum Storage Tank Registration Program, contact us at (512) 239-2628 or dcreg@tceq.texas.gov. **Do not submit this form to dcreg@tceq.texas.gov since doing so will cause delays in processing.**

Individuals are entitled to request and review their personal information the agency gathers on its forms. They may also have any errors in their information corrected. To review such information, please contact the TCEQ Public Information Section at (512) 239-3282.