For TCEQ use only: IHW REG/	/CO/	/INITIAL-UPDATE
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## Notification for Hazardous or Industrial Waste Management

**Bold** items required for all notifications. \* items required for all new notifications. Print clearly or type.

## Instructions for filling out this form.

If information on this form applies to any other program area within the TCEQ, you must also complete a TCEQ Core Data Form (TCEQ 10400) and send the Core Data Form to Central Registry at: Texas Commission on Environmental Quality, Central Registry MC144, P. O. Box 13087, Austin Texas 78711-3087

on Environmental Quality, Central Registry MC144, P. O. Box 13087, Austin Texas 78711-3087					
So	lid Waste Registration #	(required for all up	dates):	Effective Date:	
Pa	rt A: Site Informatio	n (refers to the locat	ion being register	red)	
Su	ıbmission Reason:	New Upda	æ		
	*(Items marked with *	k are required for all	new notifications.	)	
1.	EPA ID:		-		
2.	Regulated Entity Numb	er: RN			
3.	Site Name:				
	e Location:*				
4.	Street Address:				
	or (provide site locatio	n description in #5	only if the site doe	es not have a street address)	
5.	Site Location Description	on:			
	and				
6.	City*:				
7.	State*:		8. Zip+4:	*	
9.	County*:				
	(Geocoding of the Phys	sical Address may be curacy.) If you provi	e used to supply c ided a site location	to meet TCEQ Core Data Standards. coordinates where none have been n description in #5 instead of a street nd longitude in #11.	
10	. Latitude:*	degrees (to	6 decimal places	. Do not provide minutes and seconds.)	
11	. Longitude:*	degrees (to	6 decimal places	. Do not provide minutes and seconds.)	
12	. Primary North America	n Industry Classifica	tion System (NAIC	CS) Code:*	
13	. Site Land Type:*				
	Private	Federa	al	State	
	County	Tribal		Other:	
	District	Munici	pal		

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Solid Waste Registration # (required fo	or all updates):	Effective Date:
Site Name:		
Part B: Owner/Operator Informati	on (for the site bein	g registered)
Submission Reason: New	Update	
*(Items marked with * are required	d for all new notifica	tions.)
14. Customer Number: CN		
15. Owner/Operator Name:*		
(List the legal business name as file Accounts.)	ed with the Secretary	of State's office or Comptroller of Public
16. Check this box if a different legal owner information below, and f	-	e owner operates this site. Indicate the iddendum in Part H.
17. Type of Customer:*		
Corporation		State Government
Individual		Other Government
City Government		General Partnership
County Government		Limited Partnership
Federal Government		Other:
Tax Information: (Do not provide Socia	I Security numbers b	pelow.)
18. Federal Tax ID:		
19. TX State Tax ID:		
20. Texas SOS/CPA Filing Number:*		<u> </u>
21. Mailing Address:*		
22. City:*		
23. State:*	24. Zi	p+4:*
25. Telephone:*		Fax:
27. Email:		

TCEQ use only: IHW REG/	_/CO/	/INITIAL-UPDATE
Solid Waste Registration # (require	d for all updates):	Effective Date:
Site Name:		
Part C: Contact Information (fo	r the site being registered)	
Submission Reason: New	Update	
*(Items marked with * are requ	uired for all new notifications.)	
Primary Site Contact*		
28. First Name:*		
29. Last Name:*		
30. Title:*		
31. Company Name:*		
32. Mailing Address:*		
33. City:*		
34. State:*		<u></u>
36. Telephone:*	37. Fax:	
38. Email:		
Billing Contact* (The billing contact	can be an individual or company	name.)
Same as primary site contact O	R registering as a transporter (go	to Part D)
39. First Name:		
40. Last Name:		
41. Title:		
42. Company Name:*(The billing contact company na	ame should match either #15 or a	#100.)
43. Mailing Address:*		
44. City:*		
45. State:*	46. Zip+4:*	<u> </u>
47. Telephone:*	48. Fax:	
49. Email:		

TCEQ use only: IHW REG/	/CO/	/INITIAL-UPDATE		
Solid Waste Registration # (requi	red for all updates):	Effective Date:		
Site Name:				
Part D: Waste Activities (for the	e site being registered)			
Submission Reason: New				
*(Items marked with * are red	quired for all new notifica	tions)		
Site Land Type: (from #13)				
Private	Federal	State		
County	Tribal	Other:		
District	Municipal			
50. Registration Type:* (check all that apply) Generator (go to #51-53) Transporter (go to #54-56) Transfer Facility (must either indicate transporter above or have a solid waste registration as a transporter at another location.) Reverse Distributor Receiver (may require an industrial and hazardous waste permit) Recycler (may require an industrial and hazardous waste permit)				
Generator Activities: (#51-53 requ	uired for all generators)			
51. Generator Type: Industri	al Non-industrial (go	to #53)		
52. Industrial Class 1 Generator: g month. Y N	greater than or equal to 2	20 lbs. of Class 1 industrial waste per		
53. Hazardous Waste Generator C	ategory: (check one, if ap	oplicable)		
waste or greater than 2.2 ll	os. acute hazardous waste	ual to 2,200 lbs. of non-acute hazardous e per month. G that will consolidate VSQG waste.		
Small Quantity Generator (SQG): Greater than 220 lbs. of non-acute hazardous waste but less than 2,200 lbs. of non-acute hazardous waste per month and less than or equal 2.2 lbs. acute hazardous waste per month.				
		0 but less than or equal to 220 lbs. of non- e hazardous waste per month.		
	btain a solid waste registr	N" in #52 and nothing or VSQG in #53, ration or permanent EPA ID. See the		
Transporter Activities: (#54-56 re	quired for all transporters	5)		
54. Waste Types Transported:	Hazardous Industr	rial Class 1		
55. Do you transport the wastes listed above for hire (on behalf of other generators)? Y N				
56. Are any of the transported wa	stes generated at your fa	cility? Y N		

TCEQ use only: IHW R	EG//(	CO/		/IN]	TIAL-UPDATE
Solid Waste Registration	n # (required fo	or all updates):	I	Effecti	ve Date:
Site Name:					
Part D: Waste Activi	<b>ties</b> (for the site	e being registe	red, conti	nued)	
<b>Submission Reason:</b>	New	Update			
*(Items marked wi	th * are require	d for all new n	otification	s)	
Other hazardous waste	activities: (Che	ck all that app	ly)		
Universal Waste:					
57. Large Quantity at any one time.) I		•	accumulat	es 5,000 KG or	more of universal waste
Batteries	Pesticides	Mercury	Paint	Lamps	Aerosol cans
58. Destination Fac	ility (A permit is	required for t	his activity	<b>/.</b> )	
59. United States In	mporter of Haza	rdous Waste			
60. Recognized Trader:	Importer	Exporter			
61. Importer I	Exporter of spen	it lead-acid bat	teries		
62. Healthcare facil	ity operating un	der 30 TAC Ch	apter 335	Subchapter W	
63. Eligible academic entity opting into or currently operating under 40 CFR 262 Subpart K as adopted under 30 TAC 335.59. If checked, indicate one type of eligible academic entity below: College or University  Teaching Hospital owned by or with a formal written affiliation with a college/university  Non-profit institute owned by or with a formal written affiliation with a college/university					

TCEQ use only: IHW REG/	/CO/	/INITIAL-UPDATE
Solid Waste Registration # (req	uired for all updates):	Effective Date:
Site Name:	_	
Part E: Waste Management	<b>Units</b> (located at the site	being registered)
Submission Reason: No	ew Update	
*(Items marked with * are i	required for all new notific	cations)
		<b>ment units only</b> that require registration. dates to permitted waste management units.
64. Unit Sequence Number:* _	65.	Unit Type Code:*(see Appendix B)
66. Unit Description:*		
67. Unit Regulatory Status:*		
13- RCRA permit exemp	t- accumulation time	
(Small Quantity and Ver	/ Small Quantity Generato	ors only)
03- RCRA permit exemp	t <90-day storage (Large	Quantity Generators only)
05- Non-hazardous regu	lated (industrial Class 1, 2	2, or 3 wastes only)
08- RCRA permit exemp	t- wastewater treatment	
09- RCRA permit exemp	t- totally enclosed treatme	ent
10- RCRA permit exemp	t- other	
11- RCRA permit exemp	t- recycling unit	
14- UIC registration		
68. System Type Code:*(see Ap	pendix C) H	
69. Texas Waste Codes for wast	es generated on-site and	managed in this WMU:*
Updates to permitted waste	management units red	uuire a permit modification

For more information about permit modifications, visit

https://www.tceq.texas.gov/permitting/waste\_permits/ihw\_permits/ihw.html#permitted or contact the IHW Permits Section at 512-239-2335 or <a href="mailto:ihwper@tceq.texas.gov">ihwper@tceq.texas.gov</a>.

TCEQ use only: IHW REG//CO/	/INITIAL-UPDATE
Solid Waste Registration # (required for all updates):	Effective Date:
Site Name:	
Part F: Waste Streams (generated at the site being red	gistered)
Submission Reason: New Update	
*(Items marked with * are required for all new notific	cations)
70. Sequence Number:* 7:	1. Texas Form Code:*
72. Class Code: *(check one) H (Hazardous); Industri	al: 1 (Class 1); 2 (Class 2); 3 (Class 3)
73. Description of waste and generation process:*	
74. Date of Generation:* (current date or earlier)	
75. Origin Code:* (check one) The waste:	
<ol> <li>was generated on-site from a product or service activity.</li> </ol>	5- was residual from the on-site treatment, disposal, or recycling of previously existing
2- resulted from a spill clean-up, equipment decommissioning, or emergency removal.	hazardous waste. (For hazardous waste, also indicate source code G25.)
3- derived from the on-site management of a non-hazardous waste.	6- was from a state, federal, or locally funded cleanup.
4- was received from off-site and was not recycled or treated on-site.	7- was from a corrective action or closure.
76. Waste is accumulated, treated, or disposed on-site:*	Y N
77. If yes for #76, provide the three digit waste manager waste is managed:*	nent unit sequence number(s) where the
78. Waste is managed/disposed off-site:* Y N	
79. Industrial Class 2 and Class 3 wastes only: This is on the <u>Toxic Substances Control Act Chemical Substances</u>	•
For hazardous wastes only:	AICS (from #12):
80. Source Code:* (See Appendix E) 81. N	Mixed Radioactive Waste:* Y N
82. For Source Code G25, indicate the System Type Code	from Appendix C.
83. EPA Hazardous Waste Numbers/Codes:	
	<del></del>

TCEQ use only: IHW REG/	_/CO/	/INITIAL-UPDATE
Solid Waste Registration # (required	d for all updates):	Effective Date:
Site Name:		
Part G: Certification (Must be inc	luded with all submissions; items	marked with * are required.)
84. *Contact the Preparer	Authorized Signer with any ques	stions regarding this submission.
Preparer Information:*		
85. Name:*		
86. Title:		
87. Company:*		
88. Telephone:*	89. Fax:	
90. Email:		
Authorized Signer:		
complete and accurate. I understa	the best of my knowledge, that the nd that the registration on listed on to certify that I have signature authorit	
91. Same as preparer information	on in #85-90 (go to #98)	
92. Name:		
93. Title:		
94. Company:		
95. Telephone:	96. Fax:	
97. Email:		
98. Signature:*		
	Mail completed form to:	

Texas Commission on Environmental Quality Registration and Reporting Section MC-129 PO Box 13087 Austin, TX 78711-3087

## Use the following address for any submissions sent via overnight services:

Texas Commission on Environmental Quality Registration and Reporting Section MC-129 12100 Park 35 Circle Bldg D Austin, TX 78753

For initial registrations, submit forms with original signatures via one of the addresses above. **Updates only** may be faxed to (512) 239-6410. Initial registrations submitted by fax will be returned to the sender.

For any questions about filling out this form not covered in the instructions, or for information about the Industrial and Hazardous Waste Program, contact us at (512) 239-6413 or wasteval@tceq.texas.gov.

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

<b>T</b> 050	/ TINK DEC/	100.1	(11)
ICEQ	use only: IHW REG/	_/CO/	/INITIAL-UPDATE
Solid V	Vaste Registration # (required	Effective Date:	
Site N			
Part H	I: (To be filled out only if #16	is checked) <b>Operator A</b>	ddendum
Subm	ission Reason: New	Update	
*(1	Items marked with * are requ	vired for all new notificatio	ns)
99. Cu	stomer Number: CN		
100.	Operator Name:*		
•	st the legal business name as counts.)	filed with the Secretary o	f State's office or Comptroller of Public
101.	Type of Customer:*		
	Corporation		State Government
	Individual		Other Government
	City Government		General Partnership
	County Government		Limited Partnership
	Federal Government		Other:
Tax In	formation: (Do not provide So	ocial Security numbers bel	ow.)
102.	Federal Tax ID:		<u> </u>
103.	TX State Tax ID:		
104.	Texas SOS/CPA Filing Number	er:*	
105.	Mailing Address:*		
106.	City:*		
107.	State:*	108.	Zip+4:*
109.	Telephone:*	110.	Fax:
111.	Email:		

TCEQ use only:	IHW REG//CO/		/INITIAL-l	JPDATE		
Solid Waste Reg	istration # (required for all up	odates):	_ Effective Da	te:		
Site Name:						
Part I: LQG Co	nsolidation of VSQG Haza	rdous Waste Adden	dum			
Submission Re	eason: New Upda	ate				
	EPA IDs and site names of an registration noted above as al			son that will send waste	e to the LQG	with the
VSQG EPA ID	VSQG Site Name	VSQG Site Ad	ldress	VSQG Site City	State	Zip Code