For TCEQ use only: IHW REG/	/CO/	/INITIAL-UPDATE
-----------------------------	------	-----------------



## 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				
Solid Waste Registration # (required for all updates):		:es): <b>Ef</b>	fective Date:	
Pa	rt A: Site Information	(refers to the location	n being registered)	
Su	ıbmission Reason:	New Update		
	*(Items marked with *	are required for all ne	w notifications.)	
1.	EPA ID:			
2.	Regulated Entity Numb	er: RN		
3.	Site Name:			
	e Location:*			
4.	Street Address:			
	or (provide site location	n description in #5 on	ly if the site does not ha	ve a street address)
5.	Site Location Description	n:		
	and			
6.	City*:			
7.	State*:		8. Zip+4:*	<u></u>
9.	County*:		-	
	(Geocoding of the Phys provided or to gain acc	sical Address may be u curacy.) If you provide	sed to supply coordinate	TCEQ Core Data Standards. es where none have been tion in #5 instead of a street ude 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 American	n Industry Classification	n System (NAICS) Code	**
13	. Site Land Type:*			
	Private	Federal		State
	County	Tribal		Other:
	District	Municipa		

For TCEQ use only: IHW REG/	_ /CO <u>/</u>	/INITIAL-UPDATE
Solid Waste Registration # (required for	all updates):	Effective Date:
Site Name:		
Part B: Owner/Operator Information	on (for the site bein	ng registered)
Submission Reason: New	Update	
*(Items marked with * are required	for all new notifica	tions.)
14. Customer Number: CN		_
15. Owner/Operator Name:*		
(List the legal business name as filed Accounts.)	d with the Secretary	y of State's office or Comptroller of Public
16. Check this box if a different lega owner information below, and file	-	e owner operates this site. Indicate the addendum 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 Social	Security numbers	below.)
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. Z	ip+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 # (	required for all updates):	Effective Date:	
Site Name:			
Part D: Waste Activities (	for the site being registered)		
<b>Submission Reason:</b>	New Update		
*(Items marked with * a	re required for all new notifica	ations)	
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 required for all generators)			
51. Generator Type: Industrial Non-industrial (go to #53)			
52. Industrial Class 1 Generator: greater than or equal to 220 lbs. of Class 1 industrial waste per month. Y N			
53. Hazardous Waste Generator Category: (check one, if applicable)			
Large Quantity Generator (LQG): Greater than or equal to 2,200 lbs. of non-acute hazardous waste or greater than 2.2 lbs. acute hazardous waste per month.  Check here and fill out Part I if the site is an LQG 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.			
Very Small Quantity Generator (VSQG): Greater than 0 but less than or equal to 220 lbs. of non-acute hazardous waste per month and 2.2 lbs. acute hazardous waste per month.			
If you check "Non-industrial" in #51 and VSQG in #53 or "N" in #52 and nothing or VSQG in #53, then your site does not need to obtain a solid waste registration or permanent EPA ID. See the <a href="instructions">instructions</a> for information about obtaining an EPA ID.			
Transporter Activities: (#54-	56 required for all transporters	s)	
54. Waste Types Transported	d: Hazardous Industi	rial Class 1	
55. Do you transport the wastes listed above for hire (on behalf of other generators)? $$ $$ $$ $$ $$ $$ $$			
56. Are any of the transported wastes generated at your facility? Y N			

TCEQ use	only: IHW REG	//C0	D/		/INIT	TAL-UPDATE
Solid Waste	e Registration	# (required for	all updates):		Effective	e Date:
Site Name	e:					
Part D: W	aste Activitie	s (for the site	being registe	red, contin	ued)	
Submissio	on Reason:	New	Update			
*(Item.	s marked with	* are required	for all new n	otifications	)	
Other haza	rdous waste a	ctivities: (Chec	k all that appl	ly)		
Universal V	Vaste:					
	,	indler of Unive icate waste typ	•	accumulate	s 5,000 KG or n	nore of universal waste
	Batteries	Pesticides	Mercury	Paint	Lamps	Aerosol cans
58. Des	stination Facilit	y (A permit is r	equired for th	nis activity.	)	
59. Uni	ted States Imp	orter of Hazard	dous Waste			
60. Recogn	ized Trader:	Importer	Exporter			
61. Imp	oorter Exp	oorter of spent	lead-acid bat	teries		
62. Hea	althcare facility	operating und	er 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 si	te being registered)		
Submission Reason: Ne	ew Update			
*(Items marked with * are i	required for all new noti	ifications)		
		<b>ement units only</b> that require registration. Ipdates to permitted waste management units.		
64. Unit Sequence Number:*	6	5. Unit Type Code:*(see Appendix B)		
66. Unit Description:*				
67. Unit Regulatory Status:*				
13- RCRA permit exempt	- accumulation time			
(Small Quantity and Very	/ Small Quantity Genera	ators only)		
03- RCRA permit exempt	<90-day storage (Larg	ge Quantity Generators only)		
05- Non-hazardous regu	05- Non-hazardous regulated (industrial Class 1, 2, or 3 wastes only)			
08- RCRA permit exempt	08- RCRA permit exempt- wastewater treatment			
09- RCRA permit exempt	09- RCRA permit exempt- totally enclosed treatment			
10- RCRA permit exempt	10- RCRA permit exempt- other			
11- RCRA permit exempt	- recycling unit			
14- UIC registration				
68. System Type Code:*(see Ap	pendix C) H			
69. Texas Waste Codes for wast	es generated on-site ar	nd managed in this WMU:*		
Updates to permitted waste	management units r	require 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 reg	istered)
Submission Reason: New Update	
*(Items marked with * are required for all new notifical	ations)
70. Sequence Number:* 71	. Texas Form Code:*
72. Class Code: *(check one) H (Hazardous); Industria	l: 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 managem 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 a on the <u>Toxic Substances Control Act Chemical Substances</u>	•
For hazardous wastes only:	AICS (from #12):
80. Source Code:* (See Appendix E) 81. M	lixed Radioactive Waste:* Y N
82. For Source Code G25, indicate the System Type Code	from Appendix C.
83. EPA Hazardous Waste Numbers/Codes:	

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.

TCEQ :	use only: IHW REG//CO/	!	/INITIAL-UPDATE
Solid Waste Registration # (required for all updates):		Effective Date:	
Site N	lame:		
Part H	1: (To be filled out only if #16 is che	ecked) <b>Operator Ad</b>	dendum
Subm	ission Reason: New U	Jpdate	
*(1	Items marked with * are required fo	or all new notification	(s)
99. Cus	stomer Number: CN		
100.	Operator Name:*		_/
•	st the legal business name as filed v counts.)	with the Secretary of	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 Social S	ecurity numbers belo	w.)
102.	Federal Tax ID:		_
103.	TX State Tax ID:		<u></u>
104.	Texas SOS/CPA Filing Number:*_		
105.	Mailing Address:*		
106.	City:*		
107.	State:*		Zip+4:*
109.	Telephone:*	110.	Fax:
111.	Email:		

TCEQ use only: IHW REG	//CO/	/INITIAL-UPDATE
Solid Waste Registration #	# (required for all updates):	Effective Date:
	ion of VSQG Hazardous Waste <i>i</i>	Addendum
Submission Reason:		
		control of the same person that will send above as allowed under 30 TAC 335.53(f).
VSQG EPA ID	VSQG Site Name	