



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 checked="" 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 checked="" type="checkbox"/> Other Property Transfer
2. Customer Reference Number (if issued)	3. Regulated Entity Reference Number (if issued)
CN 605857168	RN 100218643

[Follow this link to search for CN or RN numbers in Central Registry**](#)

SECTION II: Customer Information

4. General Customer Information	5. Effective Date for Customer Information Updates (mm/dd/yyyy)	5/31/2022				
<input checked="" type="checkbox"/> New Customer <input type="checkbox"/> Update to Customer Information <input checked="" type="checkbox"/> Change in Regulated Entity Ownership						
<input type="checkbox"/> Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)						
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:				
Frisco Community Development Corporation		Exide Technologies				
7. TX SOS/CPA Filing Number	8. TX State Tax ID (11 digits)	9. Federal Tax ID (9 digits)	10. DUNS Number (if applicable)			
0134188001	30117625670	81-1304365	190075143			
11. Type of Customer:	<input checked="" 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 checked="" 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 checked="" 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 checked="" 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:	6101 Frisco Square Boulevard					
	5th Floor					
	City	State	TX	ZIP	75034	ZIP + 4
16. Country Mailing Information (if outside USA)		17. E-Mail Address (if applicable)				
		mborchardt@friscotexas.gov				
18. Telephone Number	19. Extension or Code	20. Fax Number (if applicable)				
(972) 292-5127		(972) 292-5586				

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 checked="" type="checkbox"/> New Regulated Entity <input type="checkbox"/> Update to Regulated Entity Name <input checked="" 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.)	
Frisco Community Development Corporation Site – 7471 Old 5th Street	

23. Street Address of the Regulated Entity: <i>(No PO Boxes)</i>	7471 Old 5th Street							
	City	Frisco	State	TX	ZIP	75034	ZIP + 4	
24. County	Collin							

Enter Physical Location Description if no street address is provided.

25. Description to Physical Location:	5 MI N & 1 MI W OF INTX OF SW 121 & 289								
26. Nearest City	Frisco				State	TX	Nearest ZIP Code		75034
27. Latitude (N) In Decimal:	33.140347			28. Longitude (W) In Decimal:	-96.827804				
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds				
33	08	25.26	96	49	38.91				
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)				
9199			921190						
33. What is the Primary Business of this entity? <i>(Do not repeat the SIC or NAICS description.)</i>									
Community development and preservation									
34. Mailing Address:	6101 Frisco Square Boulevard								
	5 th Floor								
	City	Frisco	State	TX	ZIP	75034	ZIP + 4		
35. E-Mail Address:	mborchardt@friscotexas.gov								
36. Telephone Number	37. Extension or Code		38. Fax Number <i>(if applicable)</i>						
(972) 292-5127			(972) 292-5586						

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 checked="" type="checkbox"/> Industrial Hazardous Waste
				50206
<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 checked="" type="checkbox"/> Storm Water	<input type="checkbox"/> Title V Air	<input type="checkbox"/> Tires	<input type="checkbox"/> Used Oil
	WQ0002964000, TXR05EU11			
<input type="checkbox"/> Voluntary Cleanup	<input type="checkbox"/> Waste Water	<input type="checkbox"/> Wastewater Agriculture	<input type="checkbox"/> Water Rights	<input checked="" type="checkbox"/> Other: Water Quality
				R04100218643 - Complaint investigation 2015

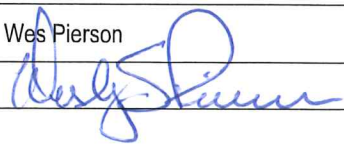
SECTION IV: Preparer Information

40. Name:	Todd Rees / WSP USA Inc.	41. Title:	Senior Vice President
42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Mail Address
(970) 975-0566		() -	todd.rees@wsp.com

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:	Frisco Community Development Corporation	Job Title:	Operations Manager for Frisco Community Development Corporation
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Name (In Print):	Wes Pierson	Phone:	972 292-5105
Signature:		Date:	5/11/23