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.

ON 1: General Information

SECTION 1: General Inform	<u>iation</u>									
1. Reason for Submission (If other is a	,			,						
New Permit, Registration or Authorization (Core Data Form should be submitted with the program application.)										
Renewal (Core Data Form should be					Othe	1 0	Property Transfer			
2. Customer Reference Number (if iss		Follow this link to search for CN or RN numbers in			Regul	ated Entity Reference	Number (ii	f issued)		
CN 605857168	<u>for</u>	Central Re		R	RN 100218643					
SECTION II: Customer Info	<u>ormation</u>									
4. General Customer Information	5. Effective Da	te for Cus	stomer Inf	ormati	ion Up	odates (mm/dd/yyyy)	5/31/2	022		
New Customer □ Update to Customer Information □ Change in Regulated Entity Ownership □ 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	automa	ticall	y bas	sed on what is cui	rrent and	active with the		
Texas Secretary of State (SOS)	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		e Tax ID (11 digits)				ederal Tax ID (9 digits)		<b>10. DUNS Number</b> ( <i>if applicable</i> ) 190075143		
0134188001	301176256	25670			81-	1304365	1900/3	)/3143		
11. Type of Customer:	ion	☐ Individual Part			Partnership:  General	tnership:  General Limited				
Government:   City   County   Federal   State   Other   Sole Proprietorship   Other:										
12. Number of Employees  ☐ 0-20 ☐ 21-100 ☐ 101-250 ☐ 251-500 ☐ 501 and higher ☐ 33. Independently Owned and Operated? ☐ Yes ☐ No										
14. Customer Role (Proposed or Actual) – as it relates to the Regulated Entity listed on this form. Please check one of the following										
□ Owner       □ Operator       □ Owner & Operator         □ Occupational Licensee       □ Responsible Party       □ Voluntary Cleanup Applicant       □ Other:										
6101 Frisco Square	Boulevard									
15. Mailing Address: 5th Floor	15. Mailing 5th Floor									
City Frisco		State	TX	ZII	P 7	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 Numbe	20. Fax Number (if applicable)					
( 972 ) 292-5127										
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)										
New Regulated Entity  ☐ Update to Regulated Entity Name  ☐ 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										

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  6. 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 ignature 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 dentified in field 39.													
City			7471 Old 5th Street										
City		tity:									T		
Solution to Physical Location   Solution				Frisco	State	TX	ZIF	) 1	75034	ZIP + 4			
25. Description to Physical Location: Physical Location: S MI N & 1 MI W OF INTX OF SW 121 & 289  26. Nearest City Frisco  33.140347  28. Longitude (W) In Decimal: 33.140347  28. Longitude (W) In Decimal: 33.140347  29. Longitude (W) In Decimal: 33.140347  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? 29. Primary Bic Code (4 digits) 34. Mailing Address:  City Frisco State TX ZIP 75034  35. E-Mail Address:  Type Type Type Type Type Type Type Type	24. County		Collin										
Solid   Soli			E	nter Physical I	ocation Descript	on if no st	reet a	ddress is	provided.				
Prisso			5 MI N	& 1 MI W (	OF INTX OF S	SW 121	& 28	39					
27. Latitude (N) In Decimal:   33.140347   28. Longitude (W) In Decimal:   -96.827804	26. Nearest City							S	tate	Nea	rest ZIP Code		
Degrees   Minutes   Seconds   Degrees   Minutes   Seconds   Seco	Frisco						TX			750			
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9199 9199 921190	33						38.91						
33. What is the Primary Business of this entity? (Do not repeat the SIC or NAICS description.)  Community development and preservation  34. Mailing Address:  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 (if applicable)  (972) 292-5127 (972) 292-5586  9. 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 sim. See the Core Data Form instructions for additional guidance.  Dam Safety Districts Edwards Aquifer Emissions Inventory Air Municipal Solid Waste New Source Review Air OSSF Petroleum Storage Tank PWS  Studge Storm Water OTTILL VITE Used Oil  WQ0002964000, TXR.05EU11  Voluntary Cleanup Waste Water Wastewater Agriculture Waster Rights R04100218643 - Complaint in vestigation 2015  EECTION 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  EECTION V: Authorized Signature  6. 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 gnature 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 gnature 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 gnature 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 leading to the proper in the	23. Filliary Sic Code (4 digits) Su Secondary Sic Lone (4 digits)							ICS Code					
Community development and preservation   6101 Frisco Square Boulevard   34. Mailing Address:   State   TX   ZIP   75034   ZIP + 4						921190							
34. Mailing Address:  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 (if applicable)  (972) 292-5127 Code and Programs and write in the permits/registration numbers that will be affected by the updates submitted on this mrs. See the Core Data Form instructions for additional guidance.  Dam Safety Districts Edwards Aquifer Emissions Inventory Air Influence Solutions for additional guidance.  Municipal Solid Waste Solid Waste Solid Waste Data Form instructions for additional guidance.  Title V Air Emissions Inventory Air Influence Solid Waste Petroleum Storage Tank Rod 100218643 - Complaint investigation 2015  ECCTION 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  ECCTION V: Authorized Signature  6. 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 gnature 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 tentified in field 39.					·	or NAICS des	scription	1.)					
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Dam Safety													
Dam Safety	<b>39. TCEQ Programs</b> orm. See the Core Data	<b>and ID</b> a Form ir	Numbers C nstructions for	Check all Progran r additional quida	ns and write in the pe ince.	rmits/registra	ation n	umbers tha	t will be affected	d by the updates	submitted on this		
Municipal Solid Waste						ifer		Emissions	Inventory Air		l Hazardous Waste		
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	<b>46.</b> By my signature ignature authority to dentified in field 39.	below, submit	I certify, to this form or	the best of my land the of	knowledge, that the entity specified in S	informatio ection II, F	n provield 6	vided in th and/or as	is form is true required for th	and complete, ne updates to the	and that I have the ID numbers		
				Job Title				nunity					

Name (In Print):	Wes Pierson	Phone:	972 292-5105
Signature:	Cerly Lucia	Date:	5/11/23