



Texas Commission on Environmental Quality

Permit or Registration Application for Municipal Solid Waste Facility

Part I

A. General Information

Facility Name:	Brazos Valley Disposal Facility			
Physical or Street Address (if available):	8825 Stewarts Meadow			
(City) (County)(State)(Zip Code):	College Station	Brazos	TX	77845
(Area Code) Telephone Number:	(979) 260-3867			
Charter Number:	N/A			

If the application is submitted on behalf of a corporation, provide the Charter Number as recorded with the Office of the Secretary of State for Texas.

Operator Name ¹ :	CCAA, LLC			
Mailing Address:	P.O. Box 5449			
(City) (County)(State)(Zip Code):	College Station	Brazos	TX	77805
(Area Code) Telephone Number:	(979) 260-0006			
(Area Code) FAX Number:	(979) 260-9814			
Charter Number:	0708990622			

If the permittee is the same as the operator, type "Same as Operator".

Permittee Name:	Same as Operator			
Physical or Street Address (if available):				
(City) (County)(State)(Zip Code):				
(Area Code) Telephone Number:				
Charter Number:				

If the application is submitted by a corporation or by a person residing out of state, the applicant must register an Agent in Service or Agent of Service with the Texas Secretary of State's office and provide a complete mailing address for the agent. The agent must be a Texas resident.

Agent Name:	N/A			
Mailing Address:				
(City) (County)(State)(Zip Code):				
(Area Code) Telephone Number:				
(Area Code) FAX Number:				

Application Type:

<input checked="" type="checkbox"/> Permit	<input type="checkbox"/> Major Amendment	<input type="checkbox"/> Minor Amendment
<input type="checkbox"/> Registration	<input type="checkbox"/> Modification	<input type="checkbox"/> Temporary Authorization
	<input type="checkbox"/> w/Public Notice	
	<input type="checkbox"/> w/out Public Notice	<input type="checkbox"/> Notice of Deficiency Response

¹ The operator has the duty to submit an application if the facility is owned by one person and operated by another [30 TAC 305.43(b)]. The permit will specify the operator and the owner who is listed on this application [Section 361.087 Texas Health and Safety Code].

Facility Classification:

<input type="checkbox"/>	Type I	<input checked="" type="checkbox"/>	Type IV	<input type="checkbox"/>	Type V	<input type="checkbox"/>	Type IX
<input type="checkbox"/>	Type I AE	<input type="checkbox"/>	Type IV AE	<input type="checkbox"/>	Type VI		

Activities covered by this application (check all that apply):

<input type="checkbox"/>	Storage	<input type="checkbox"/>	Processing	<input checked="" type="checkbox"/>	Disposal
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Waste management units covered by this application (check all that apply):

<input type="checkbox"/>	Containers	<input type="checkbox"/>	Tanks	<input type="checkbox"/>	Surface Impoundments	<input checked="" type="checkbox"/>	Landfills
<input type="checkbox"/>	Incinerators	<input type="checkbox"/>	Composting	<input type="checkbox"/>	Type IV Demonstration Unit	<input type="checkbox"/>	Type IX Energy/Material Recovery
<input type="checkbox"/>	Other (Specify)			<input type="checkbox"/>	Other (Specify)		
<input type="checkbox"/>	Other (Specify)			<input type="checkbox"/>	Other (Specify)		

Is this submittal part of a Consolidated Permit Processing request, in accordance with 30 TAC Chapter 33?

Yes No

If yes, state the other TCEQ program authorizations requested.

N/A

Provide a brief description of the portion of the facility covered by this application. For amendments, modifications, and temporary authorizations, provide a brief description of the exact changes to the permit or registration conditions and supporting documents referenced by the permit or registration. Also, provide an explanation of why the amendment, modification, or temporary authorization is requested.

By way of this application, the applicant, CCAA, LLC (CCAA), proposes to permit the ±42- acre property as a Type IV Municipal Solid Waste (MSW) Disposal Facility. The permitted maximum fill elevation of the facility is 399 feet above mean sea level (ft-msl) and the permitted capacity is approximately 4,243,800 cubic yards, with an approximated site life extending to the year 2018.

Does the application contain confidential Material? Yes No

If yes, cross-reference the confidential material *throughout the application* and submit as a separate document or binder conspicuously marked "CONFIDENTIAL."

Alternative Language Notice Instructions

For certain permit applications, public notice in an alternate language is required. If an elementary school or middle school nearest to the facility offers a bilingual program, notice may be required to be published in an alternative language. The Texas Education Code, upon which the TCEQ alternative language notice requirements are based, trigger a bilingual education program to apply to an entire school district should the requisite alternative language speaking student population exist. However, there may not exist any bilingual students at a particular school within a district which is required to offer the bilingual education program. For this reason, the requirement to publish notice in an alternative language is triggered if the nearest elementary or middle school, as a part of a larger school district, is required to make a bilingual education program available to qualifying students and either the school has students enrolled at such a program on-site, or has students who attend such a program at another location in satisfaction of the school's obligation to provide such a program as a member of a triggered district.

If it is determined that an alternative language notice is required, the applicant is responsible for ensuring that the publication in the alternate language is complete and accurate in that language. Electronic versions of the Spanish template examples are available from the TCEQ to help the applicant complete the publication in the alternative language.

Alternative Language Notice Application Form:

Alternative language notice confirmation for this application:

1. Is a bilingual program required by the Texas Education Code in the school district where the facility is located? YES NO **Bryan ISD**

(If NO, alternative language notice publication not required)

2. If YES to question 1, are students enrolled in a bilingual education program at either the elementary school or the middle school nearest to the facility? YES NO
Jane Long Middle School, Bryan ISD

(If YES to questions 1 and 2, alternative language publication is required; If NO to question 2, then consider the next question)

3. If YES to question 1, are there students enrolled at either the elementary school or the middle school nearest to the facility who attend a bilingual education program at another location? YES NO

(If Yes to questions 1 and 3, alternative language publication is required; If NO to question 3, then consider the next question)

4. If YES to question 1, would either the elementary school or the middle school nearest to the facility be required to provide a bilingual education program but for the fact that it secured a waiver from this requirement, as available under 19 TAC '89.1205(g)?
 YES NO

(If Yes to questions 1 and 4, alternative language publication is required; If NO to question 4, alternative language notice publication not required)

If a bilingual education program(s) is provided by either the elementary school or the middle school nearest to the facility, which language(s) is required by the bilingual program? **Spanish**

Note: Applicants for new permits and major amendments must make a copy of the administratively complete application available at a public place in the county where the facility is, or will be, located for review and copying by the public.

Public place where administratively complete permit application will be located.				
Public Place (e.g., public library, county court house, city hall, etc.):	Bryan + College Station Public Library System Larry J. Ringer Public Library			
Mailing Address:	1818 Harvey Mitchell Pkwy. S.			
(City) (County)(State)(Zip Code):	College Station	Brazos	TX	77845-4297
(Area Code) Telephone Number:	979-764-3416			

B. Facility Location

Except for Type I AE and Type IV AE landfill facilities, for permits, registrations, amendments, and modifications requiring public notice, provide the URL address of a publicly accessible internet web site where the application and all revisions to that application will be posted.
http://bvrpermits.weebly.com

Local Government Jurisdiction:	Brazos County
Within City Limits of:	N/A
Within Extraterritorial Jurisdiction of City of:	College Station
Is the proposed municipal or industrial solid waste disposal or processing facility located in an area in which the governing body of the municipality or county has prohibited the disposal or processing of municipal or industrial solid waste? (If YES, provide a copy of the ordinance or order):	
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	

Provide a description of the location of the facility with respect to known or easily identifiable landmarks.
Approximately 1,300 feet northwest of the intersection of Stewarts Meadow and FM 60 (Raymond Stotzer Parkway)

Detail the access routes from the nearest United States or state highway to the facility.
Farm to Market Road 60 (Raymond Stotzer Parkway) and Stewarts Meadow Road

Provide the latitudinal and longitudinal geographic coordinates of the facility.

Latitude	N 30° 34' 28.50"
Longitude	W 96° 24' 23.34"
Elevation (above msl)	287.86 feet, NAD83 Texas State Planes, Central Zone, US Foot

Is the facility within the Coastal Management Program boundary?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
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Texas Department of Transportation District Location (State Highway's):

TXDOT District Name & Number:	Bryan District #17			
District Engineer's Name:	Catherine Hejl, P.E.			
Street or P. O. Box:	1300 North Texas Avenue			
(City) (County)(State)(Zip Code):	Bryan	Brazos	TX	77803
(Area Code) Telephone Number:	(979) 778-9600			
(Area Code) FAX Number:	(979) 778-9709			

The local governmental authority or agency responsible for road maintenance (County Roads):

Agency Name	Brazos County Road and Bridge Department			
Contact Person's Name:	Gary Arnold			
Street or P. O. Box:	2617 Highway 21 West			
(City) (County)(State)(Zip Code):	Bryan	Brazos	TX	77803
(Area Code) Telephone Number:	(979) 822-2127			
(Area Code) FAX Number:	(979) 775-0453			

State Representative:

District Number:	House District #14			
State Representative's Name:	Fred Brown			
District Office Address:	1920 West Villa Maria Road, Suite 303			
(City) (County)(State)(Zip Code):	Bryan	Brazos	TX	77207
(Area Code) Telephone Number:	(979) 822-9797			

(Area Code) FAX Number:	(979) 822-7979			
State Senator:				
District Number:	Senate District #5			
State Senator's Name:	Steve Ogden			
District Office Address:	309 W. Main St., Suite 115			
(City) (County)(State)(Zip Code):	Round Rock	Williamson	TX	78664
(Area Code) Telephone Number:	(512) 463-0105			
(Area Code) FAX Number:	(512) 463-5713			

Council of Government (COG) Information:

COG Name:	Brazos Valley Council of Governments			
COG Representative's Name:	Candilyn McLean			
COG Representative's Title:	Program Manager			
Street or P. O. Box:	P. O. Drawer 4128			
(City) (County)(State)(Zip Code):	Bryan	Brazos	TX	77805-4128
(Area Code) Telephone Number:	(979) 595-2800			
(Area Code) FAX Number:	(979) 595-2810			

River Basin Information:

River Authority:	Brazos River Authority			
Contact Person's Name:	John B. Hofmann, Region Manager Lower/Central Basin			
Watershed Sub-Basin Name:	Central watershed, Brazos-Little Brazos sub-basin, Brazos River basin			
Street or P. O. Box:	4600 Cobbs Drive			
(City) (County)(State)(Zip Code):	Waco	McLennan	TX	76714
(Area Code) Telephone Number:	(254) 761-3100			
(Area Code) FAX Number:	(254) 761-3207			

This site is located in the following District of the U.S. Army Corps of Engineers:							
<input type="checkbox"/>	Albuquerque, NM	<input checked="" type="checkbox"/>	Ft. Worth, TX	<input type="checkbox"/>	Galveston, TX	<input type="checkbox"/>	Tulsa, OK

C. Maps *The maps and documents required by this form are included in Part I and II of the permit application documents. Drawings applicable to the information required below are referenced by their appropriate number as designated in the application.*

General

For permits, registrations, and amendments only, submit a topographic map, ownership map, county highway map, or a map prepared by a registered professional engineer or a registered surveyor which shows the facility and each of its intake and discharge structures and any other structure or location regarding the regulated facility and associated activities. Maps must be of material suitable for a permanent record, and shall be on sheets 8-1/2 inches by 14 inches or folded to that size, and shall be on a scale of not less than one inch equals one mile. The map shall depict the approximate boundaries of the tract of land owned or to be used by the applicant and shall extend at least one mile beyond the tract boundaries sufficient to show the following:

each well, spring, and surface water body or other water in the state within the map area;

1 See Part I/II, Figure 3-2

2 See Part I/II, Figure 3-2

3 See Part I/II, Figures 1-1 and 3-1

the general character of the areas adjacent to the facility, including public roads, towns and the nature of development of adjacent lands such as residential, commercial, agricultural, recreational, undeveloped, etc;

See Part I/II, Figures 3-1 and 3-4

the location of any waste disposal activities conducted on the tract not included in the application;
and

See Part I/II, Figure 2-1-1

the ownership of tracts of land adjacent to the facility and within a reasonable distance from the proposed point or points of discharge, deposit, injection, or other place of disposal or activity.

See Part I/II, Figure 1-4

General location maps

For permits, registrations, and amendments only, submit at least one general location map at a scale of one-half inch equals one mile. This map shall be all or a portion of a county map prepared by Texas Department of Transportation (TxDOT). If TxDOT publishes more detailed maps of the proposed facility area, the more detailed maps shall also be included in Part I. Use the latest revision of all maps.

See Part I/II, Figures 1-1 and 1-2

Land ownership map

Provide a map that locates the property owned by adjacent and potentially affected landowners. The maps should show all property ownership within 1/4 mile of the facility, on-site facility easement holders, and all mineral interest ownership under the facility.

See Part I/II, Figure 1-4

Landowners list

Provide the adjacent and potentially affected landowners' list, keyed to the land ownership map with each property owner's name and mailing address. The list shall include all property owners within 1/4 mile of the facility, easement holders, and all mineral interest ownership under the facility. Provide the property, easement holders', and mineral interest owners' names and mailing addresses derived from the real property appraisal records as listed on the date that the application is filed. Provide the list in electronic form, as well. **See Part I/II, Figure 1-4**

D. Property owner information

For permits, registrations, amendments, and modifications that change the legal description, a change in owner, or a change in operator only, provide the following:

(1) the legal description of the facility; **See the Boundary Map and Metes and Bounds Description included in the Documentation Section, and Part I/II, Figure 1-5**

- (A) the abstract number as maintained by the Texas General Land Office for the surveyed tract of land;
- (B) the legal description of the property and the county, book, and page number or other generally accepted identifying reference of the current ownership record;
- (C) for property that is platted, the county, book, and page number or other generally accepted identifying reference of the final plat record that includes the acreage encompassed in the application and a copy of the final plat, in addition to a written legal description;
- (D) a boundary metes and bounds description of the facility signed and sealed by a registered professional land surveyor;
- (E) on-site easements at the facility, and
- (F) drawings of the boundary metes and bounds description; and

(2) a property owner affidavit signed by the owner. **Attached as page 9 of this form**

E. Legal authority

Provide verification of the legal status of the owner and operator, such as a one-page certificate of incorporation issued by the secretary of state. List all persons having over a 20% ownership in the proposed facility. **See certificate and Lease Agreement included in the Documentation Section.**

Indicate Ownership status of the facility:									
<input type="checkbox"/>	Private	<input type="checkbox"/>	Corporation	<input checked="" type="checkbox"/>	Partnership	<input type="checkbox"/>	Proprietorship	<input type="checkbox"/>	Non-Profit Organization
<input type="checkbox"/>	Public	<input type="checkbox"/>	Federal	<input type="checkbox"/>	Military	<input type="checkbox"/>	State	<input type="checkbox"/>	Regional
<input type="checkbox"/>	County	<input type="checkbox"/>	Municipal	<input type="checkbox"/>	Other (Specify)				

Does the operator own the facility units and the facility property?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
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If "No," for permits, registrations, amendments, and modifications that changes the legal description, a change in owner, or a change in operators submit a copy of the lease for the use of or the option to buy the facility units or facility property, as appropriate, and identify: (See Lease Agreement in Document Section.)

Owner Name:	Kelly Burt Dozer, Inc.			
Street or P. O. Box:	6217 East Highway 21			
(City) (County)(State)(Zip Code):	Bryan	Brazos	TX	77802
(Area Code) Telephone Number:	979-778-1902			
(Area Code) FAX Number:	979-778-3802			
Charter Number:	1097555			

F. Evidence of competency

For permits, registrations, amendments, and modifications that change the legal description, a change in owner, or a change in operators submit a list of all Texas solid waste sites that the owner and operator have owned or operated within the last ten years.

Site Name	Site Type	Permit/Reg. No.	County	Dates of Operation
See Evidence of Competency included in Documentation Section				

Submit a list of all solid waste sites in all states, territories, or countries in which the owner and operator have a direct financial interest.

Site Name	Location	Dates of Operation	Regulatory Agency (Name & Address)
See Evidence of Competency included in Documentation Section			

A licensed solid waste facility supervisor, as defined in 30 TAC Chapter 30, Occupational Licenses and Registrations will be employed before commencing facility operation.

Provide the names of the principals and supervisors of the owner's and operator's organization, together with previous affiliations with other organizations engaged in solid waste activities.

Name	Previous Affiliation	Other Organization
See Evidence of Competency included in Documentation Section		

For landfill permit applications only, evidence of competency to operate the facility shall also include landfilling and earthmoving experience if applicable, and other pertinent experience, or licenses as described in 30 TAC Chapter 30 possessed by key personnel. The number and size of each type of equipment to be dedicated to facility operation will be specified in greater detail on Part IV of the application within the site operating plan.

Landfilling/Earthmoving Equipment Types	Personnel Experience or Licenses
See Evidence of Competency included in Documentation Section	

For mobile liquid waste processing units, submit a list of all solid waste, liquid waste, or mobile waste units that the owner and operator have owned or operated within the past five years. Submit a list of any final enforcement orders, court judgments, consent decrees, and criminal convictions of this state and the federal government within the last five years relating to compliance with applicable legal requirements relating to the handling of solid or liquid waste under the jurisdiction of the commission or the United States Environmental Protection Agency. Applicable legal requirement means an environmental law, regulation, permit, order, consent decree, or other requirement.

Solid waste, liquid waste, or mobile waste units owned or operated within past 5 years	Texas and federal final enforcement orders, court judgments, consent decrees, and criminal convictions
N/A	N/A

G. Appointments

Provide documentation that the person signing the application meets the requirements of 30 TAC §305.44, Signatories to Applications. If the authority has been delegated, provide a copy of the document issued by the governing body of the owner or operator authorizing the person that signed the application to act as agent for the owner or operator. *(See Appointment included in Documentation Section)*

H. Application Fees

For a new permit, registration, amendment, modification, or temporary authorization, submit a \$150 application fee.

For authorization to construct an enclosed structure over an old, closed municipal solid waste landfill in accordance with 30 TAC 330 Subchapter T, submit a \$2,500 application fee.

If paying by check, send payment to:

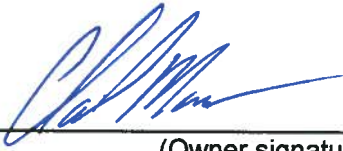
Texas Commission on Environmental Quality
 Financial Administration Division, MC 214
 P. O. Box 13087
 Austin, Texas 78711-3087

Payment maybe made online using TCEQ e-pay at www.tceq.state.tx.us/e-services/	
E-pay confirmation number	

PROPERTY OWNER AFFIDAVIT

"I, Charles Mancuso, Operating Manager/President on behalf of CCAA, LLC
(property owner)

acknowledge that the State of Texas may hold me either jointly or severally responsible for the operation, maintenance, and closure and post-closure care of the facility. For a facility where waste will remain after closure, I acknowledge that I have a responsibility to file with the county deed records an affidavit to the public advising that the land will be used for a solid waste facility prior to the time that the facility actually begins operating as a municipal solid waste landfill facility, and to file a final recording upon completion of disposal operations and closure of the landfill units in accordance with Title 30 Texas Administrative Code §330.19, Deed Recordation. I further acknowledge that I or the operator and the State of Texas shall have access to the property during the active life and post-closure care period, if required, after closure for the purpose of inspection and maintenance."



(Owner signature)

JUNE 3 2011

(Date)

Signature Page

I, Charles Mancuso, President
(Operator) (Title)

certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature: [Handwritten Signature] Date: JUNE 3 2011

TO BE COMPLETED BY THE OPERATOR IF THE APPLICATION IS SIGNED BY AN AUTHORIZED REPRESENTATIVE FOR THE OPERATOR

I, _____, hereby designate _____
(Print or Type Operator Name) (Print or Type Representative Name)

as my representative and hereby authorize said representative to sign any application, submit additional information as may be requested by the Commission; and/or appear for me at any hearing or before the Texas Commission on Environmental Quality in conjunction with this request for a Texas Water Code or Texas Solid Waste Disposal Act permit. I further understand that I am responsible for the contents of this application, for oral statements given by my authorized representative in support of the application, and for compliance with the terms and conditions of any permit which might be issued based upon this application.

Printed or Typed Name of Operator or Principal Executive Officer

Signature

SUBSCRIBED AND SWORN to before me by the said Charles MANCUSO

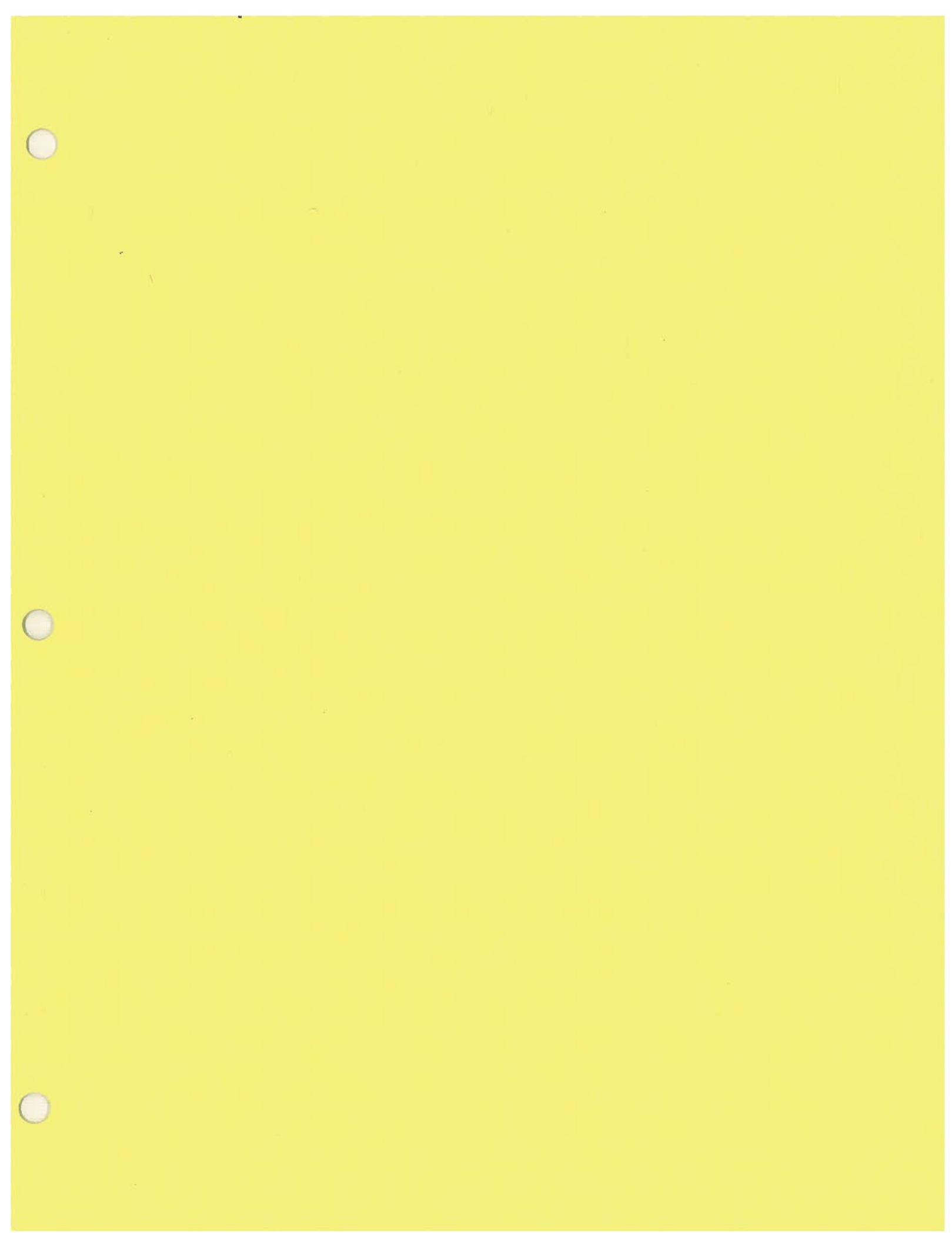
On this 3 day of June, 2011

My commission expires on the 14 day of November, 2013



Kelly J. Crowe
Notary Public in and for
Harris County, Texas

(Note: Application Must Bear Signature & Seal of Notary Public)





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 type="checkbox"/> Other	
2. Attachments Describe Any Attachments: (ex. Title V Application, Waste Transporter Application, etc.)		
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Parts I through IV, Solid Waste Permit Application		
3. Customer Reference Number (if issued)	Follow this link to search for CN or RN numbers in Central Registry**	4. Regulated Entity Reference Number (if issued)
CN 603110115		RN

SECTION II: Customer Information

5. Effective Date for Customer Information Updates (mm/dd/yyyy)			
6. Customer Role (Proposed or Actual) – as it relates to the <u>Regulated Entity</u> listed on this form. Please check only 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: _____
7. General Customer Information			
<input type="checkbox"/> New Customer	<input type="checkbox"/> Update to Customer Information	<input type="checkbox"/> Change in Regulated Entity Ownership	
<input type="checkbox"/> Change in Legal Name (Verifiable with the Texas Secretary of State)		<input checked="" type="checkbox"/> No Change**	
**If "No Change" and Section I is complete, skip to Section III – Regulated Entity Information.			
8. Type of Customer:		<input type="checkbox"/> Corporation	<input type="checkbox"/> Individual
<input type="checkbox"/> City Government	<input type="checkbox"/> County Government	<input type="checkbox"/> Federal Government	<input type="checkbox"/> Sole Proprietorship- D.B.A
<input type="checkbox"/> Other Government	<input type="checkbox"/> General Partnership	<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Other: _____
9. Customer Legal Name (If an individual, print last name first: ex: Doe, John)			End Date:
10. Mailing Address:			
City			
State			
ZIP			
ZIP + 4			
11. Country Mailing Information (if outside USA)		12. E-Mail Address (if applicable)	
13. Telephone Number		14. Extension or Code	15. Fax Number (if applicable)
() -			() -
16. Federal Tax ID (9 digits)	17. TX State Franchise Tax ID (11 digits)	18. DUNS Number (if applicable)	19. TX SOS Filing Number (if applicable)
20. Number of Employees			21. Independently Owned and Operated?
<input 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 type="checkbox"/> Yes		<input type="checkbox"/> No

SECTION III: Regulated Entity Information

22. 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 type="checkbox"/> Update to Regulated Entity Information <input type="checkbox"/> No Change** (See below)			
**If "NO CHANGE" is checked and Section I is complete, skip to Section IV, Preparer Information.			
23. Regulated Entity Name (name of the site where the regulated action is taking place)			
Brazos Valley Disposal Facility			

24. Street Address of the Regulated Entity: <i>(No P.O. Boxes)</i>	8825 Stewarts Meadow						
	City	College Station	State	TX	ZIP	77845	ZIP + 4
25. Mailing Address:	P.O. Box 5449						
	City	College Station	State	TX	ZIP	77805	ZIP + 4
26. E-Mail Address:							
27. Telephone Number	28. Extension or Code			29. Fax Number (if applicable)			
(979) 260-0006				(979) 260-9814			
30. Primary SIC Code (4 digits)	31. Secondary SIC Code (4 digits)		32. Primary NAICS Code (5 or 6 digits)		33. Secondary NAICS Code (5 or 6 digits)		
4953			562212				
34. What is the Primary Business of this entity? <i>(Please do not repeat the SIC or NAICS description.)</i>							
Type IV Disposal Facility							

Questions 34 – 37 address geographic location. Please refer to the instructions for applicability.

35. Description to Physical Location:							
36. Nearest City	County			State		Nearest ZIP Code	
37. Latitude (N) In Decimal:	38. Longitude (W) In Decimal:						
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds		

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 or the updates may not be made. If your Program is not listed, check other and write it in. 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"/> Industrial Hazardous Waste	<input checked="" 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 type="checkbox"/> Stormwater	<input type="checkbox"/> Title V – Air	<input type="checkbox"/> Tires	<input type="checkbox"/> Used Oil	<input type="checkbox"/> Utilities
<input type="checkbox"/> Voluntary Cleanup	<input type="checkbox"/> Waste Water	<input type="checkbox"/> Wastewater Agriculture	<input type="checkbox"/> Water Rights	<input type="checkbox"/> Other:


SECTION IV: Preparer Information

40. Name:	Lou Ann Lowe, P.E.	41. Title:	Senior Engineer
42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Mail Address
(281) 821-6868	24013	(281) 821-6870	llowe@golder.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 9 and/or as required for the updates to the ID numbers identified in field 39.

(See the Core Data Form instructions for more information on who should sign this form.)

Company:	CCAA, LLC	Job Title:	Operating Manager/President
Name (In Print):	Charles Mancuso	Phone:	(979) 260-0006
Signature:		Date:	June 3 / 2011