**Texas Commission on Environmental Quality**



**Form OP-UA19**

**Wastewater Unit Attributes**

**General:**

This form is used to provide a description and data pertaining to all wastewater units and streams with potentially applicable requirements associated with a particular regulated entity number and application. Each table number, along with the possibility of a corresponding letter (i.e., Table 1a, Table 1b), corresponds to a certain state or federal rule. If the rule on the table is not potentially applicable to a wastewater unit or stream, then it should be left blank and need not be submitted with the application. If the codes entered by the applicant show negative applicability to the rule or sections of the rule represented on the table, then the applicant need not complete the remainder of the table(s) that corresponds to the rule. Further instruction as to which questions should be answered and which questions should not be answered are located in the “Specific” section of the instruction text. The following is included in this form:

**Tables 1a and 1b:** Title 30 Texas Administrative Code Chapter 115 (30 TAC Chapter 115)

Subchapter B: Industrial Wastewater

The Texas Commission on Environmental Quality (TCEQ) regulated entity number (RNXXXXXXXXX) and the application area name from Form OP-1 (Site Information Summary) must appear in the header of each page for the purpose of identification for the initial submittal. The date of the initial form submittal must also be included and should be consistent throughout the application (*MM-DD-YYYY*). **Leave the permit number blank for the initial form submittal.** If this form is included as part of the permit revision process, enter the permit number assigned by the TCEQ, the area name (from Form OP-1), the date of the revision submittal, and the regulated entity number.

Unit attribute questions that do not require a response from all applicants are preceded by qualification criteria in the instructions. If the unit does not meet the qualification criteria, a response to the question is not required. **Anytime a response is not required based on the qualification criteria, leave the space on the form blank.**

**Notwithstanding any qualification criteria in the form instructions or information provided in other TCEQ guidance, the applicant may leave an attribute question blank (or indicate “N/A” for “Not Applicable”) if the attribute is not needed for the applicable requirement determinations of a regulation for a unit.**

In some situations, the applicant has the option of selecting alternate requirements, limitations, and/or practices for a unit. Note that these alternate requirements, limitations, and/or practices must have the required approval from the TCEQ Executive Director and/or the U.S. Environmental Protection Agency Administrator before the federal operating permit application is submitted.

The Texas Commission on Environmental Quality (TCEQ) **requires** that a Core Data Form be submitted on all incoming registrations unless **all** of the following are met: the Regulated Entity and Customer Reference Numbers have been issued by the TCEQ and no core data information has changed. The Central Registry, a common record area of the TCEQ which maintains information about TCEQ customers and regulated activities, such as company names, addresses, and telephone numbers. This information is commonly referred as “core data.” The Central Registry provides the regulated community with a central access point within the agency to check core data and make changes when necessary. When core data about a facility is moved to the Central Registry, two new identification numbers are assigned: the *Customer Reference (CN)* number and the *Regulated Entity (RN)* number. The Core Data Form is required if facility records are not yet part of the Central Registry or if core data for a facility has changed. If this is the initial registration, permit, or license for a facility site, then the Core Data Form must be completed and submitted with application or registration forms. If amending, modifying, or otherwise updating an existing record for a facility site, the Core Data Form is not required, unless any core data information has changed. To review additional information regarding the Central Registry, go to the TCEQ Web site at [www.tceq.texas.gov/permitting/central\_registry/guidance.html](http://www.tceq.texas.gov/permitting/central_registry/guidance.html).

**Specific:**

**Table 1a: Title 30 Texas Administrative Code Chapter 115 (30 TAC Chapter 115)**

**Subchapter B: Industrial Wastewater**

* *Complete Table 1a only for affected wastewater streams of an affected source category located in a county subject to 30 TAC Chapter 115. The plant in which these components are located must have:*

*1. an annual volatile organic compound (VOC) loading of greater than 10 Mg (11.03 tons); and*

*2. the provisions of Title 40 Code of Federal Regulations Part 63 (40 CFR 63), Subpart G are not used as an alternative to complying with this division relating to Industrial Wastewater.*

**Unit ID No.:** Enter the identification number (ID No.) for the component of each wastewater storage, handling, transfer, and/or treatment facility (wastewater storage tank, surface impoundment, oil-water separator, biotreatment unit, or wet weather retention basin) (maximum 10 characters) as listed on Form OP-SUM (Individual Unit Summary).

**SOP Index No.**: Site operating permit (SOP) applicants should indicate the SOP Index Number for the unit or group of units (maximum 15 characters consisting of numeric, alphanumeric characters, and/or dashes prefixed by a code for the applicable regulation [i.e., 60KB-*XXXX*]). For additional information relating to SOP Index Numbers, please refer to the TCEQ guidance document “Federal Operating Permit Application.”

**Petroleum Refinery:** Enter “YES” if the affected source category is a petroleum refinery. Otherwise, enter “NO.”

**Alternate Control Requirement:** Enter “YES” if the TCEQ Executive Director has approved an alternate control requirement (ACR) or exemption criteria in accordance with 30 TAC § 115.910. Otherwise, enter “NO.”

**ACR ID No.:** If an ACR has been approved, then enter the corresponding ACR unique identifier for each unit or process. If the unique identifier is unavailable, then enter the date of the ACR approval letter in the table column. The unique identifier and/or the date of the approval letter is contained in the compliance file under the appropriate account number. Otherwise, leave this column blank.

* **Continue only if “Alternate Control Requirement” is “NO.”**

**90% Overall Control Option:** Enter “YES” if the 90% overall control option is used as an alternative to the control requirements of 30 TAC § 115.142. Otherwise, enter “NO.”

* **Continue only if “90% Overall Control Option” is “NO.”**

**Safety Hazard Exemption:** Enter “YES” if the TCEQ Executive Director has approved a request to exempt the wastewater component because compliance with the control requirements of 30 TAC § 115.142 would create a safety hazard. Otherwise, enter “NO.”

**Safety Hazard Exemption ID No.:** If an exemption of the wastewater component has been approved, then enter the corresponding executive director exemption unique identifier for each unit or process. If the unique identifier is unavailable, then enter the date of the executive director exemption approval letter (maximum 10 characters). The unique identifier and/or the date of the approval letter is contained in the compliance file under the appropriate regulated entity number. Otherwise, leave this column blank.

* **Continue only if “Safety Hazard Exemption” is “NO.”**

**Table 1b: Title 30 Texas Administrative Code Chapter 115 (30 TAC Chapter 115)**

**Subchapter B: Industrial Wastewater**

**Unit ID No.:** Enter the identification number (ID No.) for the component of each wastewater storage, handling, transfer, and/or treatment facility (wastewater storage tank, surface impoundment, or oil-water separator) (maximum 10 characters) as listed on Form OP-SUM (Individual Unit Summary).

**SOP Index No.**: Site operating permit (SOP) applicants should indicate the SOP Index Number for the unit or group of units (maximum 10 characters consisting of numeric, alphanumeric characters, and/or dashes prefixed by a code for the applicable regulation [i.e., 60KB-*XXXX*]). For additional information relating to SOP Index Numbers, please refer to the TCEQ guidance document “Federal Operating Permit Application.”

**Wastewater Component Type:** Select one of the following codes that apply to the wastewater component type. Enter the code on the form.

Code Description

BASIN A properly operated wet weather retention basin as defined in 30 TAC § 115.140

EXEMPT A wastewater component that is exempted from the control requirements of 30 TAC § 115.142 because it handles only exempted wastewater streams under 30 TAC § 115.147(2)

BIO A properly operated biotreatment unit

OTHER Component other than those listed above

* **Continue only if “Wastewater Component Type” is “OTHER.”**

**Roof or Seal Type:** Select one of the following codes that best represents the wastewater component’s roof or seal combination type. Enter the code on the form.

Code Description

FLT-V Floating roof or internal floating roof wastewater component with a vapor mounted primary seal

FLOA Floating roof or internal floating roof wastewater component tank that does not have a vapor mounted primary seal

NONE The wastewater component does not have a floating roof or internal floating roof

* **Complete the rest of this form only if “Roof or Seal Type” is “NONE.”**

**Control Devices:** Select one of the following codes that apply to the control device utilized to comply with 30 TAC § 115.142. Enter the code on the form.

Code Description

ENCLNC Enclosed non-catalytic combustion device

CATA Catalytic incinerator

CHILL Condenser (chiller)

CARB Carbon adsorber

FLARE Flare

STRIP Steam Stripper

VAPCOMB Vapor Combustor

OTHER Other vapor control system

**Control Device ID No.:** If applicable, enter the identification number (ID No.) for the control device to which emissions are routed. This number should be consistent with the control device identification number (ID No.) listed on Form OP‑SUM. If there is no control device, then leave this column blank (maximum 10 characters).

**Monitoring Type:** Enter “YES” if the TCEQ Executive Director has approved other monitoring methods for the emission control device or other devices installed, in lieu of the monitoring requirements of 30 TAC

§§ 115.144(3)(A) - (H). Otherwise, enter “NO.”

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**Wastewater Unit Attributes**

**Form OP-UA19 (Page 1)**

**Federal Operating Permit Program**

**Table 1a: Title 30 Texas Administrative Code Chapter 115 (30 TAC Chapter 115)**

**Subchapter B: Industrial Wastewater**

| **Date:** | **Permit No.:** | **RN Number:** |
| --- | --- | --- |
| **Area Name:** | **CN Number:** |

| **Unit ID No.** | **SOP Index No.** | **Petroleum Refinery** | **Alternate Control Requirement** | **ACR ID No.** | **90% Overall Control Option** | **Safety Hazard Exemption** | **Safety Hazard Exemption ID No.** |
| --- | --- | --- | --- | --- | --- | --- | --- |
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**Wastewater Unit Attributes**

**Form OP-UA19 (Page 2)**

**Federal Operating Permit Program**

**Table 1b: Title 30 Texas Administrative Code Chapter 115 (30 TAC Chapter 115)**

**Subchapter B: Industrial Wastewater**

| **Date:** | **Permit No.:** | **RN Number:** |
| --- | --- | --- |
| **Area Name:** | **CN Number:** |

| **Unit ID No.** | **SOP Index No.** | **Wastewater Component Type** | **Roof or Seal Type** | **Control Devices** | **Control Device ID No.** | **Monitoring Type** |
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