

Texas Commission on Environmental Quality

Industrial Notice of Intent Renewal

TXR05V753

Site Information (Regulated Entity)

What is the name of the site to be authorized?	ASSOCIATED AIR CENTER
Does the site have a physical address?	No
Because there is no physical address, describe how to locate this site:	ON STREET
City	DALLAS
State	TX
ZIP	75209
County	DALLAS
Latitude (N) (##.#####)	32.85
Longitude (W) (-###.#####)	-96.85
Primary SIC Code	3721
Secondary SIC Code	
Primary NAICS Code	
Secondary NAICS Code	
Regulated Entity Site Information	
What is the Regulated Entity's Number (RN)?	RN105274823
What is the name of the Regulated Entity (RE)?	ASSOCIATED AIR CENTER
Does the RE site have a physical address?	No
Because there is no physical address, describe how to locate this site:	ON STREET
City	DALLAS
State	TX
ZIP	75209
County	DALLAS
Latitude (N) (##.#####)	32.85028
Longitude (W) (-###.#####)	-96.85167
What is the primary business of this entity?	

ASSOCIA-Customer (Applicant) Information

How is this applicant associated with this site?	Operator
What is the applicant's Customer Number (CN)?	CN601594575
Type of Customer	Organization
Full legal name of the applicant:	
Legal Name	ASSOCIATED AIR CENTER INC
Texas SOS Filing Number	011516000
Federal Tax ID	751169579

State Franchise Tax ID 17511695797

DUNS Number

Number of Employees 251-500

Independently Owned and Operated? No

I certify that the full legal name of the entity applying for this permit has been provided and is legally authorized to do business in Texas. Yes

Responsible Authority Contact

Organization Name ASSOCIATED AIR CENTER INC

Prefix

First AARON

Middle

Last MYERS

Suffix

Title ENVIRONMENTAL ANALYST

Responsible Authority Mailing Address

Enter new address or copy one from list:

Address Type Domestic

Mailing Address (include Suite or Bldg. here, if applicable) 8321 LEMMON AVE

Routing (such as Mail Code, Dept., or Attn:) ATTN: AARON MYERS, EHS

City DALLAS

State TX

ZIP 75209

Phone (###-###-####) 9725597078

Extension

Alternate Phone (###-###-####)

Fax (###-###-####) 9725597058

E-mail AARON.MYERS@ASSOCIATED.AERO

Billing Contact

Responsible contact for receiving billing statements:

Select the permittee that is responsible for payment of the annual fee. CN601594575, ASSOCIATED AIR CENTER INC

Organization Name ASSOCIATED AIR CENTER LP

Prefix

First Aaron

Middle

Last Myers

Suffix

Title Environmental Analyst

Enter new address or copy one from list:

Mailing Address

Address Type	Domestic
Mailing Address (include Suite or Bldg. here, if applicable)	8321 LEMMON AVE
Routing (such as Mail Code, Dept., or Attn:)	ATTN: AARON MYERS, EHS
City	DALLAS
State	TX
ZIP	75209
Phone (###-###-####)	9725597245
Extension	
Alternate Phone (###-###-####)	
Fax (###-###-####)	9725597058
E-mail	

Application Contact

Person TCEQ should contact for questions about this application:

Same as another contact?	ASSOCIATED AIR CENTER INC
Organization Name	ASSOCIATED AIR CENTER LP
Prefix	
First	AARON
Middle	
Last	MYERS
Suffix	
Title	ENVIRONMENTAL ANALYST
Enter new address or copy one from list:	ASSOCIATED AIR CENTER INC

Mailing Address	
Address Type	Domestic
Mailing Address (include Suite or Bldg. here, if applicable)	8321 LEMMON AVE
Routing (such as Mail Code, Dept., or Attn:)	ATTN: AARON MYERS, EHS
City	DALLAS
State	TX
ZIP	75209
Phone (###-###-####)	9725597078
Extension	
Alternate Phone (###-###-####)	
Fax (###-###-####)	9725597058
E-mail	AARON.MYERS@ASSOCIATED.AERO

INOI Renewal General Characteristics

1) Is the project located on Indian Country Lands?	No
2) What is the Sector(s) that applies to the	AB

industrial activity at your facility?

3) If applicable, select the Activity Code(s) that corresponds with the Sector or if seeking coverage based on federal effluent guidelines, select the qualifying activity type(s).

4) What is the Primary SIC Code that is within the range listed and corresponds with the selected Activity or Sector in the general permit? 3721

5) If applicable, what is the Secondary SIC Code(s)?

6) What is the name of the first water body(s) to receive the storm water runoff or potential runoff from the site? KNIGHTS BRANCH, LAKE BACHMAN

7) What is the segment number(s) of the classified water body that the discharge will eventually reach? 0822

8) Are any of the surface water body(s) receiving the discharge or potential discharge on the latest EPA-approved CWA 303(d) list of impaired waters? Yes

8.a. What is the name of the impaired water body(s)? LAKE BACHMAN

9) Do any of the surface water body(s) receiving the discharge or potential discharge have an EPA-approved or established total maximum daily load (TMDL)? Yes

10) Is the discharge into an MS4? Yes

10.a. What is the name of the MS4 Operator? Dallas Water Utilities

11) Is the discharge or potential discharge within the Recharge Zone, Contributing zone, or Contributing zone within the Transition zone of the Edwards Aquifer? No

12) I certify that a Storm Water Pollution Prevention Plan has been prepared and implemented as required in the general permit. Yes

13) I certify that I have obtained a copy and understand the terms and conditions of the Multi Sector General Permit (TXR050000). Yes

14) I understand that permits active on September 1 of each year will be assessed an Annual Water Quality fee in the amount specified in the Multi Sector General Permit. Yes

15) I understand that I must terminate this permit when it is no longer needed. Yes

Certification

I certify that I am authorized under 30 Texas Administrative Code 305.44 to sign this document and can provide documentation in proof of such authorization upon request.

I 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.

1. I am Aaron R Myers, the owner of the STEERS account ER018992.
2. I have the authority to sign this data on behalf of the applicant named above.
3. I have personally examined the foregoing and am familiar with its content and the content of any attachments, and based upon my personal knowledge and/or inquiry of any individual responsible for information contained herein, that this information is true, accurate, and complete.
4. I further certify that I have not violated any term in my TCEQ STEERS participation agreement and that I have no reason to believe that the confidentiality or use of my password has been compromised at any time.
5. I understand that use of my password constitutes an electronic signature legally equivalent to my written signature.
6. I also understand that the attestations of fact contained herein pertain to the implementation, oversight and enforcement of a state and/or federal environmental program and must be true and complete to the best of my knowledge.
7. I am aware that criminal penalties may be imposed for statements or omissions that I know or have reason to believe are untrue or misleading.
8. I am knowingly and intentionally signing Industrial Notice of Intent Renewal.
9. My signature indicates that I am in agreement with the information on this form, and authorize its submittal to the TCEQ.

OPERATOR Signature: Aaron R Myers OPERATOR

Account Number:	ER018992
Signature IP Address:	163.234.25.199
Signature Date:	2011-11-09
Signature Hash:	C96C1A92CA8C8868B7DDE01D0BF6C867D60D1CE81B318DB613EA0944BD12E6E0
Form Hash Code at time of Signature:	E3BBCEB2E4571BD945F2CBEF16A9E03AA12A6570A99F4C3211C4FDDDA36ED124

Fee Payment

Transaction by:	The application fee payment transaction was made by ER018992/Aaron R Myers
Paid by:	The application fee was paid by AARON MYERS
Fee Amount:	100
Paid Date:	The application fee was paid on 2011-11-09
Transaction/Voucher number:	The transaction number is 582EA000110004 and the voucher number is 141672

Submission

Reference Number:	The application reference number is 37044
Submitted by:	The application was submitted by ER018992/Aaron R Myers
Submitted Timestamp:	The application was submitted on 2011-11-09 at 09:47:02 CST

Submitted From:	The application was submitted from IP address 163.234.25.16
Confirmation Number:	The confirmation number is 49964
Steers Version:	The STEERS version is 5.67
Permit Number:	The permit number is TXR05V753

Additional Information

Application Creator: This account was created by Aaron R Myers