



For EAA Use Only:

Form: EAA 2 (Jan 2018)

Entity ID: _____

Facility ID: _____

900 E. Quincy, San Antonio, Texas 78215
(210) 222-2204 or 1-800-292-1047 Fax (210) 222-9869

Regulated Substances Registration

1. This registration must be completed, signed, and submitted to the Edwards Aquifer Authority (EAA) for any facility storing Regulated Substances in an aggregate quantity of more than 1,000 gallons in containers less than 500 gallons. These regulations may be viewed on the EAA website at <http://www.edwardsaquifer.org>.
2. The registration must be typed or printed legibly using ink.
3. Information submitted pursuant to this registration form shall be revised to address any related changes that may occur at the facility.
4. Incomplete registrations will be returned to the registrant for completion.
5. Each registration shall be **renewed every three years**.
6. Please note, if the applicant is a **Partnership**, the name of the partnership shall be followed by the words "a partnership" and if a **Trustee** acting on behalf of another, the trustee's name shall be followed by the word "trustee."
7. If one **other than the named applicant** executes the registration, the person executing the registration shall complete Part IV of this registration.

I. - Facility Information: Please provide the following:

1. Facility Name: _____
2. Physical Address: (Street) _____ (City) _____ (Zip) _____
3. Mailing Address: (Street) _____ (City) _____ (State) ____ (Zip) _____
4. Latitude: _____ Longitude: _____
5. On-Site Contact Name: _____ On-Site Phone. () _____

II. - Registration Type:

- Initial Registration (i.e. The facility has never been registered with the EAA.)
- Three-year renewal
- Amended Registration (Previously registered facility that has modified the type of Regulated Substance stored at the facility, the quantity of Regulated Substances stored at the facility, Ownership, Operator or Contact person).

III. - Applicant Information:

Section A - Owner Information:

1. Name of Entity: _____
2. Phone () _____ Fax () _____
3. E-mail address: _____
4. Physical Address: (Street) _____ (City) _____ (Zip) _____
5. Mailing Address: (Street) _____ (City) _____ (State) ____ (Zip) _____
6. Contact Full Name: _____ Contact Phone () _____
7. Contact Job Title: _____ Contact E-mail Address: _____
8. Contact Mailing Address: (Street) _____ (City) _____ (State) ____ (Zip) _____

Section B - Operator Information (if different from Owner):

1. Name of Entity: _____
2. Phone () _____ Fax () _____
3. E-mail address: _____
4. Physical Address: (Street) _____ (City) _____ (Zip) _____
5. Mailing Address: (Street) _____ (City) _____ (State) ____ (Zip) _____
6. Contact Full Name: _____ Contact Phone () _____
7. Contact Job Title: _____ Contact E-mail Address: _____
8. Contact Mailing Address: (Street) _____ (City) _____ (State) ____ (Zip) _____

IV. - Authorized Representative Information: If the applicant designates an authorized representative, please provide the following:

1. Name of Entity: _____
2. Phone () _____ Fax () _____
3. E-mail address: _____
4. Describe relationship to applicant (agent, officer, attorney, etc...) _____
5. Physical Address: (Street) _____ (City) _____ (Zip) _____
6. Mailing Address: (Street) _____ (City) _____ (State) ____ (Zip) _____
7. Contact Name: _____ Contact Telephone No. () _____
8. Contact Job Title: _____ Contact E-mail Address: _____
9. Contact Mailing Address: (Street) _____ (City) _____ (State) ____ (Zip) _____

V. - Site Information: Please use the following table to document the Regulated Substances stored at your facility. If your facility has more than one storage area, please duplicate this page and separately record the volume of Regulated Substances stored within each storage area.

Table Instructions: Place an “X” within the empty field(s) that represent the maximum volume of the Regulated Substances stored at any one time. You will note, the “*Regulated Substance Category*” has been placed across the top of the table and the “*Storage Volume Range*” has been placed on the left side of the table. Please record the volume of Regulated Substances rounded to the nearest 100 gallons (Example: If your facility stores 125 gallons of motor oil please place an “X” within the field that sits at the intersection of the “Petroleum or Petroleum -based products” column and the “100 to 200” gallons row.)

Name of Storage Area:											
Latitude:						Longitude:					
<i>Storage Volume Range</i> (Gallons)	<i>*Regulated Substance Category</i>										** <i>Quantity of Regulated Substances</i>
	Fertilizers	Herbicides	Household Cleaners	Pesticides	Pool Chemicals	Solvents	Industrial Chemicals	Petroleum or Petroleum-based products	Non-water based paint and associated paint products	Other (Please Specify): _____	
0 to 100											
100 to 200											
200 to 300											
300 to 400											
400 to 500											
500 to 600											
600 to 700											
700 to 800											
800 to 900											
900 to 1,000											
If more than 1,000, please enter the volume manually.											
Total quantity of Regulated Substances stored in storage area:									_____ Gallons		

* Based upon the “*Regulated Substance Category*” and/or the amount of Regulated Substance stored, EAA staff may seek more specific, follow-up information regarding the actual substance(s) stored at your facility.

** When totaling the “*Quantity of Regulated Substance*” column, please use the larger number within the provided “*Storage Volume Range*” (Example: When an “X” has been placed within the “100 to 200” gallons row, you should enter 200 gallons in the “*Quantity of Regulated Substance*” column, not 100 gallons or any amount in between).

Total quantity of Regulated Substances stored within ALL storage areas:

_____ Gallons

VI. - Additional Information: Please provide the following:

Section A - Recharge Zone Facilities:

Facilities located on the **Recharge Zone** shall include as part of this registration a site location map* that includes a facility diagram with a north arrow, scale, and that identifies the following:

- 1) All recharge features;
- 2) Site drainage patterns;
- 3) The locations of the following all;
 - a. Water wells and monitoring wells;
 - b. Storm sewer inlets;
 - c. Firefighting water connections;
 - d. Regulated Substance traps incorporated in the site design; and
- 4) Any other information as may be required by the Authority staff.

*The site location map is to be prepared and stamped by a **Qualified groundwater professional**. Please review the definition of Qualified groundwater professional as it is defined within the EAA rules.

Section B - Contributing Zone Facilities:

Facilities located on the **Contributing Zone** shall include as part of this registration form a site location map, including a facility diagram with a north arrow and scale and other information as may be required by the Authority staff.

VII. - General Storage Requirements:

EDWARDS AQUIFER AUTHORITY RULES, Ch. 713 (Water Quality), Subch. F (Regulated Substances Registration, Storage, and Planning), §713.505 requires the Owner or Operator of a facility to store any container less than 500 gallons in size, that is used to store Regulated Substance, in a manner that prevents the physical damage to the container, such as crushing, puncturing, rupture, or corrosions and protects against damage from exposure to the elements.

VIII. - Certification:

I certify that, as the Registrant, I am the Owner or Operator of the facility which is the subject of this Registration, or their Authorized Agent. Additionally, I certify that each and all of the statements and information contained herein are true and correct to the best of my knowledge and belief. Moreover, I agree to fully comply with the terms of the Edwards Aquifer Authority Act and the rules of the Authority.

Signature of Owner, Operator, or Agent: _____ Date _____

Print Name: _____

Co-Signature (if applicable): _____ Date _____

Print Name: _____