

AGENDA PLACEMENT FORM

(Submission Deadline – Monday, 5:00 PM before Regular Court Meetings)

Date: _____

Meeting Date: 01/27/2025

Submitted By: County Judge's Office

Department: _____

Signature of Elected Official/Department Head:

Court Decision: <small>This section to be completed by County Judge's Office</small>
 <div style="color: red; font-weight: bold; font-size: 1.2em;">1-27-2025</div>

Description:

Acknowledge Receipt of Texas Commission on Environmental Quality

Application for Scrap Tire Registration - Scrap Tire Facility at 6905 County

Road 302, Grandview, Texas in Johnson County-County Judge's Office

(May attach additional sheets if necessary)

Person to Present: _____

(Presenter must be present for the item unless the item is on the Consent Agenda)

Supporting Documentation: (check one) ☒ PUBLIC ☐ CONFIDENTIAL

(PUBLIC documentation may be made available to the public prior to the Meeting)

Estimated Length of Presentation: _____ minutes

Session Requested: (check one)

☐ Action Item ☒ Consent ☐ Workshop ☐ Executive ☐ Other _____

Check All Departments That Have Been Notified:

☒ County Attorney ☐ IT ☐ Purchasing ☐ Auditor

☐ Personnel ☒ Public Works ☐ Facilities Management

Other Department/Official (list) _____

**Please List All External Persons Who Need a Copy of Signed Documents
In Your Submission Email**

Approved in CC on 9/11/2023



Texas Commission on Environmental Quality

Application for Scrap Tire Registration— Scrap Tire Facility

Additional information, documents, and drawings should be securely attached and labeled with the company/facility name. Submit the **original and two copies** of the completed registration application and a completed TCEQ Core Data Form (TCEQ-10400) to: Business and Program Services Section, Scrap Tire Management Program, MC 126, TCEQ, P.O. Box 13087, Austin, TX 78711-3087. For additional information about scrap tire management requirements, please contact us by telephone at (512) 239-2335, or by e-mail at tires@tceq.texas.gov.

1. Facility Name (same as Regulated Entity Name on Core Data Form)

Hunter Morgan

2. Type of Scrap Tire Facility – select all that apply

- ☒ Processor – Activities include cutting, grinding, shredding, baling, crushing, splitting, and recapping or retreading.
- ☐ Recycler – Activities include separation and preparation of used or scrap tires for re-use.
- ☐ Energy Recovery – Activities include use as tired derived fuel.
- ☐ Other (identify):

3. Facility Location Street Address

Street Address 6905 CR 302
City, State, Zip Code Grandview, TX 76050
County Johnson

4. Facility Mailing Address (if different from above)

Street Address
City, State, Zip Code

5. Contact Person

Name Hunter Morgan
Title Owner & Operator
Phone Number 817-688-6398
Email Address hunter.morgan90@gmail.com

6. Consultant Information (if applicable)

Identify the consultant or engineer to be contacted about the facility.

Name

Company

Phone Number

Email Address

7. Property Owner Information

Identify the property owner where the facility will be located. Applicants must submit a Property Owner Affidavit (TCEQ-10299). A template is provided in this document.

Name Tonya Morgan

Street Address 3809 CR 805

City, State, Zip Code Cleburne, TX

817-999-2700

Phone Number Tlynngentry@gmail.com

Email Address



8. Investigation or Enforcement Action

Is this registration application in response to a TCEQ investigation or enforcement action?

☐ Yes
☒ No

9. Amendment to Existing Registration

Is this an amendment to an existing scrap tire facility registration? ☐ Yes ☒ No

If yes, please provide the information below.

Registration Number:

Intent of amendment:

Number of Tires and Storage Method

Processors can store up to 500 whole used or scrap tires on the ground or 2,000 whole used or scrap tires in enclosed lockable containers. A processor cannot store more than 2,000 used or scrap tires or 20 tons of tire pieces in total. Complete questions 10 and 11 about storage methods.

Recyclers and energy recovery facilities can have more than 500 whole used or scrap tires on the ground or 2,000 whole used or scrap tires in enclosed lockable containers under the 30-day supply rule (30 TAC §328.63). The 30-day supply is the amount equal to the highest documented monthly number of used or scrap tires consumed in the most recent six-month period. A facility in operation for less than six months must submit an estimate of a 30-day supply.

A storage site registration application is required for facilities that do not qualify for a 30-day supply and intend to store more than 500 scrap tires or the equivalent in tire pieces on the ground or more than 2,000 scrap tires or the equivalent in tire pieces in an enclosed lockable container. Refer to the Scrap Tire Storage Site website for requirements. <https://www.tceq.texas.gov/tires/tires-storage>

- ☐ Yes, a Storage Site Registration is required, and the application will be submitted separately.
- ☒ No, a Storage Site Registration is not required.

10. On the Ground Storage (outdoors) – No more than 500 used or scrap tires or 5 tons of tire pieces for processors.

How many used or scrap tires will be stored outdoors?

40

How many tons of tire pieces will be stored outdoors? One passenger tire equals 20 lbs.

0

11. Enclosed Storage (trailer(s), warehouse, etc.) – No more than 2,000 used or scrap tires or 20 tons of tire pieces for processors.

How many used or scrap tires will be stored in enclosed storage?

0

How many tons of tire pieces will be stored in enclosed storage? One passenger tire equals 20 lbs.

10

12. Vector Control Measures

Describe the method for controlling vectors, such as mosquitos and rodents. Monitoring for vectors and appropriate vector control measures must be applied when needed, but no less than once every two weeks.

Any standing water will be treated with pellets for mosquitos. Traps will be placed for small rodents

13. End Use of Used or Scrap Tires or Tire Pieces (check all that apply)

Identify the end use of the used or scrap tires or tire pieces. Provide the name and registration number if applicable. Not all tires must be delivered to a single location. Different types of facilities can be used. Include additional pages as an attachment as needed.

☐ Energy Recovery Facility

Name:

Registration #:

☐ Storage Site

Name:

Registration #:

☐ Landfill

Name:

Permit #:

☒ Land Reclamation Project Using Tires (LRPUT)

Name: Silver Creek Materials

Registration #:

☐ Other (identify):

14. Location Maps

Provide a map showing the location of facility in relation to a road intersection. Online mapping tools, such as Google Maps or Mapquest, are acceptable.

Map is included as attachment # 1 of this application.

15. Emergency Response

Provide documentation of arrangements with public or private emergency response personnel if facility does not intend to provide its own firefighting personnel or system. Specifically, the application must include a response letter from emergency response personnel stating they will provide fire protection in the event of an emergency. Examples of emergency response personnel include local city or county fire departments, and volunteer fire departments.

Name of public or private emergency response personnel: Grandview Volunteer Fire Department

Letter from emergency response personnel is included as attachment # 2 of this application.

16. Notification Requirements

Applicants are required to notify local authorities of the scrap tire facility registration application to comply with the notification requirements of 30 Texas Administrative Code Chapter 328, Sections 328.63(d)(1) and 328.63(d)(2). A template of the notice is provided on the next page of this application. Complete the template with the required information and send it, along with a copy of this application, by certified mail with a return receipt request. Submit return receipts to the TCEQ Scrap Tire Program as part of the registration application. Provide the name, mailing address, and date notice was mailed for the required local authorities below.

Return receipts are provided as attachment # 3 of this application.

City facility is located in

☒ Check if facility is **not** located within city limits.

Name of City Mayor

Mailing Address

Date notice was received

County facility is located in Johnson

Name of County Judge Christopher Boedeker

Mailing Address 2 N. Main St, Cleburne, TX 76033

Date notice was received 9/17/24

Name of Local Fire Authority Grandview Volunteer Fire Department

Name of Fire Marshal James Camp

Mailing Address 100 E McFarland St, Grandview, TX 76050

Date notice was received 9/24/24

Regional Council of Government

You can find the correct regional council of government by visiting txregionalcouncil.org and searching by county.

Name of Regional Council of Government North Central Texas Council of Governments

Mailing Address 616 Six Flags Drive, Arlington, TX 76005

Date notice was received 10/14/24

Scrap Tire Facility Registration – Notification to Local Authorities

Notification Date (mailed or hand-delivered date): _____

Notification to: North Central Texas Council of Governments

Hunter Morgan

Customer Legal Name

has applied to the Executive Director of the Texas Commission on Environmental Quality (TCEQ) for a Scrap Tire Facility Registration for a proposed scrap tire facility to be located at:

6905 CR 302, Grandview, TX 76050

Physical address of the facility

This notification is provided per the requirements of 30 TAC Chapter 328, Sections 328.63(d)(1) and 328.63(d)(2). Approval by the TCEQ Executive Director is required before the start of the proposed scrap tire facility operations at the above-referenced location.

Prior to authorizing a scrap tire facility, the TCEQ Executive Director must consider any timely written notification by a local government with jurisdiction over a proposed facility that the proposed facility does not comply with local requirements related to managing scrap tires and protecting public health and the environment. Such notice must include adequate documentation of noncompliance at the proposed facility. The Executive Director determines whether any documentation of noncompliance submitted is adequate. Comments on the application, if any, must be submitted in writing to the TCEQ's Waste Permits Division within 45 days of the date noted above.

The Executive Director shall, after review of the application for registration, determine if the application will be approved or denied. The Executive Director's final action on the application will be available to view at www.tceq.texas.gov/tires/pending-applications. The applicant or a person affected may file a motion to overturn the Executive Director's final action on this registration, which is a request that the commission review the Executive Director's action on an application. A motion to overturn must be filed no later than 23 days after the date of the final action. Information on how to file a motion to overturn is available at the above web page.

For more information about this application and/or to submit comments, please contact: Waste Permits Division, MC 126, Texas Commission on Environmental Quality, P.O. Box 13087, Austin, TX 78711-3087. The TCEQ staff can also be contacted via email to tires@tceq.texas.gov or by phone at (512) 239-2335.

Submitted by:

Hunter Morgan

Name of Applicant or Authorized Representative

6905 CR 302

Mailing Address

817-688-6398

Phone Number

Signature Section

I, Hunter Morgan, Owner & Operator
(print or type name of authorized signatory) (title of authorized signatory)

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: _____

Hunter Morgan

Date: _____

11/21/24

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

I, _____, hereby designate _____

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.

(print or type name of operator or principal executive officer)

Signature: _____ Date: _____



TCEQ Use Only

TCEQ Core Data Form

For detailed instructions on completing 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. Customer Reference Number (if issued)	Follow this link to search for CN or RN numbers in Central Registry**	3. Regulated Entity Reference Number (if issued)
CN		RN

SECTION II: Customer Information

4. General Customer Information		5. Effective Date for Customer Information Updates (mm/dd/yyyy)	
<input checked="" type="checkbox"/> New Customer		<input type="checkbox"/> Update to Customer Information	
<input type="checkbox"/> Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)		<input type="checkbox"/> Change in Regulated Entity Ownership	
The Customer Name submitted here may be updated automatically based on what is current and active with the 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:	
Morgan, Hunter			
7. TX SOS/CPA Filing Number	8. TX State Tax ID (11 digits)	9. Federal Tax ID (9 digits)	10. DUNS Number (if applicable)
11. Type of Customer:		<input checked="" type="checkbox"/> Individual	
<input type="checkbox"/> Corporation		Partnership: <input type="checkbox"/> General <input type="checkbox"/> Limited	
Government: <input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Federal <input type="checkbox"/> Local <input type="checkbox"/> State <input type="checkbox"/> Other		<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Other:	
12. Number of Employees		13. Independently Owned and Operated?	
<input checked="" 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	
14. Customer Role (Proposed or Actual) – as it relates to the Regulated Entity listed on this form. Please check one of the following			
<input type="checkbox"/> Owner <input type="checkbox"/> Operator <input checked="" type="checkbox"/> Owner & Operator <input type="checkbox"/> Other: _____			
<input type="checkbox"/> Occupational Licensee <input type="checkbox"/> Responsible Party <input type="checkbox"/> VCP/BSA Applicant			
15. Mailing Address:			
6905 CR 302			
City: Grandview State: TX ZIP: 76050 ZIP + 4:			
16. Country Mailing Information (if outside USA)		17. E-Mail Address (if applicable)	
		hunter.morgan90@gmail.com	
18. Telephone Number		19. Extension or Code	
(817) 688-6398			
		20. Fax Number (if applicable)	
		() -	

SECTION III: Regulated Entity Information

21. General Regulated Entity Information (If "New Regulated Entity" is selected, a new permit application is also required.)	
<input checked="" type="checkbox"/> New Regulated Entity <input type="checkbox"/> Update to Regulated Entity Name <input type="checkbox"/> Update to Regulated Entity Information	
The Regulated Entity Name submitted may be updated, in order to meet TCEQ Core 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.)	
23. Street Address of the Regulated Entity:	6905 CR 302

(No PO Boxes)							
	City	Grandview	State	TX	ZIP	76050	ZIP + 4
24. County	Johnson						

If no Street Address is provided, fields 25-28 are required.

25. Description to Physical Location:							
26. Nearest City	State					Nearest ZIP Code	
Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).							
27. Latitude (N) In Decimal:		28. Longitude (W) In Decimal:					
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds		
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? (Do not repeat the SIC or NAICS description.)							
Tire Recycling							
34. Mailing Address:		6905 CR 302					
City	Grandview	State	TX	ZIP	76050	ZIP + 4	
35. E-Mail Address:		hunter.morgan90@gmail.com					
36. Telephone Number		37. Extension or Code		38. Fax Number (if applicable)			
(817) 688-6398				() -			

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. See the Core Data Form instructions for additional guidance.

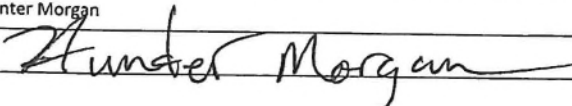
<input type="checkbox"/> Dam Safety	<input type="checkbox"/> Districts	<input type="checkbox"/> Edwards Aquifer	<input type="checkbox"/> Emissions Inventory Air	<input type="checkbox"/> Industrial Hazardous Waste
<input type="checkbox"/> Municipal Solid Waste	<input type="checkbox"/> New Source Review Air	<input type="checkbox"/> OSSF	<input type="checkbox"/> Petroleum Storage Tank	<input type="checkbox"/> PWS
<input type="checkbox"/> Sludge	<input type="checkbox"/> Storm Water	<input type="checkbox"/> Title V Air	<input checked="" type="checkbox"/> Tires	<input type="checkbox"/> Used Oil
<input type="checkbox"/> Voluntary Cleanup	<input type="checkbox"/> Wastewater	<input type="checkbox"/> Wastewater Agriculture	<input type="checkbox"/> Water Rights	<input type="checkbox"/> Other:

SECTION IV: Preparer Information

40. Name:	Hunter Morgan		41. Title:	Owner/Operator
42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Mail Address	
(817) 688-6398		() -	hunter.morgan90@gmail.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 6 and/or as required for the updates to the ID numbers identified in field 39.

Company:			Job Title:	Owner operator
Name (In Print):	Hunter Morgan		Phone:	(817) 688- 6398
Signature:			Date:	11/21/24





Grandview Volunteer Fire Department, Inc.

P.O. Box 505 Grandview, Texas 76050
(817)-866-2333

09/30/2024

Emergency Response Verification

***Prepared for Hunter Morgan
6905 County Road 302
Grandview Texas 76050***

The aforementioned address is in the fire district of the Grandview Fire Department. Grandview Fire provides fire protection and Emergency Medial Services to this area. Ambulance services are provided by Careflite Ground. 6905 County Road 302 falls within the borders of John County, TX. If any other information is required feel free to call the number below or email chief camp.

A handwritten signature in black ink, appearing to read "James S. Camp".

***James S. Camp
Grandview Volunteer Fire Department
Fire Chief
(682)-970-7433
firechief@grandviewvfd.org***