Bryan W. Shaw, Ph.D., P.E., Chairman Toby Baker, Commissioner Jon Niermann, Commissioner Richard A. Hyde, P.E., Executive Director



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

Protecting Texas by Reducing and Preventing Pollution

June 14, 2016

Mr. John Thill, General Partner East Division Street Partners, LP 6241 Alverton Drive Carlsbad, California 92009

Re: Municipal Setting Designation (MSD) Certificate for StorageLand I, a General Partnership, Storageland Facility and Adjacent Vacant Tract, 1830 & 1840 East Division Street, Arlington, Tarrant County, TX; Municipal Setting Designation (MSD) No. 310; Customer No. CN604705202; Regulated Entity No. RN102337953

Dear Mr. Thill:

The Texas Commission on Environmental Quality (TCEQ) received the above referenced Municipal Setting Designation (MSD) application on December 4 2015 and additional information supporting this MSD application on March 9 2016. Based on our review, the application contains the required information as outlined in Texas Health and Safety Code (THSC) §361.804. Enclosed is the Municipal Setting Designation Certification for your site. If you have any questions, please do not hesitate to contact me at (512) 239-3170 or via e-mail (Estefani.jimenez@tceq.texas.gov).

Sincerely.

Estefani D. Jimenez, Title

VCP-CA Section

Remediation Division

EDJ/jdm

cc: Mr. Sam Barrett, Waste Section Manager, TCEQ Ft. Worth/Dallas Regional Office, R-4
Mr. Lance Crabtree, Terracon Consultants, Inc., 8901 Carpenter Freeway, Suite 100, Dallas, TX 75247

Enclosure: MSD Certificate

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY



MUNICIPAL SETTINGS DESIGNATION CERTIFICATE

As provided for in §361.807, Subchapter W, Texas Health and Safety Code (Solid Waste Disposal Act):

I, Beth Seaton, Director, Remediation Division, TCEQ, certify the Municipal Setting Designation (MSD) for MSD No. 310, in the City of Arlington, for the tract of land described in Exhibit "A". The eligibility requirements of Texas Health and Safety Code §361.803 are satisfied as attested to by the affidavit in Exhibit "B", provided pursuant to Texas Health and Safety Code §361.804(b)(2)(D). This certificate shall continue in effect so long as the ordinance or restrictive covenant required by Texas Health and Safety Code §361.8065 remains in effect.

Any person addressing environmental impacts for a property located in the certified municipal setting designation shall complete any necessary investigation and response action requirements in accordance with Texas Health and Safety Code §361.808, in conjunction with the applicable Texas Commission on Environmental Quality environmental remediation regulation, as modified by Texas Health and Safety Code §361.808.

EXECUTED this the

Beth Seaton, Director

Remediation Division

Texas Commission on Environmental Quality

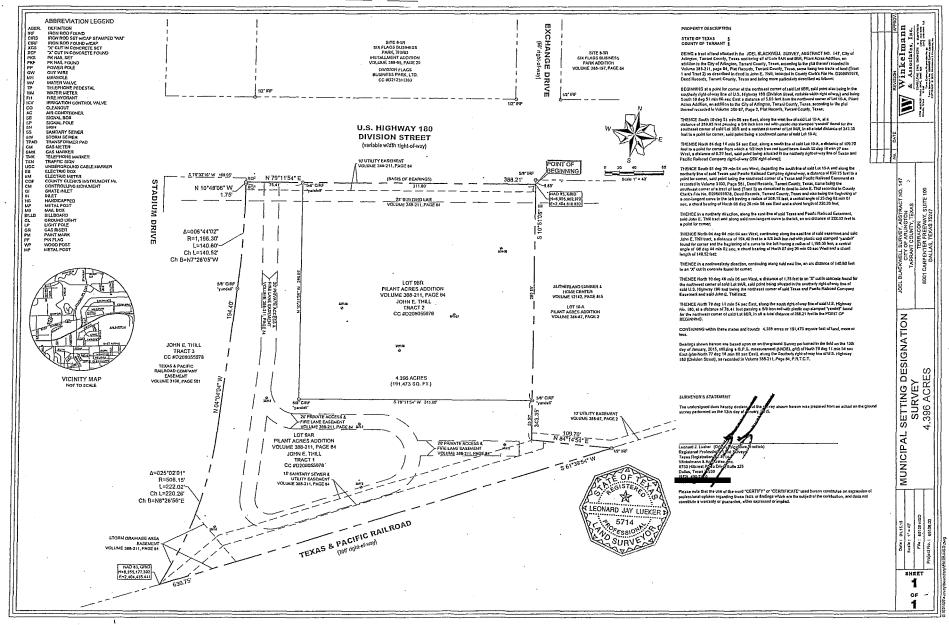


EXHIBIT # 18 "
PAGE _____OF ____

Municipal Setting Designation

Affidavit of Eligibility

BEF(ORE ME, the undersigned authority, on this day personally appeared	
	TOHN \in THLL , as an authorized representative of STORAGELAND \overline{L} , known to me to be the person	
whos	e name is subscribed below who being by me first duly sworn, upon their oath, d as follows:	
	over the age of 18 and legally competent to make this affidavit. I have personal dedge of the facts stated herein.	
I affii	matively state that (place an X in all applicable blanks)	
\boxtimes	The MSD eligibility criteria of THSC Section 361.803 are satisfied.	
\boxtimes	True and accurate copies of all documents demonstrating that the MSD eligibility criteria provided by THSC 361.803 have been satisfied and are included with the application.	
X	A true and accurate copy of a legal description of the proposed MSD property is included with the application.	
X	Notice has been provided in accordance with THSC 361.805.	
\boxtimes	A copy of an ordinance or restrictive covenant and any required resolutions are provided in this application or will be provided before the executive director certifies this application.	
	Date: ///25/15	
Signa	ture ///	
	JOHN E. Thill	
Printe	ed Name	
	CIENERAL PARTNER	
Title		
STAT	EOF_CAUFORNIA	
COUN	NTY OF SAND DIEGO	
Nove	SUBSCRIBED AND SWORN before me on this the day of	
	Notary Public in and for the State of CACIFORNIA	

TCEQ 20149

August 2011

* PLEASE SEE ATTACHED CAUFORNIA JURAT

See Attached Document (Notary to cross out	lines 1-6 below)
☐ See Statement Below (Lines 1–6 to be completed)	eted only by document signer[s], not Notary)
2	
3	
4	
5	
6	
Signature of Document Signer No. 1	Signature of Document Signer No. 2 (if any)
	ficate verifies only the identity of the individual who signed the the truthfulness, accuracy, or validity of that document.
State of California County of SAN DIEGO HERMIE AQUINO Commission # 2064599 Notary Public - California San Diego County My Comm. Expires May 14, 2018	Subscribed and sworn to (or affirmed) before me on this
Seal Place Notary Seal Above	PTIONAL
	his information can deter alteration of the document or this form to an unintended document.
Description of Attached Document	EXHIBIT B
Title or Type of Document: APPIDAVIT OF	EUGIBILITY Document Date: 11/85/N
Number of Pages: / Signer(s) Other Than	Named Above: