## **Texas Commission on Environmental Quality**

**PBR New Registration** 

What is the name of the site to be authorized?	USDA-ARS-Southern Plains Agricultural Research Center
Does the site have a physical address?	Yes
Physical Address	
Number and Street	2881 F AND B RD
City	COLLEGE STATION
State	TX
ZIP	77845
County	BRAZOS
Latitude (N) (##.#####)	30.618174
Longitude (W) (-###.#####)	-96.362071
Primary SIC Code	8733
Secondary SIC Code	
Primary NAICS Code	541715
Secondary NAICS Code	
Regulated Entity Site Information	
What is the Regulated Entity's Number (RN)?	RN100668763
What is the name of the Regulated Entity (RE)?	RESEARCH FACILITY
Does the RE site have a physical address?	Yes
Physical Address	
Number and Street	2881 F AND B RD
City	COLLEGE STATION
State	TX
ZIP	77845
County	BRAZOS
Latitude (N) (##.#####)	
Longitude (W) (-###.#####)	
Facility NAICS Code	541710
What is the primary business of this entity?	

# Customer (Applicant) Information

How is this applicant associated with this site?	Operator
What is the applicant's Customer Number (CN)?	CN600376750
Type of Customer	Federal Government
Full legal name of the applicant:	
Legal Name	United States Department of Agriculture Agricultrure Research Service
Texas SOS Filing Number	

Federal Tax ID	72056483
State Franchise Tax ID	
State Sales Tax ID	
Local Tax ID	
DUNS Number	960721348
Number of Employees	21-100
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	United States Department of Agriculture Agricultrure Research Service
Prefix	
First	Mark
Middle	
Last	Buxkemper
Suffix	
Credentials	
Title	Facility Manager
Responsible Authority Mailing Address	
Enter new address or copy one from list:	
Address Type	Domestic
Mailing Address (include Suite or Bldg. here, if applicable)	2881 F AND B RD
Routing (such as Mail Code, Dept., or Attn:)	
City	COLLEGE STATION
State	TX
ZIP	77845
Phone (###-###)	9792609262
Extension	
Alternate Phone (###-####)	9794125449
Fax (###-###-###)	
E-mail	Mark.Buxkemper@usda.gov
Responsible Official Contact	
Person TCEQ should contact for questions about this application:	
Same as another contact?	
Organization Name	USDA ARS Southern Plains Agricultural Research Center
Prefix	MR
First	Mark
Middle	

Buxkemper

Last

Criterials         Facility Manager           Enter new address or copy one from list:         Facility Manager           Enter new address or copy one from list:         Facility Manager           Enter new address (rock of Stape)         Domestic           Mailing Address (rock of Bidg, hero, if application)         Domestic           Routing (such as Mail Code, Dept., or Attr.)         College STATION           State         TX           State         TX           Phone (###.######)         77645           Phone (###.######)         3798260922           Extension         TX           Extension         Facility Hammager           Facility Hammager         Mark Buokemper@usda.gov           Technical Contact           Technical Contact           Personal Contact           Congenization Name         CN800376750, United States Department of Agriculture Agric	Suffix	
Title         Facility Manager           Enter new address or copy one from list         Domestic           Mailing Address         2881 F AND B RD           Mailing Address (include Suite or Bidg, here, if applicable)         2881 F AND B RD           Routing (such as Mail Code, Dept., or Altr.)         TX           City         COLLEGE STATION           State         TX           ZIP         77845           Phone (###-###-###)         9792009262           Extension         TY           Attenate Phone (###-###-###)         9794125449           Fax (###-###-###)         Mark Buxkemper@usda.gov           Technical Contact           Technical Contact           Technical Contact           Technical Contact for questions about this application:           Technical Contact           Conganization Name         United States Department of Agriculture Research Service           Organization Name         United States Department of Agriculture Research Service           Organization Name         United States Department of Agriculture Agriculture Research Service           Fils         Mark           Mark         State Service           United States Department of Agriculture Agriculture Agri		
Enter new address or copy one from list  Mailing Address (redude Suite or Bldg. here, If applicable)  Address Type  College STATION  State  TX  ZIP  T7845  Phone (###.###.####)  \$793603262  Extension  Alternate Phone (###.###.####)  \$794125449  Extension  Alternate Phone (###.###.####)  Email Code, or Attn.)  Technical Contact  Person TCEQ should contact for questions about this application:  Same as another contact?  Agriculture Agriculture Research Service  Organization Name  Prefix  First  Mark  Mark  Buxkemper  Mark  First  Mark  Mark  Mark  First  Mark  Mark  Mark  Mark  Mark  Middle  Last  Last  Same as another contact?  Credentials  Title  Enter new address or copy one from list:  Mailing Address (include Suite or Bldg. here, if application; such as Mail Code. Dept., or Attn.)  State  TX  ZIP  Frone (###.###.###)  College STATION  State  TX  TR  Research Service  College STATION  TX  TX  TR  Frone (###.###.###)  College STATION  State  TX  TR  TR  Frone (###.###.####)  College STATION  TX  TR  Frone (###.###.####)  College STATION  State  TX  TR  TR  Frone (###.###.####)  College STATION  State  TX  TR  Frone (###.###.####)  State States Department of Agriculture Agric		Facility Manager
Mailing Address         Address Type         Domestic           Address (include Suite or Bldg, here, if applicable)         2881 F AND B RD           Routing (such as Mail Code, Dept., or Attn.)         COLLEGE STATION           City         COLLEGE STATION           State         TX           ZIP         77845           Phone (### ### ####)         9794125449           Extension         Wark, Buxkemper@usda gov           Technical Contact           Person TCEQ should contact for questions about this application:           Person TCEQ should contact for questions about this application:         CN800376750, United States Department of Agricultural Research Service           Organization Name         CN800376750, United States Department of Agricultural Research Service           Prefix         Mr           First         Mark           Mark         Mark           Middle         Use of the service of the se		r dollity Manager
Address Type         Domestic           Mailing Address (include Suite or Bidg, here, if applicable)         2881 F AND B RD           Routing (such as Mail Code, Dept., or Atth:)         COLLEGE STATION           City         77845           State         TX           ZIP         77845           Phone (###.###.####)         97942690262           Extension         THAIL REPORT (AMERICAN AND AND AND AND AND AND AND AND AND A		
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applicable)         COLLEGE STATION           Cly         COLLEGE STATION           State         TX           ZIP         77845           Phone (###.###.####)         9794125449           Extension         Wark Bunkemper@usda.gov           Fex. (###.###.####)         Mark Bunkemper@usda.gov           Technical Contact           Person TCEO should contact for questions about this application:           CN600376750, United States Department of Agriculture Research Service           Organization Name           Organization Name         United States Department of Agriculture Agric		
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Extension         9794125449           Fax (###-###-####)         9794125449           Fax (###-###-####)         Mark.Buxkemper@usda.gov           Technical Contact           Person TCEQ should contact for questions about this application:           Same as another contact?         CN600376750, United States Department of Agriculture Agricult	ZIP	77845
Alternate Phone (###.#################################	Phone (###-###-###)	9792609262
Fax (###-###-####) E-mail Mark Buxkemper@usda.gov  Technical Contact  Person TCEQ should contact for questions about this application:  Same as another contact?  Ch600376750, United States Department of Agricultrure Research Service  Agricultrure Agricultrure Research Service  United States Department of Agricultrure Agricultrur	Extension	
E-mail  Technical Contact  Person TCEQ should contact for questions about this application:  Same as another contact?  Cincinnation Name  Organization Name  Organization Name  Organization Name  Prefix  Mark  Mark  First  Mark  Mark  Middle  Last  Buxkemper  Suffix  Credentials  Title  Facility Manager  Enter new address or copy one from list:  Mailing Address (include Suite or Bldg. here, if applicable)  Routing (such as Mail Code, Dept., or Attn:)  City  Cate  Last  College STATION  Tyas  Tyas  Proposed  Tyas  Tyas  Proposed  Tyas  Tyas  Proposed  Tyas  Tyas  Proposed  Tyas  Proposed  Tyas  Tyas  Tyas  Proposed  Tyas  Tyas  Tyas  Proposed  Tyas	Alternate Phone (###-####)	9794125449
Technical Contact  Person TCEQ should contact for questions about this application:  Same as another contact?  Cinamization Name  Organization Name  Organization Name  United States Department of Agricultrure Research Service Prefix  Mark  First  Mark  Middle  Last  Buxkemper  Suffix  Credentials  Title  Facility Manager  Enter new address or copy one from list:  Salting Address  Malling Address  Malling Address (include Suite or Bldg. here, if applicable)  Routing (such as Mail Code, Dept., or Attn:)  City  CollEGE STATION  State  TX  ZIP  Phone (###_#################################	Fax (###-####)	
Person TCEQ should contact for questions about this application:  Same as another contact?  Organization Name  Organization Name  United States Department of Agriculture Research Service  Organization Name  United States Department of Agriculture Agricultura	E-mail	Mark.Buxkemper@usda.gov
Person TCEQ should contact for questions about this application:  Same as another contact?  Organization Name  Organization Name  Organization Name  United States Department of Agriculture Research Service  Prefix  MR  First  Mark  Middle  Last  Buxkemper  Suffix  Credentials  Title  Facility Manager  Enter new address or copy one from list:  Mailing Address  Address Type  Address Type  Address Type  Address Type  Address (include Suite or Bldg. here, if applicable)  Sugling Address (include Suite or Bldg. here, if applicable)  State  Titly  Credentials  Address Mail Code, Dept., or Attn:)  City  State  Tix  ZIP  77845  Phone (###_#################################		
application:  Same as another contact?  Same as another contact?  Organization Name  Organization Name  Prefix  MR  First  Mark  First  Mark  Middle  Last  Suffix  Credentials  Title  Fine Audress or copy one from list:  Malling Address Type  Address Type  Address Type  Address (include Suite or Bldg, here, if applications)  Alling Address (include Suite or Bldg, here, if applications)  Routing (such as Mail Code, Dept., or Attn.)  City  Alle Same Address (include Suite or Bldg, here, if applications)  Alling (such as Mail Code, Dept., or Attn.)  State  Allers Type  Allers Type  Allers Sype  Alle	Technical Contact	
Agriculture Agriculture Research Service Organization Name Organization Name Prefix MR First Mark Middle Last Last Suffix Credentials Title Enter new address or copy one from list: Mailing Address Type Address Type Mailing Address (include Suite or Bldg. here, if applicable) Routing (such as Mail Code, Dept., or Attn.) City State Tity State Agriculture Agriculture Research Service  Agriculture Agriculture Research Service Routing (such as Mail Code, Dept., or Attn.) State Tite Ale College STATION State Tix JIP Phone (###-#################################		
Prefix         MR           First         Mark           Middle         Wark           Last         Buxkemper           Suffix         Wark           Credentials         Facility Manager           Enter new address or copy one from list:         Site Physical Address           Mailing Address         Sexpectable           Mailing Address (include Suite or Bldg. here, if applicable)         Domestic           Routing (such as Mail Code, Dept., or Attn:)         COLLEGE STATION           State         TX           ZIP         77845           Phone (###.#####)         9792609262           Extension         Proper (###.#################################	Same as another contact?	
First         Mark           Middle         Last         Buxkemper           Suffix         Facility Manager           Credentials         Facility Manager           Title         Facility Manager           Enter new address or copy one from list:         Site Physical Address           Mailing Address         Domestic           Address Type         Domestic           Malling Address (include Suite or Bldg. here, if applicable)         2881 F AND B RD           Routing (such as Mail Code, Dept., or Attn:)         TX           City         COLLEGE STATION           State         TX           ZIP         77845           Phone (###.####)         979609262           Extension         9794125449	Organization Name	·
Middle Last Buxkemper Suffix Credentials Title Facility Manager Enter new address or copy one from list: Site Physical Address Mailing Address Address Type Domestic Mailing Address (include Suite or Bldg. here, if applicable) Routing (such as Mail Code, Dept., or Attn:) City COLLEGE STATION State TX ZIP Phone (###.####) Phone (###.####) Stension Alternate Phone (###.#####) State STATION	Prefix	MR
Last Suffix  Credentials  Title Facility Manager Enter new address or copy one from list: Site Physical Address Mailing Address Mailing Address Mailing Address Mailing Address (include Suite or Bldg. here, if applicable) Routing (such as Mail Code, Dept., or Attn:)  City COLLEGE STATION State TX ZIP Phone (###_########) Phone (###_#################################	First	Mark
Suffix Credentials Title Facility Manager Enter new address or copy one from list: Site Physical Address Mailing Address Mailing Address Address Type Domestic Mailing Address (include Suite or Bldg. here, if applicable) Routing (such as Mail Code, Dept., or Attn:) City COLLEGE STATION State TX ZIP 77845 Phone (###-#####) Phone (###-######) Stetension Alternate Phone (###-#####) 9794125449	Middle	
Credentials Title Facility Manager Enter new address or copy one from list: Site Physical Address Mailing Address Address Type Domestic Mailing Address (include Suite or Bldg. here, if applicable) Routing (such as Mail Code, Dept., or Attn:) City COLLEGE STATION State TX ZIP 77845 Phone (###-####) Extension Alternate Phone (###-####) 9794125449	Last	Buxkemper
Title Facility Manager  Enter new address or copy one from list: Site Physical Address  Mailing Address  Address Type Domestic  Mailing Address (include Suite or Bldg. here, if applicable)  Routing (such as Mail Code, Dept., or Attn:)  City COLLEGE STATION  State TX  ZIP 77845  Phone (###-###) 9792609262  Extension  Alternate Phone (###-###) 9794125449	Suffix	
Enter new address or copy one from list:  Mailing Address  Address Type  Domestic  Mailing Address (include Suite or Bldg. here, if applicable)  Routing (such as Mail Code, Dept., or Attn:)  City  COLLEGE STATION  State  TX  ZIP  Phone (###-####)  Phone (###-####)  Atternate Phone (###-####)  Site Physical Address  Site Physical Address  Comments  12881 F AND B RD  2881 F AND B RD  27841	Credentials	
Mailing Address Address Type Domestic Mailing Address (include Suite or Bldg. here, if applicable) Routing (such as Mail Code, Dept., or Attn:) City College Station State TX ZIP Phone (###-####) Phone (###-####) State Atternate Phone (###-####) Proposition  Alternate Phone (###-####) Domestic Domest	Title	Facility Manager
Address Type Domestic  Mailing Address (include Suite or Bldg. here, if applicable)  Routing (such as Mail Code, Dept., or Attn:)  City COLLEGE STATION  State TX  ZIP 77845  Phone (###-####) 9792609262  Extension  Alternate Phone (###-####) 9794125449	Enter new address or copy one from list:	Site Physical Address
Mailing Address (include Suite or Bldg. here, if applicable)  Routing (such as Mail Code, Dept., or Attn:)  City COLLEGE STATION  State TX  ZIP 77845  Phone (###-###) 9792609262  Extension  Alternate Phone (###-###) 9794125449	Mailing Address	
applicable)         Routing (such as Mail Code, Dept., or Attn:)         City       COLLEGE STATION         State       TX         ZIP       77845         Phone (###-###)       9792609262         Extension       4lternate Phone (###-###)         Alternate Phone (###-###)       9794125449	Address Type	Domestic
City       COLLEGE STATION         State       TX         ZIP       77845         Phone (###-###)       9792609262         Extension       Alternate Phone (###-###)         Alternate Phone (###-###)       9794125449		2881 F AND B RD
City       COLLEGE STATION         State       TX         ZIP       77845         Phone (###-###)       9792609262         Extension       Alternate Phone (###-###)         Alternate Phone (###-###)       9794125449	Routing (such as Mail Code, Dept., or Attn:)	
ZIP       77845         Phone (###-####)       9792609262         Extension       4lternate Phone (###-####)         9794125449		COLLEGE STATION
Phone (###-###) 9792609262  Extension  Alternate Phone (###-###) 9794125449	State	TX
Extension  Alternate Phone (###-####)  9794125449	ZIP	77845
Extension  Alternate Phone (###-####)  9794125449	Phone (###-####)	9792609262
	Alternate Phone (###-####)	9794125449
	Fax (###-####)	

or § 106.494(1)(E)?

5) Will crematories be used for the sole purpose of

cremation of human remains, embryonic and fetal tissue remains, as well as the umbilical cord, placenta, gestational sac, blood, or body fluids in accordance with THSC, § 697.004, and appropriate containers?

5.1. Will the second chamber of the incinerator be designed to maintain a temperature of at least 1,600

of Record - Texas Commission on Environmental Quality - www.tceq.texas	.gov
E-mail	Mark.Buxkemper@usda.gov
PBR General Information - New Sites	
1) To determine fee amount does this business qualify as a small business, non-profit organization, or small government entity?	No
Are there any other registered air authorizations at this site?	Yes
2.1. Please list any PBRs, Standard Permits, Air Pre- Construction Permits, and/or Standard Exemptions at this site.	PBR49453 two pathological waste incinerators that will be replaced with two new units
2.2. Does the current project being registered directly affect any of the permitted facilities listed above?	Yes
2.2.1. If "Yes" to the previous question, enter the affected permit number(s)	PBR 49453
3) Is this project located at a major site?	No
Does this registration require certification or is certification being submitted voluntarily?	No
5) Is the facility in compliance with all PBRs claimed?	Yes
Is the facility in compliance with all other applicable state/federal rules and regulations?	Yes
7) Is the facility in compliance with all applicable distance requirements?	Yes
Section 1 Rule Selection	
Rule#: 1	
Select the type of unit that is being registered.	PATHOLOGICAL WASTE INCINERATORS
Select the rule(s) associated to the unit specified.	106.494
106.494 Rule Compliance	
Is this authorization request to permit a commercial incinerator that accepts animal carcasses generated off-site for monetary compensation?	No
2) Will the manufacturer's rated capacity (burn rate) be 200 pounds per hour (lbs/hr) or less?	Yes
3) Will the incinerator be a dual-chamber design?	Yes
4) Are burners located in each chamber, sized to manufacture's specifications, and operated as necessary to maintain the minimum required temperature at all times according to § 106.494(1)(D)	Yes

No

Yes

degrees Fahrenheit and a gas residence time of at	
least a 0.5 second?	
6) Will there be any obstructions to stack flow when the incinerator is operated other than devices that are designed to automatically open when the incinerator is operated?	
7) Will the manufacturer's recommended operating instructions be posted at the unit and will the unit be operated in accordance with these instructions?	
8) Will the opacity of emissions from the incinerator No exceed 5.0% averaged over a six-minute period?	
9) What type of fuel will be used to operate the sweet Natural Gas incinerator?	
10) Will the incinerator be used to dispose of only Yes pathological waste, embryonic and fetal tissue remains, and/or carcasses?	
106.4 Rule Compliance	
1) What are the annual VOC emissions in tons per year 1 (tpy) for this registration?	
2) What are the total annual SO2 emissions in tpy for 1 this registration?	
3) What are the total annual NOx emissions in tpy for 1 this registration?	
4) What are the total annual CO emissions in tpy for 1 this registration?	
5) What are the total annual PM emissions in tpy for 1 this registration?	
6) What are the total annual PM10 emissions in tpy for 1 this registration?	
7) What are the total annual PM2.5 emissions in tpy for this registration?	
8) What are the total annual H2S emissions in tpy for 1 this registration?	
9) What are the total annual HAP emissions in tpy for this registration?	
PBR Attachments	
Please attach one PDF with all required documents to complete the project.	
[File Properties]	
File Name <a fileid="82733" href="/ePermitsExternal/faces">Binder1.pdf</a>	s/file?
Hash 67C2A10951E5D3DD0134CA6C5D4D8D001807A8233465067	FF0C173F1FE58E25D
MIME-Type application/pdf	
Confidential No	

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1) Per Texas Health and Safety Code, Section 382.05155, does the applicant want to expedite the processing of this application?

No

#### Signature

The signature below indicates to the best of my knowledge that the information submitted is true and complete, and that I have signature authority to submit this application on behalf of the regulated entity.

- 1. I am Mark A Buxkemper, the owner of the STEERS account ER016807.
- 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 PBR New Registration.
- 9. My signature indicates that I am in agreement with the information on this form, and authorize its submittal to the TCEQ.

OPERATOR Signature: Mark A Buxkemper OPERATOR

Account Number: ER016807
Signature IP Address: 128.194.207.5
Signature Date: 2020-02-06

Signature Hash: 6A49F2FA0309A1C0610A455CB83850056A7F201AAC7E933F72A01FF90D5E7C6A

Form Hash Code at time of 7DAA6AFBA4A0A4D7A5E7EB0F41BECB8AB58C14211EF3EBED94F7BC7483F94D51

Signature:

#### Fee Payment

Transaction by:	The application fee payment transaction was made by ER016807/Mark A Buxkemper
Paid by:	The application fee was paid by MARK BUXKEMPER
Fee Amount:	\$450.00
Paid Date:	The application fee was paid on 2020-02-06
Transaction/Voucher number:	The transaction number is 582EA000377165 and the voucher number is 452669

#### Submission

Reference Number:	The application reference number is 342508
Submitted by:	The application was submitted by ER016807/Mark A Buxkemper

Submitted Timestamp:	The application was submitted on 2020-02-06 at 09:30:06 CST
Submitted From:	The application was submitted from IP address 128.194.207.5
Confirmation Number:	The confirmation number is 294140
Steers Version:	The STEERS version is 6.29

### **Additional Information**

Application Creator: This account was created by Mark A Buxkemper