PST ASSIGN	RE		UST
		08466766	
For internal use only		<u> 20190328</u>	

Owner's Customer	No.: CN		Faci	lity's Regulated l	Entity No.: RN	1		
TCEQ - UNI	DERGROU this form i	JND STC for filing re	egistration an	NK REGISTRAT	information)	CERTIFI	Page 1 of 5	
	Tarras			completed form to:			TCEQ Facility ID No.:	
For Use Petroleum St Commission Texas Comm			orage Tank Registral Ission on Environme	ion Team (MC-13	18)	35214		
in	On	18810N	iP. O. Box 130		nai Quainy		TCEQ Owner ID No.:	
TEXAS TEXAS	Enviro	nmental	Austin, Texas				62643	
TOK	Quality	,	(612) 239-2160	O Fax (612)239-3398 OF FORM FOR YOUR RI	ECORDS•		Federal Tax ID No. :	
			TANK OV	VNER INFORMA	ATION		<u></u>	
TANK OWNER BUSINESS OR L	AST NAME:		ER FIRST NAME	TYPE OF TANK OW				
ANR ENTERPRISES INC		Individual	Corporatio	n 🖂 Com	mon Carrier Railroad			
OWNER MAILING ADDRESS		<u> </u>		Federal Gov't			al Gov't	
3410 BROAD STREE	er .			County Gov't	City Gov't		Proprietorship	
	•			LOCATION OF RECORDS:				
				At facility Of	fsite at:			
City:		STATE:	ZIP CODE:	OFFSITE RECORDS LOCA	ATION ADDRESS	CITY	STATE	
HOUSTON		TX	77087					
COUNTRY (OUTSIDE USA)	E-MAIL AD	DRESS	77007	RECORDS CUSTODIAN/C	ONTACT PERSON:	TELEPHONE !	No.	
	ł			IMRAN DHANAN	I	832-549	-6165	
OWNER'S AUTHORIZED REPRI	SENTATIVE TI	TLE:	TELEPHONE NO.	FAX NO:	INDEPEND		IED & OPERATED	
IMRAN DHANANI		832	-549-6165			YES 🔲 I	NO ON	
STATE FRANCHISE TAX II	ום כ	JNS NO		NUMBER OF EMPLOY				
				7 0-20 <u>21-100</u>		251-500	501 & HIGHER	
** For Self-Certifica	tion only thi	s form wiji	not be process	<u>ed</u> until all delinque	nt fees and/or pe	naities owe	d to the TCEQ or the	
Unice of the Attori	ley General (on behalf o				ent Fee and	Penalty Protocol. **	
P			2. FACILI	TY INFORMATI				
FACILITY NAME:				TYPE OF FACILITY:	☐ Emergence	y Generate	or Wholesale	
BROAD MINI MART					rm or Resident	ial 🗂 Fi	eet Refueling	
PHYSICAL LOCATION:				Aircraft Refue	oling 🖂 India:	n Land	Watercraft Fueling	
3410 BROAD STREE	т			Industrial/Manufacturing/Chemical Plant				
Спу:	ZPC	COE COU	NTY:	Number of regulated *USTs at this facility: 1 Underground Storage Tanks (USTs)				
HOUSTON TX 77087- Harris		\$	Number of regulated *ASTs at this facility:					
On-Site Contact Person	Tm		ELEPHONE NO.:	*Aboveground Storage	e Tanks (ASTs)	<u> </u>		
	1116	.6.	ELEPHONE NO.:	PRIMARY SIC CODE		SECONDAP	RY SIC CODE	
IMRAN DHANANI		832-5	49-6165					
E_MAIL ADDRESS:	FAX	NUMBER		PRIMARY NAICS COI	DE	SECONDAR	Y NAICS CODE	
	ŀ				. [
LATITUDE	1 · · · · ·	1	^	LONGITUDE		- 1		
Degrees	Minutes	S	econds	Degrees	Minutes		Seconds	
	<u> </u>	<u> </u>						
*** PRIOR TO RE	TAIL SALE C	F FUEL TO	THE PUBLIC	USING MEASURED E	DISPENSING DEV	/ICES, ANY	METER MUST BE	
HEGIS	EHED WITH			NT OF AGRICULTUR				
- 1				RATOR INFOR			ere if same as owner)	
* "Operator" means at TCEQ Operator ID No	ny person in D.:	day-to-day	control of, an (Assigned		lity for, the daily of CN	operation (of the UST system.	
TANK OPERATOR NAME: (DO	NOT LIST EMPL	OYEES OF OP	ERATOR)	TYPE OF TANK OPE	RATOR:			
				Individual Individual		Corporation	חס	
MAILING ADDRESS:				Sole Proprieto	rship	Federal G	ov't	
				State Gov't		County Go	ried	
CITY:		STATE:	ZIP CODE:	Local Gov't		City Gov's	14 -	
		TX TITLE:]		•	2 2010	
				Date listed person	Date listed person became operator: \[\lambda \text{PR} \lambda \frac{\lambda}{\lambda} \lambda			
REPRESENTATIVE:								
						7	CEQ ROOM	
							· Ell E	

To:

TCEQ- UST REGISTRATION & SELF-CERTIFICATION FORM TCEQ Facility ID No 35214 ***MAKE A COPY OF FORM FOR YOUR RECORDS*** For Self-Certification Annual Renewal, Sections 1 thru 5 and 7 thru 9 must be completed. If there are any changes including change of ownership along with the renewal of the delivery certificate, Sections 1 thru 5 and 7 thru 10 & 12 must be completed. For Initial Registration, Sections 1 thru 13, the complete form should be completed. For data verification purposes, please check our IWR (Integrated web reporting) web page www15,tcaq.texas.gov/crpub/index.cfm?fuseaction=regent.RNSearch If you have any questions on how to fill out this form or about the PST Registration program, please contact us at 512/239-2160. Individuals are entitled to request and review their personal information that the agency gathers on its forms. They may also have any errors in their information corrected. To review such information, contact us at 512-239-2160. 4. REASON FOR THIS FILING PART A). UST REGISTRATION INFORMATION (Mark all that apply): ☐ Initial Registration ☐ UST Ownership Change (New Owner indicate effective date :) ☐ Amendment of: ▲☐ Owner Information ■ Operator Information □ UST System Information c | Facility Information Financial Assurance Information E **Operator Training** Other (specify): PART B). UST COMPLIANCE SELF-CERTIFICATION INFORMATION (Mark all that apply): Initial Certification at Facility (Including Tank Ownership Change) New Tank at Facility Annual Renewal ☐ Other (specify): energy not be made. If the program is not listed, class other and many in **Animal Feeding Operation** Dam Safety Industrial & Hazardous Waste Districts Municipal Solid Waste New Source Review - Air OSSF 7 Petroleum Storage Tank Sludge Stormwater Tires Title V - Air Utilities г Voluntary Cleanup Program Wastewater Agriculture Wastewater Permit Water Districts Water Rights Water Utilities Other Other Unknown Licensing - Type(s) П 6. OPERATOR TRAINING Each class of operator - Class A, Class B, and Class C shall be trained and certified in accordance with Title 30, TAC 334 Subchapter N. Class A and Class B Operators must ensure that training certificates are maintained at each facility. A copy of the initial or new certificate must also be provided to the TCEQ with their annual self certification starting August 8, 2012. All classes of operators must be retrained within three years of their training date. As of the signature date on this form, this site is in compliance with all Class A, B, and C UST facility operator training: Ves No Class A Operator (Exactly as it appears on certificate) First Name MALIK Last Name LALANI Training Provider API WORKSAFE Date of Training 1/25/18 Class B Operator - Check Box if Same as Class A Operator First Name **Last Name**

Training Provider

Date of Training

	TCEO. US	T PECISTO TOEG	Facility ID No. 35214		
	7. SELECERT	TOTAL ME SELF-CE	RTIFICATION FORM		
Important: Complet	tion of this section is requi	FICATION OF COMPLIANCE WI red before TCEQ issues a UST Delivery Carti	ITH UST REQUIREMENTS		,
any incomplete sut	law unless a valid, current	nt Delivery Certificate is available and/or display	ficate. Delivery of regulated substances into	regulat	or
 INDICATE RESPON 	ISES TO EACH QUESTION BY	FICATION OF COMPLIANCE W. red before TCEQ issues a UST Delivery Certificate is available and/or displa- issuance of a Delivery Certificate for this for MARKING X IN THE APPROPRIATE SPACE AT THE valence at the feetile in the second se	scility.	arked a	Ņ
REGISTRATION	• For regulated UST s	valence at the tacility indicated by the	ERIGHT.	YES	I
	pursuant to §334.7 of	ystems at the facility indicated below, is the TCEQ rules (including information in this filing	registration information filed with the TCEC () complete, accurate, & up-to-date?		ľ
FACILITY FEES	 For regulated UST so owner been paid in 	ystems at the facility indicated below, have full (i.e., annual fees plus all fate fees, penads)	all facility fees billed to date to the current		Ľ
FINANCIAL ASSURANCE	For regulated UST sy requirements, as des	pads) /stems at the facility indicated below, does to	inancial assurance coveres	V	
· · · · · · · · · · · · · · · · · · ·	UST systems?	states at the facility indicated below, does to cribed in Chapter 37 Subchapter I of TCEQ ry, and third-party property damage in the expenses at the facility indicated below, are of	rules, fer first-party sorractive action, vent of a petroleum release from these	Ø	[
TECHNICAL	as described in TCE	rstems at the facility indicated below, are at Q rules in §334.49 (relating to Corrosion P	in compliance with technical standards		
STANDARDS	and Alternative Proce	stems at the facility indicated below, are at Q rules in §334.49 (retating to Corrosion Pelating to Spill and Overfill Prevention and Course) if a written variance to all or part of granted by the TCEQ? (A Avese resporting duties have been met for 60 da	rotection), \$334.50 (relating to Release ontrol) and \$334.43 (relating to Verices)		r
	sections has been	granted by the TCEQ? (A Ayesa regi	the requirements of the previous three		L
am certifying A	certification.)	porting duties have been met for 60 da	lys prior to and including the date of		
Tank ID #(s) IA	iat the tollowing U	ST systems at this facility are in c			
i nis Self-Certifica	tion will not be process	and another form. Bed or Delivery Certificate created unless with this form. (State & Federal Entitles of INANCIAL ASSURANCE INSOL			
diaminatikan paman mengapan se	reconst	with this form. (State & Federal Entities L	i Proof of Financial Assurance has bee Exempt)	n prov	d
	8. F	INANCIAL ASSURANCE INFOF	BMATION		
inancial Assurance (I	Petroleum USTs only)	OF THE OF	TIVIATION - group are conserved to the constitution of the property of the conserved to the	ر بالأقيا	
Does this facility mai	The second of th				
1st party corrective a	retroleum USTs only) et Financial Assurance (i ction and 3™ naty bodik	FA) requirements for <u>both</u>			
	wife o vally cooliu				
	e my accany	injury/property damage liability?	□ No □ Example (otals == 4.5.)		
If YES, identify FA m	echanism(s): 🚺 Insura	Yes (as rich was a line)	No Exempt (state and federal	entities	0
	echanism(s): Insura	Yes (as rich was a line)	No Exempt (state and federal	entities	0
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Also requires	Surety stand-by trust fund.	ance (or risk retention group) Financial y bond Local Gov. financial test 1 to 1 Toppiel and available to local governments	test	entities edit* stricts).	0
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