

3E COMPANY

Fax

To: CAROL GENSWEIDER From: MELANIE KOSKE
TCEQ Fax: 760-602-8854 ph# 760-602-8700
Fax: 512-239-6410 Pages: 5 (Including cover sheet) x7486
Phone: Date: 8/29/2007
Re: REG INFO CC:

☐ Urgent ☒ For Review ☐ Please Comment ☐ Please Reply ☐ Please Recycle

CAROL ATTACHED ARE ALL THE STORE NUMBERS
APPLIED FOR WIND GENERATION DATES. I'VE
LISTED THE TX FORM CODES WITH BEEF
WASTE DESCRIPTION & GENERATING PROCESS.

IF ADDITIONAL INFORMATION IS REQUIRED,
PLEASE CONTACT ME.

THANK YOU

MELANIE

3E Company, 1905 Aston Ave., Carlsbad, CA 92008 (800) 451-8346

This facsimile (including any attachments) contains confidential information intended for a specific individual and purpose, and is protected by law. If you are not the intended recipient, you must shred this information, and are requested to notify the disclosing party that you received this facsimile in error. Any disclosure, copying, or distribution of this information or use of the information is not permitted without the authorization of the disclosing party.

Home Depot Store Number	Date of Generation	Texas Form Code	Waste Description and Generating Process
0505	2/13/1997	801	Aerosols, Compressed Gas- <i>Used/Returned/Damaged/Spilled Product</i>
0506	2/11/1999	105	Corrosive, Acidic Liquid-Sulfuric Acid, Hydrochloric Acid- <i>Used/Returned/Damaged/Spilled Product</i>
0509	1/28/1999	110	Corrosive, Basic Liquid-Potassium Hydroxide, Sodium Hydroxide- <i>Used/Returned/Damaged/Spilled Product</i>
0513	1/22/2004	211	Gasoline from <i>Used/Returned/Damaged Equipment</i> (lawn mowers, chainsaws)
0514	1/2/2003	319	Oxidizing Solid-Chlorine (Pool Chemicals) <i>Used/Returned/Damaged/Spilled Product</i>
0517	7/13/2000	209	Paint Related Material-Flammable Liquids - <i>Used/Returned/Damaged/Spilled Product</i>
0519	12/12/2002	401	Pesticides-Solids <i>Used/Returned/Damaged/Spilled Product</i>
0523	7/21/1994	219	Toxic Liquids-Pesticides <i>Used/Returned/Damaged/Spilled Product</i>
0525	11/16/1995	388	Mercury (Broken Fluorescent Light Tubes) <i>Used/Returned/Damaged/Spilled Product</i>
0526	4/18/1998		
0528	11/12/1998		
0539	8/15/1991		
0540	2/25/1993		
0542	12/13/1990		
0553	3/28/1996		
0556	12/5/1996		
0563	3/11/1999		
0565	5/18/1995		
0566	3/17/1994		
0571	12/22/1988		

Home Depot Store Number	Date of Generation		
0576	9/23/1993		
0578	4/4/1996		
0580	11/5/1992		
5039	1/20/2004		
5046	1/12/2004		
5565	2/6/2002		
5580	12/18/2000		
5595	6/1/1992		
6503	10/20/1998		
6504	2/17/2000		
6506	2/11/1999		
6509	11/30/2000		
6510	5/27/1999		
6512	10/5/2000		
6513	6/30/2005		
6515	9/2/1999		
6518	2/13/2003		
6520	8/19/1999		
6521	8/19/1999		
6523	3/30/2000		
6525	1/20/2000		
6526	4/20/2000		
6529	5/4/2000		
6533	10/18/2001		
6534	7/6/2000		
6539	8/11/2005		
6540	10/12/2000		
6542	7/19/2001		
6548	2/8/2001		
6549	7/19/2001		

Home Depot Store Number	Data of Generation		
6551	2/28/2001		
6555	10/2/2003		
6556	2/7/2002		
6558	8/25/2005		
6562	5/24/2001		
6563	9/4/2003		
6564	7/4/2001		
6567	1/16/2003		
6575	7/18/2002		
6576	1/23/2002		
6578	5/2/2002		
6581	6/12/2003		
6585	10/23/2003		
6586	12/12/2002		
6587	1/8/2004		
6588	6/5/2003		
6801	4/10/2003		
6802	4/24/2003		
6803	3/13/2003		
6806	4/28/2005		
6807	10/9/2003		
6809	1/22/2004		
6810	8/28/2003		
6812	1/15/2004		
6814	3/11/2004		
6816	7/1/2004		
6817	7/1/2004		
6819	3/3/2005		
6820	3/17/2005		
6828	8/25/2005		

Home Depot Store Number	Data of Generation		
6830	2/2/2006		
6833	8/31/2006		
6839	10/19/2006		
6859	11/22/2006		
6860	2/1/2007		
6863	4/19/2007		
6984	9/15/2005		
6988	6/30/2005		
8418	9/23/2004		
8419	5/27/2004		
8438	9/23/2004		
8439	11/18/2004		
8454	1/6/2005		
8517	5/24/2007		
8518	1/6/2005		
8519	1/6/2005		
8520	3/17/2005		
8540	2/19/2004		
8951	7/29/2004		

EQ Core Data Form

TCEQ Use Only

HW-88301-00

If you have questions on how to fill out this form or about our Central Registry, please contact us at 512-239-5175.

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 512-239-3282.

SECTION I: General Information

1. Reason for Submission *Example: new wastewater permit; IHW registration; change in customer information; etc.*

Initial Notification

2. Attachments Describe Any Attachments: (ex: Title V Application, Waste Transporter Application, etc.)

x YES NO TCEQ-00002

3. Customer Reference Number-if issued

4. Regulated Entity Reference Number-if issued

CN

(9 digits)

RN

(9 digits)

SECTION II: Customer Information

5. Customer Role (Proposed or Actual) -- As It Relates to the Regulated Entity Listed on This Form

Please check one of the following:

X

Owner

Operator

Owner and Operator

Occupational Licensee

Volunteer Cleanup Applicant

Other

TCEQ Use Only

Superfund

PST

Respondent

6. General Customer Information

X

New Customer

Change to Customer Information

Change in Regulated Entity Ownership

No Change *

*If A No Change and Section I is complete, skip to Section III - Regulated Entity Information.

7. Type of Customer:

Individual

Sole Proprietorship - D.B.A.

Partnership

X

Corporation

Federal Government

State Government

County Government

City Government

Other Government

Other:

8. Customer Name (If an individual, please print last name first)

If new name, enter previous name:

Home Depot USA, Inc.

HD 5595

SEP 18 2007

9. Mailing Address:

1905 Aston Av. #100

TCEQ
CENTRAL FILE ROOM

City

State

ZIP

ZIP + 4

Carlsbad

CA

92008

10. Country Mailing Information if outside USA

11. E-Mail Address if applicable

12. Telephone Number

760-602-8700

13. Extension or Code

7486

14. Fax Number if applicable

760-602-8854

15. Federal Tax ID (9 digits)

581853319

16. State Franchise Tax ID Number if applicable

17. DUNS Number if applicable (9 digits)

18. Number of Employees

0-20

21-100

X

101-250

251-500

501 and higher

19. Independently Owned and Operated?

X

Yes

No

SECTION III: Regulated Entity Information

20. General Regulated Entity Information

X New Regulated Entity Change to Regulated Entity Information No Change*

*If "No Change" and Section I is complete, skip to Section IV - Preparer Information.

AUG 31 2007

Registration and Reporting Section

fin 9-5-07 TR

21. Regulated Entity Name (If an individual, please print last name first)					
HOME DEPOT USA, INC #HD5595					
22. Street Address (No PO Boxes)		18100 CHISHOLM TRAIL			
		City	State	ZIP	ZIP + 4
		HOUSTON	TX	77060	
23. Mailing Address		1905 Aston Av #100			
		City	State	ZIP	ZIP + 4
		Carlsbad	CA	92008	
24. E-Mail Address: [REDACTED]					
25. Telephone Number		26. Extension or Code		27. Fax Number if applicable	
760-602-8700		7486		760-602-8854	
28. Primary SIC Code (4 digits)	29. Secondary SIC Code (4 digits)	30. Primary NAICS Code (5 or 6 digits)		31. Secondary NAICS Code (5 or 6 digits)	
1521		444110			
32. What is the Primary Business of this entity? (Please do not repeat the SIC or NAICS description)					
Home Improvement Retailer					
Questions 33 - 37 address geographic location. Please refer to the instructions for applicability.					
33. County	HARRIS				
34. Description of Physical Location					
35. Nearest City			State	Nearest Zip	
			TX	77060	
36. Latitude (N)			37. Longitude (W)		
<i>Degrees</i>	<i>Minutes</i>	<i>Seconds</i>	<i>Degrees</i>	<i>Minutes</i>	<i>Seconds</i>
29	45	46	-95	21	46
38. TCEQ Programs In Which This Regulated Entity Participates <i>Not all programs have been listed. Please add to this list as needed. If you don't know or are unsure, please mark "Unknown". If you know a permit or registration # for this entity, please write it below the program.</i>					
<input type="checkbox"/>	Animal Feeding Operation	<input type="checkbox"/>	Petroleum Storage Tank	<input type="checkbox"/>	Water Rights
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
<input type="checkbox"/>	Title V - Air	<input type="checkbox"/>	Wastewater Permit	X	Retail
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
<input type="checkbox"/>	Industrial & Hazardous Waste	<input type="checkbox"/>	Water Districts	<input type="checkbox"/>	
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
<input type="checkbox"/>	Municipal Solid Waste	<input type="checkbox"/>	Water Utilities	<input type="checkbox"/>	Unknown
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
<input type="checkbox"/>	New Source Review - Air	<input type="checkbox"/>	Licensing - TYPE(s)	<input type="checkbox"/>	
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
Section IV: Preparer Information					
39. Name			40. Title		
Melanie Koske			Waste Specialist		
41. Telephone Number		42. Extension or Code		43. Fax Number if applicable	
760-602-8700		7486		760-602-8854	
44. E-mail Address: [REDACTED]					

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IHW	CO

Notification For Hazardous or Industrial Waste Management

Please print or type. Definitions and codes can be found in the Hazardous or Industrial Waste Form Instructions. Changes not related to Waste Streams or Waste Management Units must be accompanied by TCEQ Core Data Form (TCEQ 10400).

Part I. General Registration Information

Section A. Notification Type and Registration Numbers

If this is an Initial Notification, leave registration numbers blank. If updating existing Notice of Registration, provide current registration numbers.

1. Notification type (check one): ☒ Initial ☐ Update

2. Solid Waste Registration Number: _____

3. EPA Identification Number: TX R000064964

4. Customer Reference Number: CN _____

5. Regulated Entity Number: RN _____

Section B. Company Information

1. Company Name: HOME DEPOT

2. Site Name: HD 5595

3. Registration Type (check all that apply): ☒ Generator ☐ Receiver ☐ Transporter ☐ Recycler

4. Contact Information:

MELANIE, KOSKE, WASTE SPECIALIST
(First Name, Last Name, Title)

Telephone Number: (760) 602-8700 Fax Number: (760) 602-8854 Email: [REDACTED]

5. Waste Handler Status (check all that apply):

☒ Not Applicable ☐ Permitted TSD ☐ Interim TSD ☐ Recycler

Section C. Generator Information

If your facility does not fit the definition of a "Generator" skip to Section D

1. Generator Type (check all that apply): ☐ Industrial ☒ Non-industrial ☐ Railroad Commission

2. Hazardous Waste Generation Status (check one):

☐ Large Quantity Generator (LQG)

❖ 2,200 pounds (1,000 kilograms) or more of hazardous waste
and/or
❖ 2.2 pounds (1 kilogram) or more of acutely hazardous waste

☒ Small Quantity Generator (SQG)

❖ between 220 and 2,200 pounds (100 and 1,000 kilograms) of hazardous waste
and
❖ less than 2.2 pounds (1 kilogram) of acutely hazardous waste

☐ Industrial Conditionally Exempt Small Quantity Generator (CESQG)

❖ 220 pounds (100 kilograms) or less of hazardous waste
and
❖ less than 2.2 pounds (1 kilogram) of acutely hazardous waste
and
❖ 220 pounds (100 kilograms) or more of industrial Class 1 waste

☐ Universal Waste Only

❖ All hazardous waste generated is classified as Universal Waste and no reportable Class 1 waste is generated at the site.

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Section D. Receiver Information

If your facility does not fit the definition of a "Receiver" skip to Section E

1. Facility Category (check one): ☐ Commercial ☐ Captive ☐ Captured
2. Class of Waste Received for treatment, storage or disposal (check all that apply):
☐ Hazardous ☐ Class 1 ☐ Class 2 ☐ Class 3
3. If you receive waste from off-site and recycle it, see TCEQ Form 0524 "Notification Form for Receiving and Recycling Hazardous or Industrial Waste".

Section E. Transporter Information

If your facility does not fit the definition of a "Transporter" skip to Section F

*To Transport hazardous waste you must have an EPA identification number. See EPA RCRA Subtitle C Site Identification Form (EPA Form 8700-12).

1. Carrier Classification (answer "yes" or "no" to each question):

a. Do you transport for hire?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
b. Do you transport your own waste?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
c. Is this site a transfer facility?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2. Types of waste transported (check all that apply):
☐ Hazardous* ☐ Class 1 ☐ Class 2 ☐ Class 3

Section F. Certification of Company Information

I certify that the information submitted herein is complete and accurate to the best of my knowledge

Melanie Koske

Printed Preparer's Name

760-602-8700 x7486

Telephone Number

[Signature]

Preparer's Signature

8/7/07

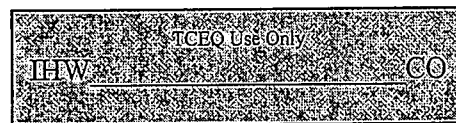
Date

Mail all completed registration forms

(i.e., Notification for Hazardous or Industrial Waste Management, TCEQ 00002; TCEQ Core Data Form, TCEQ 10400; EPA RCRA Subtitle C Site Identification Form, EPA Form 8700-12)

**Texas Commission on Environmental Quality
 Registration, Review, and Reporting Division
 Registration and Reporting Section, MC 129
 PO Box 13087
 Austin, TX 78711-3087**

If you have questions on how to fill out this form or about the Industrial and Hazardous Waste Program, please contact us at 512/239-6413. 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 512/239-3282.



Notification For Hazardous or Industrial Waste Management

Please print or type. Definitions and codes can be found in the Hazardous or Industrial Waste Form Instructions. Changes not related to Waste Streams or Waste Management Units must be accompanied by TCEQ Core Data Form (TCEQ 10400). You may copy this section as needed for each waste stream at your site.

Part II. Waste Stream Notification

Section A. Notification Type and Registration Numbers

If this is an Initial Notification, leave registration numbers blank. If updating existing Notice of Registration, provide current registration numbers.

1. Notification type (check one): ☒ Initial ☐ Update

2. Solid Waste Registration Number: _____

3. EPA Identification Number: TXR000064964

4. Customer Reference Number: CN _____

5. Regulated Entity Number: RN _____

6. Company Name: HOME DEPOT

7. Site Name: HD 5595

Section B. Waste Stream Information

1. Texas Waste Code: 3500
Sequence Number

801
Texas Form Code
(See Appendix B)

H 1 2 3
Class Code
(Circle Class Code)

2. Waste Description and Generating Process: USED PRODUCT

3. Date of Generation: ____/____/____
Month Day Year

4. Origin Code (check one):

- | | |
|-------------------------------------|---|
| <input checked="" type="checkbox"/> | 1. The waste was generated on-site from a product process or service activity. |
| <input type="checkbox"/> | 2. The waste resulted from a spill clean-up, equipment decommissioning, or emergency removal by company. |
| <input type="checkbox"/> | 3. The waste was derived from the on-site management of a non-hazardous waste. |
| <input type="checkbox"/> | 4. The waste was received from off-site and was not recycled or treated on-site. |
| <input type="checkbox"/> | 5. The waste was residual from the on-site treatment, disposal or recycling of previously existing hazardous waste. |
| <input type="checkbox"/> | 6. The waste was from a state, federal, or locally funded cleanup. |
| <input type="checkbox"/> | 7. The waste was from a corrective action or closure. |

5. New Chemical Substance: ☐ Yes ☒ No

If you check "yes" and the waste is Class 2 or Class 3, attach copies of all information, documentation and rationale used to classify the waste.

6. Waste Management Location (check all that apply): ☐ On-site ☒ Off-site

Provide the 3-digit waste management unit sequence number for any ON-SITE waste management units where this waste is treated, stored or disposed. If the waste management unit is new, leave blank, and include waste stream in Part III Waste Management Unit Notification, question 9.

7. If this waste is recycled, see TCEQ Form 0525 "Generator Notification Form for Recycling Hazardous or Industrial Waste".



Please provide the 8-digit Texas Waste Code from Item 1 of Section B of the previous page:

3500801H

If this waste is non-hazardous, skip Questions 8-13 and go to Section C. Certification of Waste Stream Information

8. EPA Hazardous Waste Numbers (EPA Codes):

0001 0005 0007 0035 _____

9. NAICS Code: 444110

10. Source Code (See Appendix C): G 11

11. Mixed Radioactive Waste: ☐ Yes ☒ No

12. System Type Code (See Appendix D): H _____

*Only fill out System Type Code if you selected Origin Code 5 from the previous page.

13. EPA Form Code (See Appendix E): W 0001

Section C. Certification of Waste Stream Information

I certify that the information submitted herein is complete and accurate to the best of my knowledge.

Melanie Koske
Printed Preparer's Name

760-602-8700
Telephone Number

[Signature]
Preparer's Name

8/7/07
Date



Notification For Hazardous or Industrial Waste Management

Please print or type. Definitions and codes can be found in the Hazardous or Industrial Waste Form Instructions. Changes not related to Waste Streams or Waste Management Units must be accompanied by TCEQ Core Data Form (TCEQ 10400). You may copy this section as needed for each waste stream at your site.

Part II. Waste Stream Notification

Section A. Notification Type and Registration Numbers

If this is an Initial Notification, leave registration numbers blank. If updating existing Notice of Registration, provide current registration numbers.

1. Notification type (check one): ☒ Initial ☐ Update

2. Solid Waste Registration Number: _____

3. EPA Identification Number: TX R000064964

4. Customer Reference Number: CN _____

5. Regulated Entity Number: RN _____

6. Company Name: HOME DEPOT

7. Site Name: HD 5595

Section B. Waste Stream Information

1. Texas Waste Code: 3 5 0 1
Sequence Number

2 0 9
Texas Form Code
(See Appendix B)

H 1 2 3
Class Code
(Circle Class Code)

2. Waste Description and Generating Process: USED PRODUCT

3. Date of Generation: ____/____/____
Month Day Year

4. Origin Code (check one):

☒

1. The waste was generated on-site from a product process or service activity.

2. The waste resulted from a spill clean-up, equipment decommissioning, or emergency removal by company.

3. The waste was derived from the on-site management of a non-hazardous waste.

4. The waste was received from off-site and was not recycled or treated on-site.

5. The waste was residual from the on-site treatment, disposal or recycling of previously existing hazardous waste.

6. The waste was from a state, federal, or locally funded cleanup.

7. The waste was from a corrective action or closure.

5. New Chemical Substance: ☐ Yes ☒ No

If you check "yes" and the waste is Class 2 or Class 3, attach copies of all information, documentation and rationale used to classify the waste.

6. Waste Management Location (check all that apply): ☐ On-site ☒ Off-site

Provide the 3-digit waste management unit sequence number for any ON-SITE waste management units where this waste is treated, stored or disposed. If the waste management unit is new, leave blank, and include waste stream in Part III Waste Management Unit Notification, question 9.

7. If this waste is recycled, see TCEQ Form 0525 "Generator Notification Form for Recycling Hazardous or Industrial Waste".



Please provide the 8-digit Texas Waste Code from Item 1 of Section B of the previous page:

3501209H

If this waste is non-hazardous, skip Questions 8-13 and go to Section C. Certification of Waste Stream Information

8. EPA Hazardous Waste Numbers (EPA Codes):

D001 D035

9. NAICS Code: 444110

10. Source Code (See Appendix C): G 06

11. Mixed Radioactive Waste: ☐ Yes ☒ No

12. System Type Code (See Appendix D): H

*Only fill out System Type Code if you selected Origin Code 5 from the previous page.

13. EPA Form Code (See Appendix E): W 0 0 1

Section C. Certification of Waste Stream Information

I certify that the information submitted herein is complete and accurate to the best of my knowledge.

Melanie Koske

Printed Preparer's Name

760-602-8700

Telephone Number

M Koske

Preparer's Name

8/7/07

Date

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Notification For Hazardous or Industrial Waste Management

Please print or type. Definitions and codes can be found in the Hazardous or Industrial Waste Form Instructions. Changes not related to Waste Streams or Waste Management Units must be accompanied by TCEQ Core Data Form (TCEQ 10400). You may copy this section as needed for each waste stream at your site.

Part II. Waste Stream Notification

Section A. Notification Type and Registration Numbers

If this is an Initial Notification, leave registration numbers blank. If updating existing Notice of Registration, provide current registration numbers.

1. Notification type (check one): ☒ Initial ☐ Update

2. Solid Waste Registration Number: _____

3. EPA Identification Number: TXL000064964

4. Customer Reference Number: CN _____

5. Regulated Entity Number: RN _____

6. Company Name: HOME DEPOT

7. Site Name: HD 5595

Section B. Waste Stream Information

1. Texas Waste Code: 3502
Sequence Number

110
Texas Form Code
(See Appendix B)

H 1 2 3
Class Code
(Circle Class Code)

2. Waste Description and Generating Process: USED PRODUCT

3. Date of Generation: ____ / ____ / ____
Month Day Year

4. Origin Code (check one):

- | | |
|-------------------------------------|---|
| <input checked="" type="checkbox"/> | 1. The waste was generated on-site from a product process or service activity. |
| <input type="checkbox"/> | 2. The waste resulted from a spill clean-up, equipment decommissioning, or emergency removal by company. |
| <input type="checkbox"/> | 3. The waste was derived from the on-site management of a non-hazardous waste. |
| <input type="checkbox"/> | 4. The waste was received from off-site and was not recycled or treated on-site. |
| <input type="checkbox"/> | 5. The waste was residual from the on-site treatment, disposal or recycling of previously existing hazardous waste. |
| <input type="checkbox"/> | 6. The waste was from a state, federal, or locally funded cleanup. |
| <input type="checkbox"/> | 7. The waste was from a corrective action or closure. |

5. New Chemical Substance: ☐ Yes ☒ No

If you check "yes" and the waste is Class 2 or Class 3, attach copies of all information, documentation and rationale used to classify the waste.

6. Waste Management Location (check all that apply): ☐ On-site ☒ Off-site

Provide the 3-digit waste management unit sequence number for any **ON-SITE** waste management units where this waste is treated, stored or disposed. If the waste management unit is new, leave blank, and include waste stream in Part III Waste Management Unit Notification, question 9.

7. If this waste is recycled, see TCEQ Form 0525 "Generator Notification Form for Recycling Hazardous or Industrial Waste".

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Please provide the 8-digit Texas Waste Code from Item 1 of Section B of the previous page:

3502110H

If this waste is non-hazardous, skip Questions 8-13 and go to Section C. Certification of Waste Stream Information

8. EPA Hazardous Waste Numbers (EPA Codes):

0002

9. NAICS Code: 444110

10. Source Code (See Appendix C): G 02

11. Mixed Radioactive Waste: ☐ Yes ☒ No

12. System Type Code (See Appendix D): H

*Only fill out System Type Code if you selected Origin Code 5 from the previous page.

13. EPA Form Code (See Appendix E): W 0 0 1

Section C. Certification of Waste Stream Information

I certify that the information submitted herein is complete and accurate to the best of my knowledge.

Melanie Koske

Printed Preparer's Name

760-602-8700

Telephone Number

[Signature]

Preparer's Name

8/7/07

Date