

TCEQ Core Data Form

TCEQ Use Only

For detailed instructions regarding completion of this form, please read the Core Data Form Instructions or call 512-239-5175.

1. Reason for Submission (If other is checked please describe in space provided.)											
New Permit, Registration or Authorization (Core Data Form should be submitted with the program application.)											
☐ Renewal (Core Data Form should be submitted with the renewal form) ☐ Other											
2. Customer Reference Number (if issued) Follow this link to search 3. Regulated Entity Reference Number (if issued)											
CN 6036		for CN or RN Central R									
SECTION II: Customer Information											
4. General C	5. Effective D	e Date for Customer Information Updates (mm/dd/yyyy) 8/2/2021)21		
□ New Customer □ Change in Regulated Entity Ownership □ Change in Regulated Entity Ownership □ Change in Logal Name (Verificable with the Toyon Secretary of State or Toyon Comptroller of Public Accounts)											
Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts) The Customer Name submitted here may be undeted automatically based on what is surrent and active with the											
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:											
RPM xConstruction, LLC											
7. TX SOS/C	PA Filing	Number	8. TX State T	Tax ID (11 digits)			ç	9. Federal Tax ID (9 digits)		10. DUNS Number (if applicable)	
801232857											
11. Type of Customer:											
Government:											
12. Number of Employees ☐ 0-20 ☐ 21-100 ☐ 101-250 ☐ 251-500 ☒ 501 and higher ☐ 3. Independently Owned and Operated? ☐ Yes ☐ No											
14. Customer Role (Proposed or Actual) – as it relates to the Regulated Entity listed on this form. Please check one of the following											
□Owner □ Operator □ Owner & Operator											
Occupational Licensee Responsible Party Voluntary Cleanup Applicant Other:											
15 Mailing	5208	Tennyson Par	kway								
15. Mailing Address:	Suite 1	30			1			_			
	City	Plano		State	TX		ZIP	7502	24	ZIP + 4	
16. Country Mailing Information (if outside USA) 17. E-Mail Address (if applicable)											
						djimenez@rpmxconstruction.com					
18. Telephone Number				19. Extension or Code				20. Fax Number (if applicable)			
(469) 441-5496											
SECTION III: Regulated Entity Information											
21. General Regulated Entity Information (If 'New Regulated Entity" is selected below this form should be accompanied by a permit application)											
New Regulated Entity ☐ Update to Regulated Entity Name ☐ Update to Regulated Entity Information											
The Regulated Entity Name submitted may be updated in order to meet TCEQ Agency 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.)											
RPM CBP No. 4 - Spiritas Ranch											

TCEQ-10400 (02/21) Page 1 of 3

23. Street Addres												
(No PO Boxes)		City		State		ZIP		ZIP + 4				
24. County												
		Е	nter Physical L	ocation Description	on if no stre	et address is p	rovided.					
25. Description to Physical Location				th-northwest on tersection of F					mately 0.4			
26. Nearest City	•					Stat	te	Nea	rest ZIP Code			
Little Elm			т.		T	TX		762	227			
27. Latitude (N) Ir	n Decim					ongitude (W) In	Decimal:	-96.9636				
Degrees		Minutes		Seconds	Degree	Degrees			Seconds			
33			12	59		96		57	49			
29. Primary SIC C	Code (4 d	ligits) 30.	Secondary SIC	Code (4 digits)	31. Primary (5 or 6 digits)	y NAICS Code		2. Secondary NAICS Code or 6 digits)				
3273												
33. What is the P				(Do not repeat the SIC		· · · · · · · · · · · · · · · · · · ·	•					
Operate a peri	manen	t concre	te batch plar	nt for public wo								
34. Mailing		5208 Tennyson Parkway										
34. Mailing Address:			-		Su	ite 130		T.				
Addi voc.		City	Plano	State	TX	ZIP	75024	ZIP + 4				
35. E-Mail Ad	ddress:				ljimenez@r	pmxconstruction	on.com					
36. Telephone Number 37. Extension or Code 38. Fax Number (if applicable)								icable)				
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	(469)44						() -	100010)			
	and ID	41-5496 Numbers	Check all Program	ns and write in the per		on numbers that v	() -	•			
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 Name (In Print):
 Diego Jimenez

 Phone:
 (469) 441- 5496

TCEQ-10400 (02/21) Page 2 of 3

Signature:		Date:	
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TCEQ-10400 (02/21) Page 3 of 3