

## Texas Commission on Environmental Quality

### Standard Permit for Existing Registration

123967

#### Site Information (Regulated Entity)

What is the name of the site to be authorized? EXXONMOBIL CHEMICAL MONT BELVIEU PLASTICS PLANT

Does the site have a physical address? Yes

##### Physical Address

Number and Street 13330 HATCHERVILLE RD

City BAYTOWN

State TX

ZIP 77521

County CHAMBERS

Latitude (N) (##.#####) 29.879357

Longitude (W) (-###.#####) -94.91583

Primary SIC Code

Secondary SIC Code

Primary NAICS Code

Secondary NAICS Code

##### Regulated Entity Site Information

What is the Regulated Entity's Number (RN)? RN102501020

What is the name of the Regulated Entity (RE)? EXXONMOBIL CHEMICAL MONT BELVIEU PLASTICS PLANT

Does the RE site have a physical address? Yes

##### Physical Address

Number and Street 13330 HATCHERVILLE RD

City MONT BELVIEU

State TX

ZIP 77521

County CHAMBERS

Latitude (N) (##.#####) 29.874722

Longitude (W) (-###.#####) -94.916111

Facility NAICS Code

What is the primary business of this entity? INDUSTRIAL CHEMICAL MANUFACTURING PLANT

#### Customer (Applicant) Information

How is this applicant associated with this site? Owner Operator

What is the applicant's Customer Number (CN)? CN600123939

Type of Customer Corporation

|  |                                  |
|--|----------------------------------|
| Full legal name of the applicant:  |                                  |
| Legal Name   | Exxon Mobil Corporation          |
| Texas SOS Filing Number  | 3362806                          |
| Federal Tax ID   | 135409005                        |
| State Franchise Tax ID   | 11354090059                      |
| State Sales Tax ID   |                                  |
| Local Tax ID   |                                  |
| DUNS Number  | 1213214                          |
| Number of Employees  | 501+                             |
| Independently Owned and Operated?  | Yes                              |
| 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  | Exxon Mobil Corporation          |
| Prefix   | MRS                              |
| First  | Allison                          |
| Middle   |                                  |
| Last   | Korenek                          |
| Suffix   |                                  |
| Credentials  |                                  |
| Title  | ENVIRONMENTAL SECTION SUPERVISOR |
| Responsible Authority Mailing Address  |                                  |
| Enter new address or copy one from list:   |                                  |
| Address Type   | Domestic                         |
| Mailing Address (include Suite or Bldg. here, if applicable)   | PO BOX 1653                      |
| Routing (such as Mail Code, Dept., or Attn:)   |                                  |
| City   | MONT BELVIEU                     |
| State  | TX                               |
| ZIP  | 77580                            |
| Phone (###-###-####)   | 2545453427                       |
| Extension  |                                  |
| Alternate Phone (###-###-####)   |                                  |
| Fax (###-###-####)   |                                  |
| E-mail   | ALLISON.KORENEK@EXXONMOBIL.COM   |

## Responsible Official Contact

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Person TCEQ should contact for questions about this application:

|                          |                         |
|--------------------------|-------------------------|
| Same as another contact? |                         |
| Organization Name        | EXXON MOBIL CORPORATION |

|  |                                  |
|--|----------------------------------|
| Prefix   | MRS                              |
| First  | ALLISON                          |
| Middle   |                                  |
| Last   | KORENEK                          |
| Suffix   |                                  |
| Credentials  |                                  |
| Title  | ENVIRONMENTAL SECTION SUPERVISOR |
| Enter new address or copy one from list:                     |                                  |
| Mailing Address  |                                  |
| Address Type   | Domestic                         |
| Mailing Address (include Suite or Bldg. here, if applicable) | PO BOX 1653                      |
| Routing (such as Mail Code, Dept., or Attn:)                 |                                  |
| City   | MONT BELVIEU                     |
| State  | TX                               |
| ZIP  | 77580                            |
| Phone (###-###-####)   | 2545453427                       |
| Extension  |                                  |
| Alternate Phone (###-###-####)                               |                                  |
| Fax (###-###-####)   |                                  |
| E-mail   | ALLISON.KORENEK@EXXONMOBIL.COM   |

## Technical Contact

Person TCEQ should contact for questions about this application:

|  |                         |
|--|-------------------------|
| Same as another contact?                                     |                         |
| Organization Name  | EXXON MOBIL CORPORATION |
| Prefix   | MR                      |
| First  | SIVA SANKAR             |
| Middle   |                         |
| Last   | THANAPAL                |
| Suffix   |                         |
| Credentials  |                         |
| Title  | PERMITS ADVISOR         |
| Enter new address or copy one from list:                     |                         |
| Mailing Address  |                         |
| Address Type   | Domestic                |
| Mailing Address (include Suite or Bldg. here, if applicable) | PO BOX 1653             |
| Routing (such as Mail Code, Dept., or Attn:)                 |                         |
| City   | MONT BELVIEU            |

|                                |                              |
|--------------------------------|------------------------------|
| State                          | TX                           |
| ZIP                            | 77580                        |
| Phone (###-###-####)           | 2545453630                   |
| Extension                      |                              |
| Alternate Phone (###-###-####) |                              |
| Fax (###-###-####)             |                              |
| E-mail                         | SIVA.THANAPAL@EXXONMOBIL.COM |

## Standard Permit General Information- Existing Reg Sites

|   |                           |
|---|---------------------------|
| 1) Is this project for a change of representations or a renewal of the standard permit?   | Change of Representations |
| 1.1. Is the registration being revised to represent the addition of a new facility?   | No                        |
| 1.1.1. Is the registration being revised to represent any change in the method of control of emissions, a change in the character of the emissions, or an increase in the discharge of the various emissions? | Yes                       |
| 2) Will the revised/renewed facility meet all of the requirements of the standard permit?   | Yes                       |

## Standard Permit Rule Amendment Information- Existing Sites

|  |                            |
|--|----------------------------|
| 1) Type of unit that is being registered   | POLLUTION CONTROL PROJECTS |
| 1.1. Does the project result in any collateral increases of emissions?                       | Yes                        |
| 1.1.1. Will the NAAQS and/or impacts analysis be attached?                                   | Yes                        |
| 1.2. Will this project be received by the TCEQ within 180 days of the original registration? | No                         |

## Standard Permit Attachments

|   |   |
|---|---|
| 1) Please attach PI-1S, NAAQS analysis and/or impacts analysis if applicable, and all other required documents to complete the project. |   |
| [File Properties]   |   |
| File Name   | <a href=/ePermitsExternal/faces/file?fileId=200249>MBPP PCP Revision Application_CONF.pdf</a> |
| Hash  | A162F28C5D3B228F14DBC1EE38656E3E878BADC29A22D00085C5AA96DFDD078E                              |
| MIME-Type   | application/pdf   |
| Confidential  | Yes   |
| [File Properties]   |   |
| File Name   | <a href=/ePermitsExternal/faces/file?fileId=200248>MBPP                                       |

|              |  |
|--------------|--|
| Hash         | 42838BA35D3405B0C9AE5901EBD7775BF23AA9DF3B9B577C1D0A64A5CA3A88C1 |
| MIME-Type    | application/pdf  |
| Confidential | No   |

2) Please attach any other necessary information needed to complete the registration.

## Expedite

1) Per Texas Health and Safety Code, Section 382.05155, does the applicant want to expedite the processing of this application? No

## Certification

The electronic signature below indicates that the Responsible Official has knowledge of the facts herein set forth and that the same are true, accurate, and complete to the best of my knowledge and belief. By this signature, the maximum emission rates listed on this certification reflect the maximum anticipated emissions due to the operation of this facility and all representations in this certification of emissions are conditions upon which the facilities and sources will operate. It is understood that it is unlawful to vary from these representations unless the certification is first revised. The signature certifies that to the best of the Responsible Officials knowledge and belief, the project will satisfy the conditions and limitations of the indicated exemption or permit by rule and the facility will operated in compliance with all regulations of the Texas Commission on Environmental Quality and with Federal U.S. Environmental Protection Agency regulations governing air pollution. The signature below certifies that, based on information and belief formed after reasonable inquiry, the statements and information above and contained in the attached document(s) are true, accurate, and complete. If you questions on how to fill out this form or about air quality permits. Please call (512) 239-1250. Individuals are entitled to request and review their personal information that the agency gathers on its forms.

1. I am Allison Korenek, the owner of the STEERS account ER040803.
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 Standard Permit for Existing Registration 123967.
9. My signature indicates that I am in agreement with the information on this form, and authorize its submittal to the TCEQ.

OWNER OPERATOR Signature: Allison Korenek OWNER OPERATOR

Account Number: ER040803

Signature IP Address: 136.228.238.113

Signature Date:

2024-06-04

Signature Hash:

8C3A0CCDCC859F59E3119C8BA61ED6FE28C62F956C84AA2A62CCE5F4DF0730B1

Form Hash Code at  
time of Signature:

608E6B300CF59AE431D8BDB696D7291D5EE8F0D344501FD7A9C3D7EEB922D0BF

## Fee Payment

|                             |   |
|-----------------------------|---|
| Transaction by:             | The application fee payment transaction was made by ER090832/Dann Schimming |
| Paid by:                    | The application fee was paid by DANN SCHIMMING                              |
| Fee Amount:                 | \$900.00  |
| Paid Date:                  | The application fee was paid on 2024-06-04                                  |
| Transaction/Voucher number: | The transaction number is 582EA000612790 and the voucher number is 708083   |

## Submission

|                      |  |
|----------------------|--|
| Reference Number:    | The application reference number is 658279                     |
| Submitted by:        | The application was submitted by ER042414/Siva Sankar Thanapal |
| Submitted Timestamp: | The application was submitted on 2024-06-04 at 14:54:55 CDT    |
| Submitted From:      | The application was submitted from IP address 136.228.238.30   |
| Confirmation Number: | The confirmation number is 543774                              |
| Steers Version:      | The STEERS version is 6.76                                     |
| Permit Number:       | The permit number is 123967                                    |

## Additional Information

Application Creator: This account was created by Siva Sankar Thanapal