

Texas Commission on Environmental Quality

Air New Source Review (NSR) Void Permit

multiple

Site Information (Regulated Entity)

Does the site have a physical address?	Yes
Physical Address	
Number and Street	4710 PAN AMERICAN EXPY
City	SAN ANTONIO
State	TX
ZIP	78218
County	BEXAR
Latitude (N) (##.#####)	29.4763
Longitude (W) (-###.#####)	-98.3997
Primary SIC Code	
Secondary SIC Code	
Primary NAICS Code	
Secondary NAICS Code	
Regulated Entity Site Information	
What is the Regulated Entity's Number (RN)?	RN101625945
What is the name of the Regulated Entity (RE)?	HEB RETAIL SUPPORT CENTER
Does the RE site have a physical address?	Yes
Physical Address	
Number and Street	4710 PAN AMERICAN EXPY
City	SAN ANTONIO
State	TX
ZIP	78218
County	BEXAR
Latitude (N) (##.#####)	29.4763
Longitude (W) (-###.#####)	-98.3997
Facility NAICS Code	
What is the primary business of this entity?	

Customer (Applicant) Information

How is this applicant associated with this site?	Multiple
What is the applicant's Customer Number (CN)?	CN601297963
Type of Customer	Partnership
Full legal name of the applicant:	
Legal Name	H-E-B, LP
Texas SOS Filing Number	15370710
Federal Tax ID	743010657
State Franchise Tax ID	17430106579
State Sales Tax ID	
Local Tax ID	
DUNS Number	7924756
Number of Employees	101-250
Independently Owned and Operated?	No

Responsible Official Contact

Person TCEQ should contact for questions about this application:

Same as another contact?	
Organization Name	H-E-B LP
Prefix	MRS
First	Cimber
Middle	
Last	Mabe
Suffix	
Credentials	
Title	Senior Environmental Manager
Enter new address or copy one from list:	
Mailing Address	
Address Type	Domestic
Mailing Address (include Suite or Bldg. here, if applicable)	646 S FLORES ST
Routing (such as Mail Code, Dept., or Attn:)	
City	SAN ANTONIO
State	TX
ZIP	78204
Phone (###-###-####)	2109386504
Extension	
Alternate Phone (###-###-####)	
Fax (###-###-####)	
E-mail	mabe.cimber@heb.com

Void Permit General Information

1) Select Reason for Void/Cancellation:	Other
1.1. Please provide an explanation:	Freezer operations decommissioned and moved to new Freezer under new authorization.
2) Select all permits/registrations to be voided:	51089 51090 90874
3) Active permits/registrations that are associated to the selected RN, but are not associated to the selected CN:	44341 44341 51054
4) Active permits/registrations that have a pending project associated to the permit:	NONE
5) Enter the effective date of voidance/cancellation:	11/25/2024

Certification

I certify that I am the responsible official for this application and that, based on information and belief formed after reasonable inquiry, the statements and information on this form are true, accurate, and complete. I further understand that any permits/registrations voided at my request will not be eligible for reactivation.

1. I am Cimber W Mabe, the owner of the STEERS account ER000425.
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 Air New Source Review (NSR) Void Permit multiple.

9. My signature indicates that I am in agreement with the information on this form, and authorize its submittal to the TCEQ.

MULTIPLE Signature: Cimber W Mabe MULTIPLE

Customer Number:	CN601297963
Legal Name:	H-E-B, LP
Account Number:	ER000425
Signature IP Address:	165.225.216.191
Signature Date:	2024-11-26
Signature Hash:	B3B292796903F8702E37F3EA44EF1B0DB303F6F8 18E1DAC9C08DE33543A0DC23
Form Hash Code at time of Signature:	60636CD044C6AF2468F9CF32C9D99B8D790908D DD6D2FD599E8481360A0A3C34

Submission

Reference Number:	The application reference number is 712583
Submitted by:	The application was submitted by ER000425/Cimber W Mabe
Submitted Timestamp:	The application was submitted on 2024-11-26 at 16:36:50 CST
Submitted From:	The application was submitted from IP address 165.225.216.191
Confirmation Number:	The confirmation number is 587203
Steers Version:	The STEERS version is 6.83

Additional Information

Application Creator: This account was created by James Reis