

Certification and Registration for Permits by Rule
Form PI-7-CERT
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I. Registrant Information
A. Company or Other Legal Customer Name
Company Official Contact Information (<input checked="" type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Other: _____)
Name: Ben Pfeifer
Title: Senior EH&S Delivery Specialist
Mailing Address: 332 SH 332E, APB-2A1
City: Lake Jackson
State: TX
ZIP Code: 77566
Phone: (409) 948-5703
Fax:
Email Address: benjamin.pfeifer@dow.com
<i>All PBR registration responses will be sent via email.</i>
A. Technical Contact Information (<input checked="" type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Other: _____)
Name: Ben Pfeifer
Title: Senior EH&S Delivery Specialist
Company Name: The Dow Chemical Company
Mailing Address:
City: 332 SH 332E, APB-2A1
State: TX
ZIP Code: 77566
Phone Number: (409) 948-5703
Fax Number:
Email Address: benjamin.pfeifer@dow.com

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II. Facility and Site Information
A. Name and Type of Facility
Facility Name: Primenes
Facility Type: <input checked="" type="checkbox"/> Permanent <input type="checkbox"/> Temporary
For portable units, please provide the serial number of the equipment being authorized below.
Serial No(s):
B. Facility Location Information
Street Address: 1900 Tidal Road
If there is no street address, provide written driving directions to the site and provide the closest city or town, county, and ZIP code for the site (attach description if additional space is needed).
City: Deer Park
County: Harris
ZIP Code: 77536
C. TCEQ Core Data Form
Is the Core Data Form (TCEQ Form Number 10400) attached? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
If "NO," provide customer reference number (CN) and regulated entity number (RN) below.
Customer Reference Number (CN): 605605831
Regulated Entity Number (RN): 100223205
D. TCEQ Account Identification Number (if known): HG-0632-T
E. Type of Action
<input checked="" type="checkbox"/> Initial Application <input type="checkbox"/> Change to Registration
For Change to Registration provide the Registration Number:
F. PBR number(s) claimed under 30 TAC Chapter 106
(List all the individual rule number(s) that are being claimed.)
106. 261
106.
106.
106.

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II. Facility and Site Information <i>(continued)</i>
G. Historical Standard Exemption or PBR
Are you claiming a historical standard exemption or PBR? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
If "YES," enter rule number(s) and associated effective date in the spaces provided below.
Rule Number: _____ Effective Date: _____
Rule Number: _____ Effective Date: _____
H. Previous Standard Exemption or PBR Registration Number
Is this authorization for a change to an existing facility previously authorized under a standard exemption or PBR? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
If "YES," enter previous standard exemption number(s) and PBR registration number(s) and associated effective dates in the spaces provided below.
Standard Exemption or PBR Registration Number: _____
Effective Date: _____
I. Other Facilities at this Site Authorized by Standard Exemption, PBR, or Standard Permit
Are there any other facilities at this site that are authorized by an Air Standard Exemption, PBR, or Standard Permit? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
If "YES," enter standard exemption number(s), PBR registration number(s), and Standard Permit registration number(s), and associated effective date in the spaces provided below.
Standard Exemption, PBR Registration, and Standard Permit Registration Number(s): _____
Effective Date: _____
Standard Exemption, PBR Registration, and Standard Permit Registration Number(s): _____
Effective Date: _____
Standard Exemption, PBR Registration, and Standard Permit Registration Number(s): _____
Effective Date: _____
J. Other Air Preconstruction Permits
Are there any other air preconstruction permits at this site? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
If "YES," enter permit number(s) in the spaces provided below.

K. Affected Air Preconstruction Permits
Does the PBR being claimed directly affect any permitted facility? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

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II. Facility and Site Information <i>(continued)</i>
If "YES," enter the permit number(s) in the spaces provided below.
17392
L. Federal Operating Permit (FOP) Requirements (30 TAC Chapter 122 Applicability)
1. Is this facility located at a site that is required to obtain an FOP pursuant to 30 TAC Chapter 122? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> To Be Determined
If the site currently has an existing FOP, enter the permit number:
Check the requirements of 30 TAC Chapter 122 that will be triggered if this certification is accepted. <i>(check all that apply)</i>
<input type="checkbox"/> Initial Application for a FOP <input type="checkbox"/> Significant Revision for an SOP <input type="checkbox"/> Minor Revision for an SOP
<input type="checkbox"/> Operational Flexibility/Off Permit Notification for an SOP <input type="checkbox"/> Revision for a GOP
<input type="checkbox"/> To Be Determined <input checked="" type="checkbox"/> None
2. Identify the type(s) of FOP issued and/or FOP application(s) submitted/pending for the site. <i>(check all that apply)</i>
<input type="checkbox"/> SOP <input type="checkbox"/> GOP <input type="checkbox"/> GOP application/revision (submitted or under APD review)
<input type="checkbox"/> N/A <input checked="" type="checkbox"/> SOP application/revision (submitted or under APD review)
III. Fee Information <i>(See Section VII. for address to send fee or go to www.tceq.texas.gov/epay to pay online.)</i>
A. Fee Requirements
Is a fee required per Title 30 TAC § 106.50? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
If "NO," specify the exception. There are three exceptions to paying a PBR fee. <i>(check all that apply)</i>
1. Registration is solely to establish a federally enforceable emission limit. <input type="checkbox"/>
2. Registration is within six months of an initial PBR review, and it is addressing deficiencies, administrative changes, or other allowed changes. <input type="checkbox"/>
3. Registration is for a remediation project (30 TAC § 106.533). <input type="checkbox"/>
B. Fee Amount
1. A \$100 fee is required if <i>any</i> of the answers in III.B.1 are "YES."
This business has less than 100 employees. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
This business has less than \$6 million dollars in annual gross receipts. <input type="checkbox"/> YES <input type="checkbox"/> NO
This registration is submitted by a governmental entity with a population of less than 10,000. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
This registration is submitted by a non-profit organization. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

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III. Fee Information (See Section VII. for address to send fee or go to www.tceq.texas.gov/epay to pay online.) (continued)	
2. A \$450 fee is required for all other registrations	
A. Payment Information	
Check/money order/transaction or voucher number:	
Individual or company name on check:	
Fee Amount: \$	
Was the fee paid online? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
IV. Technical Information Including State and Federal Regulatory Requirements Check the appropriate box to indicate what is included in your submittal. NOTE: Any technical or essential information needed to confirm that facilities are meeting the requirements of the PBR must be provided. Not providing key information could result in a deficiency of the project.	
A. PBR requirements (Checklists are optional; however, your review will go faster if you provide applicable checklists.)	
Did you demonstrate that the general requirements in 30 TAC § 106.4 are met? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Did you demonstrate that the individual requirements of the specific PBR are met? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
B. Confidential Information Included (If confidential information is submitted with this registration, all confidential pages must be properly marked "CONFIDENTIAL.") <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
C. Process Flow Diagram: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
D. Process Description: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
E. Maximum Emissions Data and Calculations: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Note: If the facilities listed in this registration are subject to the Mass Emissions Cap & Trade program under 30 TAC Chapter 101, Subchapter H, Division 3 , the owner/operator of these facilities must possess NO _x allowances equivalent to the actual NO _x emissions from these facilities.	
F. Is this certification being submitted to certify the emissions for the entire site? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
If "NO," include a summary of the specific facilities and emissions being certified.	
G. Table 1(a) (Form 10153) Emission Point Summary: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
H. Distances from Property Line and Nearest Off-Property Structure	
Distance from this facility's emission release point to the nearest property line: 550	feet
Distance from this facility's emission release point to the nearest off-property structure: 550	feet

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IV. Technical Information Including State and Federal Regulatory Requirements

Check the appropriate box to indicate what is included in your submittal.

NOTE: Any technical or essential information needed to confirm that facilities are meeting the requirements of the PBR must be provided. Not providing key information could result in a deficiency of the project.

I. Project Status

Has the company implemented the project or waiting on a response from TCEQ? ☐ Implemented ☒ Waiting

J. Projected Start of Construction and Projected Start of Operation Dates:

Projected Start of Construction (provide date): 03/15/2025

Projected Start of Operation (provide date): 04/01/2025

V. Delinquent Fees

This form **will not be processed** until all delinquent fees and/or penalties owed to the TCEQ or the Office of the Attorney General on behalf of the TCEQ is paid in accordance with the Delinquent Fee and Penalty Protocol. For more information regarding Delinquent Fees and Penalties, go to the TCEQ website at: www.tceq.texas.gov/agency/financial/fees/delin/index.html.

VI. Signature For Registration and Certification

The signature below confirms that I have knowledge of the facts included in this application and that these facts are true and correct to the best of my knowledge and belief. I further state that to the best of my knowledge and belief, the project for which this application is made will not in any way violate any provision of the Texas Water Code (TWC), Chapter 7; the Texas Health and Safety Code, Chapter 382, the Texas Clean Air Act (TCAA); the air quality rules of the Texas Commission on Environmental Quality; or any local governmental ordinance or resolution enacted pursuant to the TCAA. I further state that I understand my signature indicates that this application meets all applicable nonattainment, prevention of significant deterioration, or major source of hazardous air pollutant permitting requirements. The signature further signifies awareness that intentionally or knowingly making or causing to be made false material statements or representations in the application is a criminal offense subject to criminal penalties.

Name (printed)

Signature (original signature required)

Date

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VII. Submitting Copies of the Certification and Registration

Copies must be sent as listed below.

Processing delays may occur if copies are not sent as noted.

Who	Where	What
Air Permits Initial Review Team (APIRT)	Regular, Certified, Priority Mail MC 161, P.O. Box 13087 Austin, Texas 78711-3087 Hand Delivery, Overnight Mail MC 161, 12100 Park 35 Circle, Building C, Third Floor Austin, Texas 78753	Originals Form PI-7-CERT, Core Data Form, and all attachments. Not required if using ePermits ¹ .
Revenue Section, TCEQ	Regular, Certified, Priority Mail MC 214, P.O. Box 13088 Austin, Texas 78711-3088 Hand Delivery, Overnight Mail MC 214, 12100 Park 35 Circle, Building A, Third Floor Austin, Texas 78753	Original Money Order or Check, Copy of Form PI-7-CERT, and Core Data Form. Not required if fee was paid using ePay ² .
Appropriate TCEQ Regional Office	To find your Regional Office address, go to the TCEQ website at www.tceq.texas.gov/agency/directory/region , or call (512) 239-1250.	Copy of Form PI-7-CERT, Core Data Form, and all attachments. Not required if using ePermits
Appropriate Local Air Pollution Control Program(s)	To Find your local or Regional Air Pollution Control Programs go to the TCEQ, APD website at www.tceq.texas.gov/permitting/air/local_programs.html , or call (512)-239-1250	Copy of Form PI-7-CERT, Core Data Form, and all attachments.

¹ ePermits located at www3.tceq.texas.gov/steers/

² ePay located at www.tceq.texas.gov/epay

TCEQ-20182 (APD-ID177v1.0, revised 12/22) PI-7-CERT

This form is for use by facilities subject to air quality permit requirements and may be revised periodically.