Texas Commission on Environmental Quality

PBR New Registration

Site Information (Regulated Entity)

What is the name of the site to be authorized?	MP Magnetics
Does the site have a physical address?	Yes
Physical Address	
Number and Street	13840 Independence Parkway
City	Fort Worth
State	ТХ
ZIP	75901
County	TARRANT
Latitude (N) (##.#####)	32.98333
Longitude (W) (-###.######)	-97.24985
Primary SIC Code	3499
Secondary SIC Code	
Primary NAICS Code	332999
Secondary NAICS Code	
Regulated Entity Site Information	
What is the Regulated Entity's Number (RN)?	
What is the name of the Regulated Entity (RE)?	MP Magnetics
Does the RE site have a physical address?	Yes
Physical Address	
Number and Street	13840 Independence Parkway
City	Fort Worth
State	ТХ
ZIP	75901
County	TARRANT
Latitude (N) (##.#####)	32.98333
Longitude (W) (-###.######)	-97.24985
Facility NAICS Code	332999
What is the primary business of this entity?	Magnetics manufacturing

Customer (Applicant) Information

How is this applicant associated with this site?	Owner Operator
What is the applicant's Customer Number (CN)?	
Type of Customer	Corporation
Full legal name of the applicant:	
Legal Name	MP Magnetics LLC
Texas SOS Filing Number	804376917
Federal Tax ID	870840007
State Franchise Tax ID	32082525117
State Sales Tax ID	
Local Tax ID	
DUNS Number	
Number of Employees	251-500
Independently Owned and Operated?	No
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	MP Magnetics LLC
Prefix	

First	Kelly
Middle	Tony
Last	Trent
Suffix	Tion
Credentials	
	EUS Monogor
	EHS Manager
Responsible Authority Mailing Address	
Enter new address or copy one from list:	
Address Type	Domestic
Mailing Address (include Suite or Bldg. here, if applicable)	6720 VIA AUSTI PKWY STE 450
Routing (such as Mail Code, Dept., or Attn:)	
City	LAS VEGAS
State	NV
ZIP	89119
Phone (###-####)	7252218227
Extension	
Alternate Phone (###-#####)	
Fax (###-####)	
E-mail	ktrent@mpmaterials.com

Responsible Official Contact

Person TCEQ should contact for questions about this	
application:	
Same as another contact?	MP Magnetics LLC RESPONSIBLE AUTHORITY
Organization Name	MP Magnetics LLC
Prefix	MS
First	Kelly
Middle	
Last	Trent
Suffix	
Credentials	
Title	EHS Manager
Enter new address or copy one from list:	
Mailing Address	
Address Type	Domestic
Mailing Address (include Suite or Bldg. here, if applicable)	6720 VIA AUSTI PKWY STE 450
Routing (such as Mail Code, Dept., or Attn:)	
City	LAS VEGAS
State	NV
ZIP	89119
Phone (###-###+####)	7252218227
Extension	
Alternate Phone (###-###-####)	
Fax (###-####-####)	
E-mail	ktrent@mpmaterials.com

Technical Contact

Person TCEQ should contact for questions about this application:	
Same as another contact?	Responsible Official Contact
Organization Name	MP Magnetics LLC
Prefix	MS

First	Kelly
Middle	
Last	Trent
Suffix	
Credentials	
Title	EHS Manager
Enter new address or copy one from list:	
Mailing Address	
Address Type	Domestic
Mailing Address (include Suite or Bldg. here, if applicable)	6720 VIA AUSTI PKWY STE 450
Routing (such as Mail Code, Dept., or Attn:)	
City	LAS VEGAS
State	NV
ZIP	89119
Phone (###-####+####)	7252218227
Extension	
Alternate Phone (###-#####)	
Fax (###-###-####)	
E-mail	ktrent@mpmaterials.com

PBR General Information - New Sites

 To determine fee amount does this business qualify as a small business, non-profit organization, or small government entity? 	No	
2) Is this application for a portable facility?	No	
3) Are there any other registered air authorizations at this site?	No	
4) Is this project located at a major site?	No	
5) Does this registration require certification or is certification being submitted voluntarily?	Yes	
6) Is the facility in compliance with all PBRs claimed?	Yes	
7) Is the facility in compliance with all other applicable state/federal rules and regulations?	Yes	
8) Is the facility in compliance with all applicable distance requirements?	Yes	

Section 1 Rule Selection

Select the rule(s) associated to the unit specified.

Rule#: 1

Select the type of unit that is being registered.	FACILITIES (EMISSION LIMITATIONS)
Select the rule(s) associated to the unit specified.	106.261
Rule#: 2	
Select the type of unit that is being registered.	FACILITIES (EMISSION AND DISTANCE LIMITATIONS)
Select the rule(s) associated to the unit specified.	106.262
Rule#: 3	
Select the type of unit that is being registered.	METAL MELTING AND HOLDING FURNACE

106.321

Rule#: 4

Select the type of unit that is being registered.	MISCELLANEOUS METAL EQUIPMENT
Select the rule(s) associated to the unit specified.	106.317

Rule#: 5

Select the type of unit that is being registered.	AQUEOUS SOLUTIONS FOR ELECTROLYTIC AND ELECTROLESS
Select the rule(s) associated to the unit specified.	106.375

Rule#: 6

Select the type of unit that is being registered.
Select the rule(s) associated to the unit specified.

Section 2 Rule Selection

Rule#: 7

Select the type of unit that is being registered.	COOLING-WATER UNITS
Select the rule(s) associated to the unit specified.	106.371
Rule#: 8	
Select the type of unit that is being registered.	INDUSTRIAL GASES
Select the rule(s) associated to the unit specified.	106.372
Rule#: 9	
Select the type of unit that is being registered.	BENCH SCALE LABORATORY EQUIPMENT
Select the rule(s) associated to the unit specified.	106.122
Rule#: 10	
Select the type of unit that is being registered.	SOLDERING BRAZING WELDING
Select the rule(s) associated to the unit specified.	106.227

Rule#: 11

Select the type of unit that is being registered. Select the rule(s) associated to the unit specified.

PBR Attachments

Please attach one PDF with all required documents to complete the project. [File Properties] File Name

<a

106.266

METAL INSPECTION

106.316

href=/ePermitsExternal/faces/file?fileId=123923>106. 261 106.262 Workbook_Revised.xlsx 0052557DBECBFB510925067B2F1DDA17C2AE97A 688FB64C2E3C29DE2FA57CC82

VACUUM CLEANING SYSTEMS

Hash

МІМЕ-Туре	application/vnd.openxmlformats- officedocument.spreadsheetml.sheet
Confidential	No
[File Properties]	
File Name	MP Materials PBR Report_2022-0325_CONF Sections.pdf</a
Hash	0481E5A6A2C5DA0EA3669315C201682B05C94C4 582D0453CB3E4FACD49EBE185
MIME-Type	application/pdf
Confidential	Yes
[File Properties]	
File Name	MP Materials PBR Report_2022-0325_Non-Conf.pdf</a
Hash	64B3ECD8B79C4575FCEE3DFB8C83A7D5986309 0C1154DB687A4C6522A82CEC67
MIME-Type	application/pdf
Confidential	No

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?	Yes	
1.1. Can the applicant demonstrate that the purpose of this application will benefit the economy of this state or an area of this state?	Yes	

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 Official's 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 have any questions on how to fill out this form or about air 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 Kelly Trent, the owner of the STEERS account ER087431.
- 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 inguiry 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 a PI-7CERT for a PBR New Registration.

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: Kelly Trent OWNER OPERATOR

Account Number:	ER087431
Signature IP Address:	165.225.218.224
Signature Date:	2022-03-25
Signature Hash:	3FD8521C1BD4D5CA1C9968B0028B2DF353C1080 5C09868F23501907B488CA6E5
Form Hash Code at time of Signature:	C977CD9536225AD684539919808BA44485758F2D 247CC43B79D5C429EDA47B21

Fee Payment

Transaction by:	The application fee payment transaction was made by ER045919/Kalpalatha Kambham
Paid by:	The application fee was paid by LATHA KAMBHAM
Fee Amount:	\$450.00
Paid Date:	The application fee was paid on 2022-03-25
Transaction/Voucher number:	The transaction number is 582EA000485001 and the voucher number is 570097

Fee Payment

Transaction by:	The surcharge fee payment transaction was made by ER045919/Kalpalatha Kambham
Paid by:	The surcharge fee was paid by LATHA KAMBHAM
Fee Amount:	\$500.00
Paid Date:	The surcharge fee was paid on 2022-03-25
Transaction/Voucher number:	The transaction number is 582EA000485001 and the voucher number is 570098

Submission

Reference Number:	The application reference number is 476648
Submitted by:	The application was submitted by ER087431/Kelly Trent
Submitted Timestamp:	The application was submitted on 2022-03-25 at 08:13:09 CDT
Submitted From:	The application was submitted from IP address 165.225.218.224
Confirmation Number:	The confirmation number is 398217
Steers Version:	The STEERS version is 6.50

Additional Information

Application Creator: This account was created by Kalpalatha Kambham