

## Texas Commission on Environmental Quality

### Standard Permit 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  | TX                         |
| 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)?    | RN111465571                |
| 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  | TX                         |
| 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)?    | CN606000065      |
| 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

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

MS

First

Kelly

Middle

Last

Trent

Suffix

Credentials

Title

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 (###-###-####)

7522218227

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?

CN606000065, 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 (###-###-####) 7522218227

Extension

Alternate Phone (###-###-####)

Fax (###-###-####)

E-mail ktrent@mpmaterials.com

## Technical Contact

Person TCEQ should contact for questions about this application:

Same as another contact?

CN606000065, 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 (###-###-####) 7522218227

Extension

Alternate Phone (###-###-####)

Fax (###-###-####)

E-mail ktrent@mpmaterials.com

## Standard Permit General Information- New Reg Sites

|   |                                |
|---|--------------------------------|
| 1) Is this facility permanent or temporary?   | Permanent                      |
| 2) Will the proposed facility meet all of the requirements of the standard permit?              | Yes                            |
| 3) Select the type of unit that is being registered:  | ELECTRIC GENERATING FACILITIES |
| 3.1. Select the rule associated to the unit specified.  | 6005                           |
| 3.2. Are there multiple units with a total generating capacity less than 1 Mega Watt at a site? | No                             |

## Standard Permit Attachments

1) Please attach one PDF with the PI-1S and all required documents to complete the project.

[File Properties]

|              |  |
|--------------|--|
| File Name    | <a href=/ePermitsExternal/faces/file?fileId=133341>MP Materials SP EGU Application_Final 2022-0816_Non Conf Sections.pdf</a> |
| Hash         | C472957168734F3C5ECC2CF0F2D97B6942C9777E20AB991008509969C9561222   |
| MIME-Type    | application/pdf  |
| Confidential | No   |

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

[File Properties]

|              |  |
|--------------|--|
| File Name    | <a href=/ePermitsExternal/faces/file?fileId=133342>MP Materials SP EGU Application_Final 2022-0816_Conf Sections.pdf</a> |
| Hash         | 0109B1D669C356E9B2F7ABB739E8FAA959FAF7B24850E63A22E8FE1B7196C8D0   |
| MIME-Type    | application/pdf  |
| Confidential | Yes  |

## 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 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 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 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 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:                | 165.225.32.107   |
| Signature Date:                      | 2022-08-16   |
| Signature Hash:                      | 3FD8521C1BD4D5CA1C9968B0028B2DF353C10805C09868F23501907B488CA6E5 |
| Form Hash Code at time of Signature: | F793F9858773CD29279C83DAD3450490A81EF19CD37CD5D0E2645046518F8AA8 |

## 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:                 | \$900.00  |
| Paid Date:                  | The application fee was paid on 2022-08-17                                      |
| Transaction/Voucher number: | The transaction number is 582EA000502593 and the voucher number is 589300       |

## 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 2022-08-17                                      |
| Transaction/Voucher number: | The transaction number is 582EA000502593 and the voucher number is 589301     |

## Submission

|                   |  |
|-------------------|--|
| Reference Number: | The application reference number is 500468                   |
| Submitted by:     | The application was submitted by ER045919/Kalpalatha Kambham |

|                      |  |
|----------------------|--|
| Submitted Timestamp: | The application was submitted on 2022-08-17 at 07:23:07 CDT  |
| Submitted From:      | The application was submitted from IP address 172.58.180.192 |
| Confirmation Number: | The confirmation number is 416131                            |
| Steers Version:      | The STEERS version is 6.54                                   |

## Additional Information

Application Creator: This account was created by Kalpalatha Kambham