

**PINEY WOODS SANITATION  
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TCEQ Use Only

# TCEQ Core Data Form

For detailed instructions regarding completion of this form, please read the Core Data Form Instructions or call 512-239-5175.

## SECTION I: General Information

1. Reason for Submission (If other is checked please describe in space provided.)		
<input checked="" type="checkbox"/> New Permit, Registration or Authorization (Core Data Form should be submitted with the program application.)		
<input type="checkbox"/> Renewal (Core Data Form should be submitted with the renewal form)	<input type="checkbox"/> Other	
2. Customer Reference Number (if issued)	Follow this link to search for CN or RN numbers in Central Registry**	3. Regulated Entity Reference Number (if issued)
CN 601502735		RN 104856687

## SECTION II: Customer Information

4. General Customer Information		5. Effective Date for Customer Information Updates (mm/dd/yyyy)	
<input checked="" type="checkbox"/> New Customer		<input type="checkbox"/> Update to Customer Information	
<input type="checkbox"/> Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)		<input type="checkbox"/> Change in Regulated Entity Ownership	
<b>The Customer Name submitted here may be updated automatically based on what is current and active with the Texas Secretary of State (SOS) or Texas Comptroller of Public Accounts (CPA).</b>			
6. Customer Legal Name (If an individual, print last name first: eg: Doe, John)		If new Customer, enter previous Customer below:	
PINEY WOODS SANITATION			
7. TX SOS/CPA Filing Number	8. TX State Tax ID (11 digits)	9. Federal Tax ID (9 digits)	10. DUNS Number (if applicable)
801950833	14317852011	43-178520	555546725
11. Type of Customer:		Partnership: <input type="checkbox"/> General <input type="checkbox"/> Limited	
<input checked="" type="checkbox"/> Corporation		<input type="checkbox"/> Individual	
Government: <input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> Other		<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Other:	
12. Number of Employees		13. Independently Owned and Operated?	
<input type="checkbox"/> 0-20 <input type="checkbox"/> 21-100 <input checked="" type="checkbox"/> 101-250 <input type="checkbox"/> 251-500 <input type="checkbox"/> 501 and higher		<input type="checkbox"/> Yes <input type="checkbox"/> No	
14. Customer Role (Proposed or Actual) – as it relates to the Regulated Entity listed on this form. Please check one of the following:			
<input type="checkbox"/> Owner <input type="checkbox"/> Operator <input type="checkbox"/> Owner & Operator			
<input type="checkbox"/> Occupational Licensee <input type="checkbox"/> Responsible Party <input type="checkbox"/> Voluntary Cleanup Applicant <input type="checkbox"/> Other:			
15. Mailing Address:			
PINEY WOODS SANITATION			
5002 BUSINESS 50 WEST			
City	State	ZIP	ZIP + 4
JEFFERSON CITY	MO	65109	
16. Country Mailing Information (if outside USA)		17. E-Mail Address (if applicable)	
18. Telephone Number	19. Extension or Code	20. Fax Number (if applicable)	
(573)659 5166		( ) -	

## SECTION III: Regulated Entity Information

21. General Regulated Entity Information (If 'New Regulated Entity' is selected below this form should be accompanied by a permit application)	
<input checked="" type="checkbox"/> New Regulated Entity <input type="checkbox"/> Update to Regulated Entity Name <input type="checkbox"/> Update to Regulated Entity Information	
<b>The Regulated Entity Name submitted may be updated in order to meet TCEQ Agency Data Standards (removal of organizational endings such as Inc, LP, or LLC.)</b>	
22. Regulated Entity Name (Enter name of the site where the regulated action is taking place.)	
PINEY WOODS SANITATION, INC	

23. Street Address of the Regulated Entity: (No PO Boxes)	405 E PEASE						
	City	CROCKETT	State	TX	ZIP	75835	ZIP + 4
24. County	HOUSTON						

Enter Physical Location Description if no street address is provided.

25. Description to Physical Location:						
26. Nearest City					State	Nearest ZIP Code
27. Latitude (N) In Decimal:	31.323576			28. Longitude (W) In Decimal:	95.467571	
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds	
29. Primary SIC Code (4 digits)	30. Secondary SIC Code (4 digits)	31. Primary NAICS Code (5 or 6 digits)		32. Secondary NAICS Code (5 or 6 digits)		
4953		562212				
33. What is the Primary Business of this entity? (Do not repeat the SIC or NAICS description.) TYPE I TRANSFER STATION						
34. Mailing Address:	PINEY WOODS SANITATION					
	5002 BUSINESS 50 WEST					
	City	JEFFERSON CITY	State	MO	ZIP	65109 ZIP + 4
35. E-Mail Address:	HTTPS://PINEYWOODS.SANITATION.COM/TCEQ-FACILITY-INFO/MATD.4					
36. Telephone Number	37. Extension or Code			38. Fax Number (if applicable)		
579 659 5166	( ) -			( ) -		

39. TCEQ Programs and ID Numbers Check all Programs and write in the permits/registration numbers that will be affected by the updates submitted on this form. See the Core Data Form instructions for additional guidance.

<input type="checkbox"/> Dam Safety	<input type="checkbox"/> Districts	<input type="checkbox"/> Edwards Aquifer	<input type="checkbox"/> Emissions Inventory Air	<input type="checkbox"/> Industrial Hazardous Waste
<input checked="" type="checkbox"/> Municipal Solid Waste	<input type="checkbox"/> New Source Review Air	<input type="checkbox"/> OSSF	<input type="checkbox"/> Petroleum Storage Tank	<input type="checkbox"/> PWS
<input type="checkbox"/> Sludge	<input type="checkbox"/> Storm Water	<input type="checkbox"/> Title V Air	<input type="checkbox"/> Tires	<input type="checkbox"/> Used Oil
<input type="checkbox"/> Voluntary Cleanup	<input type="checkbox"/> Waste Water	<input type="checkbox"/> Wastewater Agriculture	<input type="checkbox"/> Water Rights	<input type="checkbox"/> Other:

#### SECTION IV: Preparer Information

40. Name:	JAMES R HUBBARD (SW0005219)	41. Title:	MUO1. MGR / TRANSFER MGR
42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Mail Address
936 876 5640	( ) -	( ) -	JHUBBARD@PINEYWOODS.SANITATION.COM

#### SECTION V: Authorized Signature

46. By my signature below, I certify, to the best of my knowledge, that the information provided in this form is true and complete, and that I have signature authority to submit this form on behalf of the entity specified in Section II, Field 6 and/or as required for the updates to the ID numbers identified in field 39.

Company:	PINEY WOODS SANITATION	Job Title:	MUO1. MGR / TRANSFER MGR
Name (In Print):	JAMES R HUBBARD	Phone:	936 876 5640
Signature:	<i>James R Hubbard</i>	Date:	14 Sept 2020

PINEY WOODS SANITATION  
REVISED 16 SEPT 2020  
TCEQ-10400 (06/19) SEP 16 2020

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PART 1

**13. Facility Type(s)**

Type I                       Type IV                       Type V  
 Type I AE                   Type IV AE                   Type VI

**14. Activities Conducted at the Facility**

Storage                   Processing                   Disposal

**15. Facility Waste Management Unit(s)**

Landfill Unit(s)                   Incinerator(s)  
 Class 1 Landfill Unit(s)       Autoclave(s)  
 Process Tank(s)                   Refrigeration Unit(s)  
 Storage Tank(s)                   Mobile Processing Unit(s)  
 Tipping Floor                       Type VI Demonstration Unit  
 Storage Area                       Compost Pile(s) and/or Vessel(s)  
 Container(s)                       Other (specify):  
 Roll-off Boxes                     Other (specify):  
 Surface Impoundment           Other (specify) **TYPE V TRANSFER STATION**

**16. Description of Proposed Facility or Changes to Existing Facility**

Provide a brief description of the proposed activities if application is for a new facility, or the proposed changes to an existing facility or permit conditions if the application is for an amendment. **TYPE V, HANDLE MSW FROM CROCKETT AND HOUSTON COUNTY. AREA HAS NO FACILITY FOR MSW DISPOSAL. THIS WILL PROVIDE A LEGAL TRANSFER STATION FOR MSW DISPOSAL.**

**17. Facility Contact Information**

**Site Operator (Permittee/Registrant) Name:** **PINEY WOODS SANITATION**  
**Customer Reference No. (if Issued)\*:** **CN 601502735**  
**Contact Name:** **DENNY WHEELER**                  **Title:** **DISTRICT MANAGER**  
**Mailing Address:** **P.O. BOX 1417**  
**HOUSTON**                      **SWOOD 5428**  
**City:** **HOUSTON**                  **County:** **WALWORTH**                  **State:** **TEXAS**                  **Zip Code:** **75949**  
**(Area Code) Telephone Number:** **936 876 5640**  
**Email Address:** **DWHEELER@PINEYWOODSSANITATION.COM**  
**TX Secretary of State (SOS) Filing Number:**

\*If the Site Operator (Permittee/Registrant) does not have this number, complete a TCEQ Core Data Form (TCEQ-10400) and submit it with this application. List the Site Operator (Permittee/Registrant) as the Customer.

PINEY WOODS SANITATION  
 17MARCH2020  
 TCEQ-0650, Part I Application (rev. 09-01-2019)

REVISION  
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Facility Name:  
MSW Authorization #:

Initial Submittal Date:  
Revision Date:

**10. Facility Contact Information**

**Site Operator (Permittee/Registrant) Name:** *PIVEY WOODS SANITATION*

Customer Reference No. (if issued)\*: *CN 601502735*

Mailing Address: *5002 BUSINESS 50 WEST*

City: *JEFFERSON CITY* County: *COLE* State: *MO* Zip Code: *65109*

(Area Code) Telephone Number: *5736595166*

Email Address: *PIVEYWOODSSANITATION.COM*

TX Secretary of State (SOS) Filing Number: *801950833*

\*If the Site Operator (Permittee/Registrant) does not have this number, complete a TCEQ Core Data Form (TCEQ-10400) and submit it with this application. List the Site Operator (Permittee/Registrant) as the Customer.

**Operator Name<sup>1</sup>:** *SAME AS SITE OPERATOR*

Customer Reference No. (if issued)\*: CN

Mailing Address:

City: County: State: Zip Code:

(Area Code) Telephone Number:

Email Address:

Charter Number:

<sup>1</sup>If the Operator is the same as Site Operator/Permittee type "Same as "Site Operator (Permittee/Registrant)".

\*If the Operator does not have this number, complete a TCEQ Core Data Form (TCEQ-10400) and submit it with this application. List the Operator as the customer.

**Consultant Name (if applicable):**

Texas Board of Professional Engineers Firm Registration Number:

Mailing Address:

City: County: State: Zip Code:

(Area Code) Telephone Number:

Email Address:

**Agent in Service Name (required only for out-of-state):**

Mailing Address:

City: County: *N/A* State: Zip Code:

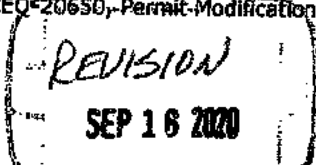
(Area Code) Telephone Number:

Email Address:

*PIVEY WOODS SANITATION*

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*PART 1*

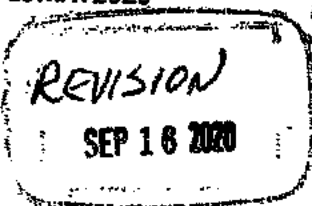


BECKY HOPKINS 611 SANTA ANGELAIST CHULA VISTA , CA 91914	7442
JOHN VICKERS 501 CR 3150 CROCKETT, TEXAS 75835	4521/4522
EDUCATION LLC. 827 OAK VALLEY CROCKETT, TEXAS 75835	22775
DEDRA MCCALLOUGH 1209 STOKES CROCKETT, TEXAS 75835	26873
CHRISTINA HUBBARD 1211 STOKES CROCKETT, TEXAS 75835	27245
ROBERT D BOYD 109 E PECAN DR CROCKETT, TEXAS 75835	1005
BEVERLY BIORGIO 100 PLUM DR. CROCKETT, TEXAS 75835	22462
JAMES LEEDIKER 113 E. HOMEWOOD CROCKETT, TEXAS 75835	9045
ASHANTI BERTRAND 114 E HOMEWOOD CROCKETT, TEXAS 75835	8998
MOLLY SUE ARLEDGE EST NO ADDRESS CROCKETT, TEXAS 75835	8229
ALICIA & MARIA ESPINOSA 102 PLUM DR CROCKETT, TEXAS 75835	12360

PINEY WOODS SANITATION  
15MAY2020

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PART I



DWAYNE CASWELL 11653  
2300 E. PLUM  
CROCKETT, TEXAS 75835

JERRY GARRETT 14071  
201 E PECAN  
CROCKETT, TEXAS 75835

WILBURN & GWENDA TULLY 3915  
624 N 4<sup>TH</sup> ST.  
CROCKETT, TEXAS 75835

JIMMIE LEE CLARK 13740  
200 E PECAN  
CROCKETT, TEXAS 75835

DENNIS & NELDA MCCAIN 8562  
906 E MIMOSA  
CROCKETT, TEXAS 75835

WANDA STEPHENS 14558  
100 N PINEVIEW  
CROCKETT, TEXAS 75835

JEREMY & JESSICA HOPKINS 7406  
103 N PINEVIEW TERRACE  
CROCKETT, TEXAS 75835

BETH HAMLIN 14312  
105 N PINEVIEW TERRACE  
CROCKETT, TEXAS 75835

LINA ROSS EST 9165  
NO ADDRESS  
CROCKETT, TEXAS 75835

MELVIN EDWARDS 28918/28259  
700 STOKES  
CROCKETT, TEXAS 75835

FREDDY WYATT 31911/31909  
WOOD ST  
CROCKETT, TEXAS 75835

PINEY WOODS SANITATION  
REVISED 15SEPT2020



JIMMY & MYESHA TILLIS 212 WOOD ST CROCKETT, TEXAS 75835	26565
JAMES HACKETT WOOD ST CROCKETT, TEXAS 75835	5009
TEAL INTREST 213 WOOD CROCKETT, TEXAS 75835	16667
BENNIE BROOKS POLLAR CROCKETT, TEXAS 75835	9293
EMMA LEE LOCKHART 818 STOKES CROCKETT, TEXAS 75835	13466
BARBARA KING STOKES CROCKETT, TEXAS 75835	8413
ROBERT REESE EST POLAR LANE CROCKETT, TEXAS 75835	12476
SUSIE MAE BROOKS POLAR LANE CROCKETT, TEXAS 75835	1855
JOHN LOCKHART 1212 STOKES CROCKETT, TEXAS 75835	10961
EDELL MATHIS W. PATTERSON CROCKETT, TEXAS 75835	9881
S.H. EASTERLINGS NO ADDRESS CROCKET, TEXAS 75835	4601

MAXWELL LANKFORD NO ADDRESS CROCKETT, TEXAS 75835	19972
GEORGIA HOPKINS 215 PATTERSON ST CROCKETT, TEXAS 75835	19105
SHARON PARKER 211 W PATTERSON CROCKETT, TEXAS 75835	19974
ESTER BURTON 104 DELLA BATES CROCKETT, TEXAS 75835	20199
DERRICK SIMON 102 ALEX MCMEARN ST CROCKETT, TEXAS 75835	20187
DIXIE TAYLOR 105 ALEX MCMEARN ST CROCKETT, TEXAS 75835	20196
PATRICK DENNIS 107 DELLA BATES CROCKETT, TEXAS 75835	20202
WILLIAM & PATTY DANIELS 105 DELLA BATES CROCKETT, TEXAS 75835	20203
BARBARA DECKARD 103 DELLA BATES CROCKETT, TEXAS 75835	20204
WILEY RICO W FOREST LAWN CROCKETT, TEXAS 75835	22227
WILLIAM PETTY W NAVARRO RD CROCKETT, TEXAS 75835	26252/4515/11911/11920

ALA EDUCATION LLC 1901 W NAVARRO RD CROCKETT, TEXAS 75835	22775
JUAN & AMALIA GARCIA W HOUSTON AVE. CROCKETT, TEXAS 75835	16504
A.B. KEEN EST NO ADDRESS CROCKETT, TEXAS 75835	8201
AKRETHA KITCHEN 800 W HOUSTON CROCKETT, TEXAS 75835	10094
LUTHER DURRETT 700 W HOUSTON CROCKETT, TEXAS 75835	10095/4517
NICOLASA GONZALES 600 W HOUSTON CROCKETT, TEXAS 75835	2002
ROMANA TREJO 406 W ARLEDGE CROCKETT, TEXAS 75835	22409
ELISA SALINAS 102 N DURRETT CROCKETT, TEXAS 75835	32479
CHARLES & LISA PUCCIO 308 W HOUSTON CROCKETT, TEXAS 75835	1160
BNEINO & BRENDA LOZANO ARLEDGE ST CROCKETT, TEXAS 75835	4524
JOHN VICKERS NO ADDRESS CROCKETT, TEXAS 75835	15922

TRESEA ONETA LAND 205 N. DOGWOOD CROCKETT, TEXAS 75835	10775
ELIZA WILLIAMS EST N DOGWOOD CROCKETT, TEXAS 75835	16809
BENNIE MINTER N.DOGWOOD CROCKETT, TEXAS 75835	10776
CARLOS HARRIS NO ADDRESS CROCKETT, TEXAS 75835	20737
WILLIAM ALLEN SMITH 108 N DOGWOOD CROCKETT, TEXAS 75835	20719
SCOTT SEDRICK 106 N DOGWOOD CROCKETT, TEXAS 75835	20718
WESLEY BEARD 112 WESTSIDE DR CROCKETT, TEXAS 75835	20735
HELEN MASTERS 112 WESTSIDE DR CROCKETT, TEXAS 75835	20736
CONGRAGATION OF MADISONVILLE N. LOOP 304 CROCKETT, TEXAS 75835	7725
BOB SULLIVAN N. LOOP 304 CROCKETT, TEXAS 75835	13770