



TCEQ Core Data Form

For detailed instructions on completing 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 600753990		RN 106035801

SECTION II: Customer Information

4. General Customer Information		5. Effective Date for Customer Information Updates (mm/dd/yyyy)		02/19/2025				
<input type="checkbox"/> New Customer		<input checked="" type="checkbox"/> Update to Customer Information		<input type="checkbox"/> Change in Regulated Entity Ownership				
<input type="checkbox"/> Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)								
<i>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).</i>								
6. Customer Legal Name (If an individual, print last name first: eg: Doe, John)				<i>If new Customer, enter previous Customer below:</i>				
Hidalgo County								
7. TX SOS/CPA Filing Number		8. TX State Tax ID (11 digits)		9. Federal Tax ID (9 digits) 746000717	10. DUNS Number (if applicable)			
11. Type of Customer:		<input type="checkbox"/> Corporation		<input type="checkbox"/> Individual	Partnership: <input type="checkbox"/> General <input type="checkbox"/> Limited			
Government: <input type="checkbox"/> City <input checked="" type="checkbox"/> County <input type="checkbox"/> Federal <input type="checkbox"/> Local <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 type="checkbox"/> 101-250 <input type="checkbox"/> 251-500 <input checked="" type="checkbox"/> 501 and higher				<input type="checkbox"/> Yes <input checked="" 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 checked="" type="checkbox"/> Owner & Operator				
<input type="checkbox"/> Occupational Licensee		<input type="checkbox"/> Responsible Party		<input type="checkbox"/> VCP/BSA Applicant				
<input type="checkbox"/> Other:								
15. Mailing Address:	100 E. Cano St.							
	Second Floor							
	City	Edinburg		State	TX	ZIP	78539	ZIP + 4
16. Country Mailing Information (if outside USA)				17. E-Mail Address (if applicable)				
				richard.cortez@co.hidalgo.tx.us				

18. Telephone Number	19. Extension or Code	20. Fax Number (if applicable)
(956) 318-2600		(956) 318-2699

SECTION III: Regulated Entity Information

21. General Regulated Entity Information (If 'New Regulated Entity' is selected, a new permit application is also required.)							
<input type="checkbox"/> New Regulated Entity <input type="checkbox"/> Update to Regulated Entity Name <input checked="" type="checkbox"/> Update to Regulated Entity Information							
<i>The Regulated Entity Name submitted may be updated, in order to meet TCEQ Core Data Standards (removal of organizational endings such as Inc, LP, or LLC).</i>							
22. Regulated Entity Name (Enter name of the site where the regulated action is taking place.)							
Hidalgo County MS4							
23. Street Address of the Regulated Entity: (No PO Boxes)	1304 S. 25th Avenue						
	City	Edinburg	State	TX	ZIP	78542	ZIP + 4
24. County	Hidalgo						

If no Street Address is provided, fields 25-28 are required.

25. Description to Physical Location:	THE UNINCORPORATED AREA OF HIDALGO COUNTY WITHIN THE MCALLEN URBAN AREA.						
26. Nearest City	State			Nearest ZIP Code			
Edinburg	TX			78539			
<i>Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).</i>							
27. Latitude (N) In Decimal:			28. Longitude (W) In Decimal:				
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds		
26	17	13.05	98	08	52.19		
29. Primary SIC Code	30. Secondary SIC Code	31. Primary NAICS Code		32. Secondary NAICS Code			
(4 digits)	(4 digits)	(5 or 6 digits)		(5 or 6 digits)			
9111							
33. What is the Primary Business of this entity? (Do not repeat the SIC or NAICS description.)							
Stormwater conveyance for the unincorporated areas of Hidalgo County within the McAllen Urban area.							
34. Mailing Address:	1304 S. 25 th Avenue						
	City	Edinburg	State	TX	ZIP	78542	ZIP + 4
35. E-Mail Address:	environmental@hchd.org						
36. Telephone Number	37. Extension or Code			38. Fax Number (if applicable)			
(956) 383-6221				(956) 318-0911			

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 checked="" type="checkbox"/> New Source Review Air	<input checked="" type="checkbox"/> OSSF	<input checked="" type="checkbox"/> Petroleum Storage Tank	<input type="checkbox"/> PWS
120130, 120145	Reg. 176132, 103798		Regs. 85027, 85026, 77407, 85439, 77540, 84949	
<input type="checkbox"/> Sludge	<input type="checkbox"/> Storm Water	<input checked="" type="checkbox"/> Title V Air	<input checked="" type="checkbox"/> Tires	<input type="checkbox"/> Used Oil
		O3527	Regs. 9401,13523	
<input type="checkbox"/> Voluntary Cleanup	<input type="checkbox"/> Wastewater	<input type="checkbox"/> Wastewater Agriculture	<input type="checkbox"/> Water Rights	<input type="checkbox"/> Other:

SECTION IV: Preparer Information

40. Name:	Martin Ramirez	41. Title:	Environmental Health Manager
42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Mail Address
(956) 383-0111	7306	(956) 318-0911	environmental@hchd.org

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:	Hidalgo County	Job Title:	County Judge
Name (In Print):	Richard F. Cortez	Phone:	(956) 318- 2600
Signature:		Date:	