

RAILROAD COMMISSION OF TEXAS

Oversight and Safety Division Alternative Fuels Safety Department

APPLICATION AND NOTICE OF EXCEPTION TO THE REGULATIONS FOR COMPRESSED NATURAL GAS

Please Type or Print

INSTRUCTIONS: Any person may apply for an exception to the *Regulations for Compressed Natural Gas*. All application filings must meet the submission requirements of Section 13.35 of the *Regulations for Compressed Natural Gas*. Strict compliance with this section is necessary to ensure that fairness and uniformity in the administrative process is extended to all applicants. All applicants are routinely advised that a request for exception in no way guarantees that an exception will be granted. A non-refundable fee of \$50 must accompany each original application. If resubmission is required a non-refundable fee of \$30 must accompany each resubmission. DO NOT SEND CASH. Make Check or Money Order Payable To: The Railroad Commission of Texas. To pay by credit card please visit our website www.rrc.texas.gov.

PLEASE COMPLETE ALL BLANKS ON THIS FORM AND RETURN TO THE ALTERNATIVE ENERGY DIVISION. FILE ONE LEGIBLE APPLICATION FORM PER SITE, LISTING ALL APPLICABLE EXCEPTIONS TO CNG REGULATION REFERENCES.

APPLICANT INFORMATION:

| Applicant's name: | | representing |
|-------------------------------|------------------|---|
| | (Individual) | (Company name, if applicable) |
| Lic. No. | Mailing Address: | |
| | | (City, State) (Zip Code) |
| Tel. No.:(A/C) | Fax No | |
| regulation reference) Gas. | | of the Regulations for Compressed Natural |

GEOGRAPHICAL LOCATION:

If stationary CNG installation, give physical street address or geographical location:

(Give directions from nearest highway or town)

, county of _____

Nearest town or city

STATEMENT OF DESIRED RELIEF:

State below your request for exception, and how it specifically fails to comply with the *Regulations for Compressed Natural Gas.* Be sure you also quote the exact reference and description of the regulation.

STATEMENT OF SUPPORTING FACTS:

State the facts supporting your desired relief. Explain the social and economic impact if the exception is not granted. Estimate the total sum of all monetary factors or alternative solutions necessary to bring the installation or equipment into full compliance with the regulations, plus any additional costs to the consumer, if applicable.

Social impact, if not granted (effect on the health, safety and welfare of individuals in the community or other stakeholders):

Economic impact, if not granted (effect on commerce, employment, income and other monetary factors):

SAFETY ASPECTS OF EXCEPTION:

Explain the safety aspects involved and how this exception may be justified without affecting the health, safety and welfare of the general public. If the exception involves an existing CNG installation or existing CNG mobile equipment, list existing safety features. What additional safety modification(s) could be made to offset the requested exception to the Commission's *Regulations for Compressed Natural Gas*?

DESCRIPTION OF ACREAGE OR LEASED AREA:

<u>If a stationary CNG installation</u>, use the space below to describe the site sufficiently for determination of property or lease lines, land ownership, and by what legal authority the applicant, if not the owner, is permitted occupancy.

ATTACH SUPPORTING DOCUMENTS: A legal property description with a site plan indicating the dimensions of the boundaries described by the legal description or a plat showing the dimensions of the property description. The site plan must show all adjoining property lines, streets, and highway or railroad right-of-ways and must coincide with the legal property description or plat. The site plan may include other information such as buildings, storage containers, and other exposures relevant to the exception, which is not indicated on the plat. If the area described is under lease, a copy of the lease agreement, and exhibit(s) showing the area under lease may be filed in lieu of the legal property description or plat.

Legal description and acreage:

| I have attached: | 1. 🗖 | Legal property description with site plan |
|------------------|------|---|
| Check applicable | 2. 🗖 | Survey plat with site plan |
| box(es) | 3. 🗖 | Lease agreement with site plan |

AFFECTED PARTIES WHO MUST BE SENT A COPY OF THIS REQUEST:

A copy of CNG Form 1025 must be sent by certified mail, return receipt requested, to all affected parties as specified below on the same date on which the form is filed with or sent to AFS. The information shall include a notice that any objection shall be filed with AFS within 18 calendar days of postmark.

For stationary Installations:

- 1. **D** Persons or businesses owning or occupying property adjacent to the site;
- 2. **I** The city council or fire marshal, if the site is within municipal limits; and
- 3. **I** The county Commission, if the site is not within any municipal limits

For motor or mobile fuel installations:

- 1. **D** The Texas Department of Public Safety; and
- 2. **I** All CNG loading and unloading facilities utilized by the applicant

AFS may require an applicant to give notice to persons in addition to those listed above if doing so will not prejudice the rights of any entity.

PLEASE GIVE FULL NAME AND ADDRESS OF EACH AFFECTED PARTY. EACH AFFECTED PARTY MUST BE AFFORDED AN OPPORTUNITY TO OBJECT OR NOT TO OBJECT TO THE EXCEPTION REQUESTED. THE PARTY SHALL NOTIFY THE SECTION IN WRITING OF SPECIFIC OBJECTIONS. THE ORIGINAL OF THE RETURN RECEIPT CARDS MUST BE FILED WITH YOUR ORIGINAL APPLICATION AS EVIDENCE THAT AFFECTED NOTICE WAS RECEIVED BY THE AFFECTED PARTY. ATTACH A COPY OF A LAND ABSTRACT OR MARK THE SITE PLAN ABOVE TO SHOW ALL ADJOINING PROPERTY OWNERS. LIST ALL NAMES AND ADDRESSES OF REQUIRED PARTIES TO RECEIVE NOTICE ON PAGE 4 OF THIS APPLICATION. USE PAGES 5 AND 6, NOTICE OF EXCEPTION TO AFFECTED PARTIES, AS THE INSTRUMENT OF NOTICE.

Stationary Installations Only:

I have attached: Check applicable box(es)

- 1. **D** Land abstract of surrounding properties AND original certified mail return receipt(s) for each notice sent.
- 2. D Expanded site plan showing surrounding properties and original certified mail return receipt(s) for each notice sent.

NOTE: ANY ATTACHED MATERIAL TO BE CONSIDERED MUST BE FILED WITH AN AFFIDAVIT SIGNED BY A PERSON HAVING PERSONAL KNOWLEDGE THAT THE INFORMATION PROVIDED IS TRUE AND CORRECT.

Names and addresses of parties that were mailed copies of this request.

| 1. | | | |
|----------|--------------------------|-------------|----------|
| | Name of person or entity | | |
| | Mailing address | City, State | Zip Code |
| 2 | | | |
| | Name of person or entity | | |
| | Mailing address | City, State | Zip Code |
| 3. | | | |
| | Name of person or entity | | |
| | Mailing address | City, State | Zip Code |
| 4 | | | |
| | Name of person or entity | | |
| | Mailing address | City, State | Zip Code |
| 5. | | | |
| <i>.</i> | Name of person or entity | | |
| | Mailing address | City, State | Zip Code |
| ADD | DITIONAL COMMENTS: | | |

The applicant must make a credible case the exception in particular is necessary and an exception, if granted, would not impair or tend to impair the health, safety and welfare of general public. Photographs and other documentation may be submitted or requested by AFS if necessary to clarify the applicant's intentions toward this purpose.

I certify all the person(s) named above have been sent a copy of CNG Form 1025, with their contact information listed on page 5, by certified mail, return receipt requested. I understand that should the exception be granted, I may be required to file a CNG Form 1500, Application to Install CNG Facility (Aggregate Capacity Greater than 240 Standard Cubic Feet Water Volume); CNG Form 1500A, Notice of Proposed Compressed Natural Gas Installation; or CNG Form 1501, Completion Report for CNG Commercial Installations of 240 Standard Cubic Feet Water Volume or Less. Any non-compliance with the regulations could result in my company being subjected to administrative enforcement proceedings and/or administrative penalties under Chapter 113, Texas Natural Resources Code.

I declare under penalties in Section 91.143, Texas Natural Resources Code, I am authorized to make this application; it was prepared by me or under my supervision and direction, and the date and facts stated herein are true, correct and complete to the best of my knowledge. I also understand AFS must be notified of any changes to this application as soon as possible which may necessitate re-notification of adjoining property owners as required by Section 13.35 of the *Regulations for Compressed Natural Gas*.

Additionally, applicant agrees that this application may be executed by electronic signature, which shall be considered as an original signature for all purposes and shall have the same force and effect as an original signature.

(Printed name of Applicant or Applicant's Representative)

(Authorized signature of Applicant or Applicant's Representative)

NOTICE OF EXCEPTION TO AFFECTED PARTIES

TO:

| | (Name of person or entir | ty to receive notice | .) | | | | | |
|---|---|---|--|--|---|--|--|--|
| | (Address) | | | _ | | | | |
| | (City) | (State) | (Zip Code) | | | | | |
| the Reg | ve been notified as <i>gulations for Compre</i> aby given notice that | | | | | | | |
| | | (Full na | ame of applica | int or person requ | lesting exception) | | | |
| of | | | | | | | | |
| hac | (Address | , | | | (City) | | (State) | (Zip code) |
| nas requ | uested exception(s) to | Section(s) | | | | | | |
| | | | (Regu | lation Reference | (s)) | | | |
| of the R | egulations for Compre | essed Natural (| | | | at: | | |
| | | | | | | | | |
| | | (Street | address or oth | er accurate desc | ription of property) | | | |
| | | (City) | | | (State) | | (7 | ip Code) |
| THE FO | LLOWING SPACE IS | | BY THE PA | ARTY WHICH | . , | OTICE | (2 | ip code) |
| | | | | | | | | ation and have |
| received | a copy of CNG Form | 1025, applicat | ion and not | | an affected par on to the <i>Regul</i> | | | |
| AFS in particula the sec Page 6 the notic Addition | t/Do Not Object (C) writing within 18 da ar exception requeste tion. A hearing will b of this form or a sepa ce herein. ally, affected party ag signature for all purpo | ays of the dat d must be sen be held when rate sheet of p rees that this no | e the appl t to AFS. Y the Railroa aper to list otice may be | ication was i ou may requi d Commissio and explain a e executed by | mailed. Any quest a copy of the of Texas reconstruction of Texas reconstruction for the other of the other of the other | estions ab ne complete eives prope objection. I ature, which | out this pro e applicatio r objections have read a shall be co | ocedure or the n on file with . You may use nd understand |
| | (Pri | nted name of affec | ted party) | | | | (Date) | |
| | (S | ignature of affected | l party) | | | (A/C) | (Telephon | ne No.) |
| | | (Address) | | | | | | |
| | (City) | | State | Zip Code | | | | |
| | | | CN | IG FORM 1025 | | | | |

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REASON FOR OBJECTION

By filing this application via facsimile transmission, applicant voluntarily stipulates and agrees that the filed facsimile copy shall be treated as an original document for all purposes in any court or administrative proceeding.

Return to: Railroad Commission of Texas Alternative Fuels Safety PO Box 12967 Austin, Texas 78711-2967

FAX (512) 463-0649

Rev. January 2021