Bryan W. Shaw, Ph.D., *Chairman*
Carlos Rubinstein, *Commissioner*
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TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

Protecting Texas by Reducing and Preventing Pollution

December 7, 2012

Mr. Matthew A. Love, Director
Exide Technologies
P.O. Box 14294
Reading, PA 19612-4294

Re: Voluntary Cleanup Program (VCP) Application for the J Parcel, Exide Technologies, Frisco, Collin County, Texas; VCP No. 2541

Dear Mr. Love:

The Texas Commission on Environmental Quality (TCEQ) has received your VCP application submitted pursuant to §361.604 of the Texas Solid Waste Disposal Act (SWDA) for assistance and review of site investigation and cleanup activities for the above referenced site. After careful review, the application is determined to be eligible for the VCP. Our statement of eligibility is based on our understanding that no part of the permitted area is included in the area proposed for VCP. The VCP project manager for your site is Mr. Gary Beyer of the VCP-CA Section.

In addition, a voluntary party must enter into a voluntary cleanup agreement that sets forth the terms and conditions of the evaluation of the reports and the implementation of work plans prior to any assistance and review by the TCEQ. Please find enclosed a VCP Agreement. Please contact the VCP project manager for your site to negotiate the terms of the Agreement prior to submittal.

Please note that §361.606(d) of the SWDA states that if an agreement is not reached between a person desiring to participate in the VCP and the Executive Director 30 days after good faith negotiations have begun (i.e., the date of this letter), either party may withdraw from the negotiations and TCEQ will retain the person's application fee.

Applicants initiating a voluntary cleanup under the Texas Risk Reduction Program (TRRP) should first conduct an affected property assessment pursuant to 30 Texas Administrative Code (TAC) §§350.51-350.55, Subchapter C. Reporting requirements under TRRP may be found in 30 TAC §§350.91-350.96, Subchapter E. Please review the TRRP requirements for the Affected Property Assessment Report (APAR) pursuant to 30 TAC §350.91. The TCEQ's report form for the APAR may be downloaded from the internet at http://www.tceq.texas.gov/remediation/trrp/guidance.html (TRRP-12) or may be obtained from us by mail at your request.

Please reference VCP No. 2541 on the front of any future letters or reports. Future submittals should be mailed to the site project manager, Mr. Gary Beyer at the TCEQ, VCP-CA Section, mail code MC-221, at the letterhead address.

Sincerely,

Anna Rodriguez Brulloths, Section Manager
VCP-CA Section, Remediation Division
Texas Commission on Environmental Quality

ARB/jdm

cc: Mr. Sam Barrett, Waste Section Manager, TCEQ Region 4 Office, Dallas/ Fort Worth

Mr. Arturo Rodriguez, Attorney, Russell & Rodriguez LLP, c/o City of Frisco, 1633 Williams Drive, Suite 200, Georgetown, TX 78626

Mr. Tim Nickels, Consultant, Pastor Behling & Wheeler LLC, 2201 Double Creek Drive, Suite 4004, Round Rock, TX 78664

Ms. Christine Graessle, Attorney, Exide Technologies, 13000 Deerfield Park, Building 200, Milton, GA 30004

Early next wk

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)*

☐ New Permit, Registration or Authorization *(Core Data Form should be submitted with the program application)*

☐ Renewal *(Core Data Form should be submitted with the renewal form)* ☒ Other **VCP Application**

2. Attachments **Describe Any Attachments:** *(ex. Title V Application, Waste Transporter Application, etc.)*

☒ Yes ☐ No VCP Application

3. Customer Reference Number *(if issued)*	Follow this link to search for CN or RN numbers in Central Registry**	4. Regulated Entity Reference Number *(if issued)*
CN 600129787		RN

SECTION II: Customer Information

5. Effective Date for Customer Information Updates (mm/dd/yyyy) 10/3/2012

6. Customer Role (Proposed or Actual) – *as it relates to the Regulated Entity listed on this form. Please check only one of the following:*

☐ Owner ☐ Operator ☐ Owner & Operator
☐ Occupational Licensee ☐ Responsible Party ☒ Voluntary Cleanup Applicant ☐ Other: _____

7. General Customer Information

☐ New Customer ☐ Update to Customer Information ☐ Change in Regulated Entity Ownership
☐ Change in Legal Name (Verifiable with the Texas Secretary of State) ☒ No Change**

If "No Change" and Section I is complete, skip to Section III – Regulated Entity Information.

8. Type of Customer:	☐ Corporation	☐ Individual	☐ Sole Proprietorship- D.B.A
☐ City Government	☐ County Government	☐ Federal Government	☐ State Government
☐ Other Government	☐ General Partnership	☐ Limited Partnership	☐ Other: _____

9. Customer Legal Name *(If an individual, print last name first: ex: Doe, John)* *If new Customer, enter previous Customer below* *End Date:*

10. Mailing Address:

City State ZIP ZIP + 4

11. Country Mailing Information *(if outside USA)* **12. E-Mail Address** *(if applicable)*

13. Telephone Number ( ) - **14. Extension or Code** **15. Fax Number** *(if applicable)* ( ) -

16. Federal Tax ID *(9 digits)* **17. TX State Franchise Tax ID** *(11 digits)* **18. DUNS Number** *(if applicable)* **19. TX SOS Filing Number** *(if applicable)*

20. Number of Employees

☐ 0-20 ☐ 21-100 ☐ 101-250 ☐ 251-500 ☐ 501 and higher

21. Independently Owned and Operated?

☐ Yes ☐ No

SECTION III: Regulated Entity Information

22. General Regulated Entity Information *(If 'New Regulated Entity' is selected below this form should be accompanied by a permit application)*

☐ New Regulated Entity ☐ Update to Regulated Entity Name ☐ Update to Regulated Entity Information ☒ No Change** *(See below)*

**If "NO CHANGE" is checked and Section I is complete, skip to Section IV, Preparer Information.

23. Regulated Entity Name *(name of the site where the regulated action is taking place)*

24. Street Address of the Regulated Entity: *(No P.O. Boxes)*							
	City		State		ZIP		ZIP + 4
25. Mailing Address:							
	City		State		ZIP		ZIP + 4
26. E-Mail Address:							

27. Telephone Number	28. Extension or Code	29. Fax Number *(if applicable)*
( ) -		( ) -

30. Primary SIC Code (4 digits)	31. Secondary SIC Code (4 digits)	32. Primary NAICS Code (5 or 6 digits)	33. Secondary NAICS Code (5 or 6 digits)

34. What is the Primary Business of this entity? *(Please do not repeat the SIC or NAICS description.)*

Questions 34 – 37 address geographic location. Please refer to the instructions for applicability.

35. Description to Physical Location:

36. Nearest City	County	State	Nearest ZIP Code

37. Latitude (N) In Decimal:			38. Longitude (W) In Decimal:		
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds

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 or the updates may not be made. If your Program is not listed, check other and write it in. See the Core Data Form instructions for additional guidance.

☐ Dam Safety	☐ Districts	☐ Edwards Aquifer	☐ Industrial Hazardous Waste	☐ Municipal Solid Waste
☐ New Source Review – Air	☐ OSSF	☐ Petroleum Storage Tank	☐ PWS	☐ Sludge
☐ Stormwater	☐ Title V – Air	☐ Tires	☐ Used Oil	☐ Utilities
☐ Voluntary Cleanup	☐ Waste Water	☐ Wastewater Agriculture	☐ Water Rights	☐ Other:

SECTION IV: Preparer Information

40. Name:	Pastor, Behling & Wheeler, LLC - Tim Nickels	41. Title:	Project Scientist

42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Mail Address
(512) 671-3434		(512) 671-3446	tim.nickels@pbwllc.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 9 and/or as required for the updates to the ID numbers identified in field 39.

(See the Core Data Form instructions for more information on who should sign this form.)

Company:	Exide Technologies	Job Title:	Executive Vice President, Strategy and Business Development
Name *(In Print)*:	Bruce A. Cole	Phone:	(678) 566-9000
Signature:	Bruce A. Cole	Date:	10/12/12