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A VISION FOR TOMORROW

December 19, 2011

Daniela Ortiz de Montellano, Project Manager  
Municipal Solid Waste Permits Section  
Waste Permits Division (MC-124)  
Texas Commission on Environmental Quality  
12100 Park 35 Circle, Bldg F  
Austin, Texas 78753

Re: Stericycle Garland Facility – Dallas County  
Municipal Solid Waste - Registration No. 40253  
Registration Modification – Request for Alternate Buffer Zone and  
Update the Site Layout Plan – 2<sup>nd</sup> Notice of Deficiency  
Tracking Nos. 14871671 and 15007997; RN101572063 / CN600362693

Dear Ms. Ortiz de Montellano:

On behalf of Stericycle, Inc., we hereby submit the following responses to your November 22, 2011 letter to Mr. Mark Triplett, Environmental Manager with Stericycle, Inc. regarding the municipal solid waste registration modification for the above referenced facility.

Response to Comments:

As directed in your November 22, 2011 letter, the request for the alternative buffer zone is being removed from this registration modification because of the agency's re-evaluation of our request. The Site Layout Plan (enclosed) has been revised to reflect the original/currently approved buffer zone which is 50 ft on the north, south and west sides and 32 ft on the east side.

Please process the other revisions/updates to the Site Layout Plan as a registration modification without public notice in accordance with 30 Texas Administrative Code (TAC) §305.70(j)(8). Changes to the Site Layout Plan include the location of a new building as well as show the proposed expansion of the existing building. A revised Site Layout Plan (Figure 1-1) is enclosed. The Facility Floor Layout (Figure 1-2) and Building Profile (Figure 2-1) with a revision date of October 25, 2011 were previously submitted to the TCEQ and are part of the registration modification request. For your convenience, copies of these two figures are also enclosed. Additionally, pages 1 and 11 of the Part I Form are also enclosed.

Enclosed, please find one original and two copies of this response to comments and the applicable revised pages. Additionally, one copy has been sent to Mr. Sam Barrett, Waste Program Manager, TCEQ Region 4. In accordance with 30 TAC §330.57(g)(6), each revised figure has a revision number and date. If you have questions regarding this response, please contact Lara Garey at (936) 499-1041 or Amy Hesseltine at (361) 883-1984.

Sincerely,

  
Amy R. Hesseltine, PE  
Project Manager

cc: Mr. Mark Triplett, Stericycle, Inc.  
Ms. Lara Garey, Garey Environmental  
Mr. Sam Barrett, Waste Program Manager, TCEQ Region 4 Office



# Texas Commission on Environmental Quality

## Permit or Registration Application for Municipal Solid Waste Facility

### Part I

#### A. General Information

Facility Name:	Stericycle-Garland			
Physical or Street Address (if available):	2821 Industrial Lane			
(City) (County)( State)( Zip Code):	Garland	Dallas	TX	75041
(Area Code) Telephone Number:	(972) 931-2374			
Charter Number:	0011349906 (1/19/97)			

If the application is submitted on behalf of a corporation, provide the Charter Number as recorded with the Office of the Secretary of State for Texas.

Operator Name <sup>1</sup> :	Stericycle, Inc.			
Mailing Address:	28161 N. Keith Drive			
(City) (County)( State)( Zip Code):	Lake Forest	Lake County	IL	60045-4528
(Area Code) Telephone Number:				
(Area Code) FAX Number:				
Charter Number:	0011349906 (1/19/97)			

If the permittee is the same as the operator, type "Same as Operator".

Permittee Name:	Same as Operator			
Physical or Street Address (if available):				
(City) (County)( State)( Zip Code):			TX	
(Area Code) Telephone Number:				
Charter Number:				

If the application is submitted by a corporation or by a person residing out of state, the applicant must register an Agent in Service or Agent of Service with the Texas Secretary of State's office and provide a complete mailing address for the agent. The agent must be a Texas resident.

Agent Name:	CT Corporation System			
Mailing Address:	350 North St. Paul Street			
(City) (County)( State)( Zip Code):	Dallas	Dallas	TX	75201
(Area Code) Telephone Number:				
(Area Code) FAX Number:				

#### Application Type:

<input type="checkbox"/> Permit	<input type="checkbox"/> Major Amendment	<input type="checkbox"/> Minor Amendment
<input checked="" type="checkbox"/> Registration	<input checked="" type="checkbox"/> Modification	<input type="checkbox"/> Temporary Authorization
	<input type="checkbox"/> w/Public Notice	
	<input checked="" type="checkbox"/> w/out Public Notice	<input type="checkbox"/> Notice of Deficiency Response

<sup>1</sup> The operator has the duty to submit an application if the facility is owned by one person and operated by another [30 TAC 305.43(b)]. The permit will specify the operator and the owner who is listed on this application [Section 361.087 Texas Health and Safety Code].

Signature Page

I, R. Mark Triplett, P.E., BCEE  
(Operator)

Regional Environmental Manager  
(Title)

certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature: R. Mark Triplett

Date: 9 Dec 2011

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TO BE COMPLETED BY THE OPERATOR IF THE APPLICATION IS SIGNED BY AN AUTHORIZED REPRESENTATIVE FOR THE OPERATOR

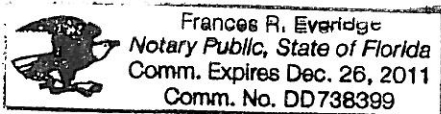
I, \_\_\_\_\_, hereby designate \_\_\_\_\_  
(Print or Type Operator Name) (Print or Type Representative Name)

as my representative and hereby authorize said representative to sign any application, submit additional information as may be requested by the Commission; and/or appear for me at any hearing or before the Texas Commission on Environmental Quality in conjunction with this request for a Texas Water Code or Texas Solid Waste Disposal Act permit. I further understand that I am responsible for the contents of this application, for oral statements given by my authorized representative in support of the application, and for compliance with the terms and conditions of any permit which might be issued based upon this application.

\_\_\_\_\_  
Printed or Typed Name of Operator or Principal Executive Officer

\_\_\_\_\_  
Signature

-----  
SUBSCRIBED AND SWORN to before me by the said R. Mark Triplett  
On this 9<sup>th</sup> day of December, 2011  
My commission expires on the 26<sup>th</sup> day of December, 2011



Frances R. Everidge  
Notary Public in and for  
Escambia County, Texas Florida

(Note: Application Must Bear Signature & Seal of Notary Public)

**PART III**  
**[30 TAC §330.63]**

**TYPE V MEDICAL WASTE PROCESSING FACILITY**  
**REGISTRATION APPLICATION**  
**REGISTRATION NO. MSW-40253**  
**Garland, Dallas County, Texas**

**Prepared by:**

**Geosyntec Consultants**  
**Austin, TX 78746**  
**and**  
**TETC, LLC**  
**Frost, TX 76641**

**November 2010**  
**Tech-Revision #1 (January 2011)**

**Revised by:**



**engineers | architects | contractors**

TBPE Firm No. F-366  
801 Navigation, Suite 300  
Corpus Christi, TX 78408  
(361) 883-1984



*12/9/11*  
*Amy B Hesseltn*  
FOR REGISTRATION PURPOSES ONLY  
DECEMBER 9, 2011 REVISIONS ONLY

**in conjunction with: Garey Environmental**

**revised October 25, 2011**  
**revised December 9, 2011**