

## TCEQ EXIT INTERVIEW FORM: Potential Violations and/or Records Requested

<b>Regulated Entity/Site Name</b>		<b>TCEQ Add. ID No.</b>	
		<b>RN No. (optional)</b>	
<b>Investigation Type</b>	<b>Contact Made In-House (Y/N)</b>	<b>Purpose of Investigation</b>	
<b>Regulated Entity Contact</b>		<b>Telephone No.</b>	<b>Date Contacted</b>
<b>Title</b>		<b>Fax No.</b>	<b>Date Faxed</b>

**NOTICE:** The information provided in this form is intended to provide clarity to issues that have arisen during the investigation process between the TCEQ and the regulated entity named above and *does not represent final TCEQ findings related to violations*. Any potential or alleged violations discovered after the date on this form will be communicated by telephone to the regulated entity representative prior to the issuance of a notice of violation or enforcement. Conclusions drawn from this investigation, including additional violations or potential violations discovered (if any) during the course of this investigation, will be documented in a final investigation report.

Issue		For Records Request: identify the necessary records, the company contact and date due to the agency. For Alleged and Potential Violation issues: include the rule in question with the clearly described potential problem. Other type of issues: fully describe.	
No.	Type <sup>1</sup>	Rule Citation (if known)	Description of Issue

<sup>1</sup>Issue Type Can Be One or More of: AV (Alleged Violation), PV (Potential Violation), O (Other), or RR (Records Request)

Did the TCEQ document the regulated entity named above operating without proper authorization?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Did the investigator advise the regulated entity representative that continued operation is not authorized?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Document Acknowledgment. Signature on this document establishes only that the regulated entity (company) representative received a copy of this document and associated continuation pages on the date noted. If contact was made by telephone, document will be faxed to regulated entity; therefore, signature not required.

<b>Investigator Name (Signed &amp; Printed)</b>	<b>Date</b>	<b>Regulated Entity Representative Name (Optional)</b>	<b>Date</b>

**If you have questions about any information on this form, please contact your local TCEQ Regional Office.**

Individuals are entitled to request and review their personal information that the agency gathers on its forms. They may also have any errors in their information corrected. To review such information, call 512-239-3282.