

On-site Activity Reporting System (OARS) Designee(s)

I, Judge KP George, the undersigned responsible party for
Responsible Official Name

Fort Bend County, Authorized Agent (AA), hereby delegate the
Regulated Entity Name

following designee(s) with the responsibility of submitting monthly activity report information in
TCEQ's OARS program on behalf of the Authorized Agent:

Michael R Schaffer/Director, EH

Name of Designee/Title (print)

4520 Reading Road, Rosenberg, TX 77471

Mailing address of Designee (print)

Continuation of mailing address of Designee (if applicable) (print)

Crystal Hernandez

Name of alternate Designee/Title (print) (optional)

4520 Reading Road, Rosenberg, TX 77471

Mailing address of alternate Designee (if different from above)

Continuation of mailing address of alternate Designee (if applicable) (print)

Judge KP George

Name/title of AA's responsible party

Signature

Date