

Chattanooga-Hamilton County Air Pollution Control Bureau
Certificate for Gasoline Dispensing Facility with Stage 1 Vapor Recovery

Please print or type

Owner of Gasoline Dispensing Facility

Name of Business			
Billing Address			
City	State	Zip Code	Telephone Number

Name and Title of Applicant (Applicant must be an authorized agent or owner of facility)

Name	Title
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Location of Gasoline Dispensing Facility

Name of Facility			
Street Address			
City	State	Zip Code	Telephone Number

Certificate Number:

Installation Permit Initial Certificate of Operation Renewal Certificate of Operation

Facility Information

Gasoline Tank Information				Normal Operating Schedule	
Tank ID or #	Octane (Regular, Mid-grade, Premium)	Tank Size (in Gallons)	Dual or Coaxial (D or C)	Hours per Day:	
				Days per Week:	
				Annual Gallons of Throughput:	
				Previous Years Gallons of Throughput	
				Estimate for New Facility	

Certification:

This is to certify that I am familiar with operations concerning this equipment and the information provided on this application is true and complete to the best of my knowledge:

Applicant's Signature

Date

Return to:
Chattanooga-Hamilton County Air Pollution Control Bureau
6125 Preservation Drive, Suite 140
Chattanooga, TN 37416-3740
(423) 643-5970