



Chattanooga-Hamilton County Air Pollution Control Bureau

Certificate for Gasoline Dispensing Facility with Stage 1 Vapor Recovery

Owner of Gasoline Dispensing Facility

Name of Business:			
Billing Address:			
City:	State:	Zip Code:	Phone Number:
Email Invoices? Yes No	Email Address:		

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:	Phone Number:

Certificate Number:

Installation Permit	Initial Certificate of Operation	Renewal Certificate of Operation
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Facility Information

Gasoline Tank Information					
Tank ID or #	Octane (Regular, Mid-grade, Premium)	Tank Size (in Gallons)	Dual or Coaxial (D or C)	Normal Operating Schedule	
				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

*By signing, you agree that your electronic signature is the legal equivalent of your manual/wet signature under applicable laws (including the U.S. ESIGN Act). You acknowledge your intent to be legally bound by this document.

Please print or type the information and return the completed form by email or mail to:

Stage1VR@chattanooga.gov

Chattanooga-Hamilton County Air Pollution Control Bureau
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Chattanooga, TN 37421
(423) 643-5970