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		, , , ,					
Brien	Docket Ril	havi LLC	/				
Billing Address	7977101	11.11.			3741A1 E		
	mon St.						
City	State	50	Zip Code	Telephone			
Clouby	1 70		137311	423	506-0307		
Name and Title	of Applicant (Appl	icant must be an	authorized agent	or owner of facility)			
Name and Title of Applicant (Applicant must be an authorized agent or owner of facility) Name Title							
Nikita	Patel	10000000					
Location of Gas	soline Dispensing	Facility	all and a second				
Name of Facility							
	Market						
Street Address		\wedge					
6405	Harrison 1	ike					
City	State		Zip Code	Telephone	Number		
Chattanoga IN. 37416 423-506-0307							
Received							
Certificate Number: 3 3/4/08 JUN 0 6 2025							
Installation Permit Initial Certificate of Operation IRenewal Certificate of Operation (Invoiced Annually) Chaltanooga-Hamilton County							
Facility Information							
Gasoline Tank Information Pressure Aire							
Tank ID or #	Octane (Regular, Mid- grade, Premium)	Tank Size (in Gallons)	Dual or Coaxial (D or C)	Normal Operati	ng Schedule		
1 7	D. OH	9	1	Hours per Day:			
1-4	Neg 87	0,000 "	1	Days per Week:			
1-8	Prem 93	3.000	\mathcal{L}				
. 0			\ \hat{\chi}	Annual Gallons of			
1-0	Now Ethanol	4,000	P	Throughput: Previous Years	42 8		
				Gallons of Throughput	N/A		
	77211			Estimate for New Facility			
Contidention							
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:							
MET 05-16-2025.							
Applicant's Signature Date							
Applicant's Signature							



Fwd: 3-330408 New UST Tanks

1 message

Ronald Drumeller <rdrumeller@chattanooga.gov>

To: Alan Frazier <afrazier@chattanooga.gov>

Wed, May 7, 2025 at 1:53 PM

Ruhani LLC Oasis Market 6405 Harrison Pike Chattanooga, TN

Ron Drumeller

Executive Director

Chattanooga-Hamilton County Air Pollution Control Bureau

CBL Center II

2034 Hamilton Place Blvd. Suite 300 Chattanooga, TN 37421

Office: (423) 643-5974 Phone: (678) 622-1135 rdrumeller@chattanooga.gov

www.apcb.org

----- Forwarded message ------

From: Melissa Porter < Melissa. Porter@tn.gov>

Date: Wed, May 7, 2025 at 11:52 AM Subject: 3-330408 New UST Tanks To: Frank Pointer <Frank.Pointer@tn.gov>

Cc: Jo McCrary <Jo.McCrary@tn.gov>, J.David Stone <J.David.Stone@tn.gov>, Kevin Rice <Kevin.Rice@tn.gov>, Dale

A. Robinson <Dale.A.Robinson@tn.gov>, Drumeller Ronald C <rdrumeller@chattanooga.gov>

Good morning!

Attached is a preinstall form for a new tank going in at Facility ID # 3-330408, 6405 Harrison Pike, Chattanooga, TN.

Thanks!

Melissa

Please note that Fees and Notification staff will stop accepting all Notification Forms to their personal email beginning September 1, 2022. Please send all forms to: Notification.Fees@tn.gov

NOTICE: New Change of Address effective 04.22.2024



Melissa Porter | Administrative Services Assistant 2

Dept of Environment & Conservation

Underground Storage Tank Division | Central Office

Davy Crockett Tower, 7th Floor

500 James Robertson Pkwy

Nashville, TN 37243

Office: (615) 532-0982 Cell: (615) 477-7551

Melissa.Porter@tn.gov

www.tn.gov/environment

We value your feedback! Please complete our customer satisfaction survey.

https://tn.gov/environment/article/contact-tdec-customer-service-form





RECEIVED
By Melissa Porter at 2:03 pm, May 06, 2025

APPROVED
By Melissa Porter at 10:34 am, May 07, 2025

STATE OF TENNESSEE

DEPARTMENT OF ENVIRONMENT AND CONSERVATION

Division of Underground Storage Tanks
Davy Crockett Tower, 7th Floor
500 James Robertson Pkwy
Nashville, Tennessee 37243

Pre-Installation Notification for Underground Storage Tanks

	/	444115				
Type of Installation	n ∭New Facility	☑ Pre-existing Faci	lity Piping Replacement			
Facility ID	3-330408	Owner ID	# 359272			
TANK OWNER INFORMATION						
First and Last Nan	ne or Corporate Name	Ruhan'i A	CZC			
Owner's Mailing Address 540 Trman St.						
City Cle	ke land	State 7	V. Zip Code 37.3//			
Phone Number	423-506-0	307 E-ma	The state of the s			
		FACILITY INFORMATI	ON , Com			
Facility Name Oasis Market						
Facility Location (i.e., Physical Address) 6405 Harrison Pike						
C ty Chattanoog State Tw. Zip Code 374/6						
County Hamilton Phone Number for Facility -						
Estimated Date of Installation 5-20-25						
CONTACT PERSON IN CHARGE OF INSTALLATION						
First Name, Last Name Ken Curtis						
Company Old State Const. The Title Presi						
Email Curti	old State (1)	Smil. Com	hone Number 706 - 252 - 563)			

PROPERTY OWNER INFORMATION /
Does the tank owner, listed on page 2, also own this property? Yes O No If Yes, skip this section
First Name or Business Name:
Last Name or Business Name Continued:
Mailing Address:
City: Zip Code:
E-mail: Phone Number:
Fax Number: Alternate Phone Number:
IF OWNER HAS AN AUTHORIZED REPRESENTATIVE OR OPERATOR LIST BELOW
First Name: Last Name:
Mailing Address: Associated Company:
City: Zip Code:
Phone Number: Fax Number:
Alternate Phone Number: E-mail:
Owner may be held liable anywhere the term "owner/operator" is mentioned in chapter 400-18-01 of the Tennessee Underground Storage Tank Program rules, even though you have designated an operator.
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents and that based on my inquiry of those individuals immediately responsible for obtaining the information. I believe that the submitted information is true, accurate and complete, as specified in Tennessee Code Annotated Section 39-16-702(2)(a)(4). This declaration is made under penalty of perjury.
Tank Owner's Signature Date

PROPERTY OWNER INFORMATION /					
Does the tank owner, listed on page 2, also own this property? Yes O No If Yes, skip this section					
First Name or Business Name: Ruhmi LLC					
Last Name or Business Name Continued:					
Mailing Address: 540 Inman St W					
City: Dove Cund State: 7N Zip Code: 37312					
E-mail: 15 Candrasis (17) Phone Number: 423-506-0307					
Fax Number: NA Alternate Phone Number: 443-977-3595					
IF OWNER HAS AN AUTHORIZED REPRESENTATIVE OR OPERATOR LIST BELOW					
First Name: Last Name:					
Mailing Address: Associated Company:					
City: Zip Code:					
Phone Number: Fax Number:					
Alternate Phone Number: E-mail:					
Owner may be held liable anywhere the term "owner/operator" is mentioned in chapter 400-18-01 of the Tennessee Underground Storage Tank Program rules, even though you have designated an operator.					
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents and that based on my inquiry of those individuals immediately responsible for obtaining the information. I believe that the submitted information is true, accurate and complete, as specified in Tennessee Code Annotated Section 39-16-702(2)(a)(4). This declaration is made under penalty of perjury.					
Tank Owner's Signature 5/5/25 Date					

TANK SYSTEM INFORMATION						
Tank # and Compartment Letter QL 1146 [5]	7 1 7A 7A	J.B ^{7B}	1-C7C			
	Tank (Ma	ark All That	Are Planned)		
Mark if Tank is Manifolded						
Mark if Tank is an Emergency Generator						
Double Walled		Ø	Ø			
Fiberglass Reinforced Plastic						
Polyethylene Tank Jacket						
Composite		Ø	Ø			
Compartment Volume	8,000 gal	3,000 gal	4,000ga1			
Substance To Be Stored						
Gasoline	P					
Diesel	İ					
Kerosene						
Avgas						
Biodiesel						
E-100						
E-85*						
Gear Oil						
Hazardous Substance						
Heating Oil						
Hydraulic Fluid						
Jet Fuel						
Mineral Spirits						
Motor Oil						
Oil Water Separator						
Power Steering Fluid						
Other (Specify)						

^{*}E-85 (tanks containing 85% ethanol) must have the following compatibility worksheet included: Ethanol Equipment Compatibility Worksheet (CN-1285) and Statement of Compatibility (CN-1283).

Piping (Mark All That Are Planned)						
Tank # and Compartment Letter UL 1746 15 K	- /-A -7A	-1-B-7B	/ - C- 7C		,	
Double Walled	X	X	X			
Fiberglass Reinforced Plastic						
Flexible Piping						
Secondary Containment		4				
Piping Type						
Suction: valve only at dispenser (Safe Suction)						
Suction: valve only at tank (US Suction)						
Pressurized	Ø					
Gravity Feed						
SPILL AND OVERFILL PROTECTION (Mark All That Are Planned)						
High Product Level Alarm		团				
Ball Float Valves, Flow Restrictive						
Automatic Shut Off (Flapper)		Ø				
Spill Containment Device Has Been Installed						
	Will Be	2				

Page 5 of 5 3-330408 on 05/07/2025 Page 5 of 10

RUHANI LLC

Entity Type: Limited Liability Company (LLC)

Formed in: TENNESSEE Term of Duration: Perpetual Managed By: Member Managed

Series LLC: No

Number of Members: 6 or less

Status: Active

Control Number: 000933472

Initial Filing Date: 11/22/2017 2:18:00 PM

Fiscal Ending Month: December AR Due Date: 04/01/2026 Obligated Member Entity: Yes

OME Effective Date: 01/01/2023

Registered Agent

RUHANI LLC

6701 RINGGOLD RD

EAST RIDGE, TN 37412-4229

Principal Office Address

6701 RINGGOLD RD

EAST RIDGE, TN 37412-4229

Mailing Address

6701 RINGGOLD RD

EAST RIDGE, TN 37412-4229

AR Standing: Good

RA Standing: Good

Other Standing: Good

Revenue Standing: N/A

History (12)		And the res	
Туре	Date	Tracking Number	Change History
2024 Annual Report for RUHANI LLC	1/24/2025 3:25:14 PM	B1671-4408	
2023 Annual Report for RUHANI LLC	3/7/2024 8:48:15 AM	B1518-5259	
Articles of Amendment for RUHANI LLC	1/30/2023 9:34:00 AM	B1270-3752	 Obligated Member Entity changed from: No Value to: Yes OME Effective Date changed from: No value to: 01/01/2023
2022 Annual Report for RUHANI LLC	1/24/2023 12:23:51 PM	B1325-5801	
2021 Annual Report for RUHANI LLC	3/23/2022 9:25:46 AM	B1185-4113	o Member Count changed from: 2 to: 3
2020 Annual Report for RUHANI LLC	3/31/2021 2:57:45 PM	B1013-0110	
2019 Annual Report for RUHANI LLC	3/20/2020 10:13:33 AM	B0841-8614	