

Bulk Plant



<u>Equipment</u>				
	<u>Manufacturer</u>	<u>Model</u>	<u>Size (in)</u>	
1				
2				
3	Storage tank fill adapter	_____	_____	_____
4	Dust cap for adapter	_____	_____	_____
5	Truck fill adaptor	_____	_____	_____
6	Dust cap for adapter	_____	_____	_____
7	Storage tank vapor adaptor	_____	_____	_____
8	Dust cap for adapter	_____	_____	_____
9	Truck vapor adaptor	_____	_____	_____
10	Dust cap for adapter	_____	_____	_____
11	Dry break nozzle	_____	_____	_____
12	Dry break nozzle dust cap	_____	_____	_____
13	Product hose(s)	_____	_____	_____
14	Vapor hose(s)	_____	_____	_____
	<u>Manufacturer</u>	<u>Model</u>	<u>Pres (psig)</u>	<u>Vac (psig)</u>
15				
16	Primary emergency vent	_____	_____	_____
17	Secondary emergency vent	_____	_____	_____
18	Pressure vacuum valve	_____	_____	_____
19	Pressure vacuum gauge	_____	_____	_____
20	Vet line diameter	_____ (in)		
21	Tank truck capacity	_____ (gal)	_____ (gal)	_____ (gal)
22	Fuel gauge manufacturer	_____	type _____	
23	Overfill prevention device	_____		
24	Number of nozzles	_____		
25	Storage tank capacity	_____ (gal)	_____ (gal)	_____ (gal)
26	Fuel stored	_____	_____	_____
27	Storage tank dimensions	_____ length (ft)	_____ diameter (ft)	
28	The storage tank is	<input type="checkbox"/> horizontal	<input type="checkbox"/> vertical	
29	Shell color	<input type="checkbox"/> white	<input type="checkbox"/> aluminum specular	<input type="checkbox"/> aluminum diffuse gray
30		<input type="checkbox"/> light gray	<input type="checkbox"/> medium gray	<input type="checkbox"/> red/primer
31	Shell condition	<input type="checkbox"/> good	<input type="checkbox"/> poor	
32	Storage tank is	<input type="checkbox"/> aboveground	<input type="checkbox"/> underground	
<u>Operations</u>				
33				
34	The tank contains AVGAS and the valve is permanently sealed			<input type="checkbox"/> YES <input type="checkbox"/> NO
35	Tanker trucks are switch loaded			<input type="checkbox"/> YES <input type="checkbox"/> NO
36	Transfer occurs between tanker trucks			<input type="checkbox"/> YES <input type="checkbox"/> NO
37	Fuel enters compartments within 6 inches from the bottom of the compartment			<input type="checkbox"/> YES <input type="checkbox"/> NO
38	Rule 1200 Toxics Evaluation supplemental application is attached			<input type="checkbox"/> YES <input type="checkbox"/> NO
39	A maintenance plan is attached			<input type="checkbox"/> YES <input type="checkbox"/> NO

- 40 Max fuel to intermediate refueler truck(s) _____ (gal/hr) _____ (gal/month)
- 41 Max fuel dropped to storage tank(s) _____ (gal/hr) _____ (gal/month)
- 42 Max fuel dispensed to motor vehicles _____ (gal/hr) _____ (gal/month)
- 43 ARB certification number _____
- 44 Name of preparer _____ Title _____
- 45 Phone _____ email _____ date _____

Before acting on an application for Authority to Construct or Permit to Operate, the District may require further information, plans, or specifications. Forms with insufficient information may be returned to the applicant for completion, which will cause a delay in application processing and may increase processing fees. The applicant should correspond with equipment and material manufacturers to obtain the information requested on this supplemental form.