



Form 400-E-11 Fuel Dispensing And Storage Equipment

This form must be accompanied by a completed Application for a Permit to Construct/Operate - Forms 400-A, Form 400-CEQA, and Form 400-PS.

Mail To:
SCAQMD
P.O. Box 4944
Diamond Bar, CA 91765-0944
Tel: (909) 396-3385
www.aqmd.gov

Section A - Operator Information

Facility Name (Business Name of Operator That Appears On Permit): _____ Valid AQMD Facility ID (Available On Permit Or Invoice Issued By AQMD): _____

Address where the equipment will be operated (for equipment which will be moved to various location in AQMD's jurisdiction, please list the initial location site): _____

Fixed Location Various Locations

Section B - Facility Information

Property Zone	a. Commercial b. Residential c. Industrial d. Parking e. Other (specify): _____
Business Type	a. Retail Facility 1. Has the owner/operator attended a SCAQMD approved Rule 461 training course? No Yes Date of Course Completion: _____ 2. Has the owner/operator developed an Operation and Maintenance manual as required by Rule 461? No Yes b. Non-Retail Facility 1. Do you own any fleet vehicles? No Yes Total number of fleet vehicles: _____
Operating Schedule	_____ hours/day _____ days/week _____ days/year

Section C - Equipment Description

1. UNDERGROUND STORAGE TANK INFORMATION: COMPLETE AND CHECK THE APPROPRIATE COLUMNS (Excluding Diesel for Single Compartment Tanks)

Dual or Multi-Compartment Tank?	Number of Compartments	Tank No.	Fuel Type (e.g. Unleaded 87)	Tank Capacity (Gallons)	Manifold Location		Tank Status		
					Under-ground	At Vent	New	Existing	Removed

a. Provide Phase I CARB Executive Order Number (see instructions): _____

b. Are any of these storage tanks methanol compatible? No Yes (Identify these tanks): _____

c. Will any of these storage tanks be located in a vault below grade? No Yes

d. Will a condensate/vapor trap be installed in the vapor return line? No Yes

e. Will the tank(s) at this site contain a remote fill? No Yes

f. Will semi-rigid piping (NUPI or UPP) be used for the vapor return line? No Yes

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Section C - Equipment Description (cont.)

2. ABOVEGROUND STORAGE TANK INFORMATION: COMPLETE AND CHECK THE APPROPRIATE COLUMNS (Excluding Diesel for Single Compartment Tanks)

Dual or Multi-Compartment Tank?	Number of Compartments	Tank No.	Fuel Type (e.g. Unleaded 87)	Tank Capacity (Gallons)	Tank Dimensions L x W x H L x Dia (Inches)			Phase II CARB Executive Order (Table III)	Hose Length (Feet)	Tank Status		
					L	W (or D)	H			New	Exist-ing	Re-moved

3. Indicate the distance and address of the nearest residential and commercial/industrial structures located outside the property line of the facility as measured from the approximate center of the islands:

Residential _____ (ft)

Commercial/Industrial _____ (ft)

Select One: N NE E SE S SW W NW

Select One: N NE E SE S SW

Located at: _____

Located at: _____

4. FUELING POSITION INFORMATION: COMPLETE FOR ALTERATIONS OR NEW CONSTRUCTION

Total Number of Fueling Positions After Alteration or New Construction: _____

Total Number of Fueling Positions Prior to Alteration (for Alterations Only): _____

5. NOZZLE INFORMATION: COMPLETE ALL COLUMNS

Fuel Type (e.g. Unleaded 87)	# New Nozzles	# Existing Nozzles	# Removed Nozzles	Phase II CARB Executive Order (Table II)	Maximum Monthly Throughput (Gal/Mo)	Maximum Annual Throughput (Gal/Yr)

Change of Throughput Condition:

Total throughput change: _____ gal/mo

Date of throughput change: _____

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6. GASOLINE PRODUCT INFORMATION: COMPLETE TABLE		# Of Product(s) (Excluding Diesel)	
Number of nozzle(s) dispensing ONE product (grade) of gasoline:	_____	x	1 = _____
Number of nozzle(s) dispensing TWO product (grade) of gasoline:	_____	x	2 = _____
Number of nozzle(s) dispensing THREE product (grade) of gasoline:	_____	x	3 = _____
TOTAL NOZZLE COUNT:		TOTAL PRODUCT COUNT = _____	

7. DISPENSER INFORMATION: COMPLETE AND CHECK THE APPROPRIATE COLUMNS						
Dispenser		No. of Similar Dispensers	Dispenser			No. of Nozzles Per Dispenser
Make	Model No.		New	Existing	Removed	Unleaded

8. THROUGHPUT INFORMATION: PROVIDE THROUGHPUT RECORDS FOR THE PAST 2 YEARS (EXISTING SITES)		
Year of Operation	Fuel Type	Throughput (Gal/Yr)
	Gasoline	
	Gasoline	

9. For existing gasoline storage and dispensing systems and based on the following, please provide a copy of your MOST RECENT vapor recovery test results.

a. Balance System Tests:
 • Static Pressure (Leak-Decay);
 • Dynamic Pressure (Back-Pressure); and,
 • Liquid Removal (if applicable).

b. Vacuum Assisted System Tests (Except Healy and Hirt Systems):
 • Static Pressure (Leak-Decay); and,
 • Air-to-Liquid Ratio (A/L).

c. Healy Vacuum Assisted System Tests:
 • Static Pressure (Leak-Decay);
 • Air-to-Liquid Ratio (A/L); and,
 • Vapor Return Line.

d. Vacuum Assisted Hirt System Test:
 • Air-to-Liquid Ratio (A/L).

e. For systems not mentioned, provide required test results as per that system's executive order.

10. Attach a plot plan, a copy of the current Permit to Operate, and other information as directed in Form 400-E-11 Requirements.

Section D - Authorization/Signature

I hereby certify that all information contained herein and information submitted with this application is true and correct.

Preparer Info	Signature: _____ Date: _____	Name: _____
	Title: _____ Company Name: _____	Phone #: _____ Fax #: _____
Contact Info	Name: _____	Phone #: _____ Fax #: _____
	Title: _____ Company Name: _____	Email: _____

THIS IS A PUBLIC DOCUMENT

Pursuant to the California Public Records Act, your permit application and any supplemental documentation are public records and may be disclosed to a third party. If you wish to claim certain limited information as exempt from disclosure because it qualifies as a trade secret, as defined in the District's Guidelines for Implementing the California Public Records Act, you must make such claim at the time of submittal to the District.

Check here if you claim that this form or its attachments contain confidential trade secret information.

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FORM 400-E-11 REQUIREMENTS

WHO MUST APPLY FOR A PERMIT:

A fuel dispensing and storage equipment permit application is required for any new installation, alteration, facility with an expired permit or change of permit condition.

WHEN TO APPLY:

Prior to any new construction, alteration, or change of permit condition. An application shall be filed prior to use if ownership has changed. Installing any equipment contrary to the Permit to Construct or to the information provided in this form without notifying the AQMD engineer will void this application or your permit, and will require submittal of a new application and associated fees. Sites with expired permits or existing equipment operating without permit shall apply as soon as possible to avoid possible enforcement action. Sites requesting a change of permit condition must receive new permit approval prior to dispensing requested throughput change.

HOW TO APPLY:

- A. Fill out Forms 400-A, 400-E-11, and 400-CEQA for each facility for new construction, alteration, change of permit condition, and reinstatement of expired permits.
If AQMD has identified your facility as a Title V facility, use the telephone numbers in Section B below to obtain further assistance.
- B. The proper filing fee is found in Rule 301. Checks or money orders should be made payable to the South Coast Air Quality Management District. Send the completed application to: SCAQMD, P. O. Box 4944, Diamond Bar CA 91765. Further information may be obtained by calling (909) 396-2468, (909) 396-2469, or (909) 396-2470.
- C. Submit equipment location drawings which shall be to scale (suggested scale: 1 inch = 100 feet; accuracy of measurements to the nearest 5 feet will be satisfactory) and shall show at least the following:
 1. The property involved and outlines of all buildings. Identify property lines plainly.
 2. Location and identification of the proposed equipment on the property.
 3. Location of the property with respect to streets and all adjacent properties. Identify adjacent properties. Identify buildings or vacant lots outside the property lines.
Identify all such buildings as residential and commercial/industrial. Indicate direction (north) on the drawing.
 4. Drawings showing all tanks, vapor recovery and product piping with pipe diameters to be installed, provide details of dispensing nozzles, vapor return connectors, vent pipe location, and vapor processing systems (if any). Any vapor recovery system being installed or operated must be of a type certified by the California Air Resources Board.
 5. Drawings showing all islands, dispensers, and fueling positions (before and after alterations or for new construction).
- D. For all existing sites, submit annual gasoline throughput records and days of operation for the last two years.

NOTICE: *Construction or operation prior to receipt of Permit to Construct or Operate constitutes a violation of the Rules and Regulations of the SCAQMD.*

VAPOR RECOVERY SYSTEMS:

Rule 461 (c)(1) regulates the transfer of gasoline and methanol from delivery vehicles to storage tanks and requires installation of CARB certified submerged fill pipes, spill boxes, and vapor return equipment (Phase I vapor recovery). Phase I vapor recovery transfers these vapors from the storage tank into the unloading delivery vehicle so that it can be transported back to the terminal vapor processor for recovery or destruction.

Rule 461 (c)(2) regulates the transfer of gasoline and methanol into motor vehicle tanks larger than five gallons. A special fill nozzle and vapor piping allow these vapors to be returned from the vehicle fuel tank to the storage tank or to vapor processing equipment (Phase II vapor recovery).

For aboveground tanks and mobile refuelers dispensing gasoline or methanol, the standard Phase I and Phase II vapor control systems must be installed for compliance. Rule 461 also requires the installation of a pressure-vacuum relief valve.

UNDERGROUND TANK AND PIPING REQUIREMENTS:

Rule 1170(c)(1) states that after July 1, 1988 a person shall not install or allow the installation of any new underground fuel storage tank(s) unless at least one such tank at any single motor vehicle fueling facility, along with all associated underground pipes is capable of safely storing and transporting methanol fuel, as evidenced by written certification from the manufacturer for the useful life of the tank. In addition, all gasoline equipment shall be installed, equipped, and operated with CARB certified equipment (submerged fill tubes, spill boxes, etc.). Furthermore, all new gasoline tanks shall be manifolded underground and be equipped with a two-point Phase I design.

FORM 400-E-11 INSTRUCTIONS

FUEL TYPE:

Provide the type of fuel stored in each tank (e.g. gasoline grades, diesel, or methanol).

TABLE I - CARB EXECUTIVE ORDERS FOR PHASE I VAPOR RECOVERY SYSTEMS*			
Standard ^ (Non-EVR) ^ Standard cannot be used on new installations after 7/1/01	G-70-97-A	EBW-EVR	VR-103
Phil-Title Enhanced vapor Recovery (EVR)	VR-101	CN1 Manufacturing-EVR	VR-104
OPW-EVR	VR-102	EMCO Wheaton-EVR	VR-105

* If the system is not mentioned, provide CARB Executive Order (EO) Number.

TABLE II - CARB EXECUTIVE ORDERS FOR PHASE II VAPOR RECOVERY SYSTEMS* (UNDERGROUND TANKS):			
Healy without ISD	VR-201	VST with Veeder-Root Carbon Canister and ISD	VR-204 (VR)
Healy with Veeder-Root ISD	VR-202 (VR)	VST with Hirt Thermal Oxidizer without ISD	VR-205
Healy with Incon ISD	VR-202 (Incon)	EMCO Wheaton/Hirt Phase II EVR without ISD	VR-207
VST without ISD	VR-203	EMCO Wheaton/Hirt Phase II EVR with ISD	VR-208
VST with VST Cell Membrane and ISD	VR-204 (CM)		

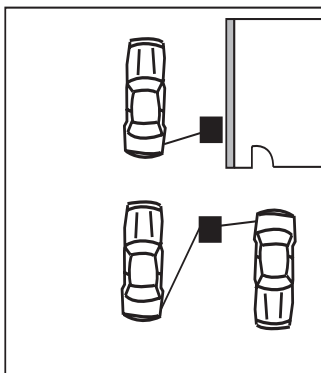
* If the system is not mentioned, provide CARB Executive Order (EO) Number.

TABLE III - CARB EXECUTIVE ORDERS FOR PHASE II VAPOR RECOVERY SYSTEMS* (ABOVEGROUND TANKS):			
Above Ground Tank Vault	G-70-160	Healy Model 400-ORVR	G-70-187
Bryant	G-70-168	Hoover Fuelmaster	G-70-161
Containment Solutions Hoover Vault	G-70-194	LRS Fuelmaster	G-70-133-A
Convault	G-70-116-F	Lube Cube	G-70-148-A
Cretex Fuel Vault	G-70-195	Moiser Brothers	G-70-152
Ecovault (Balance)	G-70-157	P/T Vault	G-70-143
Ecovault (Vacuum Assist)	G-70-156	Petroleum Marketing	G-70-155
Enviro Vault	G-70-167	Petrovault	G-70-130
Firesafe	G-70-136	San Luis Firesafe	G-70-158-A
Fuelsafe	G-70-137	Steel Tank Fireguard	G-70-162-A
Guardian Containment Armor Cast	G-70-190	Supervault	G-70-132-B
Hasstech VCP-3A	G-70-175	Tank Vault	G-70-131-A
EVR Standing Loss (Existing)	VR-301	EVR Standing Loss (New)	VR-302

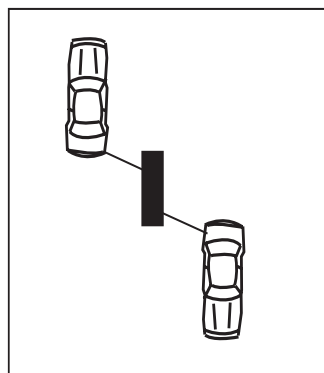
* If the system is not mentioned, provide CARB Executive Order (EO) Number.

FUEL POSITIONS:

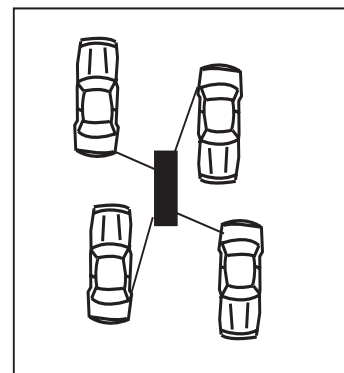
The number of fueling positions is equal to the number of nozzles that can mechanically and electronically be operated at the same time.



A. 3 Fueling Positions



B. 2 Fueling Positions



C. 4 Fueling Positions

GASOLINE PRODUCTS

Complete table by identifying the number of gasoline nozzles that dispenses either one, two, or three products (grades). Compute the overall total nozzle count and total product count.

SIGNATURE OF RESPONSIBLE MEMBER OF ORGANIZATION

This form shall be signed by a responsible person from the company applying for the permit, rather than by the contractor working on the project. In addition, include a telephone number where this person can be contacted for additional information regarding this application.

NOTE: IF FORM 400-E-11 IS INCOMPLETE, THE APPLICATION WILL BE RETURNED