



City of St. Louis Department of Health
 Air Pollution Control
 1520 Market St. Room 4058
 Saint Louis, MO 63103

(314) 613-7300
FAX (314) 613-7275

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VAPOR RECOVERY SYSTEM CONSTRUCTION/OPERATING PERMIT APPLICATION

SECTION A - GENERAL APPLICATION INFORMATION

FACILITY NAME		COUNTY	
FACILITY STREET ADDRESS		CITY	STATE
		MAIL (ZIP) CODE	
FACILITY PHONE NO. ()	FACILITY DESIGNATED PERSON		DESIGNATED PERSONS PHONE NO. ()
OWNER'S NAME		OWNER'S PHONE NO. ()	
OWNER'S MAILING ADDRESS		CITY	STATE
		MAIL (ZIP) CODE	

SECTION B - TYPE OF APPLICATION (CHECK ALL APPROPRIATE BOXES)

Operating Permit:
 Initial
 Renewal
 Post Construction

Construction Permit:
 New Facility
 Existing Facility Modification/Reconstruction

Brief Description of the Planned Construction:

SECTION C - STAGE I INFORMATION

STAGE I SYSTEM TYPE (SPECIFY): Dual System Coaxial System

TANKS	PRODUCT TYPE	TANK SIZE	TANK TYPE	VAPOR LINE MANIFOLDED (YES OR NO)	UNDERGROUND (YES OR NO)
1					
2					
3					
4					

SECTION D - STAGE II INFORMATION

SYSTEM: BALANCE _____	NUMBER OF NOZZLES: _____
VACUUM ASSIST _____	NUMBER OF DISPENSERS: _____
OTHER (SPECIFY) _____	TYPE OF DISPENSERS: _____
	DISPENSER MODEL NO.: _____

SECTION E - APPLICANT'S CERTIFICATION STATEMENT

"I CERTIFY, BASED ON INFORMATION AND BELIEF FORMED AFTER REASONABLE INQUIRY, THE STATEMENTS AND INFORMATION IN THIS DOCUMENT ARE TRUE, ACCURATE AND COMPLETE. "

SIGNATURE OF RESPONSIBLE OFFICIAL OF FACILITY	DATE
TYPE OR PRINT NAME AND OFFICIAL TITLE OF SIGNER	TELEPHONE ()

This form is to be used for Operating and Construction Permits. A \$100.00 permit fee is to be submitted for each Construction and/or Operating Permit requested on this application. Checks should be made payable to the City of St. Louis. The check along with the original application and required diagrams, plans, certifications, etc. should be mailed or delivered to:

City of St. Louis Department of Health
Air Pollution Control
1520 Market St. Room 4058
Saint Louis, MO 63103

This Division will be the lead agency for all permits issued within the City of St. Louis. The St. Louis Regional Office of the Department of Natural Resources - Stage II Unit, will assist us in assuring compliance with State Rule 10CSR10-5.220. All permits issued through this Division will be Delivered or mailed to the facility owner. Copies of permits will be made available to contractors upon request.

Attach the following with your Construction Permit Application:

1. A complete site specific diagram and a thorough description of the planned construction.
2. Plumbing diagrams including vapor lines, vent lines, slope of return vapor lines, diameters of all lines, etc...
3. A list of all equipment being installed and current California Air Resources Board (CARB) Executive Order numbers for the proposed system and/or the modified system components.
4. Proof of underground storage tank registration and any other Missouri State permits that may apply.
5. Name of the contractor performing the work.

Attach- the following with your Operating Permit Application:

1. Plumbing diagrams including product lines, vapor lines, vent lines, slope of return vapor lines, diameters of all lines, etc...
2. Proof of underground storage tank registration and any other Missouri State permits that may apply.