Mojave Desert Air Quality Management District
Brad Poiriez, *Executive Director*
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Gasoline Dispensing Application Form

Remit **$302.00** with this document (***$172.00*** *for change of owner)*

PLEASE TYPE OR PRINT

Section 1: Owner information

a. Permit To Be Issued To (company name):			b. Federal Tax ID #:
c. Mailing/Billing Address (for above company name) *include city, state, and zip code*:			
d. Facility or Business License Name (for equipment location):			
e. Facility Address - Location of Equipment (if same as for company, enter "Same"):			Equip. Coordinates (lat/long):
f. Contact Name:	Title:	Email Address:	Phone:
General Nature of Business:			Company NAICS:
Type of Organization (check one): ☐ Individual Owner ☐ Partnership ☐ Corporation ☐ Utility ☐ Local Agency ☐ State Agency ☐ Federal l·ƎŜyŏè			

Section 2: Nature of application

Business Type: ☐ Retail ☐ Non-Retail Date Business was acquired:_____	
Application is for what type of permit: ☐ New Construction ☐ Modification ☐ Change of Owner	For modification or change of owner: _____Current Permit Number
Do you claim Confidentiality of Data? ☐ No ☐ Yes (attach explanation; specify which information provided is confidential)	

Section 3: Throughput information

Please Indicate Maximum Anticipated Throughput					
Existing Facility			***New Facility***		
☐ Gasoline all grades combined	☐ E85	☐ Other _____	☐ Gasoline all grades combined	☐ E85	☐ Other _____
☐ Use the existing permit limit ☐ Requesting throughput limit increase. New limit:			_____ Gallons per month _____ Gallons per calendar quarter		
_____ Gallons per month _____ Gallons per calendar quarter					

-For District Use only-

Application Number:	Invoice Number:	Permit Number:	Company/Facility Number:

Section 4: Equipment description

Storage Tanks									
Tank No.	Type		Capacity (gallons)	Tank Status		Fuel			
				New	Existing				
1	☐ Underground	☐ Aboveground	_____	☐	☐	☐ 87 ☐ 89 ☐ 91 ☐ E85	☐ Diesel	☐	
2	☐ Underground	☐ Aboveground	_____	☐	☐	☐ 87 ☐ 89 ☐ 91 ☐ E85	☐ Diesel	☐	
3	☐ Underground	☐ Aboveground	_____	☐	☐	☐ 87 ☐ 89 ☐ 91 ☐ E85	☐ Diesel	☐	
4	☐ Underground	☐ Aboveground	_____	☐	☐	☐ 87 ☐ 89 ☐ 91 ☐ E85	☐ Diesel	☐	

Underground Tanks - Phase I Vapor Recovery System - Gasoline or E85 only							
Phase I Manufacturer and CARB Executive Order			Phase I Description Check the applicable Box(s)	P/V Valve			
				No. of Tank Vents	No. of P/V Valves	Make	Model
☐ VR-101 Phil-Tite	☐ VR-102 OPW	☐ VR-103 EBW	☐ Secondarily Contained ☐ Direct Bury ☐ Remote ☐ Vapor Riser Offset ☐ Remote Additive Fill ☐ _____ ☐ Double Fill	_____	_____	_____	_____
☐ VR-104 CNI	☐ VR-105 Emco Wheaton	☐ VR-____					

Underground Tanks - Phase II Vapor Recovery System - Gasoline or E85 only							
Phase II Manufacturer and CARB Executive Order		No. of Nozzles		Processor Type	ISD		
		Existing	Additional or New		Make	Software version	
☐ VR-201 Healy NO ISD	☐ VR-202 Healy with ISD	Triple-Product: _____	Triple-Product: _____	☐ Healy CAS ☐ Hirt VCS100 ☐ Veeder-Root Vapor Polisher ☐ VST Green Machine ☐ VST Membrane ☐ _____	☐ INCON ☐ Veeder-Root	_____	☐ Exempt from ISD, the facility's annual actual gasoline throughput is less than 600,000 gallons
☐ VR-203 Balance NO ISD	☐ VR-204 Balance with ISD	Dual Product: _____	Dual Product: _____				
☐ VR-205 VST with Hirt VCS 100 NO ISD	☐ VR-208 Emco Wheaton with Hirt VCS 100 NO ISD	Single Product (grade and no.): _____	Single Product (grade and no.): _____				
☐ VR-207 Emco Wheaton with Hirt VCS 100 NO ISD	☐ _____	Diesel: _____	Diesel: _____				
☐ VR-209 VST with FFS CAS NO ISD	☐ _____						
Exempt from Phase II ☐ E85 Dispensing Facility ☐ 100% ORVR Fleet Facility ☐ Dispensing into non-motor vehicle tanks							

Aboveground Tanks - Gasoline or E85 only					
No.	Information	Standing Loss Compliance	Phase I Manufacturer and CARB Executive Order	Phase II CARB Executive Order	No. of Nozzles
1	Make: _____ Model: _____ Serial No.: _____	**The Tank is existing and it complies with VR-301:** ☐ Painted with certified paint; or ☐ The Tank is listed in VR-301 as certified. **The Tank is new and it complies with VR-302:** ☐ The Tank is listed in VR-302 as certified.	☐ VR-401 OPW ☐ VR-402 Morrison Brothers ☐ _____	**CARB Executive Order**_____ **Exempt from Phase II** ☐ **E85 Dispensing Facility** ☐ **100% ORVR Fleet Facility** ☐ **Dispensing into non-motor vehicle tanks**	Triple-Product: _____ Dual Product: _____ Single Product (grade and no.): _____ Diesel: _____

2	Make: _____ Model: _____ Serial No.: _____	**The Tank is existing and it complies with VR-301:** ☐ Painted with certified paint; or ☐ The Tank is listed in VR-301 as certified. **The Tank is new and it complies with VR-302:** ☐ The Tank is listed in VR-302 as certified.	☐ VR-401 OPW ☐ VR-402 Morrison Brothers ☐ _____	**CARB Executive Order_____** **Exempt from Phase II** ☐ **E85 Dispensing Facility** ☐ **100% ORVR Fleet Facility** ☐ **Dispensing into non-motor vehicle tanks**	_____
3	Make: _____ Model: _____ Serial No.: _____	**The Tank is existing and it complies with VR-301:** ☐ Painted with certified paint; or ☐ The Tank is listed in VR-301 as certified. **The Tank is new and it complies with VR-302:** ☐ The Tank is listed in VR-302 as certified.	☐ VR-401 OPW ☐ VR-402 Morrison Brothers ☐ _____	**CARB Executive Order_____** **Exempt from Phase II** ☐ **E85 Dispensing Facility** ☐ **100% ORVR Fleet Facility** ☐ **Dispensing into non-motor vehicle tanks**	_____

Section 5: Operation information

Contractor Name:	Address:	Phone:	Email:
_____	_____	_____	_____

Technician/Installer Name	ICC Certificate	Phase I Certificate
_____	_____	_____

Section 6: Receptor information

Distance (Feet) and direction to the property line of closest: _____Residence _____Business _____School

Name of Closest School (K-12)_____

Section 7: Certification

I hereby certify that all information contained herein is true and correct.

Name of Responsible Official	Official Title	Signature of Responsible Official	Date Signed
_____	_____	_____	_____

Phone:	Email:
_____	_____

Application submission instructions:

1) Submit completed application to Engineering@mdaqmd.ca.gov

2) Pay the corresponding application fee of $302 per permit for new or modified permit (or $172 for change of owner) via check or credit card.

Payment by check:
Make check payable to ***Mojave Desert AQMD***
Mail the check with a copy of this completed application to:
Mojave Desert AQMD
14306 Park Avenue
Victorville, CA 92392

Payment by credit card:
Pay online at **http://www.mdaqmd.ca.gov**
Click ***"Pay Fees"***
Please note: ***a surcharge applies for all credit card payments.***

3) If payment is made online via credit card, please email the receipt to Engineering@mdaqmd.ca.gov

Should you have any additional questions, please, do not hesitate to contact the permitting division at 760-245-1661, or via email at **engineering@mdaqmd.ca.gov**