Application for Permit Under the Pollution Prevention & Control Regulations 2000

Section A: General Information

1. Name and address of installation where activity is to be carried out

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…… Post Code……

Telephone No…….. Contact Name……

Position……

2. Name and address of applicant(s)

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…… Post Code……

Telephone No…….. Contact Name……

Position……

3. **Name and address of registered office (if applicable)** In the case of partnerships, names and home address of the partners.

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…… Post Code……

Telephone No…….. Contact Name……

Position……

4. Name of the ultimate holding company (if applicable)

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5. Address for correspondence if different from (1) above

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6. Enclose a map/plan with the application showing the location where the activity is/will be carried out. Where the activity is/will be carried out on only part of the premises please indicate the exact location on the plan enclosed.

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7. **Is the service station located under permanent living quarters or working areas?**

YES	NO

8. **When was vapour balancing equipment installed or when will it be installed?**

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Section B: Activity and Control Information

9. **Volume of petrol unloaded into the service station in each of the last three calendar years; in cubic metres (i.e. litres divided by 1000). Circle the appropriate band.**

YEAR	VOLUME OF PETROL/m^3			
	<100	100-500	501-1000	>1000
	<100	100-500	501-1000	>1000
	<100	100-500	501-1000	>1000

10. **Are deliveries "Driver Controlled"**

YES	NO

11. **At a maximum, how many tanker compartments discharge into storage tanks at any one time, or will do so once a vapour balancing system is in place. If the latter information is not known, a statement of what assessment will be made to determine this information and within what timescale. The information supplied under item 11 should be supplemented by a site specific assessment.**

    There will be no more than two tanker compartments discharging into storage tanks at any one time. The vapour return line is sized at 110mm or 75mm (enter correct size) which will provide an efficient vapour path back to the tanker and adequately cope with the flow of displaced vapour from the storage tanks.

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12. **Measures taken or to be taken for vapour emission control, both during unloading and in storage.**

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13. **Please attach process diagrams and plans of vapour balancing equipment (including height and location of tank vent pipes).**

14. **Unloading procedure and instructions (please attach)**

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15. **Details of Supervision, Training and Qualifications of Operating Staff (Details should be specific to on-site staff and include general statements concerning delivery drivers)**

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16. **Schedule of maintenance of vapour balancing controls (please attach)**

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17. **Schedule of examination and testing for vapour balancing controls (please attach)**

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18. **Procedures or contingency measures in the event of vapour containment equipment failure. (please attach)**

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You may also supply any other information you wish the Local Authority to take into account when considering your application.

I hereby certify that I am authorised to sign this application and all the information contained in this application is correct to the best of my knowledge and belief.

Name (BLOCK CAPITALS):……..

Signature:……..…… **Date:**……..

Designation:……

Fee attached (cheques payable to North Lincolnshire Council) £134.00