



|                 |      |        |       |
|-----------------|------|--------|-------|
| AGENCY USE ONLY | Date | Reg. # | NOC # |
|-----------------|------|--------|-------|

**For which of the following actions are you submitting this application:**

**Stage 1**

- ☐ Installation of gasoline storage tanks >1000 gallons capacity
- ☐ Replacement of existing gasoline storage tanks >1000 gallons capacity
- ☐ Replacement of all spill buckets, all drop tubes, or all adaptors

**Stage 2**

- ☐ Installation of gasoline dispensers (increasing the total number)
- ☐ Replacement of all existing dispensers (including 6-pack to uni-hose conversions)
- ☐ Removal of the Stage 2 vapor recovery system

**Business Information**

|                                                      |                                       |        |  |
|------------------------------------------------------|---------------------------------------|--------|--|
| Facility Name (as it appears on outside of building) | Annual Gasoline Throughput (gal/year) |        |  |
| Facility Address (incl. city, state, zip)            |                                       |        |  |
| Facility Contact                                     | Phone #                               | Cell # |  |
| Company Name                                         | E-mail                                |        |  |
| Mailing Address (incl. city, state, zip)             |                                       |        |  |

**Installer Information**

|                                                           |                   |
|-----------------------------------------------------------|-------------------|
| Company                                                   | Contact           |
| Phone #                                                   | Installation Date |
| Installer's Name (needs ICC vapor recovery certification) |                   |

**Applicant Information**

|                                                                                                                                                   |                  |       |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-------|--|
| Company Name                                                                                                                                      | Applicant's Name |       |  |
| Mailing Address (incl. city, state, zip)                                                                                                          |                  |       |  |
| Phone #                                                                                                                                           | E-mail           | Fax # |  |
| I, the undersigned, do hereby certify that the information in this Notification is, to the best of my knowledge, truthful, accurate and complete. |                  |       |  |
| Signature                                                                                                                                         |                  | Date  |  |

**Your application must be accompanied by a \$500 filing fee. To pay by credit card, check here ☐ and an accounting technician will contact you.**

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| <b>TANK CAPACITIES &amp; PRODUCTS STORED</b><br><br>Tank 1: _____ gal _____<br>Tank 2: _____ gal _____<br>Tank 3: _____ gal _____<br>Note if split tank _____ Regular/Midgrade/Premium/Diesel _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <b>UNDERGROUND STORAGE TANK STAGE 1 SYSTEMS</b><br><br><input type="checkbox"/> Phil-Tite System w/E-85 Components (VR-101-*)<br><input type="checkbox"/> OPW System (VR-102-*)<br><input type="checkbox"/> EBW System (VR-103-*)<br><input type="checkbox"/> CNI System (VR-104-*)<br><input type="checkbox"/> EMCO Wheaton System (VR-105-*)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| <b>ABOVE GROUND STORAGE TANK STAGE 1 SYSTEMS</b><br><br><input type="checkbox"/> OPW System (VR-401-*)<br><input type="checkbox"/> Morrison Bros. System (VR-402-*)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <b>DISPENSER MAKE &amp; MODEL</b><br><br><input type="checkbox"/> Gilbarco Encore (not for G-70-52-AM)<br><input type="checkbox"/> Wayne Ovation<br><input type="checkbox"/> Wayne Vista HS<br><input type="checkbox"/> Other, specify _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| <b>NUMBER OF DISPENSERS</b><br><br>Gasoline _____ Gasoline+Diesel _____ Diesel only _____<br><br><b>NUMBER OF NOZZLES</b><br><br>Gasoline _____ Diesel _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>VACUUM-ASSIST STAGE 2 SYSTEMS &amp; NOZZLES</b><br><br>Healy ORVR-Compatible System (G-70-191-AA)<br><input type="checkbox"/> Healy 900<br><br><i>The following systems require vapor processors</i><br>WayneVac System w/Arid Permeator (G-70-209)<br>(Requires Wayne Vista dispenser)<br><input type="checkbox"/> Catlow ICVN<br><input type="checkbox"/> Richards Astrovac<br><input type="checkbox"/> Husky V34 6250<br><input type="checkbox"/> OPW 12VW<br><input type="checkbox"/> EMCO Wheaton A4505<br><br>Hirt VCS400-7 System (G-70-177-AA)<br><input type="checkbox"/> OPW 11VA-29<br><br><b>VACUUM-ASSIST EVR SYSTEMS &amp; NOZZLES</b><br><br>Healy EVR System w/Clean Air Separator (VR-201-*)<br><input type="checkbox"/> Healy 900<br><br>Healy EVR System w/Clean Air Separator & ISD (VR-202-*)<br><input type="checkbox"/> Healy 900 |
| <b>VAPOR BALANCE STAGE 2 SYSTEMS &amp; NOZZLES</b><br><br>Pre-EVR Balance System (G-70-52-AM)<br><input type="checkbox"/> EMCO Wheaton A4005 or RA4005<br><br><b>VAPOR BALANCE EVR SYSTEMS &amp; NOZZLES</b><br><br><i>The following systems DO NOT require vapor processors but do require EVR hanging hardware</i><br><input type="checkbox"/> I am not installing a vapor processor<br>VST EVR System w/VST Membrane, Veeder Root Vapor Polisher, FFS, VCS 100 or VST Green Machine, (VR-203-*)<br><input type="checkbox"/> VST-EVR-NB or VST-EVR-NB-R<br><input type="checkbox"/> Enviroloc<br><br>VST EVR System w/Clean Air Separator (VR-209-*)<br><input type="checkbox"/> VST-EVR-NB or VST-EVR-NB-R<br><input type="checkbox"/> Enviroloc<br><br>VST EVR System w/Hirt Oxidizer (VR-205-*)<br><input type="checkbox"/> VST-EVR-NB or VST-EVR-NB-R<br><input type="checkbox"/> Enviroloc<br><br>EMCO Wheaton EVR System w/Hirt Oxidizer (VR-207-*)<br><input type="checkbox"/> EMCO Wheaton A4005EVR or RA4005EVR<br><br>VST EVR System w/ISD and VST Membrane, Veeder Root Vapor Polisher, or Clean Air Separator (VR-204-*)<br><input type="checkbox"/> VST-EVR-NB or VST-EVR-NB-R<br><input type="checkbox"/> Enviroloc<br><br>EMCO Wheaton EVR w/Hirt Oxidizer & ISD (VR-208-*)<br><input type="checkbox"/> EMCO Wheaton A4005EVR or RA4005EVR<br><br><hr/> <b>Executive Orders for Stage 1 and 2 Vapor Recovery Systems:</b> <a href="https://ww2.arb.ca.gov/our-work/programs/vapor-recovery/vapor-recovery-executive-orders">https://ww2.arb.ca.gov/our-work/programs/vapor-recovery/vapor-recovery-executive-orders</a> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |