



MISSOURI DEPARTMENT OF NATURAL RESOURCES
 ST. LOUIS REGIONAL OFFICE
**VAPOR RECOVERY SYSTEM CONSTRUCTION/OPERATING
 PERMIT APPLICATION**

FOR OFFICE USE ONLY	
CHECK NO.	CHECK RECEIVED
CHECK AMOUNT \$	CHECK DATE
F CODE	

See instructions for additional items to submit with this form.

FACILITY INFORMATION

FACILITY NAME		COUNTY	
FACILITY STREET ADDRESS		CITY	STATE ZIP CODE
FACILITY TELEPHONE NUMBER WITH AREA CODE	FACILITY DESIGNATED PERSON		DESIGNATED PERSON TELEPHONE NUMBER WITH AREA CODE
OWNER NAME		OWNER TELEPHONE NUMBER WITH AREA CODE	
OWNER MAILING ADDRESS		CITY	STATE ZIP CODE

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

STAGE I INFORMATION

Specify Stage I System Type: Dual System Coaxial System

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

STAGE II INFORMATION

Specify Stage II System Type: Balance Vacuum Assist Other (Specify) _____

No. of Nozzles _____ Dispenser Model Number _____ No. of Dispensers _____ Type of Dispensers _____

APPLICANTS 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	DATE
TYPE OR PRINT NAME AND OFFICIAL TITLE	TELEPHONE NUMBER WITH AREA CODE

INSTRUCTIONS

This form is to apply for Gasoline Vapor Recovery Operating and Construction Permits for facilities in Jefferson, Franklin, and St. Charles Counties. A \$100 permit fee is to be submitted for each Construction or Operating Permit requested by this application. Checks should be made payable to the Missouri Department of Natural Resources. The check along with the original application signed by a facility representative and required diagrams, plans, certification, etc., should be mailed or delivered to:

Missouri Department of Natural Resources
c/o Vapor Recovery Unit Chief
7545 So. Lindbergh, Suite 210
St. Louis, MO 63125

All permits issued through the St. Louis Regional Office will be mailed to the facility representative who signed the application. Copies of permits will be made available to contractors upon request.

Attach the following with your Construction Permit Applications

1. A complete site specific diagram and a thorough description of the planned construction.
2. Plumbing diagrams including product lines, vapor lines, vent lines, slope of vapor return lines, diameters of all lines, etc.
3. A list of all equipment being installed and current California Air Resources Board, or CARB, Executive Order numbers for the proposed system or components.
4. A list of the Missouri Petroleum Equipment Test Procedures, or MOPETP, Approval numbers.
5. A copy of the Designated Employee Certificate for the facility.
6. Proof of underground storage tank registration and any other Missouri State permits that may apply.
7. Name of the contractor performing the work.

Attach the following with your Operating Permit Applications

1. Plumbing diagrams including product lines, vapor lines, vent lines, slope of vapor return lines, diameter of all lines, etc.
2. A copy of the Designated Employee Certificate for the facility.
3. Proof of underground storage tank registration and any other Missouri State Permits that may apply.