GASOLINE DISPENSING FACILITY

PERMIT APPLICATION INSTRUCTIONS FOR

CONSTRUCTION & OPERATION OF STAGE I (ONE) EVR VAPOR RECOVERY SYSTEMS

General Information:

This application must be completed accurately and in its entirety. Provide all Facility, Owner, and Contractor information requested. If you have already installed Stage I EVR controls and are currently permitted, please indicate such under current status. Receipt of a completed construction permit application shall serve as 60 days' notice for the Department's review and approval process. (In the event of an incomplete or otherwise inaccurate application, the 60-day review process will begin when the Department has *all* the required information.) However, construction must *not* begin before the permit is issued.

Construction Permit Application:

This section is to be completed, submitted to the Department and a construction permit issued PRIOR to starting construction. The tank owner must sign the completed application.

For each gasoline tank on site, be sure to indicate the following: (numbers correspond to required information on permit application)

- 1. The tank ID# as it appears on the UST registration certificate or AST registration form.
- 2. List grade of gasoline (2a) and tank capacity in gallons (2b)
- 3. Is the fill tube positioned no more than 6" from the tank bottom? Enter YES or NO
- 4. Describe the type of overfill protection used for the tank system, i.e., float vent valve, fill line restrictor, high level alarm or other approved device.
- 5. If there is more than one tank at the site, indicate whether or not the vent lines are manifolded together.
- 6. On a separate sheet, list tanks and ID #s that are manifolded and diagram the vent and vapor configuration.
- 7. Indicate whether the vapor and fill connections are standard or swivel type.
- 8. Indicate whether there is a remote fill and/or remote vapor connection. NOTE: Float vent valves cannot be used with remote fill and/or vapor configurations.
- 9. Complete the equipment table.

Sign and date the application and return the form along with the construction permit fee of \$120 made payable to the *State of Delaware* to:

DNREC-DWHS-TMS 391 Lukens Drive New Castle, DE 19720

In addition, Vapor Recovery Regulations require the advertisement of virgin sites in local newspapers. There will be an additional \$250 fee assessed to recover DNREC's cost of the required advertising.

Upon approval by the Department, you will receive a Construction Permit and a copy of your application at which time installation of the Stage I EVR Vapor Recovery system may begin. *Save this copy of your permit application*. You will need to resubmit it as the operating permit application.

Operating Permit Application:

Complete this section and mail to the TMS *after* construction is finished but **PRIOR** to beginning operations. The construction permit serves as a temporary operating permit for up to sixty (60) days after completion of testing to allow time for the operating permit to be processed and issued. You will be billed for the annual \$75 operating permit fee during our annual tank registration fee billing cycle. Upon approval by the Department an Operating Permit will be issued. This permit will be automatically renewed upon payment of the annual \$75 fee.

PermitAmendments:

When any changes are planned to the system that will change the equipment listed in the current application and operating permit, a new construction permit application must be completed and an amended permit received BEFORE the new equipment can be installed. Submission of the Vapor Recovery Notification form will help make this determination. An amended operating permit application must also be submitted after installation of the new equipment is completed. Note: any installation of equipment not specified in the current permit constitutes a permit violation and could be subject to enforcement action by the Department.



Department of Natural Resources and Environmental Control Tank Management Section 391 Lukens Drive New Castle, DE 19720 302-395-2500 (phone) 302-395-2555 (fax) www.dnrec.delaware.gov/Tanks/

STAGE I EVR VAPOR RECOVERY SYSTEM CONSTRUCTION AND OPERATING PERMIT APPLICATIONS

File Code 04

A permit is required to construct and operate a Stage I EVR Vapor Recovery System if you dispense or have dispensed more than 10,000 gallons (total of all grades) of gasoline in any one month after November 15, 1990. This application must be completed, returned to the Department and will serve as 60 days' notice for the Department's review and approval process. You must include a construction permit fee of \$120.00 per facility with this application made payable to the State of Delaware.

1. FACIL	LITY INFORMA	TION					
Facility I	D#:		_Select one: 🖌 UST 📃 AST				
Name: Wa	wa Food Market #881		Street: 1105 Elkton Road				
City: Newark Zip: 19711			County: New Castle				
Phone: Fax:			Email:				
2. UST 0	WNER INFORM	MATION					
Name/Co	rporation: Wawa, Ir	ıc.	Contact, if not named above: Paul Beu				
Street: 260	Street: 260 W. Baltimore Pike			_City: <u>Wawa</u> State: <u>PA</u> Zip: <u>19063</u>			
Phone: (67	10)361-3839	Fax:	Email: paul.beu@wawa.com				
3. CONT	RACTOR INFO	RMATION					
Co. Name	: Monridge Constructio	n	Contact Name: Jim Lai				
DE Certif	DE Certification #: B6147			Street: 386 Parkmount Rd.			
City: Glen	City: Glen Riddle			_Zip: 19063			
Phone: 61	0-558-4744	Fax: 610-558-4748	_Email: monridge2	@aol.com			
4. CURR	ENT PERMIT S	TATUS					
Stage I:	Yes 🖌 I	No If yes, Permit 7	#	Date:			
Estimated	l Start Date: 10/1/2			APPLICATION stimated Completion	on Date: <u>12/1/2023</u>		
Tank ID#	Grade of Gas	Capacity (Gallons)	Fill-Tube Wi	thin 6" of Bottom	Type of Ov	erfill Protection	
(1)	(2a)	(2b)		(3)	(4)		
1	Premium	10,000		Yes	90% a;arm & 959	90% a;arm & 95% flapper on drop tube	
2	Regular	20,000		Yes	90% a;arm & 95% flapper on drop tube		
4	Regular	12,000		Yes	90% a;arm & 95% flapper on drop tube		
5	Regular	12,000		Yes	90% a;arm & 95% flapper on drop tube		
	utive Order #: (5) nt and vapor line	VR-102-U s manifolded? (6)		Yes:	No:]	
List I.D. #s	of tanks that are	manifolded (7) and dia	gram the piping	configuration on s	eparate sheet: Dra	awing	
Vapor and fill connection type (8) Standard: Swivel:						<u>-</u>	
s there a rea	mote fill and/or r	emote vapor connectio	on? (9) Yes	: 🗌 N	lo: 🖌		

Is there a remote fill and/or remote vapor connection? (9)

(Continued on P. 2)

Equipment Information: (10)							
Component	Manufacturer	Model					
Fill Tube	Franklin Fueling	708592901					
Fill Adaptor	OPW	61SALP-1020-EVR					
Vapor Adaptor	OPW	61VSA-1020-EVR					
Vapor Cap	OPW	1711 LPC-0300					
Fill Cap	OPW	634LPC-0400					
ATG/Interstitial Cap & Adaptor	Morrison Bros.	305XPA1100AKEVR					
Spill Container	OPW	1C-31502P					
Vapor Container	OPW	1C-3202P					
Extractor	OPW	233					
Pressure/VacuumValve	OPW	723V-3203					
I, (Print Name) Paul Beu have reviewed the above application and confirm my application for a Stage I EVR Vapor Recovery Permit with my signature below.							
Signature of Tank System Owner: Paul Beu Digitally signed by Paul Beu Date: 2023.05.03 15:56:01 -04'00' Date: 6/22/2023							

OPERATING PERMIT APPLICATION

DO NOT SIGN UNTIL CONSTRUCTION IS COMPLETED.

Complete this section **AFTER** the installation and post-construction testing. The Construction Permit serves as a temporary Operating Permit for up to sixty (60) days after completion of the testing. During the 60 days, the Operating Permit must be applied for and received. The complete Operating Permit application includes the signed application, post-construction tests, soils analysis, and soils disposition as specified in the construction permit.

I, (Print Name)_______certify under penalty of law that the installed Stage I EVR Vapor Recovery System conforms to all the conditions listed in the construction permit.

Signature of Owner:		Date:		
For Official Use Only				
Date Received:	Ck. Amt	Ck. #	Bank #	
Construction Permit Number:		Date Issu	ıed:	
Date Operating Permit Application	n Received:			
Operating Permit Number:		Date Issu	led:	

Rev. 01/24/2017

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