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**RDA 1298** 

APR 2.7 2006



NOT TO BE USED FOR

## DEPARTMENT OF ENVIRONMENT & CONSERVATION AIR POLLUTION CONTROL 401 CHURCH STREET, L & C ANNEX NASHVILLE, TN 37243-1531

PERMIT APPLICATION FOR STAGE I AND STAGE II VAPOR RECOVERY TITLE V APPLICATIONS FOR APC USE ONLY: COUNTY COMPANY POINT # 6 LOG/PERMIT# **APC 150** 1. FACILITY NAME OWNER'S NAME BreadBox Stores. SITE ADDRESS (ST/RD) MAILING ADDRESS (ST/RD/P.O. BO Rona CITY, STATE, ZIP CITY, STATE, ZIP CO 37849 37950 TELEPHONE NUMBER TELEPHONE NUMBER 945-1213 CLAIMING INDEPENDENT SMALL BUSINESS (I. S. B.) MARKETER OF GASOLINE AS STATED IN RULE 1200-3-18-.24(2) NO IF YES, SUBMIT NOTARIZED CERTIFICATION STATING THAT BUSINESS SATISFIES THE I.S.B. DEFINITION CRITERIA FOUND IN 1200-3-18-.24(2) AND PROVIDE THE FOLLOWING INFORMATION: OWNER'S ANNUAL INCOME FROM REFINING OR MARKETING OF GASOLINE N/A OWNER'S TOTAL ANNUAL INCOME N/A NUMBER, GAS TYPE, CAPACITY, TYPE OF TANK - ABOVEGROUND (AG) UNDERGROUND (UG), INSTALLATION DATE TANK # **GAS TYPE** SIZE TANK TYPE INST. DATE TANK # GAS TYPE INST. DATE TANK TYPE Unleaded 10,000 GAL GAL AG / UG 10 000 GAL 5 GAL AG / UG AG /(UG) GAL AG / UG 4. TOTAL NO. GASOLINE NOZZLES N/A MAKE N/A MODEL N/A GASOLINE DISPENSER MAKE. N/A MODEL N/A TYPE OF STAGE I SYSTEM (CARB EXECUTIVE ORDER) **INSTALLATION DATE** TYPE OF STAGE II SYSTEM (CARB EXECUTIVE ORDER) INSTALLATION DATE N/A TYPE OF PRESSURE/VACUUM VENT VALVE (IF INSTALLED) MAKE OPW 523 Series MODEL 69,058 MAXIMUM MONTHLY THROUGHPUT AVERAGE YEARLY THROUGHPUT 828,696 GAL. 10. MINIMUM SLOPE OF STAGE II VAPOR RETURN LINES FROM DISPENSERS TO UNDERGROUND TANKS N/A INCHES PER FOOT 11. TYPE OF PERMIT REQUESTED CONSTRUCTION STARTING DATE COMPLETION LAST PERMIT NUMBER EMISSION SOURCE REFERENCE NUMBER DATE **OPERATING** DATE CONSTRU-DATE COMPLETED LAST PERMIT NUMBER EMISSION SOURCE REFERENCE NUMBER **CTION STARTED** 989 001 12. SUPPLIER OF GASOLIN COMPANY NAME GMPANY Paul Smith CONTACT NAME  $McR_{i}$ ADDRESS 10904 mc Bride **ADDRESS** 379**5**2 3793 Z PHONE NUMBER 865) 177-2162 PHONE NUMBER 13. SIGNATURE OF APPLICANT DATE 04/24/06 14. SIGNER'S NAME (TYPE OR PRINT TITLE PHONE NO. WITH AREA CODE/865) CONSTRUCTION/ENVIYONHEUTA Supervisor CN-1001 (Rev. 02/06)

STATE OF TENNESSEE
DEPARTMENT OF ENVIRONMENT AND CONSERVATION
DIVISION OF AIR POLLUTION CONTROL

NOT TO BE USED FOR TITLE V APPLICATIONS



JULION CONTRIGE

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9th Floor, L & C Annex 401 Church Street Nashville, TN 37243-1531 Telephone: (615 ) 532-0554 FAX: (615 ) 532-0614

## PERMIT APPLICATION

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PLEASE TYPE OR	PRINT AND SUBMI	I IN DUPLICATE FO	R EACH EMISSIO	N SQU	JRCB ATTACH, APPROPRIATE SOURCE
DESCRIPTION FOR				ĵ.	CENTER
1. ORGANIZATION'S LEGAL NAME				///	APC COMPANYPOINT NO.
BreadBox Food Stores, Ivc.			F	FOR	01-0301-01
2. MAILING ADDRESS (ST/RD/P.O. BOX)				111	APC LOG/PERMIT NO.
From Box.		F	APC	39483	
CITY		STATE	ZIP CODE		PHONE WITH AREA CODE
Knoxville		TN 37950			(865) 777-2162
3. PRINCIPAL TECHNICAL CONTACT					PHONE WITH AREA CODE
Gary had		(865)		(865) 777-2162	
4. SITE ADDRESS (ST/RD/HWY)			The state of the s		COUNTY NAME
BreadBox#33, 601 Edgernoor Rd.			Anderson		Anderson
CITY OR DISTA	NCE TO NEAREST TO		ZIP CODE PHO		PHONE WITH AREA CODE
Powell, TI			37849 (86		(&5) 945-1213
5. EMISSION SOURCE NO. (NUMBER WHICH UNIQUELY PERMIT RENEWAL					
IDENTIFIES THIS SOURCE) YES ( ) NO (					) NIA
6. BRIEF DESCRI	PTION OF EMISSION	SOURCE			
o. DRIEF DESCRI	TION OF EMISSION	SOURCE			*
Stage I Vapor Recovery for gasoline storage tanksPollution Reduction Device Code 047					
	, ,				SCOTTON DE GALLES DE CALLES DE CONTROLLES DE LA CONTROLLE
					,
	5)				
7. TYPE OF PERM	IIT REQUESTED				
			PLETION LAST PERMIT		EMISSION SOURCE REFERENCE NUMBER
	DATE		NUMBER		
( )					
OPERATING	DATE CONSTRU-	DATE COMPLETED	LAST PERMIT		EMISSION SOURCE REFERENCE NUMBER
$(\checkmark)$	CTION STARTED	1989	NUMBER J	A	001
LOCATION	TRANSFER DATE	<u> </u>	LAST PERMIT		EMISSION SOURCE REFERENCE NUMBER
TRANSFER	SFER NUMBER		NUMBER		Via to
( )			<u> </u>		
ADDRESS OF LA	AST LOCATION				
8. DESCRIBE CHA	NCECTUAT HAVE D	PEN MADE TO THIS	FOURDMENT OF O	DFD A'	TION SINCE THE LAST CONSTRUCTION OR
	ERMIT APPLICATION		EQUIPMENT OR O	I EKA	HON SINCE THE EAST CONSTRUCTION OR
(2)					27 E
9. SIGNATURE (A	PPI ICATION MIIST B	E SIGNED REFORE IT V	WILL BE PROCESSE	3D)	DATE
9. SIGNATURE (APPLICATION MUST BE SIGNED BEFORE IT WILL BE PROCESSED)					Section Control of the Control of th
Day radd					04/24/06
10. SIGNER'S NAME (TYPE OR PRINT) TITLE					PHONE WITH AREA CODE
GARY LADD CONSTRUCTION SUPERVISOR					(865) 777-2162
<u> </u>	- i wel	T CHS [N	100 WIGH	1-140/	
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