

Part B Application Form

Application for a Variation Stage II Petrol Vapour Recovery

**Local Authority Pollution Prevention and Control
Pollution Prevention and Control Act, 1999
Environmental Permitting (England and Wales) Regulations 2010**

Introduction

When to use this form

Use this form if you are applying to Wandsworth Council for a variation to your existing permit to reflect the upgrading to Stage II Petrol Vapour Recovery. The permit is to operate a 'Part B' petrol vapour recovery installation (e.g. Petrol Stations) as defined in Schedule 1 of the Environmental Permitting (England and Wales) Regulations 2010.

Which parts of the form to fill in

You should fill in as much of this form as possible. No fee will be charged for the variation as stage II vapour recovery improves the environmental performance of the installation.

When complete return to:

Environmental Protection Team, Public Health Division, Wandsworth Council, The Town Hall,
Wandsworth High Street, London SW18 2PU

LAPPC application form: to be completed by the operator

For Local Authority use		
Application reference	Officer reference	Date received

A1 Applicant details

A1.1 Name of the installation

A1.2 Please give the address of the site of the installation

Postcode

Telephone

The Ordnance Survey national grid reference *8 characters*,
for example, *SJ 123 456* (can be obtained from typing postcode into one of the on-line mapping sites).

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A1.3 Existing permits:

Please give details of any existing LAPPC or LA-IPPC authorisation for the installation, or any waste management licences or water discharge consents, including reference number(s) and type(s):

Please provide the information requested below about the "Operator", which means the person who it is proposed will have control over the installation in accordance with the permit (if granted)

A2 Who can we contact about your application?

It will help to have someone who we can contact directly with any questions about your application. The person you name should have the authority to act on behalf of the operator - This can be an agent or consultant.

Name _____

Position _____

Address _____

Postcode _____

Telephone number _____

Fax number _____

email address _____

B1 When was the stage II Vapour collection equipment installed or when will it be installed?

B1.2 What type of stage II vapour recovery system is / will be installed. Please tick

Open Active Vapour Recovery	<input type="checkbox"/>
Active Recovery	<input type="checkbox"/>
Passive Vapour Recovery	<input type="checkbox"/>

B1.3 Is an automatic monitoring system installed / going to be installed.

- No (Please tick)
- Yes

An automatic monitoring system continuously monitors hydrocarbon capture efficiency; this should be between 85% and 115% to indicate there are no faults. If no continuous monitor is installed then a test measuring hydrocarbon capture efficiency will need to be undertaken annually. If a monitor is installed then a test for hydrocarbon capture is required every 3 years.

B1.4 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 in M ³			
	<100	100-500	501-1000	>1000
	<100	100-500	501-1000	>1000
	<100	100-500	501-1000	>1000
	<100	100-500	501-1000	>1000

B1.5 Are deliveries “Driver controlled”?

No (Please tick)
 Yes

B1.6 At a maximum, how many tanker compartments discharge into storage tanks at any one time, or will do so once a vapour collection system is in place?

B1.7 Are diesel storage tanks connected to the vapour balance system?

No (Please tick)
 Yes

B1.8 Please attach process diagrams and plans of vapour collection equipment (including height and location of tank vent pipes, and general site layout).

Doc Reference: _____

B2 Details of supervision, Training and Qualifications of Operating Staff (Details should be specific to “On Site” staff and include general statements about delivery drivers).

(attach further sheets if required). Doc Reference: _____

B3 Schedule of maintenance of vapour collection control.

(attach further sheets if required). Doc Reference: _____

B3.1 Schedule of examination and testing for vapour collection controls.

(attach further sheets if required). Doc Reference: _____

B3.2 Procedures and contingency measures in the event of vapour containment equipment failure.

(attach further sheets if required). Doc Reference: _____

C4 Declaration

C4.1 Signature of current operator(s)*

I/We certify that the information in this application is correct. I/We apply for a permit in respect of the particulars described in this application (including supporting documentation) I/We have supplied.

Please note that each individual operator must sign the declaration themselves, even if an agent is acting on their behalf.

For the application from:

Installation name: _____

Signature _____

Name _____

Position _____

Date _____

Signature _____

Name _____

Position _____

Date _____

** Where more than one person is defined as the operator, all should sign. Where a company or other body corporate – an authorised person should sign and provide evidence of authority from the board of the company or body corporate.*