

**TENDRING DISTRICT COUNCIL**

**VAPOUR RECOVERY APPLICATION FORM**

**POLLUTION PREVENTION AND CONTROL (ENGLAND AND WALES)  
REGULATIONS 2000, SI 2000/1973  
POLLUTION PREVENTION AND CONTROL ACT 1999**

1. Name and address of premises where process is/will be carried out:

.....  
..... Post Code .....  
Telephone No. .... Contact Name .....  
Position .....

2. Name and address of applicant (s)

.....  
..... Post Code .....  
Telephone No. .... Contact Name .....  
Position .....

3. Name and address of registered office (if applicable). In the case of partnerships, name and home addresses of partners.

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.....  
Telephone No. .... Contact Name .....

4. Name of the ultimate holding company (if applicable).

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5. Address for correspondence if different from (1) above

.....  
..... Post Code .....

6. Enclose a map/plan with the application showing the location where the process is/will be

carried out. Where the process is/will be carried out on only part of the premises, please indicate the exact location on the plan enclosed

7. Is the service station located under permanent living quarters or working areas?

YES  NO

8. When was vapour-balancing equipment installed or when will it be installed?

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9. 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). Tick the appropriate band.

YEAR	VOLUME OF PETROL/M <sup>3</sup>			
	< 100 <input type="checkbox"/>	100 – 500 <input type="checkbox"/>	501 – 1000 <input type="checkbox"/>	> 1000 <input type="checkbox"/>
	< 100 <input type="checkbox"/>	100 – 500 <input type="checkbox"/>	501 – 1000 <input type="checkbox"/>	> 1000 <input type="checkbox"/>
	< 100 <input type="checkbox"/>	100 – 500 <input type="checkbox"/>	501 – 1000 <input type="checkbox"/>	> 1000 <input type="checkbox"/>

10. Are deliveries “Driver Controlled”?

YES  NO

11. At a maximum, how many tanker compartments discharge into storage tanks at any one time, or will do so once a vapour balancing system is in place.? If the latter information is not known, a statement of the assessment will be made to determine this information and within what timescale. The information supplied under this item should be supplemented by a site specific assessment.

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12. Measures taken or to be taken for vapour emission control, both during unloading and in storage.

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13. Please attach process diagrams and plans of vapour balancing equipment (including height and location of tank vent pipes).

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14. Unloading procedure and instructions (please attach).

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15. Details of Supervision, Training and Qualifications of Operating Staff. (Details should be specific to on-site staff and include general statements concerning delivered drivers).

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- 16. Schedule of maintenance of vapour balancing controls. (Please attach).
- 17. Schedule of examination and testing for vapour balancing controls. (Please attach).
- 18. Procedures of contingency measures in the event of vapour containment equipment failure. (Please attach).

You may also supply any other information you wish this Authority to take into account when considering your application.

Fee attached (cheques to be made payable to Tendring District Council). When completed, please return this form together with the appropriate fee to:

Environmental Services  
Tendring District Council  
Council Offices  
Weeley  
CLACTON-ON-SEA  
Essex CO16 9AJ

I hereby certify that I am authorised to sign this application and all the information contained in this application is to the best of my knowledge correct.

Name (BLOCK CAPITALS) .....

Signature ..... Date .....

Designation .....