

**ALABAMA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT  
AIR DIVISION  
GASOLINE DISPENSING FACILITY INFORMATION**

---

1. STATION INFORMATION:      NEW      EXISTING (unpermitted)

EXISTING: Air Permit #: \_\_\_\_\_

Name: \_\_\_\_\_

Owner: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ County: \_\_\_\_\_

2. GASOLINE TANK OWNER INFORMATION (if different):

Contact: \_\_\_\_\_

Owner: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ email: \_\_\_\_\_

3. STATION THROUGHPUT:

Report the volume (in gallons) of **gasoline delivered** to this facility for the past 12 months or if recently opened, please provides available monthly throughputs to date:

January: _____ gals	July: _____ gals
February: _____ gals	August: _____ gals
March: _____ gals	September: _____ gals
April: _____ gals	October: _____ gals
May: _____ gals	November: _____ gals
June: _____ gals	December: _____ gals

4. Please list all trucking companies used in the past 12 months: \_\_\_\_\_

5. Date of initial construction: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_