

TEHAMA COUNTY AIR POLLUTION CONTROL DISTRICT

P.O. BOX 1169 RED BLUFF, CA 96080
Phone: (530) 527-3717 Fax: (530) 527-0959

SERVICE STATION REQUEST FORM

TEHAMA COUNTY APCD PERMIT NUMBER: _____

Site Name: _____ Phone No.: _____

Site Owner/Operator: _____

Gasoline Product Supplier: _____

Station Operating Schedule: hrs/day: _____ days/wk: _____ wks/yr: _____

Total sales volume (gallons) for all gasoline products sold for the above stated year (annual throughput): _____

If operating Bulk Plant: Cardlock amount: _____ Bulk delivery: _____

Billing address: _____

Company: _____

Contact: _____

Address: _____

City: _____, State: _____ Zip: _____

Failure to submit, or falsification of data is a violation of the California Health and Safety Code and may result in a civil penalty.

Signature: _____

Date: _____