



1600 South Second Street
 Mount Vernon, WA 98273-5202
 ph 360-428-1617
 fax 360-428-1620
 info@nwcleanairwa.gov
 www.nwcleanairwa.gov

Application for General Order of Approval GO 003: Gasoline Dispensing Facilities

I: INSTRUCTIONS

This Application applies to gasoline dispensing facilities that are located within the jurisdiction of the Northwest Clean Air Agency (Island, Skagit, and Whatcom Counties, excluding tribal lands). To apply for coverage under this General Order of Approval GO 003, complete this application and submit it to the NWCAA. Coverage under this General Order is in lieu of submitting a Notice of Construction Application as required under Section 300 of the NWCAA Regulation.

- Read the General Order of Approval GO 003. You can find it online at <http://www.nwcleanairwa.gov>, or call (360) 428-1617 for a copy.
- Fill out this application completely, sign and date it.
- Enclose a check for \$904 made out to the Northwest Clean Air Agency for the application fee.

SECTION A. Company information (required):

Facility name: _____	Contact person: _____
Facility owner: _____	Phone No.: _____
Facility address: _____	Phone No.: _____
City: _____ State: _____	Zip: _____
Billing address: _____	Phone No.: _____
City: _____ State: _____	Zip: _____

SECTION B. New or modified gasoline dispensing facility:

Only California Air Resource Board (CARB) approved equipment will be authorized for use.

Stage I Control Method

Equipment manufacturer & part number	
Drop tube _____	Does product drop tube extend to within 6 inches from the tank bottom? <input type="checkbox"/> Yes <input type="checkbox"/> No
Vapor adaptor _____	Number of underground storage tanks: _____
Vapor cap _____	Total gasoline storage capacity: _____
CARB executive order: _____	
Estimated annual throughput: _____	

Estimated project completion date: _____

Applicant name (print/type): _____

Title: _____

Applicant signature _____

Date _____

NWCAA Office Use Only

Fee received: _____	New source? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date received: _____	If yes: <input type="checkbox"/> Added to Stratus database	
Receipt No.: _____	<input type="checkbox"/> Created digital folder	
Stage II not required (WAC 173-491-040(5)) <input type="checkbox"/> Yes <input type="checkbox"/> No		