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BULK GASOLINE PLANT AIR GENERAL PERMIT REGISTRATION FORM

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Part II. Notification to Permitting Office

(Detach and submit to appropriate permitting office; keep copy onsite)

Instructions: To give notice to the Department of an eligible facility's intent to use this air general permit, the owner or operator of the facility must detach and complete this part of the Air General Permit Registration Form and submit it to the appropriate Department of Environmental Protection or local air pollution control program office which has permitting authority. Please type or print clearly all information, and enclose the appropriate air general permit registration processing fee pursuant to Rule 62-4.050(4)(0), F.A.C. (\$100 as of the effective date of this form)

Check one:				
	FIAL REGISTRATION - Notification of intent to:  Construct and operate a proposed new facility.  Operate an existing facility not currently using an air general permit (e.g., a facility proposing to go from an air operation permit to an air general permit).			
	REGISTRATION (for facilities currently using an air general permit) - Notification of intent to: Continue operating the facility after expiration of the current term of air general permit use. Continue operating the facility after a change of ownership.  Make an equipment change requiring re-registration pursuant to Rule 62-210.310(2)(e), F.A.C., or any other change not considered an administrative correction under Rule 62-210.310(2)(d), F.A.C.			
	al Facility Information			
<u>Facility Owner/Company Name</u> (Name of corporation, agency, or individual owner who or which owns, leases, operates, controls, or supervises the facility.)				
PetroLiance LLC (Formerly Young Oil Company, Inc.)				
Site Name (Name, if any, of the facility site; e.g., Plant A, Metropolis Plant, etc. If more than one facility is owned, a registration form must be completed for each.)				
Stuart Plant				
Facility Location (Provide the physical location of the facility, not necessarily the mailing address.)  Street Address: 3390 SW Deggeller Court  City: Palm City  County: Martin, FL  Zip Code: 34990-5545				
Facility Start-Up Date (Estimated start-up date of proposed new facility.)(N/A for existing facility)				
N/A				
Facilit	y Identification Number (DEP Use ONLY - do not fill in):			

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BUREAU OF AIR REGULATION

Registration Type

Owner/Authorized Representative					
Name and Position Title (Person who, by signing this form below, certifies that the facility is eligible to use this					
air general permit.)					
Print Name and Title: Billy Laws, Environmental Manager					
Owner/Authorized Representative Mailing Address (CORP OFFICE)					
Organization/Firm: Potrol inno 11 C					
Street Address: 4000 NW 73rd St. 1009 Schieffe Lin Rd					
City: Miami Apex County: Miami Dade, FL Zip Code: 33150-3648 N.C. Zip Code: 37502					
Owner/Authorized Representative Telephone Numbers					
Telephone: <del>(843) 628-7560</del> 919-387-9810 Fax: <del>(843) 723-4205</del> Cell phone (optional): <del>(849) 830-7980</del> Acety Fax # 866-691-4332					
Cell phone (optional): (848)-830-2009  Email: blaws@petroliance-com					
улам улам (мурстона нье-вон)					
Facility Contact (If different from Owner/Authorized Representative)					
Name and Position Title (Plant manager or person to be contacted regarding day-to-day operations at the facility.)					
Print Name and Title:  Billy LAWS, Environmental Mgr.					
Facility Contact Mailing Address					
Organization/Firm: PetroLiance LLC					
Street Address: 1000 ANALTZ PA ST					
City: Miami County: FL Zip Code: 33150-3648					
Facility Contact Telephone Numbers Telephone: 843-628-7560 Fax: 843-723-4205					
Telephone: 843-628-7560 Fax: 843-723-4205 Cell phone (optional): 843-830-4989					
Email: BLAWS@petroliance.com					
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Surrender of Existing Air Operation Permit(s) - For Initial Registrations Only					
If the facility currently holds one or more air operation permits, such permit(s) must be surrendered by the owner or					
operator upon the effective date of this air general permit. In such case, check the first box, and indicate the					
operation permits being surrendered. If no air operation permits are held by the facility, check the second box.					
All existing air operation permits for this facility are hereby surrendered upon the effective date of this air					
general permit; specifically permit number(s): Current air permit expires July 10, 2011.					
No air operation permits currently exist for this facility.					
Owner/Authorized Representative Statement					
This statement must be signed and dated by the person named above as owner or authorized representative					
I, the underxigned, am the owner or authorized representative of the owner or operator of the facility					
addressed in this Air General Permit Registration Form. I hereby certify, Wased on information and					
helief formed after reasonable inquiry, that the facility addressed in this registration form is eligible for use of this air general permit and that the statements made in this registration form are true, accurate					
and complete. Further, I agree to operate and maintain the facility described in this registration form so					
as to comply with all applicable standards for control of air pollutant emissions found in the statutes of					
the State of Florida and rules of the Department of Environmental Protection and revisions thereof.					
I will promptly notify the Department of any changes to the information contained in this registration					
form.					
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Throughput Rate				
If this is an initial registration for bulk gasoline plant operations, provide an estimate of the facility's expected gasoline throughput rate (amounts received and distributed) over a 12-month period. Note: the general permit limits the throughput rate to 6.0 million gallons of gasoline in any consecutive 12 months.				
If this is a re-registration for gasoline bulk plant operations, provide the highest 12-month gasoline throughput rate for the facility for the previous five years. Indicate the 12-month period over which this usage occurred.  1.47 million gallons (2008)				
Rule 62-296.418 Applicability				
Check one:				
The facility is subject to subsection 62-296.418(1), F.A.C., because it is located in Miami-Dade, Broward. Palm Beach, Orange, Duval, Hillsborough or Pinellas counties; has an annual average daily throughput of more than 2,000 gallons; and began (or will begin) operation prior to August 1, 2007.				
The facility began (or will begin) operation prior to August 1, 2007, but is not subject to subsection 62-296.418(1) because it is not located in one of the seven listed counties, or it does not have an annual average daily throughput of more than 2,000 gallons.				
The facility is subject to subsection 62-296.418(2), F.A.C., because it is located anywhere in the state, has any throughput rate, and began (or will begin) operation on or after August 1, 2007.				
Description of Facility				
Below, or as an attachment to this form, provide a description of the bulk gasoline plant operations at the facility in sufficient detail to demonstrate the facility's eligibility for use of this air general permit and to provide a basis for tracking any future equipment or process changes at the facility. Describe all air pollutant-emitting processes and equipment at the facility, and identify any air pollution control measures or equipment used. Include the capacity of all gasoline storage tanks at the facility and note whether each such tank is equipped for submerged filling. Also, note whether the loading racks are equipped with a vapor collection and control system, and provide a description of any such system.				
The facility consists of a bulk petroleum plant which includes two (2) 20,000 gallon vehicular diesel ASTs and two (2) 13,000 gallon unleaded gasoline ASTs.				

nontvAGP

## URGENT!

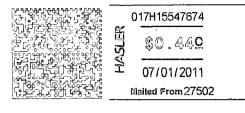
## **IMPORTANT**

## NOTIFICATION OF EXPIRING AIR GENERAL PEMIT REGISTRATION

If you wish to continue your Air General Permit (AGP) entitlement to operate, please submit a new, completed registration form with the correct processing fee to the following address:

ronowing addi	FDEP RECEIP POST OFFICE TALLAHASSEE, F	TS BOX 3070
I am a r	new OWNER of AUTHORIZED	REPRESENTATIVE for this facility.
My bus	iness has moved to a new location	1.
	have checked any of the above bestration form and processing fee.	poxes, please include this form with your
7-		
notifyin below a	•	r MEGISTRATION  my AGP entitlement to operate and I am g action by signing and dating this form ldress:  nit Program Mobile Sources, MS 5510  mental Protection ne Road
My ARMS ID	number is:	AG TILLY LAWS (PRINT YOUR NAME HERE)
Date:	27111	Juj 83
(1	nm/dd/yyyy)	(SIGN YOUR NAME HERE)





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