



Compliance Schedule

40 Code of Federal Regulations (CFR) 63 Subpart BBBBBB:
Gasoline Distribution Bulk Terminals, Bulk Plants, and Pipeline Facilities

40 CFR 63 Subpart CCCCCC: **Gasoline Dispensing Facilities**

Complete this form as soon as possible if you are unable to comply with either of these rules by the January 10, 2011 compliance date.

Section 1 – General Information

Facility Name:		Facility Number (if known):	
Facility Street Address:		City:	State: Zip:
Responsible Official's Name and Title:	Phone number:	Email (if available):	
Mailing Address (if different from facility street address):		City:	State: Zip:
Facility Local Contact's Name and Title:	Phone number:	Email (if available):	

Section 2 – Compliance Schedule Information

A. I am submitting this compliance schedule because I am unable to comply with the following standard by the January 10, 2011 compliance date:

- 40 CFR 63 Subpart BBBBBB: National Emission Standards for Hazardous Air Pollutants for Source Category:
Gasoline Distribution Bulk Terminals, Bulk Plants, and Pipeline Facilities
- 40 CFR 63 Subpart CCCCCC: National Emission Standards for Hazardous Air Pollutants for Source Category:
Gasoline Dispensing Facilities

B. Reason why compliance cannot be achieved by the January 10, 2011 compliance date:

Section 2 – Compliance Schedule Information (continued)

C. Specify the date by which installation of emission control equipment is to be initiated.

1. 40 CFR 63 Subpart BBBBBB: **Gasoline Distribution Bulk Terminals, Bulk Plants, and Pipeline Facilities**

Activity that will be initiated	Date
<input type="checkbox"/> Switch to submerged fill of cargo tanks (drop tube or bottom loading)	
<input type="checkbox"/> Other (describe)	

2. 40 CFR 63 Subpart CCCCCC: **Gasoline Dispensing Facilities**

Activity that will be initiated	Date
<input type="checkbox"/> Installation of vapor balancing system (Stage 1)	
<input type="checkbox"/> Installation of a poppet valve on a previously installed coaxial vapor balancing system	
<input type="checkbox"/> Other (describe)	

D. Specify the date by which final compliance is to be achieved.

Date

Section 3 – Certification

Responsible Official Certification		
<input checked="" type="checkbox"/> I understand that a notification of compliance status must be submitted once this facility has achieved compliance.		
<input type="checkbox"/> I certify the truth, accuracy, and completeness of this notification.		
Responsible Official Name	Responsible Official Signature	Date

Note: Responsible official is defined under §63.2 as any of the following: the president, vice-president, secretary, or treasurer of the company that owns the plant; the owner of the plant; the plant engineer or supervisor; a government official if the plant is owned by the Federal, State, city, or county government; or a ranking military officer if the plant is located on a military installation.

Submit this form to the following agency(ies):

- Iowa Department of Natural Resources, NESHAP Coordinator, 7900 Hickman, Suite 1; Windsor Heights, IA, 50324
- If the facility is located in either Linn County or Polk County, this notification shall also be submitted to the appropriate county office:

Polk County Public Works – Air Quality Division
5885 NE 14th Street; Des Moines, IA 50313

Linn County Public Health - Air Quality Division
501 13th Street NW; Cedar Rapids, IA 52405