

REGISTRATION CERTIFICATE
EPAC-10 REV. 7-73



STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION



STACK NO. 01171008815

EQUIPMENT CLASSIFICATION			REGISTRATION NO.
<input type="checkbox"/> FUEL BURNING	<input type="checkbox"/> INCINERATOR	<input checked="" type="checkbox"/> PROCESS MFG.	01170317
FIRM NAME			DATE ISSUED
GULF OIL CORP			12/05/73
LOCATION OF EQUIPMENT (No. & Street, Town, Zip)			
428-500 WATERFRONT ST		NEW HAVEN CONN 06509	
COMMISSIONER OR HIS REPRESENTATIVE			

DEPARTMENT OF ENVIRONMENTAL PROTECTION

117-088-~~157~~-~~16~~ 15

1. APPLICATION NO. G115	2. STACK NO.
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TO: Department of Environmental Protection, Air Compliance Section, State Office Bldg., Hartford, Conn. 06115. Tel. 566-2690

3. FIRM Gulf Oil Company - U.S.	LEGAL NAME	BUSINESS ADDRESS (No. & Street, City or Town)	ZIP CODE	PHONE
4. DIVISION Gulf Oil Corporation		P.O. Box 3007, Houston, Texas	77001	
5. APPLICANT G. K. Gibson		Gulf Building, Pittsburgh, Pa.		
6. INSTALLATION		428-500 Waterfront St., New Haven, Conn.	06509	469-5333
7. EQUIPMENT BEING REGISTERED	TYPE OF EQUIPMENT (e.g., storage tank) Storage Tank <i>floating roof</i>	AIR POLLUTION CONTROL EQUIPMENT USED (if "YES," file form EP-7) <input checked="" type="checkbox"/> YES <input checked="" type="checkbox"/> NO		

8. MAJOR ACTIVITY OF FIRM

MFG.
 OFFICE
 RETAIL OR WHLSE. STORE
 SCHOOL OR CHURCH
 HOTEL/MOTEL
 HOSPITAL OR LAB.
 WAREHOUSE
 RESIDENCE OR APTS.
 OTHER (Specify) *Petroleum Storage Terminal*

9. TYPES OF FUELS USED	FUEL	GRADES (x)	SULFUR CONTENT	ASH CONTENT	ANNUAL USAGE (Tons, Gals. or Cu. Ft.)	MAXIMUM FIRING RATE		SEASONAL USE			FUEL SUPPLIER		
						(lbs., Gals., Cu. Ft./hr.)	(BTU/hr.)	Month	to	Month	Name	City or Town	
OIL <input type="checkbox"/>	Kerosene		%	%									
		2	%	%									
		4	%	%									
		5	%	%									
		6	%	%									
NAT. GAS <input type="checkbox"/>													
OTHER <input type="checkbox"/>													

10. PROCESS WEIGHTS	MATERIALS	USE (Solvent, Catalyst)	ENTERING (Tons/Yr.)	LEAVING (Tons/Yr.)	11. POLLUTANTS EMITTED	MATERIAL	RATE OF EMISSIONS (Tons/Yr.)	METHOD USED TO DETERMINE EMISSIONS	

12. STORAGE AND PROCESS TANK INFORMATION

CAPACITY (Gallons): 1,795,831

MATERIAL BEING STORED: *Gulftane Gasoline*

TYPE OF COVER: NONE CLOSED WITH VENT TO ATMOSPHERE OTHER (Specify)

FLOATING ROOF (Pan) CLOSED WITH VAPOR RECOVERY SYSTEM

STORAGE TEMPERATURE: °F

13. EQUIPMENT INFORMATION

EXHAUST GAS FLOW RATE (ACFM):

MAXIMUM: _____ NORMAL: _____

DATE STARTED UP: _____ Breaching Gas Temp. (°F): _____ No. of IDENTICAL UNITS: _____

OPERATING HOURS: _____ HOURS/DAY: _____ HOURS/YR.: _____

14. STACK INFORMATION

STACK EXIT DIRECTION: HORIZ. VERT.

STACK EXIT DIMENSIONS: I.D. _____ in. OR _____ in. X _____ in.

SMOKE INDICATOR IN STACK: YES NO MAKE AND MODEL NO. _____

STACK HEIGHT (Feet): _____ IS STACK EQUIPPED WITH RAIN HAT? YES NO

STACK LINING: METAL REFRACTORY OTHER (Specify) _____

15. STACK LOCATION

Name of nearest intersecting street: _____

Distance to stack from intersection: _____ FT.

DIRECTION TO STACK: (Circle one) N, NE, E, SE, S, SW, W, NW

16. CERTIFICATION

I certify that I have examined the above information and that to the best of my knowledge it is true and complete. (Signature subjects signer to provisions of the General Statutes regarding false and misleading statements).

SIGNED: *G. K. Gibson*

TITLE: *District Operations Mgr*

DATE: *12/4/73*

MAIN FILE

PROCESS AND MANUFACTURING EQUIPMENT REGISTRATION

EP-6 NEW 5-72

117 - 088 - 317-15

STATE OF CONNECTICUT

TO: Department of Environmental Protection, Air Compliance Section, State Office Bldg., Hartford, Conn. 06115. Tel. 566-2690

1. APPLICATION NO. G115	2. STACK NO.
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3. FIRM	LEGAL NAME Gulf Oil Company-U.S.	BUSINESS ADDRESS (No. & Street, City or Town) P.O. Box 3007, Houston, Texas	ZIP CODE 77001	PHONE
4. DIVISION	Gulf Oil Corporation	Gulf Building, Pittsburgh, Penn.		
5. APPLICANT	G.K. Gibson	428-500 Waterfront St., New Haven, Conn.	06509	469-5333
6. INSTALLATION				
7. EQUIPMENT BEING REGISTERED	TYPE OF EQUIPMENT (e.g., storage tank) Storage tank	AIR POLLUTION CONTROL EQUIPMENT USED (if "YES," file form EP-7) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
8. MAJOR ACTIVITY OF FIRM	<input type="checkbox"/> MFG. <input type="checkbox"/> OFFICE <input type="checkbox"/> RETAIL OR WHLSE. STORE <input type="checkbox"/> SCHOOL OR CHURCH <input type="checkbox"/> HOTEL/MOTEL <input type="checkbox"/> HOSPITAL OR LAB. <input type="checkbox"/> WAREHOUSE <input type="checkbox"/> RESIDENCE OR APTS. <input checked="" type="checkbox"/> OTHER Petroleum Storage Terminal			

9. TYPES OF FUELS USED	FUEL	GRADES (x)	SULFUR CONTENT	ASH CONTENT	ANNUAL USAGE (Tons, Gals. or Cu. Ft.)	MAXIMUM FIRING RATE		SEASONAL USE			FUEL SUPPLIER		
						(Lbs., Gals., Cu. Ft./hr.)	(BTU/hr.)	Month	to	Month	Name	City or Town	
<input type="checkbox"/> OIL		Kerosene	. %	. %									
		2	. %	. %									
		4	. %	. %									
		5	. %	. %									
		6	. %	. %									
<input type="checkbox"/> NAT. GAS													
<input type="checkbox"/> OTHER													

10. PROCESS WEIGHTS	MATERIALS	USE (Solvent, Catalyst)	ENTERING (Tons/Yr.)	LEAVING (Tons/Yr.)	11. POLLUTANTS EMITTED	MATERIAL	RATE OF EMISSIONS (Tons/Yr.)	METHOD USED TO DETERMINE EMISSIONS	

(1796 x 80.3) = 72
2000

12. STORAGE AND PROCESS TANK INFORMATION	CAPACITY (Gallons) 1,795,831	TYPE OF COVER <input type="checkbox"/> NONE <input type="checkbox"/> CLOSED WITH VENT TO ATMOSPHERE <input type="checkbox"/> OTHER (Specify)	STORAGE TEMPERATURE: 51 °F
	MATERIAL BEING STORED Gulftane gasoline	<input type="checkbox"/> FLOATING ROOF <input checked="" type="checkbox"/> CLOSED WITH VAPOR RECOVERY SYSTEM	ON 4AM

13. EQUIPMENT INFORMATION	EXHAUST GAS FLOW RATE (ACFM):	MAXIMUM NORMAL	DATE STARTED UP	Breaching Gas Temp. (°F):	No. OF IDENTICAL UNITS	OPERATING HOURS:	HOURS/DAY	HOURS/YR.
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14. STACK INFORMATION	STACK EXIT DIRECTION <input type="checkbox"/> HORIZ. <input type="checkbox"/> VERT.	STACK EXIT DIMENSIONS I.D. _____ in. OR _____ in. X _____ in.	STACK HEIGHT (Feet) 0100	IS STACK EQUIPPED WITH RAIN HAT? <input type="checkbox"/> YES <input type="checkbox"/> NO
	SMOKE INDICATOR IN STACK <input type="checkbox"/> YES <input type="checkbox"/> NO	MAKE AND MODEL NO.	STACK LINING <input checked="" type="checkbox"/> METAL <input type="checkbox"/> REFRACTORY <input type="checkbox"/> OTHER (Specify)	

15. STACK LOCATION	Name of nearest intersecting street:	Distance to stack from intersection: _____ FT.	DIRECTION TO STACK: (Circle one) N, NE, E, SE, S, SW, W, NW
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16. CERTIFICATION	I certify that I have examined the above information and that to the best of my knowledge it is true and complete. (Signature subjects signer to provisions of the General Statutes regarding false and misleading statements).	SIGNED <i>G.K. Gibson</i> G.K. Gibson	TITLE Dist. Operations Mgr.	DATE 9/22/72
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MAIN FILE

317
117 - 088 - ~~318~~ 15

1. APPLICATION NO. G115	2. STACK NO.
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TO: Department of Environmental Protection, Air Compliance Section, State Office Bldg., Hartford, Conn. 06115. Tel. 566-2690

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4. DIVISION Gulf Oil Corporation		Gulf Building, Pittsburgh, Penn.		
5. APPLICANT G.K. Gibson		428-500 Waterfront St., New Haven, Conn.	06509	469-5333
6. INSTALLATION				

7. MAJOR ACTIVITY OF FIRM

MFG.
 OFFICE
 RETAIL OR WHLSE. STORE
 SCHOOL OR CHURCH
 HOTEL/MOTEL
 HOSPITAL OR LAB.
 WAREHOUSE
 RESIDENCE OR APTS.
 OTHER (Specify) **Petroleum Storage**

8. TYPE OF EQUIPMENT

BAGHOUSE FILTER
 CYCLONE
 ELECTRO. PREC.
 AFTER BURNER
 MULTI-CYCLONE
 SCRUBBER
 SETTLING CHAMBER
 OTHER (Specify) **Terminal Vapor Recovery System**

9. POLLUTANTS EMITTED (BEFORE control equipment)	MATERIAL	RATE OF EMISSIONS (Tons/Yr.)	METHOD USED TO DETERMINE EMISSIONS	POLLUTANTS EMITTED (AFTER control equipment)	RATE OF EMISSIONS (Tons/Yr.)	METHOD USED TO DETERMINE EMISSIONS	ULTIMATE DISPOSITION OF POLLUTANTS COLLECTED

10. TYPES OF FUELS USED (To operate air pollution control equipment)	FUEL	GRADES (x)	SULFUR CONTENT	ASH CONTENT	ANNUAL USAGE (Tons, Gals. or Cu. Ft.)	MAXIMUM FIRING RATE		SEASONAL USE		FUEL SUPPLIER		
						(Lbs., Gals., Cu. Ft./hr.)	(BTU/hr.)	Month to	Month	Name	City or Town	
OIL <input type="checkbox"/>		Kerosene	. %	. %								
		2	. %	. %								
		4	. %	. %								
		5	. %	. %								
		6	. %	. %								
NAT. GAS <input type="checkbox"/>												
OTHER <input type="checkbox"/>												

11. OPERATING CONDITIONS (Volumes @ 70°F., 29.92 in. Hg)	Total gas volume thru cleaning unit (CFM):	NORMAL	MAXIMUM	INLET GAS TEMPERATURE °F	WATER FLOW RATE (Wet Scrubber) GPM	12. COST ANALYSIS	DATE OF PURCHASE	TOTAL INITIAL COST \$
	Gas pressure drop across unit:	in. water		OUTLET GAS TEMPERATURE °F	TIME: HRS./DAY HOURS PER YEAR		INITIAL CAPITAL COST \$	ANNUAL OPERATING COST \$

13. FACILITIES SERVED	List the application numbers of the equipment attached to this control equipment.	14. PARTICLE SIZE ANALYSIS (if available)	SIZE OF PARTICLES	PERCENT OF TOTAL	COLLECTION EFFICIENCY
			0 - 1 Microns		
			1 - 10 Microns		
			10 - 44 Microns		

15. STACK INFORMATION	STACK EXIT DIRECTION	STACK EXIT DIMENSIONS	STACK HEIGHT	STACK LINING	OTHER (Specify)	Is stack equipped with rain hat? <input type="checkbox"/> YES <input type="checkbox"/> NO
	<input type="checkbox"/> HORIZ. <input type="checkbox"/> VERT.	I.D. _____ in. or _____ in. X _____ in.	FT.	<input type="checkbox"/> METAL <input type="checkbox"/> REFRACTORY		
SMOKE INDICATOR IN STACK	MAKE AND MODEL NO.	DATE SOURCE STARTED UP	NO. OF IDENTICAL UNITS			
<input type="checkbox"/> YES <input type="checkbox"/> NO						

16. STACK LOCATION	Name of nearest intersecting street:	Distance to stack from intersection:	FT.	DIRECTION TO STACK: (Circle one) N, NE, E, SE, S, SW, W, NW
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MAIN FILE