



San Joaquin Valley Air Pollution Control District

Permit to Operate Application Form for Winery Fermentation and Storage Tanks

PERMIT TO BE ISSUED TO:
MAILING ADDRESS STREET/P O BOX _____ CITY: _____ STATE _____ 9 DIGIT ZIP CODE _____
LOCATION WHERE THE EQUIPMENT WILL BE OPERATED STREET _____ CITY _____

TYPE OR PRINT NAME OF APPLICANT:	TITLE OF APPLICANT:
SIGNATURE OF APPLICANT: _____ DATE: _____	PHONE #: () _____ FAX #: () _____ E-MAIL: _____

Facility Wine Production	Maximum Annual Red Wine ⁽¹⁾ Production: _____ (cases/year) or (gal/year)
	Maximum Annual White Wine ⁽²⁾ Production: _____ (cases/year) or (gal/year)
Facility Tank Summary	Total Number of Red Wine Fermentation Tanks ⁽³⁾ : _____
	Total Number of White Wine Fermentation Tanks ⁽⁴⁾ : _____
	Total Number of Tanks used only for wine Storage: _____

- (1) Red Wine: Any wine that is fermented on-site in contact with the solid matter of must.
 (2) White Wine: Any wine that is separated from the solid matter of must prior to on-site fermentation.
 (3) Tanks equipped to ferment wine red wine (include multiple-use tanks also used for white wine fermentation and storage).
 (4) Tanks used only for fermentation and storage of white wine

Tank Data

- Provide the data below for each tank in the facility with a capacity of greater than 250 gallons on the tank data sheet. Please use additional sheets if necessary. Alternatively, submit data on an electronic spreadsheet that is compatible with MS Office.
- Additionally, a plot plan of the facility indicating the location of all tanks must be submitted as an attachment.

Data Item	Data Description	Directions
A	Tank I.D. No.	Input the Facility's I.D. # for this tank
B	Tank Capacity, gal.	Tank working capacity in gallons
C	Tank Roof	"open" or "closed"
D	Tank Materials	"steel", "concrete", "plastic", or specify other
E	Tank Use	"R" = red fermentation/storage, "W" = white fermentation/storage
F	Pressure/Vacuum Relief Valve Setting or Breather Vent Setting, psi	If applicable ("N/A" if not equipped with valve)

FOR APCD USE ONLY:

DATE STAMP:	FILING FEE RECEIVED: \$ _____ CHECK #: _____
	DATE PAID: _____
	PROJECT #: _____ FACILITY ID: _____

Tank Data Sheet

	A	B	C	D	E			F
	Tank ID #	Tank Capacity (Gallons)	Tank Roof (Open/Closed)	Tank Material (Steel, concrete, PVC, other: specify)	Tank Use			P/V valve (Yes/No)
					Fermentation	Storage	Both	
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								
17								
18								
19								
20								
21								
22								
23								
24								
25								
26								
27								
28								
29								
30								
31								
32								