



OCT 30 10 12 AM '96

October 28, 1996

Ms. Sue Thayer  
State of Vermont  
Department of Environmental Conservation  
Hazardous Materials Management Division  
103 South Main Street/West Building  
Waterbury, VT 05671-0404

RE: UST Closure Inspection, Earl's Service Station, 251 North St., Bennington, Vermont  
Facility ID # 447-7090

Dear Ms. Thayer:

On October 21, 1996, I conducted an investigation of the closure of three underground storage tanks (USTs) at Earl's Service Station, located at 251 North Street in Bennington, Vermont. The USTs are owned by Mr. Ronald Alderman of Bennington, Vermont. Enclosed are the completed State of Vermont tank pull inspection forms, site location map and site photographs.

A total of 3 USTs were located in a common UST basin. The USTs removed are listed below, with the capacity, product stored, condition of each UST and associated piping and age of UST/piping.

UST #	capacity	product	condition	piping	age
#1	4,000 gallon	super unleaded	excellent	good	11 years
#2	8,000 gallon	unl. gasoline	excellent	good	11 years
#3	8,000 gallon	unl. gasoline	excellent	fair	11 years

All the USTs were all constructed of single wall steel. The date of installation is believed to be October, 1985. Two replacement USTs are to be installed in the same location. Both new USTs have a capacity of 10,000 gallons, with one UST being a split tank. One 550 gallon #2 fuel oil tank remains in service at the site. The age of this UST is unknown.

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The USTs were excavated and removed by Phil Harrington Construction of Shaftsbury, Vt.. Cleaning of the USTs was conducted by MacIntyre Petroleum Equipment of Middlebury, Vt. Disposal of the USTs will be conducted at Elnicki Salvage of West Rutland, with transport by MacIntyre Petroleum. Approximately 120 gallons of waste was generated from the tank cleaning process. The waste consisted of residual product, water and sludge located on the bottom of the USTs. Disposal of the waste generated from the tank cleaning process is expected to be conducted by Total Waste Management.

All USTs were visually inspected for signs of petroleum leakage or penetrations. The three USTs removed were in excellent condition, with no holes, pitting or signs of leakage having occurred from the USTs. Inspection of the piping from the USTs indicated the piping to be in generally good condition, with the exception of the piping from the pump on UST #3. A PID reading in the vicinity of elbows contained an elevated VOC concentration of 210 ppm.

The soils in the tank pit consisted of medium brown sands surrounding the USTs from the surface to a depth of 9', which was the limit of excavation for UST removal. Material surrounding the outer limits of the excavation consisted of large cobbles and unconsolidated construction debris. Groundwater was encountered at a depth of 8.5', with no visible contamination observed. Four monitoring wells were located in the vicinity of the excavation, but were destroyed during the UST removal process. Two backhoe monitoring wells may have been installed in the UST basin after completion of the UST upgrade. No water samples were collected from the monitoring wells prior to or during the UST closure inspection.

Piping from the USTs to the former pump island that was not removed during the UST removal will be removed during excavation for installation of the new pump island and piping. All piping was purged of any product prior to being disconnected from the USTs.

Approximately 40 cubic yards of soils were removed from the excavation to facilitate UST removal. These soils were stockpiled on site on polyethylene. Average VOC concentration of the soils was 86 ppm. On October 24, 1996, Griffin was requested to visit the site regarding the stockpiled soils. Additional soils had been removed from the excavation to accommodate installation of the new USTs. Approximately 80 cubic yards (+/-) were present, with the property owner requesting the soils be transported to an off-site location. Mr. Kevin McGraw from Griffin visited the site to confirm amount of soils present and coordinated approval of the off-site transport with the Town of Bennington and the VTDEC. Documentation of the location the soils were transported to and letters of approval per VTDEC Off-site Soil Treatment Request Form has been separately prepared.

A total of 10 soil samples were collected from the soils which surrounded the USTs and were screened for volatile organic compounds (VOCs) with an H-Nu Model PI 101 photo ionization device (PID). All PID readings were recorded, with a peak VOC concentration of 210 ppm (parts per million) detected from samples collected in several locations throughout the

excavation. An ambient background reading of 0.4 ppm was recorded prior to the collection and screening of soil samples. All soil samples were allowed to warm to approximately 65 degrees prior to screening. The PID was properly calibrated in accordance with Griffin Protocols prior to use. The location, depth and VOC concentration for each sample is tabulated below.

Sample	Location	Depth	VOC Concentration
1	soils between UST #1&2	1.5'	5.4 ppm
2	pipng union,UST #1	2'	4.8 ppm
3	fill pipe/north end, UST #1	2'	2.8 ppm
4	between UST #1 & #2, center	4'	5.4 ppm
5	between UST #1 & #2	7'	28 ppm
6	north end of UST #2	8'	210 ppm
7	UST #2 piping	2'	7.2 ppm
8	UST #3 piping	2'	210 ppm
9	north end under UST #3	8'	180 ppm
10	south end UST #3	8'	210 ppm

All residences and businesses in the immediate area are served by the municipal water and sewer system. No private supply wells were identified or are believed to be in use in the immediate vicinity of the site. Potential sensitive receptors identified during the investigation include several buildings located within 500' of the site.

Based on data collected during the investigation and visual observations, I have arrived at the following conclusions:

- 1) There has been a release(s) of petroleum to soils and groundwater in the vicinity of UST #3. The source of the contamination is believed to have resulted from a leak in the piping located at the top of the UST/submersible pump connection.
- 2) The degree and extent of contamination have not been fully defined.
- 3) Potential sensitive receptors identified are believed to be at a minimal risk of impact from petroleum contamination detected during the UST closure inspection.
- 4) Soils removed from the excavation which contained an average VOC concentration of 86 ppm were stockpiled on site, with transport to an off-site location separately approved to occur at a later date.
- 5) All businesses and residences located in the vicinity of the site are served by the municipal water supply and are served by a municipal sewer system.

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If you have any questions regarding this closure report, give me a call at your convenience.

Sincerely,

A handwritten signature in black ink, appearing to read "Don Tourangeau", with a horizontal line extending to the right.

Don Tourangeau  
Environmental Technician

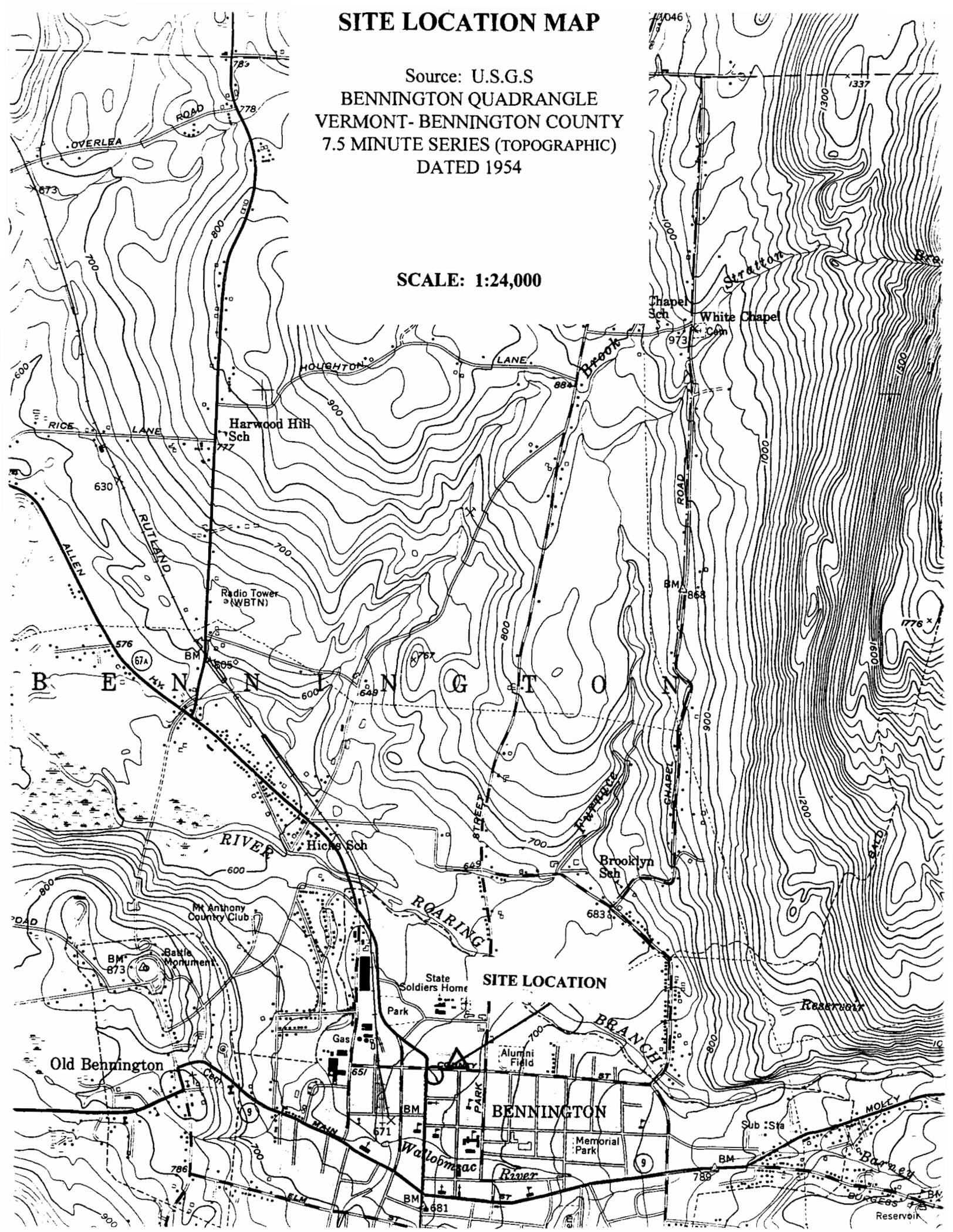
c. Mr. Ronald Alderman  
Mr. Doug Cone, MacIntyre Petroleum  
file

ref. b:10964927.doc

# SITE LOCATION MAP

Source: U.S.G.S  
BENNINGTON QUADRANGLE  
VERMONT - BENNINGTON COUNTY  
7.5 MINUTE SERIES (TOPOGRAPHIC)  
DATED 1954

SCALE: 1:24,000



UST CLOSURE INSPECTION  
EARL'S SERVICE STATION  
251 NORTH STREET  
BENNINGTON, VERMONT  
OCTOBER 21, 1996



UST #1 - 4,000 gallon gasoline tank bottom

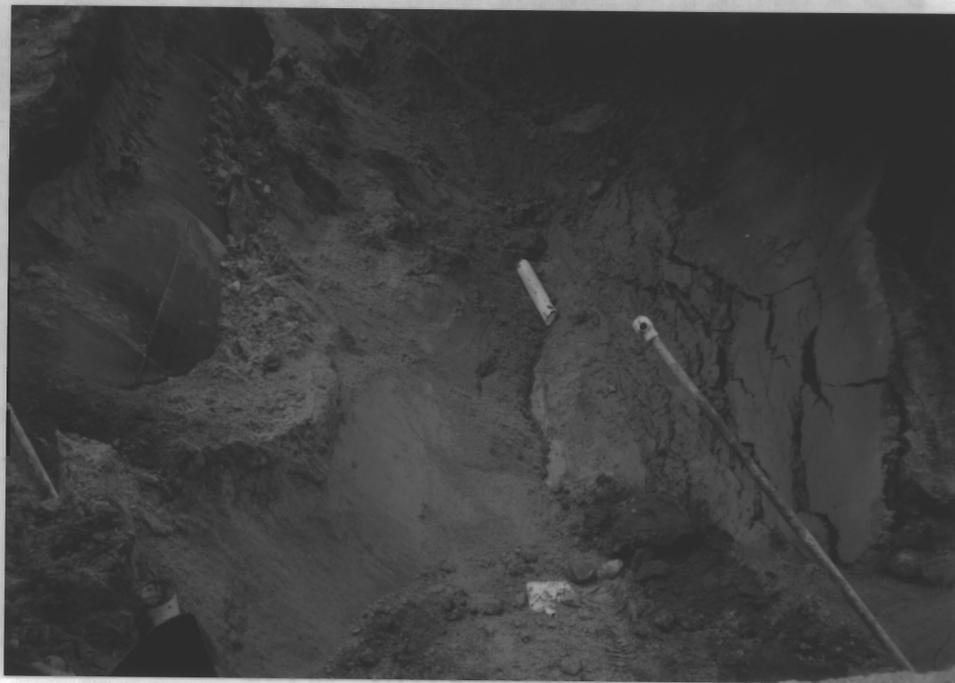


UST #1 - 4,000 gallon gasoline tank basin

UST CLOSURE INSPECTION  
EARL'S SERVICE STATION  
251 NORTH STREET  
BENNINGTON, VERMONT  
OCTOBER 21, 1996



UST #2 - 8,000 gallon gasoline tank bottom



UST #2 - 8,000 gallon gasoline tank basin

UST CLOSURE INSPECTION  
EARL'S SERVICE STATION  
251 NORTH STREET  
BENNINGTON, VERMONT  
OCTOBER 21, 1996



UST #3 - 8,000 gallon gasoline tank bottom



UST #3 - 8,000 gallon gasoline tank basin

DEC 3 1996

# UNDERGROUND STORAGE TANK PERMANENT CLOSURE FORM

**AGENCY USE ONLY**  
 Sched. closure date: 10/21/96  
 Facility Town: BENNINGTON  
 Facility ID#: 4477090  
 DEC Official: ST  
 Evaluated by: ST

VERMONT AGENCY OF NATURAL RESOURCES  
 DEPT. OF ENVIRONMENTAL CONSERVATION  
 HAZARDOUS MATERIALS MANAGEMENT DIV.  
 103 SOUTH MAIN STREET, WEST BUILDING  
 WATERBURY, VERMONT 05671-0404  
 TELEPHONE: (802) 241-3888

Company conducting site assessment: GRIFFIN INT, INC  
 Person conducting site assessment: W. TOURANGEAU  
 Telephone number of company (or person): 802-865-4288  
 Date of UST closure: 10-21-96  
 Date of site assessment: 10-21-96

This Closure Form may only be used for the facility and date indicated in the upper left hand corner. Changes in the scheduled closure date should be phoned in at least 48 hours in advance. Both the yellow and white copies must be returned to the above address; the pink copy should be retained by the UST owner. A written report from an environmental consultant covering all aspects of closure and site assessment, complete with photographs and any other relevant data, must accompany this form. All procedures must be conducted by qualified personnel - including training required by 29 CFR 1910.120. Documentation of all methods and materials used must be adequate. All work must be performed in compliance with DEC policy "UST Closure and Site Assessment Requirements" as well as all applicable statutes, regulations, and additional policies. The DEC may reject inadequate closure forms and reports.

### Section A. Facility Information:

Name of Facility: EARL'S SERVICE STATION Number of Employees: 6  
 Street address of facility: 251 NORTH STREET BENNINGTON VT.  
 Owner of UST(s) to be closed: RONALD ALDERMAN  
 Name of Contact and telephone number if different from owner: SAME  
 Mailing address of owner: 251 NORTH ST. BENNINGTON VT.  
 Telephone number of owner: 802-447-7090

### Section B. UST Closure Information: (please check one)

Reason for initiating UST Closure:  Suspected Leak  Liability  Replacement  Abandoned  
 Which portion of UST is being closed:  Tanks  Piping  Tanks & Piping

USTs undergoing permanent closure. Include condition and if leaks were found:

UST#	Product	Size (gallons)	Tank age	Tank condition	Piping age	Piping condition
1	UNLEADED GASOLINE	4000	11 YEARS	EXCELLENT	11 YEARS	GOOD
2	UNLEADED GASOLINE	8000	11 YEARS	EXCELLENT	11 YEARS	GOOD
3	UNLEADED GASOLINE	8000	11 YEARS	EXCELLENT	11 YEARS	FAIR

Which tanks, if any, will be closed in-place (must have approval from DEC) NONE

Disposal/destruction of removed UST(s):

Location RELIANCE SA LUBR, W. BURLING Date 10/22/96 Method SCRAP Date / /

Amount (gal.) and type of waste generated from USTs: TANK BOTTOMS / SLUDGE

Tank cleaning company (must be trained in confined space entry): MULTI-TYPE PETROLEUM

Certified hazardous waste hauler (tank contents are hazardous waste unless recovered and usable product): TOTAL WASTE MANAGEMENT

Hazardous waste generator ID number: N/A.

USTs not closed. This portion must be filled in to include all USTs, regardless of size, and status, \*whether "abandoned", "in use", "to be installed", or "not aware of any other tanks on-site". Remember: most new installations require permits and advance notice to this office.

UST#	Product	Size (gallons)	Tank age	*Tank Status	Piping Age	*Piping Status
1	#2 FUEL OIL	550	~ 30 YEARS	IN USE	~ 30 YEARS	IN USE
2	UNLEADED GASOLINE	10000	NEW	TO BE INSTALLED		
3	UNLEADED GASOLINE	10000/SPIT	"	"	"	

### Section C. Initial site characterization:

Work in this section must be completed by a professional environmental consultant or hydrogeologist with experience in environmental sampling for the presence of hazardous materials. A full report from the consultant must accompany this form.

Excavation size (ft<sup>2</sup>): 900 Excavation depth (ft): 9' Soil type: SAND w/ THIN COBBLES Bedrock depth (ft): N/A  
 PID Information: Make: A-NU Model: RI101

OCT 30 1996

PID Calibration information: Date 10/21/96 Time 09:15 Type of Gas ISOBUTYLENE  
Contamination detected with PID (ppm): Peak 210 ppm Depth of peak (ft) 2' x 8' Avg 86  
Soil samples collected for laboratory analysis? Yes        # of samples 0 No ✓

(show locations and depth of all readings and samples on diagram).

Have soils been polyencapsulated on site? Yes X list amount (cu. yds.): @40 C.W. No         
Have any soils been transported off site? Yes        list amount (cu. yds.): 0 No ✓  
Location transported to: N/A  
Name of DEC official granting approval to transport soils: N/A Date: ++  
Amount of soils backfilled, (cu. yds.): 0, Avg. PID —  
Have limits of contamination been defined? Yes        No X  
Are you aware of any other contaminants which may be present? Yes        No X  
Comments: None

Free phase product encountered? Yes        thickness — No ✓  
Groundwater encountered? Yes ✓ depth(ft) 0.5' No       

Were there existing monitoring wells on site? Yes ✓ (# samples taken 0) No         
Have new monitoring wells been installed? Yes        (# samples taken 0) No ✓  
Samples collected from monitoring wells for lab analysis? Yes        No ✓

(include well location, headspace readings, and laboratory results if applicable in a separate report and on the site diagram)

Is there a water supply well or spring on site? Yes        (check type: shallow        rock        spring       ) No ✓  
How many public water supply wells are located within a 0.5 mile radius? 0 min. distance (ft): Unknown  
How many private water supply wells are located within a 0.5 mile radius? Unknown min. distance (ft): Unknown  
What receptors have been impacted? X soil        indoor air ✓ groundwater        surface water        water supply

**Section D. Statements of UST closure compliance:** (must have both signatures or site assessment not complete)

As the party responsible for compliance with the Vermont UST Regulations and related statutes at this facility, I hereby certify that all of the information provided on this form is true and correct to the best of my knowledge.

Ronald G. Edman  
Signature of UST owner or owner's authorized representative

Date: 10-21-96

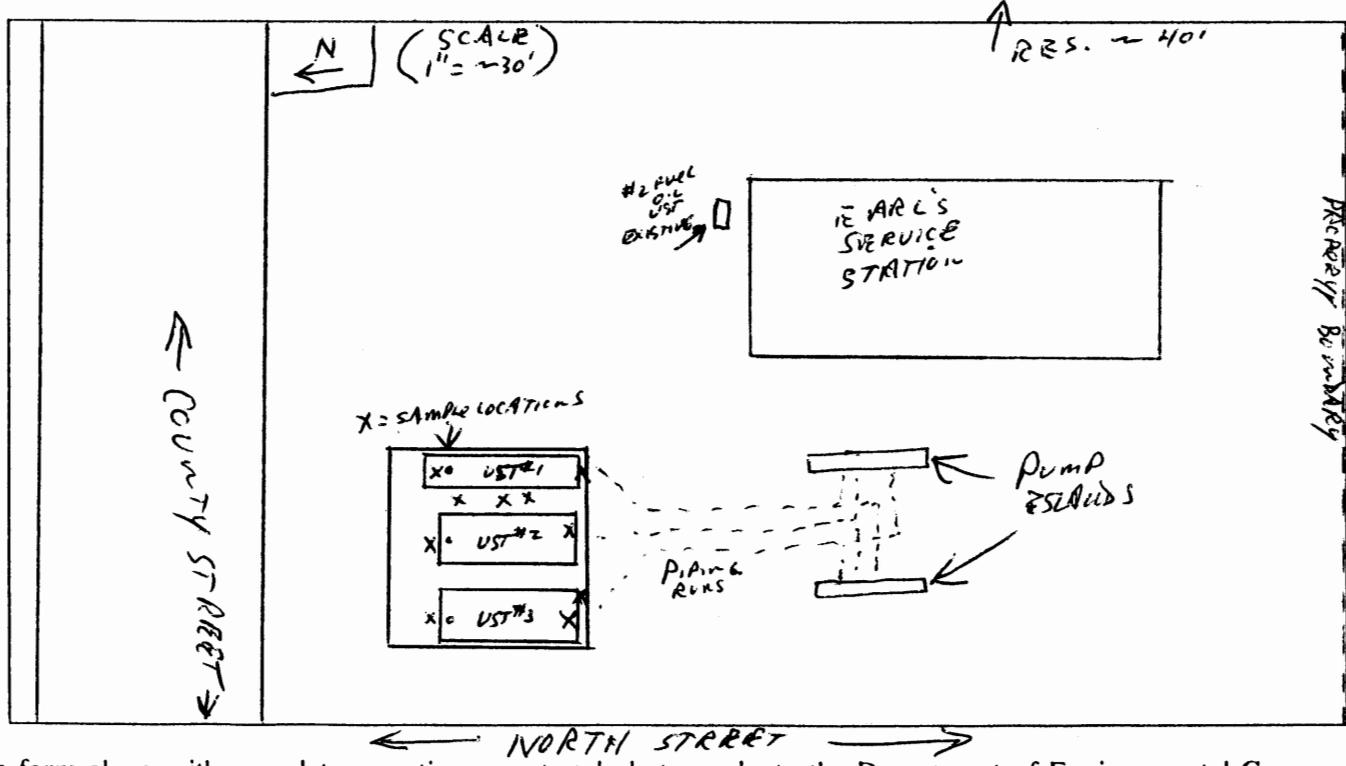
As the environmental consultant on site, I hereby certify that the site assessment requirements were performed in accordance with DEC policy and regulations, and that information which I have provided on this form is true and correct to the best of my knowledge.

P. T. G.  
Signature of Environmental Consultant

Date: 10-21-96

**SITE DIAGRAM**

Show location of all tanks and distance to permanent structures, sample points, areas of contamination, potential receptors and any pertinent site information. Indicate North arrow and major street names or route number.



Return form along with complete narrative report and photographs to the Department of Environmental Conservation, Underground Storage Tank Program within 72 hours of closure.

VT AGENCY OF NATURAL RESOURCES - DEPARTMENT OF ENVIRONMENTAL CONSERVATION  
WASTE MANAGEMENT DIVISION

OFF-SITE SOIL TREATMENT REQUEST FORM

Off-Site Location

Generator/Owner of Soil

Soil Volume/Peak PID/Avg. PID: 80 yds<sup>3</sup>/220 ppm/<50 ppm  
Off-Site Street Address: 219 Northside Drive,  
Bennington, VT  
Name of Land Owner: Mr. Bill Thompson  
Phone # of Land Owner: (802) 447-7160

Name: Earl's Service Station Inc.  
Facility ID#, Name, and Street Address: 4477090  
Earl's Service Station, 251 North St., Bennington  
Contact: Ron Alderman  
Phone #: (802) 447-7090

Off-Site Soil Treatment Siting Criteria Checklist

- There are no bedrock drinking water supplies within 200 feet of the treatment location.
- There are no shallow water supplies (e.g. dug wells, driven wells, etc.) within 300 feet of the treatment location. This limit may need to be extended if shallow water supplies are shown to be hydraulically downgradient.
- There are no sensitive environments such as a stream, river, lake, pond, wildlife refuge, wetland, floodplain or other similar areas, within 100 feet of the treatment location.
- There is adequate room to allow for treatment to occur over the necessary time frame.
- Public access to the treatment area has been restricted (e.g. fencing, posted).
- The treatment location is not in a residential area.
- Written approval from the landowner, if different from the soil generator, has been obtained before treatment begins. This must include written approval from the landowner granting Department of Environmental Conservation (DEC) investigators property access for the purpose of inspecting soil treatment at any reasonable time.
- The local municipality has been notified in writing of the off-site location prior to initiating any soil treatment. The soil generator must provide evidence to the Waste Management Division (WMD) that this notification has been made. If applicable, local permits should be obtained.
- An area map of the soil location has been submitted to the WMD.
- The WMD has given approval to move soils to the off-site location specified above, as indicated by the WMD representative's signature below.

(See attached)

As the party responsible for compliance with the "Agency Guidelines for Petroleum Contaminated Soil and Debris," subchapter 6 of the "Vermont Underground Storage Tank Regulations," and applicable statutes, I hereby certify that the representations made on this form are to the best of my knowledge true and correct.

RONALD ALDERMAN  
Name of Owner/Operator Representative (printed)  
Ronald Alderman  
Signature

President  
Company Title  
10/24/96  
Date

As land owner of the soil treatment location, I hereby give approval to the soil generator to treat the soil volume cited above at the above referenced location. In addition, I hereby grant property access to DEC investigators for the purpose of inspecting soil treatment at any reasonable time.

William R. Thoma  
Signature of Land Owner

10/24/96  
Date

Signature of WMD Representative

Date of Approval

MAR 10 1986

NOV 21 1985

PAGE 1

# VERMONT NOTIFICATION FOR UNDERGROUND STORAGE TANKS

- READ INSTRUCTION PAGE CAREFULLY BEFORE COMPLETING THIS FORM -

PLEASE TYPE OR PRINT IN INK ALL ITEMS EXCEPT "SIGNATURE" IN SECTION VI ON PAGE 2. SEPARATE NOTIFICATION MUST BE FILED FOR TANKS OWNED AT A DIFFERENT LOCATION. FOR ADDITIONAL INFORMATION, CALL THE VERMONT UNDERGROUND STORAGE TANK PROGRAM AT (802) 828-3395.

### I. OWNERSHIP OF TANKS

NAME (CORPORATION, INDIVIDUAL, PUBLIC AGENCY OR OTHER ENTITY)  
**RONALD T ALDERMAN**

STREET ADDRESS  
**NORTH ST**

TOWN OR CITY  
**BENNINGTON**

COUNTY  
**BENNINGTON**

STATE  
**VERMONT**

ZIP CODE  
**05201**

AREA CODE  
**(802)**

PHONE NUMBER  
**447 7090**

### III. SITE LEAK HISTORY (COMPLETE THIS SECTION ONLY IF APPLICABLE)

YEAR OF LEAK \_\_\_\_\_ ESTIMATE OF QUANTITY  
LEAKED IN GALLONS \_\_\_\_\_

SUBSTANCE LEAKED \_\_\_\_\_

SOURCE OF LEAK (CHECK ALL THAT APPLY)

TANK       PUMP       OVERFILL

PIPING       TRANSFER       OTHER \_\_\_\_\_

CONTAMINATION (CHECK ALL THAT APPLY)

	YES	NO	DON'T KNOW
SOIL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
GROUNDWATER	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SURFACE WATER	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

CORRECTIVE ACTION (CHECK ALL THAT APPLY)

PRODUCT RECOVERY WELLS INSTALLED

SURFACE WATER CONTAINMENT USED

CONTAMINATED SOIL EXCAVATED

TANK REPLACED

PIPING REPLACED

NO ACTION TAKEN

OTHER (SPECIFY) \_\_\_\_\_

### II. CONTACT PERSON (PERSON RESPONSIBLE FOR DAY-TO-DAY OPERATION OF TANKS)

NAME (IF SAME AS IN SECTION I, CHECK BOX HERE )  
**RONALD T ALDERMAN**

JOB TITLE  
**OWNER**

AREA CODE  
**( )**

PHONE NUMBER  
**( )**

MAILING ADDRESS (IF DIFFERENT FROM SECTION I)

STREET ADDRESS \_\_\_\_\_

TOWN OR CITY \_\_\_\_\_

COUNTY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

### IV. LOCATION OF TANKS

FACILITY NAME OR OTHER SITE IDENTIFIER, AS APPLICABLE  
**EARL'S SERVICE STATION**

STREET ADDRESS, STATE ROAD, R.R. #, AS APPLICABLE  
**CORNER NORTH + COUNTY ST**

TOWN OR CITY  
**BENNINGTON**

COUNTY  
**BENNINGTON**

STATE  
**VERMONT**

ZIP CODE  
**05201**

NUMBER OF TANKS AT THIS LOCATION  
**3**

NAME OF LANDOWNER  
**RONALD + SOAM ALDERMAN**

TYPE OF FACILITY (CHECK ONE)

INSTITUTIONAL       RETAIL/CONVENIENCE STORE

BULK PLANT       INDUSTRIAL/COMMERCIAL

STATE       RESIDENTIAL

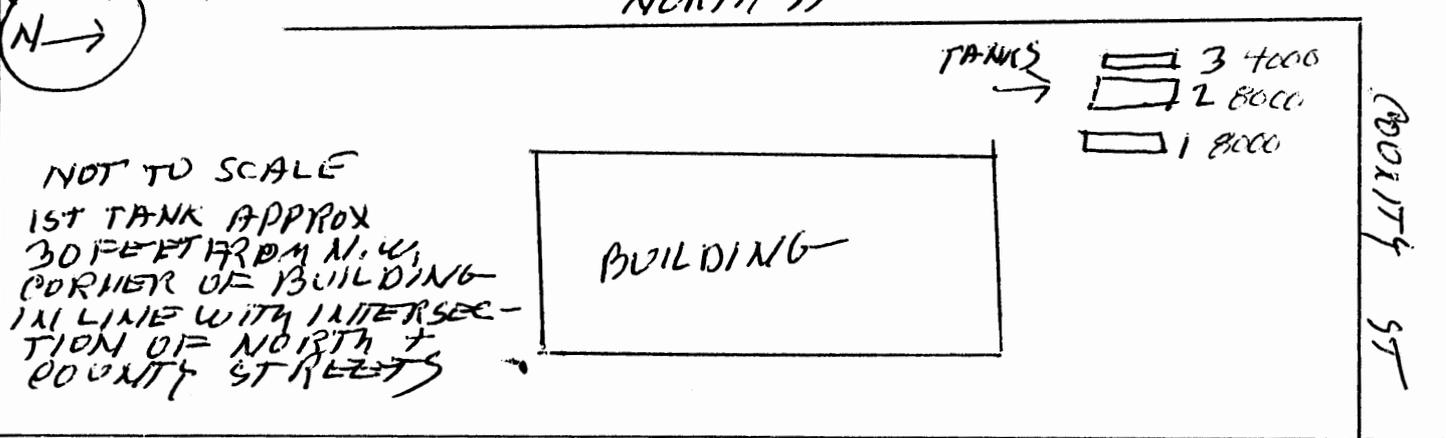
TOWN       SERVICE STATION

FARM

FEDERAL (GIVE FACILITY I.D. NO. \_\_\_\_\_)

OTHER (SPECIFY) \_\_\_\_\_

USE THIS SPACE TO SKETCH AND/OR VERBALLY DESCRIBE FACILITY LOCATION. INCLUDE ESTIMATED DISTANCES TO CENTER LINE OF ROADS, BUILDINGS, STREAMS AND OTHER LANDMARKS. USE DIRECTIONAL DESCRIPTORS (NORTH, SOUTH, ETC.) WHERE APPLICABLE.



### LOCAL USE ONLY

FACILITY I.D. NO. **447 7090** WAS RECORDED ON **January 8, 1986** IN BOOK NO. **0-255**, PAGE **175** OF THE **Bennington** LAND RECORDS.

SIGNATURE OF TOWN OR CITY OFFICER  
**Manjibender**

### STATE USE ONLY

FIRST       AMENDED

FACILITY IDENTIFICATION NUMBER  
**447 7090**

DATE RECEIVED **11-21-85** APPROVED **11/22/85**

RECEIVED BY  
**Susan Alexander**

**V. TANK INFORMATION (COMPLETE FOR EACH TANK AT THIS LOCATION)**

NUMBER TANKS SEQUENTIALLY (START WITH TANK CLOSEST TO BUILDING, IF POSSIBLE)	TANK NO.	TANK NO.	TANK NO.	TANK NO.	TANK NO.
	<u>1</u>	<u>2</u>	<u>3</u>		
1. STATUS OF TANK (CHECK ONE)	CURRENTLY IN USE	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	TEMPORARILY OUT OF USE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	PERMANENTLY OUT OF USE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. ESTIMATED AGE IN YEARS	<u>INSTALLED OCTOBER 1985</u>				
3. TOTAL CAPACITY (GALLONS)	<u>824 per call 11-26-85 8000 20000 4000</u>				
4. MATERIAL OF CONSTRUCTION (CHECK ONE)	STEEL	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	CONCRETE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	FIBERGLASS REINFORCED PLASTIC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	OTHER (SPECIFY)				
	UNKNOWN	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. INTERNAL PROTECTION (CHECK ALL THAT APPLY)	LINING (E.G. EPOXY RESINS)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	OTHER (SPECIFY)				
	NONE	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	UNKNOWN	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. EXTERNAL PROTECTION (CHECK ALL THAT APPLY)	CATHODIC PROTECTION	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	PAINTED COATING (E.G. ASPHALTIC)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	FIBERGLASS REINFORCED PLASTIC COATED	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	OTHER (SPECIFY)	<u>COLD FOR EPOXY</u>			
	UNKNOWN	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. SECONDARY CONTAINMENT (CHECK ONE)	DOUBLE-WALL TANK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	CONCRETE VAULT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	IMPERVIOUS LINER	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	OTHER (SPECIFY)				
	NONE	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8. LEAK DETECTION (CHECK ALL THAT APPLY)	DAILY INVENTORY CONTROL	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	CONTINUOUS SENSOR	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	ELECTRONIC IN-TANK SYSTEM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	GROUNDWATER MONITORING WELL	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	* PRECISION TEST (ENTER MO./YR. IF WITHIN LAST 5 YRS.)	<input type="checkbox"/> /	<input type="checkbox"/> /	<input type="checkbox"/> /	<input type="checkbox"/> /
* A PRECISION TEST IS NOT AN AIR PRESSURE TEST. BY DEFINITION, A PRECISION TEST IS ACCURATE TO .05 GAL./HR.	OTHER (SPECIFY)				
	NONE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	UNKNOWN	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. PIPING (CHECK ALL THAT APPLY)	BARE STEEL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	GALVANIZED STEEL	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	BLACK IRON	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	FIBERGLASS REINFORCED PLASTIC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	CATHODICALLY PROTECTED	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	OTHER (SPECIFY)				
10. SUBSTANCE CURRENTLY OR LAST STORED IN GREATEST QUANTITY BY VOLUME (CHECK ALL THAT APPLY)	GASOLINE (INCL. ALCOHOL BLENDS)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	DIESEL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	NOS. 2 OR 4 FUEL OIL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	NOS. 5 OR 6 FUEL OIL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	AVIATION FUEL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	KEROSENE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	USED OIL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	OTHER PETROLEUM SUBSTANCE (SPECIFY)				
	HAZARDOUS SUBSTANCE (GIVE NAME OR CAS. NO.)				
	MIXTURE OF SUBSTANCES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
UNKNOWN	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. ADDITIONAL INFORMATION FOR TANKS TAKEN PERMA- NENTLY OUT OF SERVICE	(A) ESTIMATED DATE LAST USED (MO./YR.)	<u>/</u>	<u>/</u>	<u>/</u>	<u>/</u>
	(B) ESTIMATED QUANTITY LEFT STORED (GAL.)				

**VI. SIGNATURE** I CERTIFY UNDER PENALTY OF LAW THAT THE INFORMATION PROVIDED ON THIS FORM AND ALL ATTACHED DOCUMENTS IS TRUE, ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

RONALD T. ALDERMAN OWNER

PRINTED NAME AND OFFICIAL TITLE OF OWNER OR OWNER'S AUTHORIZED REPRESENTATIVE

Ronald T. Alderman  
SIGNATURE

11/19/85  
DATE SIGNED