



SEP 21 2016

September 19, 2016

Ms. Betty Hess
16570 Hess Lane
James Creek, PA 16657

Re: Site Characterization Report / Remedial Action Plan
Storage Tank System Release February 9, 2015
Facility ID No. 31-07856
Incident No. 47284
Cook's Country Store
21042 Cook's Road
Robertsdale, PA 16674
Todd Township, Huntingdon County

Dear Ms. Hess:

The Department of Environmental Protection (Department) has reviewed the document titled Supplemental Site Characterization Report / Remedial Action Plan, dated September 2, 2016 for the release referenced above. The document was prepared by Mountain Research, LLC and submitted as a Site Characterization Report (SCR) and Remedial Action Plan (RAP) as required by 25 Pa. Code § 245.310 and § 245.311, respectively. You selected the Used Aquifer Residential Statewide Health Standard (SHS) as the remediation standard for soil and groundwater.

Based on our review, the Department approves the SCR / RAP in accordance with Section 245.311(b)(1).

Any person aggrieved by this action may appeal, pursuant to Section 4 of the Environmental Hearing Board Act, 35 P.S. Section 7514, and the Administrative Agency Law, 2 Pa.C.S. Chapter 5A, to the Environmental Hearing Board, Second Floor, Rachel Carson State Office Building, 400 Market Street, P.O. Box 8457, Harrisburg, PA 17105-8457, 717-787-3483. TDD users may contact the Board through the Pennsylvania Relay Service, 800-654-5984. Appeals must be filed with the Environmental Hearing Board within 30 days of receipt of written notice of this action unless the appropriate statute provides a different time period. Copies of the appeal form and the Board's rules of practice and procedure may be obtained from the Board. The appeal form and the Board's rules of practice and procedure are also available in braille or on audiotape from the Secretary to the Board at 717-787-3483. This paragraph does not, in and of itself, create any right of appeal beyond that permitted by applicable statutes and decisional law.

IF YOU WANT TO CHALLENGE THIS ACTION, YOUR APPEAL MUST REACH THE BOARD WITHIN 30 DAYS. YOU DO NOT NEED A LAWYER TO FILE AN

APPEAL WITH THE BOARD.

IMPORTANT LEGAL RIGHTS ARE AT STAKE, HOWEVER, SO YOU SHOULD SHOW THIS DOCUMENT TO A LAWYER AT ONCE. IF YOU CANNOT AFFORD A LAWYER, YOU MAY QUALIFY FOR FREE PRO BONO REPRESENTATION. CALL THE SECRETARY TO THE BOARD (717-787-3483) FOR MORE INFORMATION.

Thank you for your cooperation in working with the Department in the remediation of this site. If you have questions, please contact me at 717.705.4857 or by email to cystine@pa.gov.

Sincerely,



Cynthia Stine, P.G.
Licensed Professional Geologist
Storage Tank Section
Environmental Cleanup & Brownfields Program

cc: Mr. Michael Crowe, Mountain Research, LLC
USTIF



March 3, 2016

Ms. Betty Hess
16570 Hess Lane
James Creek, PA 16657

Re: Site Characterization
Cook's Country Store
Facility ID No. 31-07856
Incident No. 47284
21042 Cooks Road
Robertsdale, PA 16674
Todd Township, Huntingdon County

Dear Ms. Hess:

The Department of Environmental Protection (Department) has reviewed the document titled Site Characterization Report, dated February 11, 2016 for the release referenced above. The document was prepared by Mountain Research, LLC and submitted as a Site Characterization Report (SCR) as required by 25 Pa. Code § 245.310 and § 245.311, respectively. You selected the Used Aquifer Residential Statewide Health Standard as the remediation standard for soil and groundwater.

Based on our review, the Department approves the SCR in accordance with Section 245.311(b)(1).

Any person aggrieved by this action may appeal, pursuant to Section 4 of the Environmental Hearing Board Act, 35 P.S. Section 7514, and the Administrative Agency Law, 2 Pa.C.S. Chapter 5A, to the Environmental Hearing Board, Second Floor, Rachel Carson State Office Building, 400 Market Street, P.O. Box 8457, Harrisburg, PA 17105-8457, 717-787-3483. TDD users may contact the Board through the Pennsylvania Relay Service, 800-654-5984. Appeals must be filed with the Environmental Hearing Board within 30 days of receipt of written notice of this action unless the appropriate statute provides a different time period. Copies of the appeal form and the Board's rules of practice and procedure may be obtained from the Board. The appeal form and the Board's rules of practice and procedure are also available in braille or on audiotape from the Secretary to the Board at 717-787-3483. This paragraph does not, in and of itself, create any right of appeal beyond that permitted by applicable statutes and decisional law.

Ms. Betty Hess

- 2 -

March 3, 2016

IF YOU WANT TO CHALLENGE THIS ACTION, YOUR APPEAL MUST REACH THE BOARD WITHIN 30 DAYS. YOU DO NOT NEED A LAWYER TO FILE AN APPEAL WITH THE BOARD.

IMPORTANT LEGAL RIGHTS ARE AT STAKE, HOWEVER, SO YOU SHOULD SHOW THIS DOCUMENT TO A LAWYER AT ONCE. IF YOU CANNOT AFFORD A LAWYER, YOU MAY QUALIFY FOR FREE PRO BONO REPRESENTATION. CALL THE SECRETARY TO THE BOARD (717-787-3483) FOR MORE INFORMATION.

Thank you for your cooperation in working with the Department in the remediation of this site. If you have questions, please contact me at 717.705.4857 or by email to cystine@pa.gov.

Sincerely,

A handwritten signature in cursive script that reads "Cynthia Stine".

Cynthia Stine, P.G.

Licensed Professional Geologist

cc: Michael Crowe, Mountain Research, LLC
USTIF

NARRATIVE INFORMATION (CONT.)

The Department has reviewed the observations of Wosochlo and requests the following information **be submitted by April 30, 2013:**

1. A completed registration form registering Tanks 004, 005, and 006 as Temporarily Out of Service (TOS) and reflecting the proper ownership of the tanks.
2. Documentation that Tanks 004 and 006 have been pumped to less than one (1) inch of liquid.
3. Documentation that the metallic piping connections associated with Tanks 004, 005, and 006 are adequately protected from corrosion.

The requested documentation can be faxed to my attention at 717-705-4830, or mailed to the following address:

Evan J. Wosochlo
 DEP- Environmental Cleanup Program
 Southcentral Regional Office
 909 Elmerton Ave.
 Harrisburg, PA 17110-8200

If you have any questions, please contact Evan Wosochlo at 717-705-4835.

6/21/13- Wosochlo received all requested documentation.

A copy of this narrative was provided (faxed, emailed, hand delivered, mailed) to Mary Dietz on 4/5/13.

DEP Representative Name Evan Wosochlo	DEP Representative Signature 	Title Water Quality Specialist	Date: Telephone: 717-705-4835
<i>Signature by the person interviewed does not necessarily imply concurrence with the findings on this report, but does acknowledge that the person was shown the report or that a copy was left with the person.</i>			
Name of Person	Signature of Person	Title	Date Telephone:



**STORAGE SYSTEM REPORT FORM
NARRATIVE INFORMATION**

Facility ID Number: 31-07856		Facility Name: Cooks Country Store	
Facility Address/Location: 21042 Cooks Rd. Robertsdale, PA 16674		Municipality: Todd Twp.	
		County: Huntington	
Contact Name(s): Betty H. Hess		Contact Address: 16570 Hess Lane James Creek, PA 16657	
Contact Telephone: 814-658-2100 & 814-386-0142		Email: bettyhess@gmail.com	

On 22 May 2014 Pennsylvania Department of Environmental Protection (Department) Water Quality Specialist Rochelle Gaugler conducted a compliance inspection (inspection) of the underground storage tank (UST) system(s) at the above facility (facility) in order to determine compliance with the Storage Tank and Spill Prevention Act and the applicable technical regulations in 25 Pa. Code Chapter 245. The following was observed during the Department's inspection:

1. The facility had three registered USTs that were each constructed of single-wall cathodically protected steel. Tank 004 had a capacity of 4,000 gallons. Tank 005 had a capacity of 3,000 gallons. Tank 006 had a capacity of 2,000 gallons. Tanks 004, 005, and 006 were currently registered as Temporary Out of Service (TOS) with the Department.
2. Product piping associated with each UST was constructed of single-wall fiberglass.
3. Metallic piping connections associated with each UST were not in contact with soil. Metallic tank top connections for all USTs were immersed in several feet of water. The tank top connections had spike anodes installed 31 May 2013 by Pat McVicker.
4. Tanks 004, 005, and 006 utilized suction delivery to the dispensers with a check valve at the pump.
5. Overfill prevention was achieved with a drop tube shutoff device for each UST. The fill caps for Tanks 004, 005, and 006 were padlocked during the Department's visit.
6. Tanks 004, 005, and 006 utilized a two port stage-I vapor recovery system.
7. Due to the TOS status, the facility was currently exempt from Tank Release Detection.
8. GPS coordinates of N 40°12.673' W78°05.298' were entered into eFACTS.
9. The facility also had a small aboveground storage tank (AST) with a dispenser labeled Kerosene. The dispenser hose was missing and the AST sounded empty when tapped. *The Department recommends removing or properly registering this AST.*

28 May 2014- Betty Hess stated that she will address the water in the tank top sumps.

Continued on next page...

NARRATIVE INFORMATION (CONT.)

The Department has reviewed the observations of Gaugler and requests the following information be submitted by **20 June 2014**:

1. Documentation that the tank top sumps associated with Tanks 004, 005, and 006 are free of liquid. A disposal receipt would suffice. *Piping connections submerged in water are not adequately protected from corrosion protection.*

As a reminder, Tanks 004, 005, and 006 are due for a 3rd party facility operations inspection no later than July 25, 2014. The Department recommends that cathodic protection testing be performed on the tanks at this time.

The requested documentation can be faxed to my attention at 717-705-4830, or mailed to the following address:

Rochelle Gaugler
DEP- Environmental Cleanup Program
Southcentral Regional Office
909 Elmerton Ave.
Harrisburg, PA 17110-8200

If you have any questions, please contact Rochelle Gaugler at 717-705-4968.

A copy of this narrative was provided by mail to Betty Hess on 30 May 2014.

18 June 2014- Betty Hess informed the Department that the water was removed from the tank tops. They performed the work themselves, disposing of the clean water on adjacent property that they own. Mrs. Hess was concerned that the tank tops would fill right back up with water since there appeared to be a high water table. She requested information on whom to contact for the upcoming FOI and CP testing. The Department provided the list of certified companies via email. The Department recommended consulting with the certified individual to determine course of action regarding the water problem and whether the AST should be removed or registered with the Department.

22 July 2014- Mrs. Hess inquired about tank removal. The facility had an FOI and CP testing performed. One of the USTs failed CP testing. Due to the facility currently being closed and the high water table, Mrs. Hess is considering just removing all tanks. She had received several different options and bids from Perry Petroleum. Mrs. Hess has the equipment to perform the removal herself, but was unsure if she is allowed. Gaugler informed her that a certified individual has to be present, but she can use her own equipment.

The FOI report was received by the Department. The FOI was completed 10 July 2014. Tank 004 had a CP result of -.820, with the technician unable to get a higher result. The fill caps were locked during the FOI; therefore, overfill prevention could not be verified. The tank probes were removed to manual gauge liquid levels. The FOI listed 18 July 2014 as the date that Perry Petroleum provided the facility with several quotes. The facility had requested quotes to repair and retest the CP, remove Tank 004 only, and remove all USTs.

23 July 2014- Gaugler sent Mrs. Hess information via email on certified companies in the area that may work with Mrs. Hess's request to use her own equipment.

NARRATIVE INFORMATION (CONT.)

2 September 2014- Mrs. Hess stated that Pat McVicker was able to get a passing CP result on Tank 004 but they still want to remove the USTs. They are considering using Mountain Research.

23 September 2014- Tom Hess, Mrs. Hess's son, inquired about the tank removal process and if some work could be done without a certified individual present. Pat McVicker seems really busy and there is no way to leave a message on his voicemail. Gaugler informed Mr. Hess that the concrete on top of the tank field is certified work and cannot be broken up without a certified individual present. The Hess' will keep trying to reach Mr. McVicker.

25 September 2014- Mr. McVicker was having problems with his voicemail. He has contacted the facility. Gaugler requested a copy of the CP test results performed by Mr. McVicker from Mrs. Hess. Central Office has an open violation and needs the documentation to close. Central Office will reprint the registration certificate which closes the other open violation.

07 October 2014- Received signed copies of the tank removal paperwork via email from Mrs. Hess. The Department did not have a computer program that recognized the attachments. The attachments were able to be saved as images. Mrs. Hess believes that Mr. McVicker will provide a copy to the Department.

14 October 2014- Mrs. Hess inquired if Mr. McVicker had submitted any paperwork.

15 October 2014- Gaugler was unable to enlarge the images without losing clarity. Mrs. Hess will submit the documents again via postal mail. However, Mrs. Hess only has the pages that required her signature. Gaugler left a message on her home phone with the Department's address since Mrs. Hess does not have a working email account at this moment. A message was left for Mr. McVicker regarding the submission of his portion of the paperwork.

17 October 2014- Mrs. Hess has an alternate email at krinkled11@yahoo.com. She is still working on getting her gmail account to function normally. The paperwork has been submitted by postal mail.

25 November 2014- Mr. McVicker stated that the tanks are out of the ground. No noticeable contamination was found at the tank field. The excavated area filled with water, but no odor or visual contamination was observed. Water samples were taken from the tank field. The tanks have not been cleaned but were completely dry on the inside when removed. Heavy contamination was found underneath the dispenser island. They have excavated 3' and it is still contaminated. Mr. McVicker has been in contact with the Department clean-up program and has provided a list of environmental specialists to the owners. Mr. McVicker stated that the owners wanted to keep the tanks. The Department informed Mr. McVicker and Mrs. Hess that the tanks have to be properly cleaned. Once cleaned, the tanks will no longer be considered tanks due to the cleaning process and the owners are free to do as they wish with them. Mrs. Hess stated that they may cut the ends off and use them as a type of bridge. Gaugler instructed Mrs. Hess to inform those that are to clean the tanks so they are cut open according to her wishes and not across the top like normal. USTIF information was provided to Mrs. Hess via email to bettyhhess@gmail.com since it is working again. ***Pending removal/cleaning paperwork***

DEP Representative Name Rochelle Gaugler	DEP Representative Signature	Title Water Quality Specialist	Date:
			Telephone: 717-705-4968
<i>Signature by the person interviewed does not necessarily imply concurrence with the findings on this report, but does acknowledge that the person was shown the report or that a copy was left with the person.</i>			
Name of Person	Signature of Person	Title	Date
			Telephone:



pennsylvania
DEPARTMENT OF ENVIRONMENTAL
PROTECTION

March 11, 2014

Ms. Betty Hess
16570 Hess Lane
James Creek, PA 16657

Re: Storage Tank Program
Underground Storage Tank Closure Report
Facility ID No. 31-07856
Incident No. 47284
Cook's Country Store
21042 Cook's Road
Robertsdale, PA 16674
Todd Township, Huntingdon County

Dear Ms. Hess:

The Department has reviewed the Underground Storage Tank (UST) Closure Report Form submitted by Petroleum Maintenance Service dated February 9, 2015, regarding the removal of an UST system at the above-referenced facility. The Closure Report indicates that contamination above the Statewide Health Standard still remains at the site. Chapter 245, Section 245.310 of the Department's rules and regulations requires the responsible party to submit a Site Characterization Report within 180 days of confirming a reportable release. Please submit the Site Characterization Report by May 25, 2015 as noted in the previous letter from the Department dated December 2, 2014. Please be advised that Section 245.306 requires interim remedial actions for any release/incident that may have an immediate threat to human health or the environment.

This letter does not waive any rights of the Commonwealth of Pennsylvania to take enforcement action under applicable law for the conditions discussed in this letter. Thank you for your cooperation in working with the Department in the remediation of this site. If you have any questions, please call me at 717.705.4857.

Sincerely,

Cynthia Stine, P.G.
Licensed Professional Geologist

cc: Pat McVicker, Petroleum Maintenance Service
USTIF

#1

NOTIFICATION OF REPORTABLE RELEASE (Owners and Operators) Initial
 Follow-Up

NOTIFICATION OF CONTAMINATION (Certified Installers and Inspectors)

NOTIFICATION OF REPORTABLE RELEASE (Owners and Operators)

The Storage Tank Program's Corrective Action Process (CAP) regulations establish release reporting requirements for owners and operators of storage tanks and storage tank facilities.

Subsection 245.305(a) of the regulations requires owners or operators to notify the appropriate regional office of the Department as soon as practicable, but no later than 24 hours after the confirmation of a reportable release.

Subsection 245.305(d) requires owners or operators to provide an initial written notification to the Department, each municipality in which the reportable release occurred, and each municipality where that release has impacted environmental media or water supplies, buildings, or sewer or other utility lines, within 15 days of the notice required by subsection 245.305(a).

Subsection 245.305(e) requires owners or operators to provide follow-up written notification to the Department and to each impacted municipality of new impacts to environmental media or water supplies, buildings, or sewer or other utility lines discovered after the initial written notification required by subsection 245.305(d). Written notification is to be made within 15 days of the discovery of the new impact.

This form may be used to comply with subsections 245.305(d) and (e).

OWNERS AND OPERATORS (O/O)

INDICATE IF THIS IS AN INITIAL OR FOLLOW-UP NOTIFICATION BY MARKING THE APPROPRIATE BOX FOUND IN THE TOP RIGHT-HAND CORNER OF THIS FORM. PLEASE COMPLETE ALL INFORMATION IN SECTIONS I, II, IIIA, IIIB, IV, V, VII and VIII.

NOTIFICATION OF CONTAMINATION (Certified Installers and Inspectors)

The Storage Tank Program's Certification regulations establish standards of performance for certified installers and inspectors of storage tanks and storage tank facilities.

Subsection 245.132(a)(4) of the regulations requires certified installers and inspectors to report to the Department a release of a regulated substance or confirmed or suspected contamination of soil, surface or groundwater from regulated substances observed while performing services as a certified installer or inspector.

This form may be used to comply with subsection 245.132(a)(4). Subsection 245.132(a)(4) requires submission of the form within 48 hours of observing suspected or confirmed contamination. Where there is a reportable release, the form may be submitted jointly by the owner, operator, certified installer and certified inspector. In this instance, the form must be received by the appropriate regional office within 15 days of the notice required by subsection 245.305(a).

CERTIFIED INSTALLERS AND INSPECTORS (I/I)

PLEASE COMPLETE ALL INFORMATION IN SECTIONS I, II, IIIA, IIIC, VI, VII and VIII.

INSTRUCTIONS

- I. FACILITY INFORMATION** - Record the name, I.D. number and physical location (not P.O. Box) of the facility at which a reportable release has been confirmed or at which suspected or confirmed contamination has been observed. Include the name and phone number of a person to contact at the facility.
 - II. OWNER/OPERATOR INFORMATION** - Record the name, business address and telephone number of the owner of the facility identified in Section I. Also, record the name and telephone number of the operator of the facility.
 - III. REGULATED SUBSTANCE INFORMATION** - Indicate to the best of your knowledge: A) the type of product or products involved; B) the quantity of product or products released; and C) whether the contamination is suspected or confirmed.
 - IV. REPORTABLE RELEASE INFORMATION** - Record the date of confirmation of the reportable release, e.g., "9/18/01"; the date and regional office notified; and the date the local municipality(ies) [provide name of municipality(ies)] was/were sent a copy of this form. Indicate to the best of your knowledge the source/cause of the release, how the release was discovered and the environmental media affected and impacts.
 - V. INTERIM REMEDIAL ACTIONS** - Indicate the interim remedial actions planned, initiated or completed.
 - VI. SUSPECTED/CONFIRMED CONTAMINATION INFORMATION** - Record the date of observation of the suspected or confirmed contamination, e.g., "11/24/01". Indicate to the best of your knowledge the indications of a suspected release or extent of confirmed contamination resulting from the release of the regulated substance.
 - VII. ADDITIONAL INFORMATION** - Provide any additional, relevant, available information concerning the reportable release or suspected or confirmed contamination. Include in this section specific details or problems about the release. For example, if the piping was the source of the release and the cause was corrosion of a metal connector or flexible connector, it is important to include that information here. Use additional 8 1/2" x 11" sheets of paper, if necessary.
 - VIII. CERTIFICATION** - Please print your name, and provide your signature and date of signature. If a certified installer/inspector, provide certification number and company certification number.
 - IX. ATTACHMENT** - If a certified installer/inspector, provide a copy of failed valid tightness test(s), if applicable.
- PLEASE SEND COMPLETED ORIGINAL FORM TO:
PA Department of Environmental Protection
Environmental Cleanup and Brownfields Program
Storage Tank Section
(and the appropriate address below,
depending on where the FACILITY is located)

DEC 1 2014

<p>Southeast Region 2 East Main Street Norristown, PA 19401 PHONE: 484-250-5900 FAX: 484-250-5961</p> <p style="text-align: center;">Counties Bucks, Chester, Delaware, Montgomery, Philadelphia</p>	<p>Northeast Region 2 Public Square Wilkes-Barre, PA 18711-1915 PHONE: 570-826-2511 FAX: 570-820-4807</p> <p style="text-align: center;">Counties Carbon, Lackawanna, Lehigh, Luzerne, Monroe, Northampton, Pike, Schuylkill, Susquehanna, Wayne, Wyoming</p>	<p>South-central Region 909 Elmerton Avenue Harrisburg, PA 17110 PHONE: 866-825-0208 FAX: 717-705-4830</p> <p style="text-align: center;">Counties Adams, Bedford, Berks, Blair, Cumberland, Dauphin, Franklin, Fulton, Huntingdon, Juniata, Lancaster, Lebanon, Mifflin, Perry, York</p>	<p>North-central Region 208 W. Third Street, Suite 101 Williamsport, PA 17701 PHONE: 570-321-6325/327-3636 FAX: 570-327-3420</p> <p style="text-align: center;">Counties Bradford, Cameron, Centre, Clinton, Clearfield, Columbia, Lycoming, Montour, Northumberland, Potter, Snyder, Sullivan, Tioga, Union</p>	<p>Southwest Region 400 Waterfront Drive Pittsburgh, PA 15222 PHONE: 412-442-4091/4000 FAX: 412-442-4328</p> <p style="text-align: center;">Counties Allegheny, Armstrong, Beaver, Cambria, Fayette, Greene, Indiana, Somerset, Washington, Westmoreland</p>	<p>Northwest Region 230 Chestnut Street Meadville, PA 16335-3461 PHONE: 814-332-6945 800-373-3398 FAX: 814-332-6121</p> <p style="text-align: center;">Counties Butler, Clarion, Crawford, Elk, Erie, Forest, Jefferson, Lawrence, McKean, Mercer, Venango, Warren</p>
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#1

Incident - 47284

2630-FM-BECB0082 Rev. 5/2014

File-UST

FACILITY I.D. NUMBER 31-07856

I. FACILITY INFORMATION (Both O/O and I/I)			II. OWNER/OPERATOR INFORMATION (Both O/O and I/I)		
Facility Name <u>Cook's Country Store</u>	Facility I.D. Number <u>31-07856</u>		Owner Name <u>Betty Hess</u>	Address <u>16570 HESS LAKE</u>	
Street Address (P.O. Box not acceptable) <u>21042 Cook's Rd.</u>			City <u>JAMES CREEK</u>	State <u>PA</u>	Zip Code <u>16657</u>
City <u>Robertsdale</u>	State <u>PA</u>	Zip Code <u>16674</u>	Telephone Number <u>1914</u>		
County <u>Huntingdon</u>	Municipality <u>Todd Twp.</u>		Operator Name <u>()</u>		
Contact Person <u>Tom Hess</u>	Telephone Number <u>(814) 386-0165</u>		Telephone Number <u>()</u>		

III. REGULATED SUBSTANCE INFORMATION

A. Type of Product(s) Involved (Mark All That Apply <input checked="" type="checkbox"/>): <u>Both O/O and I/I</u>	B. Quantity (Gallons) of Product(s) Released: <u>O/O Only</u>	C. Contamination Suspected [S] or Confirmed [C] (Mark All That Apply <input checked="" type="checkbox"/>): <u>I/I Only</u>
Leaded Gasoline <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> [S] <input type="checkbox"/> [C]
Unleaded Gasoline <input checked="" type="checkbox"/>	<u>UNK</u>	<input checked="" type="checkbox"/> [S] <input type="checkbox"/> [C]
Aviation Gasoline <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> [S] <input type="checkbox"/> [C]
Kerosene <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> [S] <input type="checkbox"/> [C]
Jet Fuel <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> [S] <input type="checkbox"/> [C]
Diesel Fuel <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> [S] <input type="checkbox"/> [C]
New Motor Oil <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> [S] <input type="checkbox"/> [C]
Used Motor Oil <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> [S] <input type="checkbox"/> [C]
Fuel Oil No. 1 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> [S] <input type="checkbox"/> [C]
Fuel Oil No. 2 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> [S] <input type="checkbox"/> [C]
Fuel Oil No. 4 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> [S] <input type="checkbox"/> [C]
Fuel Oil No. 5 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> [S] <input type="checkbox"/> [C]
Fuel Oil No. 6 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> [S] <input type="checkbox"/> [C]
Other (Specify) <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> [S] <input type="checkbox"/> [C]
Unknown <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> [S] <input type="checkbox"/> [C]

IV. REPORTABLE RELEASE INFORMATION (O/O Only)

Date Reportable Release was Confirmed: <u>1/1/14</u> m d y	Date Owner/Operator Sent Copy of this Written Notification to Local Municipality(ies) and Name of Municipality(ies) Notified: Date: <u>1/1/14</u> Municipality <u></u> m d y
Date Owner/Operator Verbally Notified Appropriate Regional Office of Reportable Release and Office Notified: Date: <u>11/25/14</u> Office <u>SOUTH CENTRAL</u> m d y	Date: <u>1/1/14</u> Municipality <u></u> m d y

Source (Mark All That Apply <input checked="" type="checkbox"/>):	How Discovered (Mark All That Apply <input checked="" type="checkbox"/>):	Environmental Media Affected and Impacts (Mark All That Apply <input checked="" type="checkbox"/>):
Tank (DEP Assigned Nos. <u></u>) <input type="checkbox"/>	During Closure <input checked="" type="checkbox"/>	Soil <input checked="" type="checkbox"/>
Piping System (Aboveground Regulated) <input type="checkbox"/>	Lining Installation <input type="checkbox"/>	Sediment <input type="checkbox"/>
Piping System (Underground Regulated) <input type="checkbox"/>	Routine Leak Detection <input type="checkbox"/>	Surface Water <input type="checkbox"/>
Piping System (Non-Regulated) <input type="checkbox"/>	Third Party Inspection <input type="checkbox"/>	Ground Water <input type="checkbox"/>
Dispenser/Dispensing Equipment <input type="checkbox"/>	Tightness Testing Activities <input type="checkbox"/>	Bedrock <input type="checkbox"/>
Spill Catchment Basin <input type="checkbox"/>	Visible Product or Odor Reports <input type="checkbox"/>	Water Supplies <input type="checkbox"/>
Accident/Natural Disaster <input type="checkbox"/>	Water in Tank <input type="checkbox"/>	Vapors/Product in Buildings <input type="checkbox"/>
Submersible Turbine Pump Head/Fittings <input type="checkbox"/>	Construction <input type="checkbox"/>	Vapors/Product in Sewer/Utility Lines <input type="checkbox"/>
Containment/Sump Failure <input type="checkbox"/>	Upgrade/Repair <input type="checkbox"/>	Ecological Receptors <input type="checkbox"/>
Other (Specify) <input type="checkbox"/>	Supply Well Sample Results <input type="checkbox"/>	
Unknown <input checked="" type="checkbox"/>	Monitoring Well Sample Results <input type="checkbox"/>	
Cause (Mark All That Apply <input checked="" type="checkbox"/>):	Property Transfer <input type="checkbox"/>	
Faulty Installation <input type="checkbox"/>	Other (Specify) <input type="checkbox"/>	
Corrosion <input type="checkbox"/>	Unknown <input type="checkbox"/>	
Physical/Mechanical Failure <input type="checkbox"/>		
Spill During Delivery <input type="checkbox"/>		
Overfill at Delivery <input type="checkbox"/>		
Vehicle Gas Tank Overfill <input type="checkbox"/>		
Product Delivery Hose Rupture <input type="checkbox"/>		
Other (Specify) <input type="checkbox"/>		
Unknown <input checked="" type="checkbox"/>		

#.1

VIII. CERTIFICATION (Both O/O and I/I)

I, Betty Hess, hereby certify, under penalty of law as provided in 18 Pa. (Print Name)

C.S.A. §4904 (relating to unsworn falsification to authorities) that I am the owner or operator of the above referenced storage tank facility and that the information provided by me in this notification is true, accurate and complete to the best of my knowledge and belief.

Betty Hess Signature of Owner or Operator Nov 12 2014 Date

I, George P. McVicker, hereby certify, under penalty of law as provided in 18 Pa. (Print Name)

C.S.A. §4904 (relating to unsworn falsification to authorities) that I am the certified installer who performed tank handling activities at the above referenced storage tank facility and that the information provided by me in this notification is true, accurate and complete to the best of my knowledge and belief.

George P. McVicker Signature of Certified Installer 11 12 2014 Date

759 Installer Certification Number 511 Company Certification Number

I, _____, hereby certify, under penalty of law as provided in 18 Pa. (Print Name)

C.S.A. §4904 (relating to unsworn falsification to authorities) that I am the certified inspector who performed inspection activities at the above referenced storage tank facility and that the information provided by me in this notification is true, accurate and complete to the best of my knowledge and belief.

Signature of Certified Inspector 1 1 Date

Inspector Certification Number _____ Company Certification Number

NOTIFICATION OF REPORTABLE RELEASE (Owners and Operators)
NOTIFICATION OF CONTAMINATION (Certified Installers and Inspectors)

1-28-97
H/B

NOTIFICATION OF REPORTABLE RELEASE (Owners and Operators)

On August 21, 1993, the Storage Tank Cleanup Program's Corrective Action Process (CAP) regulations became effective. These regulations establish release reporting requirements for owners and operators of storage tanks and storage tank facilities.

Subsection 245.305(a) of the regulations requires owners or operators to notify the appropriate regional office of the Department as soon as practicable, but no later than 2 hours, after the confirmation of a reportable release.

Subsection 245.305(d) requires owners or operators to provide written notification to the appropriate regional office and to the local municipality, within 15 days of the notice required by Subsection 245.305(a). This form may be used to comply with Subsection 245.305(d).

OWNERS AND OPERATORS (O/O)

PLEASE COMPLETE SECTIONS I, II, IIIA, IIIB, IV, V, VII and VIII.

NOTIFICATION OF CONTAMINATION (Certified Installers and Inspectors)

On September 21, 1991, the Storage Tank Program's Certification regulations became effective. These regulations establish standards of performance for certified installers and inspectors of storage tanks and storage tank facilities.

Subsection 245.132(a)(4) of the regulations requires certified installers and inspectors to report to the Department a release of a regulated substance or confirmed or suspected contamination of soil, surface or groundwater from regulated substances observed while performing services as a certified installer or inspector.

This form may be used to comply with Subsection 245.132(a)(4). The Department expects submission of the form within 48 hours of observing suspected or confirmed contamination. Where there is a reportable release, the form may be submitted jointly by the owner, operator, certified installer and certified inspector. In this instance, the form must be received by the appropriate regional office within 15 days of the notice required by Subsection 245.305(a).

CERTIFIED INSTALLERS AND INSPECTORS (I/I)

PLEASE COMPLETE SECTIONS I, II, IIIA, IIIC, VI, VII and VIII.

INSTRUCTIONS

- I. **FACILITY INFORMATION** - Record the name, I.D. number and physical location (not P.O. Box) of the facility at which a reportable release has been confirmed or at which suspected or confirmed contamination has been observed. Include the name and phone number of a person to contact at the facility.
- II. **OWNER INFORMATION** - Record the name, business address and phone number of the owner of the facility identified in Section I.
- III. **REGULATED SUBSTANCE INFORMATION** - Indicate to the best of your knowledge: A) the type of product or products involved; B) the quantity of product or products released; and C) whether the contamination is suspected or confirmed.
- IV. **REPORTABLE RELEASE INFORMATION** - Record the date of confirmation of the reportable release, e.g., "08/21/93"; the date and regional office notified; and the date the local municipality (provide name of municipality) was sent a copy of this form. Indicate to the best of your knowledge the extent of contamination resulting from the release of the regulated substance.
- V. **INTERIM REMEDIAL ACTIONS** - Indicate the interim remedial actions planned, initiated or completed.
- VI. **SUSPECTED/CONFIRMED CONTAMINATION INFORMATION** - Record the date of observation of the suspected or confirmed contamination, e.g., "01/01/94". Indicate to the best of your knowledge the indications of a suspected release or extent of confirmed contamination resulting from the release of the regulated substance.
- VII. **ADDITIONAL INFORMATION** - Provide any additional, relevant, available information concerning the reportable release or suspected or confirmed contamination. Include in this section a brief description of the activity that was being conducted when the reportable release was confirmed by the owner or operator or when the suspected/confirmed contamination was observed by the certified installer or inspector, e.g., during a(n) installation, repair or upgrade, removal from service or routine inspection.
- VIII. **CERTIFICATION** - Please print your name, and provide your signature and date of signature. If a certified installer/inspector, provide certification number and company certification number.

PLEASE SEND COMPLETED ORIGINAL FORM TO:

PA Department of Environmental Protection
Environmental Cleanup Program
Storage Tank Section
(and the appropriate address below, depending on where the FACILITY is located)

<p>Southeast Region Lee Park, Suite 6010 555 North Lane Conshohocken, PA 19420 FAX: 610-832-6143</p> <p>Counties Bucks, Chester, Delaware, Montgomery, Philadelphia</p>	<p>Northeast Region 2 Public Square Wilkes-Barre, PA 18711-0790 FAX: 717-820-4907</p> <p>Counties Carbon, Lackawanna, Lehigh, Luzerne, Monroe, Northampton, Pike, Schuylkill, Susquehanna, Wayne, Wyoming</p>	<p>Southcentral Region One Ararat Boulevard Harrisburg, PA 17110 FAX: 717-540-7492</p> <p>Counties Adams, Bedford, Berks, Blair, Cumberland, Dauphin, Franklin, Fulton, Huntingdon, Juniata, Lancaster, Lebanon, Mifflin, Perry, York</p>	<p>Northcentral Region 208 W. Third Street, Suite 101 Williamsport, PA 17701 FAX: 717-327-3565</p> <p>Counties Bradford, Cameron, Centre, Clinton, Clearfield, Columbia, Lycoming, Montour, Northumberland, Potter, Snyder, Sullivan, Tioga, Union</p>	<p>Southwest Region 400 Waterfront Drive Pittsburgh, PA 15222 FAX: 412-442-4194</p> <p>Counties Allegheny, Armstrong, Beaver, Cambria, Fayette, Greene, Indiana, Somerset, Washington, Westmoreland</p>	<p>Northwest Region 230 Chestnut Street Meadville, PA 16235 FAX: 814-332-6121</p> <p>Counties Butler, Clarion, Crawford, Elk, Erie, Forest, Jefferson, Lawrence, McKean, Mercer, Venango, Warren</p>
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I. FACILITY INFORMATION (Both O/O and I/I)

Facility Name Country Crossroads Facility I.D. Number 31-07856
 Street Address (P.O. Box not acceptable) HCl, Box 13
 City Robertsdale State PA Zip Code 16674
 County Huntingdon Municipality Todd Township
 Contact Person Norman Mellott Phone Number (814) 448-9151

II. OWNER INFORMATION (Both O/O and I/I)

Owner Name Norman Mellott
 Address HCl, Box 13
 City Robertsdale
 State PA Zip Code 16674
 Phone Number (814) 448-9151

1-28-97 Site visit by Mark Bollman. Filed claim w/ Indemn. Fund. Contractor is contacting consultant.

VII. ADDITIONAL INFORMATION (Both O/O and I/I)

Include a brief description of the activity that was being conducted when the reportable release was confirmed by the owner or operator or when the suspected/confirmed contamination was observed by the certified installer or inspector, e.g., during a(n) installation, repair or upgrade, removal from service or routine inspection

While performing a piping modification at this facility, encountered water.

Water has been sent to lab to be analyzed and results will be available for review at meeting with Greg Bowman from DEP.

(Meeting has been set for 9:00 am, 1/28/97, at facility)

VIII. CERTIFICATION (Both O/O and I/I)

I, Norman Mellott (Print Name), hereby certify, under penalty of law as provided in 18 Pa. C.S.A. §4904 (relating to unsworn falsification to authorities) that I am the owner or operator of the above referenced storage tank facility and that the information provided by me in this notification is true, accurate and complete to the best of my knowledge and belief.

Signature of Owner or Operator Date

I, Brent Powell (Print Name), hereby certify, under penalty of law as provided in 18 Pa. C.S.A. §4904 (relating to unsworn falsification to authorities) that I am the certified installer who performed tank handling activities at the above referenced storage tank facility and that the information provided by me in this notification is true, accurate and complete to the best of my knowledge and belief.

Brent Powell
Signature of Certified Installer Date 1/24/97

1782
Installer Certification Number 14
Company Certification Number

I, _____ (Print Name), hereby certify, under penalty of law as provided in 18 Pa. C.S.A. §4904 (relating to unsworn falsification to authorities) that I am the certified inspector who performed inspection activities at the above referenced storage tank facility and that the information provided by me in this notification is true, accurate and complete to the best of my knowledge and belief.

Signature of Certified Inspector Date

Inspector Certification Number 14
Company Certification Number

Mr Brian Sheaffer
Perry Petroleum Equipment, Ltd.
Route 17, P. O. Box 208
Ickesburg, PA 17057

Project Manager: n/a
Project Name: **Country Crossroads**
Project Number: n/a
Sampler: n/a
Date Sampled: January 24, 1997
Time Sampled: n/a
Date Received: January 27, 1997
Time Received: 8:45 AM
Analyst: Terry Osenbach

Analytical Testing Parameters

Selected PA DEP UST Parameters: Unleaded Gasoline

Sample ID: C2007-01 • 1

Test / Parameter	Result	Units	MDL	Method	Test Date	Analyst
MTBE	53.5	ppb	10.0	EPA 8021A	January 27, 1997	RMS
Benzene	348	ppb	10.0	EPA 8021A	January 27, 1997	RMS
Toluene	1,510	ppb	10.0	EPA 8021A	January 27, 1997	RMS
Ethylbenzene	1,260	ppb	10.0	EPA 8021A	January 27, 1997	RMS
m,p-Xylene	5,500	ppb	20.0	EPA 8021A	January 27, 1997	RMS
o-Xylene	1,100	ppb	10.0	EPA 8021A	January 27, 1997	RMS
Naphthalene	572	ppb	10.0	EPA 8021A	January 27, 1997	RMS

ppb = Parts per Billion = µg/L (Water)

The MDL is the Method Detection Limit, defined as the minimum concentration of a substance that can be measured and reported with 99% confidence that the analyte concentration is greater than zero and is determined from analysis of a sample in a given matrix containing the analyte.

Selected PA DEP UST Parameters: Unleaded Gasoline

Sample ID: C2007-02 • 2

Test / Parameter	Result	Units	MDL	Method	Test Date	Analyst
MTBE	63.2	ppb	10.0	EPA 8021A	January 27, 1997	RMS
Benzene	428	ppb	10.0	EPA 8021A	January 27, 1997	RMS
Toluene	1,210	ppb	10.0	EPA 8021A	January 27, 1997	RMS
Ethylbenzene	1,220	ppb	10.0	EPA 8021A	January 27, 1997	RMS
m,p-Xylene	4,860	ppb	20.0	EPA 8021A	January 27, 1997	RMS
o-Xylene	798	ppb	10.0	EPA 8021A	January 27, 1997	RMS
Naphthalene	591	ppb	10.0	EPA 8021A	January 27, 1997	RMS

ppb = Parts per Billion = µg/L (Water)

The MDL is the Method Detection Limit, defined as the minimum concentration of a substance that can be measured and reported with 99% confidence that the analyte concentration is greater than zero and is determined from analysis of a sample in a given matrix containing the analyte.

Reviewed and reported by:

Terry Osenbach, Laboratory Director
PADEP Lab No. 22-478

(31) Huntingdon Co



Earthtech, Inc.

CONSULTING SCIENTISTS & ENGINEERS

RECEIVED SOUTH CENTRAL REGION
97 JUN 19 9 20 AM

Environmental, Mining & Site Development Services

ENVIRONMENTAL CLEANUP
SOUTHWESTERN REGION
June 6, 1997
97 JUN 18 2 30 PM

Todd Twp
31-07852

WOOD JOHNSKY

Mr. Gerald Hawk
ICF Kaiser
4000 Vine Street
Middletown, PA 17057
Fax: (412) 459-8915

RE: Country Crossroads/Norman Mellot
I.D. # 97-027 (m)

Dear Mr. Hawk:

I am writing to you to bring you up to date on the above referenced facility located in Robertsdale, Huntingdon County. The initial claim for this project was filed in February of 1997 when contaminated water and soils were encountered during a tank upgrade project at the facility. At this time an upgrade was scheduled for the tank tops up including an Automatic Tank Gauge. The existing tanks consisted of 2,000, 3,000, and 4,000 gallon bare steel tanks with fiberglass lining. All tanks contained unleaded gasoline. Perry Petroleum Equipment, LTD. of Ickesburg, Pa was hired to perform the upgrade on the tank system. Upon uncovering the tops of the tanks, strong petroleum odors were detected, water was also encountered and was visually contaminated. Perry Petroleum contacted Mr. Mark Bollman of PA DEP, Southcentral Region of the contamination. Mr. Bollman suggested to the tank owner that he hire an environmental consultant to characterize the contamination. It was at this time that Mr. Mellot retained the services of Earthtech, Inc.

Earthtech, Inc. arrived at the site on 2-24-97 and dug three test pits around the current tank field. The test pits appeared to be free of contamination; soil samples were collected from two of the test pits to document existing conditions. The samples were well below the current PA DEP Soil Standard/Action Level for all analytes. Based on this information, it appeared the contamination was isolated to the immediate tank field.

At this time quotes were given to the owner for several options to update the current system. The owner elected to install new STi-P3 tanks on the opposite side of the building in a virgin excavation. The owner decided to remove the old system and address the contamination once the new system was up and running.

Tank removal of the old system began on 5-29-97. Perry Petroleum removed the tanks and Earthtech, Inc. provided the site characterization and will prepare the closure report. Approximately 100 tons of contaminated soil was removed from the excavation. The contamination appeared to have originated from the product piping to the 3,000 gallon tank. Soils directly below the piping run for the 3,000 and 4,000 were grossly contaminated. The line

Reply To: 614 South Franklin Ave., Suite 200, Somerset, PA 15501 (814) 443-3384 FAX: (814) 445-4130
 334 Bloomfield St., Suite 101, Johnstown, PA 15904-3268 (814) 266-6402 FAX (814) 266-6530

for the 4,000 gallon tank ran straight to the tank while the product line for the 3,000 gallon contained a 90 degree elbow. This elbow appears to be the source of the contamination. All tanks appeared in fair condition with no obvious holes. Ground water was encountered approximately 5 feet below surface grade. The water did contain a sheen but no free product. Five soil samples were collected from the soil/water interface after the contaminated soils were removed. The samples were below the Soil Standard/Action Level set forth by PA DEP in August of 1996. No water samples were collected at this time due to the agitation of the water. Three 4" observation wells were installed and the excavation was backfilled with clean fill. The wells will be sampled in the near future to determine the quality of the ground water. A closure report will then be generated and forwarded to your attention. Arrangements will be made to dispose of the contaminated soils.

If you have questions or require additional information, please feel free to contact me.

Respectfully submitted,



Todd A. Ribblett
Project Manager

cc: file
Mark Bollman/PA DEP
Norman Mellot
Bob Fritz/Perry Petroleum

Certified Return Receipt # P 313 938 985

2630-FM-BECB0575 Rev. 9/2012



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF ENVIRONMENTAL CLEANUP AND BROWNFIELDS

RECEIVED
DEP SOUTH CENTRAL REGION
JUN 21 2013
ENVIRONMENTAL CLEANUP

UNDERGROUND STORAGE TANK
MODIFICATION REPORT

I. FACILITY INFORMATION		OFFICIAL USE ONLY	
Facility I.D. Number	<u>31-07856</u>	INITIAL	DATE
Facility Name	<u>COOK'S COUNTRY STORE</u>	CO Review	_____
Facility Address	<u>21042 COOKS RD</u> <u>ROBERTSDALE, PA.</u>	Data Entry	_____
Municipality	<u>Todd TWP</u>	RO Review	<u>EW</u> <u>6/24/13</u>
County	<u>Huntingdon</u>		

II. TANK INFORMATION

Tank modification is in accordance with manufacturer's specifications and current industry standards. If no, explain all irregularities in the comment section.

Yes No

Is this modification in response to an inspection?

Yes No

Tank modification complies with Fire Safety Requirements (for flammable & combustible liquids). If no, explain all irregularities in the comment section.

Yes No Not Applicable

Fire/Safety Permit Number _____ Issued By _____ Date _____

This modification activity is?

Minor modification Major modification

Major modifications include all instances of excavation in the backfill area.

III. INSTALLER INFORMATION

Installer Name	Installer Cert. No.	Certification Category(ies)	Company Name	Company Cert. No.
<u>George P. McVickr</u>	<u>759</u>	<u>UMX</u>	<u>PETRO MAINT SER</u>	<u>511</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

2630-FM-BECB0575 Rev. 9/2012

FACILITY I.D. # 31 - 07856

IV. TANK SYSTEM COMPONENTS. (Describe only components that have been installed or modified.)

Tank # 001 Tank # 002 Tank # 003

Tank # 001 Tank # 002 Tank # 003

- (1) Tank Modification (describe in V. Comments)
- C Cathodic protection (modified)
 - 99 Other

- (6) Spill Prevention Repair (describe repair, test and type in V. Comments)
- Y Yes

- (2) Underground Piping Installation or Modification (describe in V. Comments)
- B Cathodic protection added
 - Field design by a "corrosion expert" Industry Standard used for CP
 - H Modification of existing piping
 - I Double walled steel piping
 - J Double walled fiberglass
 - K Double walled plastic
 - M Jacketed piping
 - 99 Other

- (7) Overfill Prevention Installation or Modification
- S Drop tube shut-off device added
 - A Overfill alarm added
 - B Ball float valve with extractor added

- (PFLEX) Piping Flexible Connection Installation or Modification (describe in V. Comments)
- B Metallic w/cathodic protection added
 - I Placed inside containment
 - M Jacket added
 - 99 Other

- (12) Tank Release Detection Modification
- E Automatic tank gauge added
 - H Interstitial monitor (2 walls) added
 - J Groundwater monitor added (attach site evaluation)
 - K Vapor monitoring added (attach site evaluation)

- (4) Product Delivery (Pump) System Modification (describe in V. Comments)
- A Suction: Check valve at pump
 - B Suction: Check valve at tank
 - C Pressure: Submersible pump (STP)
 - D Gravity Fed
 - 88 Installed/removed siphon bar

- (19) Stage I Vapor Recovery Modification
- A Coaxial added
 - B 2 Port added

- (20) Stage II Vapor Recovery Modification
- A Complete balance system added
 - B Complete assist system added
 - C Underground piping only added

- (5) Pipe Release Detection Modification (describe in V. Comments)
- A Automatic line leak detector added
 - D Interstitial monitoring added
 - K Electronic line leak detector added
 - L Continuous Interstitial monitor added
 - 88 STP shut off added
 - 99 Other

- (21) Tank top Sump Installation or Repair (describe installation and test in V. Comments)
- Y Yes

- (22) Dispenser Pan Installation or Repair (describe installation and test in V. Comments)
- 88 New dispenser installed
 - Y Under existing dispenser



2630-FM-SECB0675 Rev. 9/2012

FACILITY I.D. # 31 - 07853

V. COMMENTS (Describe activity completed in detail. Explain "other" modifications. Include site drawing.)

om. 5-1-13
 Pumped water gas mixture out of all three tanks.
 Drained, Pumped lines at pumps.
 Found European-ched Valves.
 Plugged + capped lines + Pumps. Install new spill caps
 Put on locks. Tanks had about 1/4" - 1/2" Product water left in tanks.

om 5-10-13
 Attempted to Dewater excavation.
 Was unable to do with no pump.
 Contacted Ben Thomas He intern had. Branda Frucht.
 Contact me
 Applied for Temporary Discharge letter.
 Received on Friday may 24 2013

om
 May 31st. 2013
 Water was pumped Below Tank TOP level.
 Spike anoids where added to exposed fitting (elbow)
 at Tank TOP where Doublewall pipe connects.
 Tested ok.

VI. INSTALLER CERTIFICATION

This Section must be completed by the certified installer(s) for modifications performed on underground storage tank systems. By signing below, the certified installer verifies that the tank handling activity was conducted in compliance with the standards of Act 32 and applicable regulations. The signature also certifies, under penalty of law as provided in 18 PA C.S.A. Section 4904 (relating to unsworn falsification to authorities), that the information provided is true, accurate, and complete to the best of his/her knowledge and belief.

<u>Serge P. Muth</u>	<u>6-1-13</u>	<u>5-31-13</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
Signature(s)	Date(s) of Signature	Date(s) Work Completed



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF WASTE MANAGEMENT
STORAGE TANK DIVISION

FOR DEP USE ONLY
Reviewer _____
Date _____
Entered by _____
Date _____

HUNTINGDON CO.

**UNDERGROUND STORAGE TANK FACILITY
OPERATIONS INSPECTION**

FACILITY INFORMATION

ID Number 31 - 07856
Name Cooks Country Store
Location 21042 Cooks Road
Address Robertsdale, Pa. 16674
Municipality Fed Co. Twp

Representative Present During Inspection

Name _____
Phone _____

Owner Operator Employee None

CERTIFIED INSPECTOR

Name Des Warzel
ID No. 1367
Phone 814 254-9334
E-mail dustydes@aol.com

Date of First Site Visit (month/day/year)
2/26/2013

OWNER (must be a person)

Name _____

OPERATOR (if different than owner)

Name _____

Financial Responsibility discussed with owner

Yes No

- Provided by USTIF. Owner must have deductibles available as provided in Subchapter H of the regulations.
- Required of all UST owners except state agencies.

Suspected or confirmed contamination observed

Yes (notify proper region within 48 hours) No

Improperly closed or unregistered tanks present

Yes (provide comment) No

Written instructions/notification procedures are available/posted

Yes No

Amended registration form required for (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Added tanks | <input type="checkbox"/> Change in substance stored |
| <input type="checkbox"/> Closed tanks | <input type="checkbox"/> Change of operational status (in or out of service) |
| <input type="checkbox"/> Change in tank size | <input type="checkbox"/> Change of owner |

Inspection summary.

Indicate the compliance status of each item below using the following codes: N = Noncompliant C = Compliant

	Tank No. 004	Tank No. 005	Tank No. 006	Tank No.	Tank No.
Tank Construction and Corrosion Protection	NIR	NIR	NIR		
Piping Construction and Corrosion Protection	N	N	N		
Spill Prevention	N	N	N		
Overfill Prevention	C	C	C		
Registration Certificate Display	N	N	N		
Tank Release Detection	N	N	N		
Piping Release Detection	C	C	C		
Monthly sump checks	C	C	C		

I, the DEP Certified Inspector (IUM), have inspected the entire above referenced facility including examining manways, sumps, monitoring wells and dispensers. Based on my personal observation of the facility and documentation provided by the owner, I certify under penalty of law as provided in 18 PA C.S.A. Section 4904 (relating to unsworn falsification to authorities), that the information provided by me is true, accurate and complete to the best of my knowledge and belief.

Des Warzel

Certified Inspector's Signature

2/26/2013

Date

As the representative of the owner or operator, I have reviewed the completed inspection report. I certify under penalty of law as provided in 18 PA C.S.A. Section 4904 (relating to unsworn falsification to authorities), that the information provided by me is true, accurate and complete to the best of my knowledge and belief.

2/26/2013

Signature

Title

Date



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF WASTE MANAGEMENT
STORAGE TANK DIVISION

FOR DEP USE ONLY	
Reviewer	_____
Date	_____
Entered by	_____
Date	_____

**UNDERGROUND STORAGE TANK FACILITY
OPERATIONS INSPECTION**

FACILITY INFORMATION

ID Number 31 -- 07856
 Name Cooks Country Store
 Location 21042 Cooks Road
 Address Robertsdale, Pa. 16674
 Municipality Todd Twp.

Representative Present During Inspection

Name _____
 Phone _____
 Owner Operator Employee None

CERTIFIED INSPECTOR

Name Des Warzel
 ID No. 1367
 Phone 814 254-9334
 E-mail dustydes@aol.com
 Date of First Site Visit (month/day/year)
2/26/2013

OWNER (must be a person)

Name Kish Bank
OPERATOR (if different than owner)
 Name _____

Financial Responsibility discussed with owner Yes No
 • Provided by USTIF. Owner must have deductibles available as provided in Subchapter H of the regulations.
 • Required of all UST owners except state agencies.

Suspected or confirmed contamination observed Yes (notify proper region within 48 hours) No

Improperly closed or unregistered tanks present Yes (provide comment) No

Written instructions/notification procedures are available/posted Yes No

Amended registration form required for (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> Added tanks | <input type="checkbox"/> Change in substance stored |
| <input type="checkbox"/> Closed tanks | <input checked="" type="checkbox"/> Change of operational status (in or out of service) |
| <input type="checkbox"/> Change in tank size | <input checked="" type="checkbox"/> Change of owner |

Inspection summary.

Indicate the compliance status of each item below using the following codes: N = Noncompliant C = Compliant

	Tank No. 004	Tank No. 005	Tank No. 006	Tank No.	Tank No.
Tank Construction and Corrosion Protection	N	N	N		
Piping Construction and Corrosion Protection	N	N	N		
Spill Prevention	N	N	N		
Overfill Prevention	C	C	C		
Registration Certificate Display	N	N	N		
Tank Release Detection	N	N	N		
Piping Release Detection	C	C	C		
Monthly sump checks	C	C	C		

I, the DEP Certified Inspector (IUM), have inspected the entire above referenced facility including examining manways, sumps, monitoring wells and dispensers. Based on my personal observation of the facility and documentation provided by the owner, I certify under penalty of law as provided in 18 PA C.S.A. Section 4904 (relating to unsworn falsification to authorities), that the information provided by me is true, accurate and complete to the best of my knowledge and belief.

2/26/2013

Certified Inspector's Signature

Date

As the representative of the owner or operator, I have reviewed the completed inspection report. I certify under penalty of law as provided in 18 PA C.S.A. Section 4904 (relating to unsworn falsification to authorities), that the information provided by me is true, accurate and complete to the best of my knowledge and belief.

2/28/2013

Signature

Title

Date

**UNDERGROUND STORAGE TANK FACILITY
OPERATIONS INSPECTION**

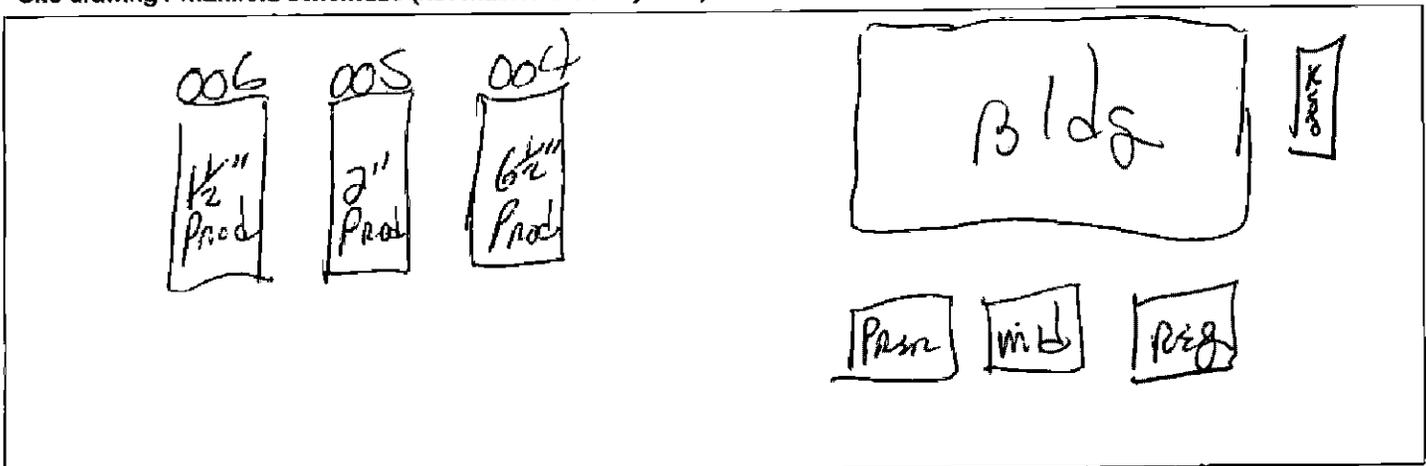
Facility Name Country Crossroads Date 2/26/2013 Facility ID 31 - 07856

I. **TANK SYSTEM INFORMATION.** For each tank, fill in the required information and codes from the following list. Where multiple codes are allowed and used for a specific tank component, describe the arrangement in the COMMENTS section. (See FOI form instructions for details.)

	Tank No. 004	Tank No. 005	Tank No. 006	Tank No.	Tank No.	DEF Use
1. Tank capacity (name plate gallons)	4000	3000	2000			
2. Substance currently stored	Gas	Gas	Gas			
3. Installation date (mm/yyyy)	05/1997	05/1997	05/1997			
4. This drone tank is manifolded to tank number	N/A	N/A	N/A			
5. Product level, in inches, at time of inspection	6 1/2	2	1 1/2			
6. Total secondary containment on this tank system	N	N	N			(18)
7. Tank construction and corrosion protection	B	B	B			(1)
8. Main piping construction and corrosion protection	K	K	K	SEE	NOTES	(2)
9a. Number of tank top sumps ‡	0	0	0			
9b. Number of tank top sumps tested tight ‡	0	0	0			(21)
9c. Spill containment tested tight	N	N	N			(21)
10a. Number of transition sumps	0	0	0			
10b. Number of transition sumps tested tight	0	0	0			(21)
11a. Number of connected dispensers	1	1	1			
11b. Number of connected dispensers with pans	0	0	0			
11c. Number of dispenser pans tested tight	0	0	0			(22)
12a. Piping flexible joints/connectors construction at tank	A	A	A	SEE	NOTES	(PFLX)
12b. Piping flexible joints/connectors construction at dispenser	99	99	99	SEE	NOTES	(PFLX)
13. Pump (product dispensing) system	A	A	A			(4)
14. Spill protection	Y	Y	Y			(6)
15. Overfill type	S	S	S			(7)
16. Current registration certificate display	N	N	N			(8)
17. Stage I vapor recovery	A	A	A			(19)
18. Stage II vapor recovery	N	N	N			(20)
Evaluate the tank system release detection methods carefully before filling in the following rows.						
19. Tank release detection	BN	BN	BN	SEE	NOTES	(12)
20. Piping small release detection (0.2 gph monthly or 0.1 gph annually)	I	I	I			(5)
21. Pressure (line 13 is C or D) piping line leak detector (LLD function)						(5)
22. LLD function includes a positive turbine pump shutoff						(23)

‡ at tank penetrations that have pipe that routinely contains or conveys product.

Site drawing / manifold schematic (not master-drone system):



Tank System Component Codes

6. Total secondary containment

- Y Yes
- N No

7. Tank construction

- A Single-wall steel, unprotected
- B Single-wall, galvanic anodes
- C Impressed current protection
- D Double-wall steel, unprotected
- E Single-wall fiberglass (FRP)
- F Double-wall fiberglass (FRP)
- G Steel with plastic or fiberglass jacket
(includes double-wall Act 100)
- H Steel with FRP coating
(Act 100 or equivalent)
- I Steel with lined interior
- J Concrete
- N Unknown
- O Double-wall, steel primary, galvanic anodes
- P Cathodically protected and lined
- 99 Other (must provide written comment)

8. Main piping construction

- A Bare steel
(including only wrapped or coated)
- B Cathodically protected, metallic
- C Copper, unprotected
- D Fiberglass or rigid non-metallic
- E Single-wall, flexible non-metallic
- F Unknown
- G No dispensing piping (most used oil tanks)
- I Double-wall, metallic primary
- J Double-wall rigid (FRP) primary
- K Double-wall flexible primary
- 99 Other (must provide written comment)

9c. Spill containment tested tight

- Y Yes
- N No

12. Piping flexible joints/connectors

- A Unprotected metallic component(s) (including only wrapped or coated)
- B Cathodically protected, metallic
- C Flexible coupling with protected metallic ends
- F Unknown
- I Completely inside a containment sump, secondary pipe or liner
- M Completely jacketed with sealed boot
- N NO jacket, not in contact with the ground
- X None
- 99 Other (must provide written comment)

13. Pump (delivery) system

- A Suction, check valve at pump or siphon bar only
- B Suction, check valve at tank
- C Pressure
- D Gravity flow to dispenser/pump
- E None

14. Spill protection

- Y Spill containment
- E Filled in less than 25 gallon increments
- N None present or needs repair

15. Overfill type (if code S or B, ensure compatible with delivery method)

- S Drop tube shut off device
- A Overfill alarm (provide description and location in comment section)
- B Ball float valve
- E Filled in less than 25 gallon increments
- N None present or not usable

16. Current registration certificate display

- Y Properly displayed
- N Not displayed

17. Stage I vapor recovery

- A Coaxial
- B 2 port
- N Not complete or none

18. Stage II vapor recovery

- A Complete balance system
- B Complete assist system
- C UG piping only; not complete
- N None of the above

19. Tank release detection

- C Manual Tank Gauging (36 Hour) and Tank Tightness Testing (TTT) every 5 years
- D Statistical Inventory Reconciliation (SIR)
- E Certified Automatic Tank Gauge (0.2 gph Leak Test)
- F Manual Tank Gauging (36 Hour), no TTT
- G44 Manual Tank Gauging, 44 Hours
- G58 Manual Tank Gauging, 58 Hours
- H Interstitial Monitoring (2 Walls)
- J Groundwater Monitoring
- K Vapor Monitoring
- N None
- O Exempt (must provide written comment)

20. Piping small release detection (0.2/0.1 gph)

- B Annual Line Tightness Test (pressure)
- C Line Tightness Test - 3 years (suction)
- D Interstitial Monitoring (monthly – includes visual checking)
- E Groundwater Monitoring
- F Vapor Monitoring
- H None
- I Exempt (must provide written comment)
- J Statistical Inventory Reconciliation (SIR)
- K Electronic Line Leak Detector (0.1 or 0.2 gph test)

21. Piping line leak detection (3 gph within 1 hr.)

- A Mechanical Line Leak Detector (incl. test)
- H None
- K Electronic Line Leak Detector (3 gph test)
- L Continuous Interstitial Monitoring with alarm or pump shut off

22. Positive Turbine pump shutoff

- Y Yes – present and tested
- P Present
- N Not present

**UNDERGROUND STORAGE TANK FACILITY
OPERATIONS INSPECTION**

Facility Name Country Crossroads Date 2/26/2013 Facility ID 31 - 07856

II. Release Detection Reference

- Records may be located at the facility or a readily available alternate site.
- The records include all of the information listed below for chosen release detection methods.
- The inspector has actually seen the records.
- A test with an inconclusive result or failure is an indication of a (suspected) product release.

Tank Tank Tank Tank Tank
System System System System System
004 005 006 — —

Instructions: Check the box to indicate that a criterion has been met.
Circle the box to indicate that a criterion has not been met.
Circle with "N/A" when a criterion is not applicable (provide comment).

Automatic Tank Gauging: (Tank only - code E)

ATG manufacturer: Veeder Root ATG model: TLS 250

Does the automatic tank gauge perform continuous in-tank release detection? Yes, No

- | | | | | | |
|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|---|
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | valid monthly leak test conducted and documented |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | manufacturer's certification of ability to detect 0.2 gph release is available |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | probes and gauge software certified for manifolded tank systems |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <ul style="list-style-type: none"> • when not specifically certified, the siphon must be broken to properly test maintenance records, for the last year, including calibration, preventative and repair equipment is operational |

Manual Tank Gauging: (Tank only - code C, F, G44 or G58)

- | | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--|
| <input type="checkbox"/> | tank capacity is 2,000 gallons or less |
| <input type="checkbox"/> | tank installed before 11/10/2007 |
| <input type="checkbox"/> | performed weekly |
| <input type="checkbox"/> | 1/8th inch accuracy stick readings |
| <input type="checkbox"/> | average 2 stick readings before and after test |
| <input type="checkbox"/> | test length appropriate for each tank |
| <input type="checkbox"/> | <ul style="list-style-type: none"> • 36 hours minimum • 44 hours, 551-1000 gallons, 64" diameter • 58 hours, 551-1000 gallons, 48" diameter |
| <input type="checkbox"/> | variation is within standard (both weekly and monthly) |

Precision Tightness Test (TTT): (Tank only - code C)

method used (after 10/11/1994): _____

date of last test: _____ result: _____

- | | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--|
| <input type="checkbox"/> | complete documentation of tightness test available |
| <input type="checkbox"/> | performed by UTT certified installer (after 9/28/1996) |
| <input type="checkbox"/> | manufacturer's certification of ability to detect 0.1 gph release is available |

Interstitial Monitoring: (Tank code H; describe monitoring equipment in comments)

- | | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | interstitial area monitored monthly (required for tanks installed after 11/20/2007) |
| <input type="checkbox"/> | interstitial sensors properly placed (per manufacturer's instructions) |
| <input type="checkbox"/> | monitoring wells (secondary barrier) or ports are clearly marked and secured |
| <input type="checkbox"/> | maintenance records, for the last year, including preventative and repair equipment manufacturer's performance claims are available |
| <input type="checkbox"/> | secondary barrier is compatible with and impermeable to the stored substance |

Statistical Inventory Reconciliation: (Tank code D and/or Piping code J)

test vendor: _____ version: _____

- | | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | manufacturer's certification of ability to detect 0.2 gph release is available |
| <input type="checkbox"/> | data is collected according to the test vendor's instructions |
| <input type="checkbox"/> | analysis completed monthly and valid results supplied to owner/operator within 20 days |
| <input type="checkbox"/> | <ul style="list-style-type: none"> • valid reports include calculated leak rate, minimum detectible leak rate, leak threshold, probability of detection and probability of false alarm |
| <input type="checkbox"/> | suspected releases properly investigated within 7 days of inconclusive or failed report to confirm or deny the occurrence of a release |

**UNDERGROUND STORAGE TANK FACILITY
OPERATIONS INSPECTION**

Facility Name Country Crossroads Date 2/26/2013 Facility ID 31 - 7856

II. RELEASE DETECTION REFERENCE (continued)

Tank	Tank	Tank	Tank	Tank
System	System	System	System	System
004	005	006	—	—

Instructions: Check the box to indicate that a criterion has been met.
Circle the box to indicate that a criterion has not been met.
Circle with "N/A" when a criterion is not applicable (provide comment).

Groundwater or Vapor Monitoring: (Tank code J or K and/or Piping code E or F; describe well locations and monitoring equipment in comments)

<input type="checkbox"/>	wells are located according to site evaluation; <u>attach page with evaluator authentication to the inspection report</u>				
<input type="checkbox"/>	wells are properly installed in accordance with site evaluation and regulations				
<input type="checkbox"/>	wells are monitored and results recorded monthly in accordance with site evaluation				
<input type="checkbox"/>	monitoring wells are marked and secured				
<input type="checkbox"/>	fill material is sufficiently porous to allow expeditious detection at the monitoring wells				
<input type="checkbox"/>	substance stored meets regulatory requirements for type of monitoring				
<input type="checkbox"/>	equipment manufacturer's performance claims are available				
<input type="checkbox"/>	equipment maintenance records, for the last year, including calibration, preventative and repair				

Groundwater monitoring:

<input type="checkbox"/>	monitoring devices can detect 1/8 inch of product or less on water				
<input type="checkbox"/>	groundwater is within 20 feet of surface grade				
<input type="checkbox"/>	wells are sealed from ground surface to the top of the filter pack				
<input type="checkbox"/>	casing is properly slotted: allows entry of product during all groundwater conditions				

Vapor Monitoring:

<input type="checkbox"/>	the monitoring device is not rendered inoperative by moisture				
<input type="checkbox"/>	background contamination will not interfere with vapor monitoring				
<input type="checkbox"/>	vapor monitors will detect increases in concentrations of stored substance				

Interstitial Monitoring: (Piping code D and/or L; describe monitoring equipment in comments)

<input type="checkbox"/>	interstitial area monitored monthly (required for all totally-contained pressurized piping systems)				
<input type="checkbox"/>	secondary enters sump and allows a release to be detected				
<input type="checkbox"/>	interstitial sensors properly placed (per manufacturer's instructions)				
<input type="checkbox"/>	monitoring wells or ports (when used) are clearly marked and secured				
<input type="checkbox"/>	maintenance records, for the last year, including preventative and repair				
<input type="checkbox"/>	equipment manufacturer's performance claims are available				
<input type="checkbox"/>	secondary barrier (pipe) is compatible with and impermeable to the stored substance				
<input type="checkbox"/>	(Code L only) continuous monitoring used as line leak detector (gravity or pressurized piping) – capable of detecting 3.0 gph release within 1 hour				
<input type="checkbox"/>	(Code L only) system tested for operability within the last year				
<input type="checkbox"/>	(Code L only) monthly "sensor status" (or equivalent) records available				

Sumps Checked Monthly

<input type="checkbox"/>	monthly sump checks for the last 12 months documented				
<input type="checkbox"/>	tank top sumps dry and clean				
<input type="checkbox"/>	transition sumps dry and clean				
<input type="checkbox"/>	dispenser pans/sumps dry and clean				

Exempt Suction System: (SUCTION piping only – code I)

NOTE: No further release detection required on piping meeting all these criteria.

<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	the tank top is lower than the suction pump inlet
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	the below grade piping slopes uniformly back to the tank
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	there is no more than one check valve in the piping
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	the check valve is located close to or inside the suction pump
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	compliance with above specifications can be readily determined; describe in comments

**UNDERGROUND STORAGE TANK FACILITY
OPERATIONS INSPECTION**

Facility Name Country Crossroads Date 2/26/2013 Facility ID 31 - 07856

II. RELEASE DETECTION REFERENCE (continued)

Tank System				
004	005	006		

Instructions: Check the box to indicate that a criterion has been met.
Circle the box to indicate that a criterion has not been met.
Circle with "N/A" when a criterion is not applicable (provide comment).

Piping Tightness (Line) Testing: (Piping only – code B or C)

test vendor: _____ version: _____
 date of last test: _____ result: _____

<input type="checkbox"/>	test certification of ability to detect 0.1 gph release at 1.5 times operating pressure is available performed by UTT certified installer (after 11/10/2008)				
<input type="checkbox"/>	test conducted at proper frequency				
<input type="checkbox"/>	<ul style="list-style-type: none"> ● conducted annually for pressurized piping without monthly monitoring ● conducted every 3 years for suction piping not meeting code I requirements 				
<input type="checkbox"/>	if test device permanently installed, maintenance records, for the last year, including calibration, preventative and repair				

Mechanical Line Leak Detector: (PRESSURIZED Piping only – code A)

manufacturer: _____ model: _____
 date last tested: _____ result: _____

<input type="checkbox"/>	certification of ability to detect a release of 3 gph at 10 psig within 1 hour is available				
<input type="checkbox"/>	operational test of leak detector according to manufacturer's instructions in last 12 months				
<input type="checkbox"/>	maintenance records, in addition to the annual test, for last year, including calibration, preventative and repair				

Electronic Line Leak Detector: (PRESSURIZED Piping only – code K)

manufacturer: _____ model: _____
 date of last 3gph test: _____ result: _____

<input type="checkbox"/>	self checking or system tested for operability within the last year				
<input type="checkbox"/>	certification of ability to detect a release of 3 gph at 10 psig within 1 hour is available				
<input type="checkbox"/>	maintenance records, in addition to annual test, for last year, including calibration, preventative and repair				
<input type="checkbox"/>	continuously monitors piping				

Is the electronic leak detector performing the "monthly" monitoring function? Yes, No If yes:
 date of last 0.2gph test: _____ result: _____

<input type="checkbox"/>	third-party certification of ability to detect 0.2 gph release is available				
<input type="checkbox"/>	documentation of monthly test available for last year				

Is the electronic leak detector performing the "annual" monitoring function? Yes, No If yes:
 date of last 0.1gph test: _____ result: _____

<input type="checkbox"/>	third-party certification of ability to detect 0.1 gph release is available				
--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	---

IUM Release Detection Record Review: (All release detection codes)

- An empty tank (less than 1" of product/sludge) or a tank supplying an emergency generator only is not required to perform release detection. Indicate date emptied or that it is an emergency generator tank in comments.
 - Recently installed tank systems must begin performing release detection immediately after receiving product. Indicate date of first product receipt in comments.
- | | | | | | |
|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--|
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | tank release detection records for the last 12 months the system contained product are available |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | tank release detection records are valid and passing |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | piping release detection records for the last 12 months the system contained product are available |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | piping release detection records are valid and passing |

Original: Regional Office – Norristown, Wilkes Barre, Harrisburg, Williamsport, Pittsburgh, or Meadville
 Copy: Owner
 Copy: DEP, Division of Storage Tanks, P.O. Box 8763, Harrisburg, PA 17105-8763
 Copy: Inspector

**UNDERGROUND STORAGE TANK FACILITY
OPERATIONS INSPECTION**

Facility Name Country Crossroads Date 2/26/2013 Facility ID 31 - 07856

III. CORROSION PROTECTION COMPLIANCE CRITERIA

Tank Tank Tank Tank Tank
System System System System System
004 005 006 _____

*Instructions: Check the box to indicate that a criterion has been met.
Circle the box to indicate that a criterion has not been met.
Circle with "N/A" when a criterion is not applicable (provide comment).*

Lined Tanks: (Tank only – code I)

tank inspected and lined according to national standard
date lined: _____
 tank initially inspected 10 years after lining and every 5 years thereafter
date(s) inspected: _____

Galvanic and Impressed Cathodic Protection: (Tank code B, C, O or P and/or Piping)

<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	tank structure to soil potential greater than 0.85 volts, <u>or</u> meets other nationally recognized protection standard: specify: _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<u>-0.891</u>	<u>-1.094</u>	<u>-0.913</u>	_____	_____	potential on tank current monitoring (date) <u>2/26/2013</u>
<u>-0.971</u>	<u>-1.103</u>	<u>-0.901</u>	_____	_____	potential on tank previously monitored (date) <u>5/15/2006</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	pipe/flex structure to soil potential greater than 0.85 volts, <u>or</u> meets other nationally recognized protection standard: specify: _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
_____	_____	_____	_____	_____	potential on pipe/flex current monitoring (date) _____
_____	_____	_____	_____	_____	potential on pipe/flex previously monitored (date) _____

Impressed Current Design and Rectifier Output: (Tank code C or P and/or Piping)

<input type="checkbox"/>	system designed by a corrosion expert system is turned on and functioning within design limits documentation of last three amp (plus volt and runtime when meters available) readings, recorded at least once every 60 days: most recent: volts: _____ amps: _____ runtime: _____ date: _____ 60 days prior: volts: _____ amps: _____ runtime: _____ date: _____ 120 days prior: volts: _____ amps: _____ runtime: _____ date: _____				
<input type="checkbox"/>					
<input type="checkbox"/>					

If Cathodic Protection or supplemental anodes were added to an existing tank system, fill in the following (Information is Required for Compliance):

Date assessed: _____ Date installed: _____
Tank Shell Assessment Method: _____

IV. Operator Training

- list of trained operators designates a class A operator; includes their training certification
- list of trained operators designates a class B operator; includes their training certification
- list of trained operators designates class C operator(s); date of initial training or last refresher is within the previous 12 months
- written instructions and notification procedures are readily available for class C operators at retail facilities; are posted in a location visible to dispenser operators at other facilities

DESCRIBE INFORMAL TRAINING PROVIDED FOR OWNER, CLASS A AND/OR CLASS B OPERATORS – see instructions.

Site closed. _____

UNDERGROUND STORAGE TANK FACILITY
OPERATIONS INSPECTION

Facility Name Country Crossroads Date 2/26/2013 Facility ID 31 - 07856

IUM checked for water in tank(s) and sump(s) - results below

V. COMMENTS INCLUDING ACTIONS TO BRING INTO COMPLIANCE (Attach additional sheets where necessary)
See instructions

1. Discussed financial responsibility deductible requirements and proof.
2. Flexible double wall piping with ends capped so as to act like single wall piping.
3. Flexible piping under pumps narrowed down to 1" piping. No metal in contact with soil.
4. No flex connectors at tanks. Flexible piping to steel nipple fittings. Not in contact with soil, but groundwater is high and fittings are under 3 feet of water. No anodes or cathodic protection. Needs anodes added and tested.
4. Tank 004 = 6" product; 005 = 2" product and 006 = 1 1/2" product. All need pumped down to less than 1" product.
5. All three fill caps are padlocked, but can be easily removed while locked.
6. All three spill control manholes need cleaned out. 004 manhole has outside lip partially broken from snowplow
7. All three vents are manifolded into one vent with a pressure / vacuum cap on it.
8. There is an unregistered 250 -300 gallon tank on property.
9. European style suction verified by Perry Petroleum.
10. Site is closed. Mortgage was foreclosed upon and property taken back by Kish Bank.
11. Tank registration expired 6/4/2010. Owner will need to pay back registration fees (\$450.00) when registration complete. DEP will invoice.
12. Registration forms and financial responsibility info emailed for owner.
13. Site is out of business and was contacted by Lettitt & Associates on behalf of Kish Bank.

Original: Regional Office - Norristown, Wilkes Barre, Harrisburg, Williamsport, Pittsburgh, or Meadville
Copy: Owner
Copy: DEP, Division of Storage Tanks, P.O. Box 8763, Harrisburg, PA 17105-8763
Copy: Inspector