Ecy 020-74 (revised 06/04)

Voluntary Cleanup Program



Washington State Department of Ecology – Toxics Cleanup Program

APPLICATION TO REQUEST ASSISTANCE. 105 + 1107 25 149 131
This application is for individuals requesting assistance from the Voluntary Cleanup Program to plan, conduct, or evaluate an independent cleanup. The applicant may be a site owner, former site owner, site operator, or consultant on behalf of the owner or operator. 157# 3342 F5# 47212 HGUST
PLEASE ANSWER THE FOLLOWING QUESTIONS TO THE BEST OF YOUR KNOWLEDGE,
Have you discussed this site with an Ecology representative? No SIE MY
If yes, what is that person's name?
What is the approximate date?
Has Ecology already received reports or records pertaining to this site? Yes
If yes, what do they pertain to? Previous environmental assessment and remediation.
Is this a leaking underground storage tank site? Yes
ls this site a Brownsfield? No (Brownfields are properties that are abandoned or underused because of environmental contamination from past industrial or commercial practices.)
PLEASE DETERMINE IF PERMITS ARE REQUIRED. Local, state, and/or federal permits may be required for cleanup activities at your site. To determine if a permit(s) is required for your cleanup action, please check with Ecology's Permit Assistance Center at 1-800-917-0043.
APPLICANT COMPLETES THIS SECTION (NOTE: THE APPLICANT IS RESPONSIBLE FOR ALL BILLINGS.)
Applicant NameShell oil Products Us Phone 707-399-7878 Applicant Address 20945 S Wilmington Avenue CityCarson
City Carson
1. Carol Campagna request the assistance of the Department of Ecology. With this application, I have enclosed an initial deposit of \$500. I understand this payment is the equivalent of approximately (5) hours of staff review on the cleanup of my contaminated site. If total charges exceed \$500, I will be billed and will puy the remaining balance. Any excess payments will be refunded to me October 11, 2005 Date

Please submit the following information, along with your signed and include appropriate Ecology office:

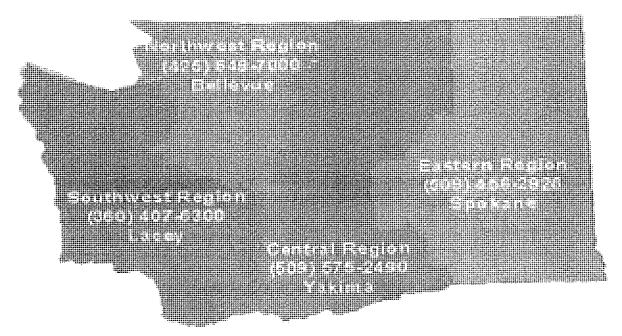
- 1. Site Summary form (Ecology Publication #020-73)
- 2. A check or money order for \$500 made out to the "Department of Ecology"
- 3. If applicable, a "Terrestrial Ecological Evaluation Exclusion" form
- 4. Any other existing reports pertaining to this site

EPT OF ECOLOGY SWED

05 00 25 49:31

WHERE TO SUBMIT YOUR FORMS, REPORTS & FEE

• Please submit your forms and reports to the regional office in which the site resides.



REGION

- Central Regional Office, Attn: Frosti Smith, 15 W. Yakima Ave., Suite 200, Yakima WA 98902
- Eastern Regional Office, Attn: Patti Carter, N. 4601 Monroe, Spokane WA 99205-1295
- Northwest Regional Office, Attn: Dale Myers, 3190 160th Ave. SE, Bellevue WA 98008-5452
- Southwest Regional Office, , Attn: Chuck Cline, PO Box 47775, Olympia WA 98504-7775

Please note: If your site is part of a major pulp mill, paper mill, aluminum smelter, or oil refinery, please submit your information to: Paul Skyllingstad, Department of Ecology – Industrial Section, PO Box 47706, Olympia WA 98504-7706, (360) 407-6949.

For office use only

roi office u	se only		
Date:	Hours:	Rate:	Staff Name:
Date:	Hours:	Rate:	Staff Name:
Date:	Hours:	Rate:	Staff Name:
Receipts Amount:	Date Paid:	Receipt#:	For Fiscal use only 173-02-94-005000-5000 LUST/NON-LUST: LUST - 30 NON-LUST - 20 OFFICE: NWRO - 40 SWRO - 50 ERO - 60 CRO - 70
			IND - 80 HQ - 90 -

To receive this document in alternative format, please contact the Toxics Cleanup Program at (360) 407-7170 or 711 or 1-800 833-6388 (TTY)

Voluntary Cleanup Program



Washington State Department of Ecology – Toxics Cleanup Program

This form is a required component of your request for assistance under the Voluntary Cleanup Program. Please include it with your application, consultation fee, and terrestrial ecological evaluation form (if applicable).

WHICH (OF THE FO	DLLOWING A	APPLY TO Y	OUR SITE?				
X You ar	e requesting	g assistance on	a planned cle	anup.				
☐ You ar	e requesting	g assistance on	an ongoing c	leanup.				
☐ You at	re requesting	g review of a c	ompleted clea	nup.				
☐ You a	re requestin	g review of mo	nitoring repo	rts.				
	_				ACCICTANCE			
PERSON	/ URGAN	IZATION M	AKING RE	QUEST FUR	ASSISTANCE			
Name: Ca	rol Campag	na						
Firm: Shel	l Oil Produc	ets US						
Mailing ad	ldress: 2094	5 S. Wilmingto	on Avenue					
	rson			nte: Californi	ia	Zip code:	90810	
Telephone carol.camp	oagna@shel			x number:		nail address:		
The second secon	The state of the s	CRIBES YO Potential	UR INVOLV	/EMENT AT	THIS SITE (CHEC Environmental	K AS MANY TI Attorney	HAT APPLY) Insurance	Other
Current Owner	Former Owner	Purchaser	Operator	Operator	Consultant		Carrier	Section 1 to 1
X								
If other, p	lease specify	y:						
SITE ID	ENTIFICA	ATION						
Name of s	ite: 2523 Pa	cific Ave.						
Alternativ	e name(s) fo	or site						
Ancmany	e name(s) iv	or orec.	· · · · · · · · · · · · · · · · · · ·					
Site addre 2523 Paci	ess: fic Avenue							
City:	Гасота	State: W	ashington	Zip code: 9	98402 Count	ty: Pierce	UBI1	Number:
Township	· 20 N	ī	Range: 3 E	Sect	ion: 9	Quarter-Qu	arter: ¼ NW,	¼ NW

	<u> </u>		Q
Latitude:	Degrees:	Minutes:	Seconds:
Longitude:	Degrees:	Minutes:	Seconds:
What method did you	use to calculate latitude	e and longitude? Addr	ess Match
How many acres is th	e site? 1.29		
Property type? Comr	mercial 🗵 Industrial 🗆	Residential Of	ther Please specify:
Is the property curren	tly being used? The ser	vice station currently	is not operational
Are there plans for ch		If yes, please specify	: Sound Transit will acquire this property and is
planted to decome pe			
Please list all that app	USTRIAL CLASSIFI oly. If you do not known struction equipment sto	the SIC code(s), list the	ODES ne activities conducted at the site (i.e. automotive repai
Gas Station and Co	nvenience Store		
Fast Food Restaura	nt		

TANK INFORMATION

Please complete the table below for all above ground tanks (AST) and underground storage tanks (UST) existing or formerly existing on the property, including unregulated tanks.

			Was free Encoun	Carried State of the Control of the		**TANK STATUS
TANKID	AST/UST	Size	*PRODUCT	ON GW	IN EXCAVATION	AND DATE
Tank 1	Gasoline	10,000 gallon	UST			
Tank 2	Gasoline	10,000 gallon	UST			
Tank 3	Gasoline	10,000 gallon	UST			
Tank 4	Waste oil	550 gallon	UST			Removed prior to 1991
Tank 5	Heating oil	550 gallon	UST			Removed prior to 1991
Tank 6	Gasoline	2500 to 8000	UST			Removed 1978
Tank 7	Gasoline	2500 to 8000	UST			Removed 1978
Tank 8	Gasoline	2500 to 8000	UST			Removed 1978
Tanks 9, 10 and 11	Unknown	1000 to 2000	USTs			Likely removed prior to 1955

^{*} Unleaded, leaded diesel, bunker-C, waste oil, heating oil, aviation fuel, other (please identify)

^{**}Left in-place, removed, closed-in-place

elitta.	TO 27		
SITE	n n	A	PS
	H . H	_	

Please include an area map that shows the general location of the site (mark the site location) and a site diagram that shows sampling and well locations.

DANGEROUS WASTE FACILITIES

SITE ASSESSMENT OR SITE REMEDIATION WORK COMPLETED TO-DATE

JIIE ASSE	SOMENI OK OTI	E MEMENTALION ARONN COLLIER TO DICE
Has site assessr	ment work been comp	pleted at the site? Yes
If yes, when?	March 2003	Were the results reported to Ecology? Yes
Has site cleanu	p work been conduct	ed at the site? Yes
If yes, when?	1994 to current	Were the results reported to Ecology? Yes
Does contamin	ation remain on-site	after cleanup? Likely
If yes, please d and dispenser i	escribe the contaminal	ation? Petroleum impacted soil likely remains in place in the vicinity of the USTs, piping the northwestern site entrance (see Figure 2).

INSTITUTIONAL CONTROLS (I.E. RESTRICTIVE COVENANT, ENGINEERED CONTROLS, FENCING)

Were institutional controls used at the site? If yes, please specify. Yes. Soil vapor extraction system was operated during mid 1990s.

DOCUMENTATION

Please list all known assessment and/or cleanup reports completed for the site. Include the title of the report, the name of the consulting firm that did the work, and the year it was completed.

T	CONSULTING FIRM	DATE
VARIOUS GROUNDWATER MONITORING REPORTS, JULY 1991 TO PRESENT	GEOENGINEERS, ENVIRONMENTAL SCIENCE AND ENGINEERING INC., EMCON	
RESULTS OF A SITE RELINQUISHMENT AND ACQUISTION ASSESSMENT FOR SHELL SERVICE STATION # 49	ENVIRONMENTAL SCIENCE AND ENGINEERING INC.	FEBRUARY 8, 1991
REMEDIAL SYSTEM INSTALLATION AT 2523 PACIFIC AVENUE, TACOMA, WASHINGTON, WIC # 246-8339-2202	ENVIRONMENTAL SCIENCE AND ENGINEERING INC.	JULY 2, 1992
COMPLIANCE SAMPLING RESULTS - STAGE II VAPOR RECOVERY INSTALLATION, TEXACO FACILITY # 63-232-0351	GROUNDWATER TECHNOLOGY	April 24, 1995
PHASE I ENVIRONMENTAL SITE ASSESSMENT — DRAFT REPORT	URS CORPORATION	MARCH 18, 2003
PHASE II ENVIRONMENTAL SITE ASSESSMENT	URS CORPORATION	August 5, 2003

AFFECTED MEDIA & CONTAINANTS

Please list the known or suspected contaminants at the site prior to cleanup. Mark the appropriate medium (such as soil) with "C" (confirmed and above Model Toxics Control Act (MTCA) cleanup standards), "B" (confirmed but below MTCA standards), "S" (suspected), "N/A" (not applicable), "O" (tested and not present), "U" (unknown).

And the second s	manufacture (1990) of the control of	GROUND	SURFACE	The second control of	The second of th	DRINKING	DATE OF RELEASE
CONTAMINANT	SOIL	WATER	WATER	AIR	SEDIMENT	WATER	(IF KNOWN)
Example:		X					
Lead	c	s	S	U	S	S	1967-82
	C	C	N/A	U	N/A	N/A	Prior to 1994
Gasoline-		ļ			and the second s		
range							
hydrocarbons							
	С	S	N/A	U	N/A	N/A	υ
Oil-range							
hydrocarbons							
	С	U	N/A	U	N/A	N/A	U
Arsenic							
BETX	С	С	N/A	U	N/A	N/A	U
					į,		
							:
							E.
						ļ	

		!		_1	<u> </u>		

METHODS AND TREATMENT \ CHNOLOGIES USED AT SITE Please check all applicable boxes that apply to your site.

CLEANUP METHOD	The second secon	GROUND	SURFACE	DRINKING	The second secon	A control of the cont
USED	Soil	WATER	WATER	WATER	AIR	SEDIMENTS
Method A						
Method B						
Method C				Mariana and American	***************************************	
TREATMENT	And the second s	GROUND	SURFACE	DRINKING	A CONTROL OF THE PROPERTY OF T	SEDIMENTS
TECHNOLOGY USED	SOIL	WATER	WATER	WATER	AIR	SEUMANIS
Air Sparging/Air					İ	
Stripping						
Bioventing						
Capping (asphalt, concrete, topsoil, RCRA cover, soil-clay, synthetic membrane)						
Carbon Adsorption				7	Liberton	
Containment On-Site						
Containment Off-Site						
Free-product Recovery	Х	Х				
In Situ Chemical Oxidation						
Natural Attenuation (dilution, volatilization, biodegradation, adsorption)	X	X				
Permeable Reactive Barriers						
Phytoremediation						
Soil Flushing						
Soil Vapor Extraction	X	Х				
Thermal Desorption						
Other (please specify)						

AFFECTED MEDIA AND CON1. INANTS AFTER CLEANUP

Please list the contaminants from the box on page 4 and list their status after cleanup. Mark the appropriate medium (such as soil) with "C" (confirmed and above Model Toxics Control Act (MTCA) cleanup standards but contained), "B" (confirmed but below MTCA standards), "R" (remediated and below MTCA standards), "N/A" (not applicable), "O" (tested and not present), "U" (unknown).

CONTAMINANT	Soul	GROUND WATER	SURFACE WATER	AIR	SEDIMENT	DRINKING WATER
Example: Lead	R	0	В	U	В	0

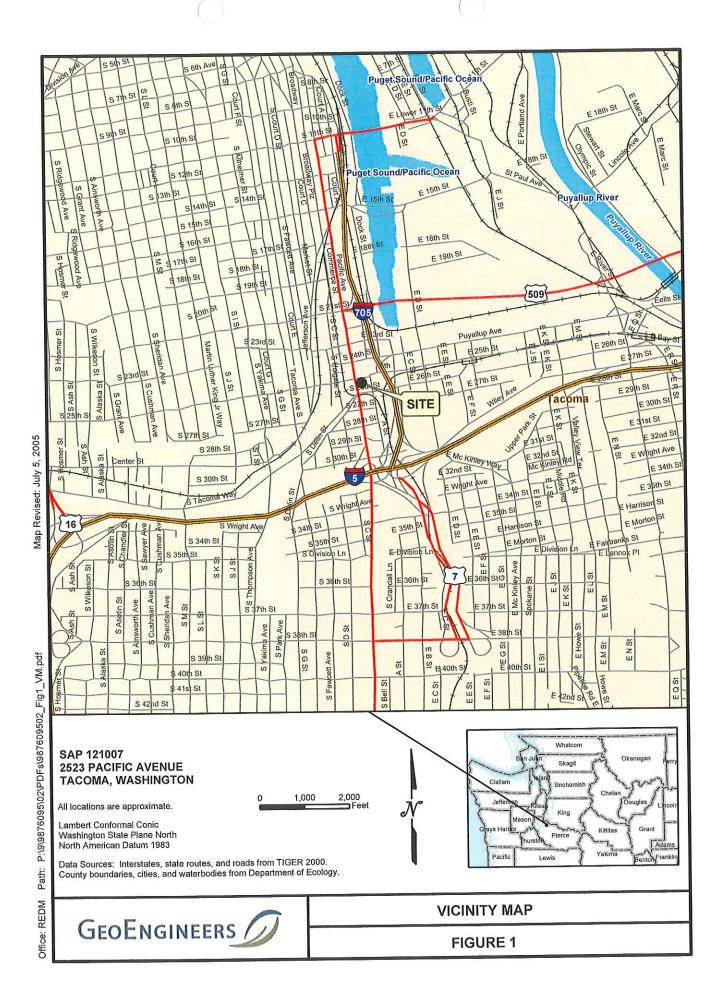
DKTIAKTIAG AANIEK W	IAD MAO. TOO FIAI OIL	PATAOT
Are there any drinking wells	within ½ mile of the site?	Yes If yes, how many? 8
Was a drinking water system	affected? Unlikely If	yes, was an alternate drinking water source provided?
Was the affected drinking wa	nter system public, private, o	or both?
Are there any creeks, stream	s, ponds, wetlands, or shore	lands on or adjacent to the site? No Within ¼ mile of the site? Yes
If yes, where are they located	1? Puyallup River is located	l approximately 1600 feet northeast of the site.
Were they impacted by the c	ontamination from the site?	No
OWNER/OPERATOR Please complete as many of Private, (2) Municipal, (3) Entitle Acquisition via Bar	f the below boxes as possib County, (4) Federal, (5) Sta	le. For type of owner/operator, please use the following codes: (1) te, (6) Tribal, (7) Mixed, (8) Other, (9) Unknown, (10) Public
Current site owner: Shell Oi	l Products US	Type: 1
	ss: 20945 S. Wilmington A	venue
City: Carson	State: Californ	
	owner listed above): Carol Camp	nagna
Street address: 20945 South W	ilmington Avenue	
City: Carson	State: California	Zip code: 90810
Phone: 707-399-7878	Fax:	E-mail address: carol.campagna@shell.com
Date of ownership: 1990 to P	resent	
Former site owner:		Туре:
Street address:		
City:	State:	Zip code:
Contact person (if different than	owner listed above):	
Street address:		
City:	State:	Zip code:
Phone:	Fax:	E-mail address:
Date of ownership:	to	

Former operator:		Туре	
Street Address:			
City:	State: 2	Zip code:	
Phone:	Fax:	3-mail address:	
Date of operation: to			
Environmental consultant: Kurt Ander	son	Type: 1	
Representing: Shell Oil Products US			
Firm: GeoEngineers			
Street address: 8410 – 154 th Avenue NE			
City: Redmond	State: Washington		o code: 98052
Phone: 425-861-6000	Fax: 425-861	-6050 E-	mail address: kanderson@geoengineers.com
SITE CONTACT PERSON (This is someone who is available conducted at the site.	IF OTHER THAN ON during normal working	WNER/ UPERATO hours and has knowl	edge about the site and the activities
Name: Perry Pineda			
Relation to site owner/operator: Facilitie	es Engineer		
Firm: Shell Oil Products US			
Street address: 26826 Maple Valley hig	hway #279		
City: Maple Valley	State: WA	Zip code:	98038
Phone: 425-413-1164	Fax: 425-413-098	8 E	-mail address: perry.pineda@shell.com
Date of involvement with site: May, 20	005 to present		
		•	
Name:			
Relation to site owner/operator:			
Firm:			
Street address:			
	State:	Zip code:	
City:	Fax:	E-mail address:	
Phone: Date of involvement with site:	to	2 111011 22 2 2 2 2 2	
Date of involvement with site.	10		

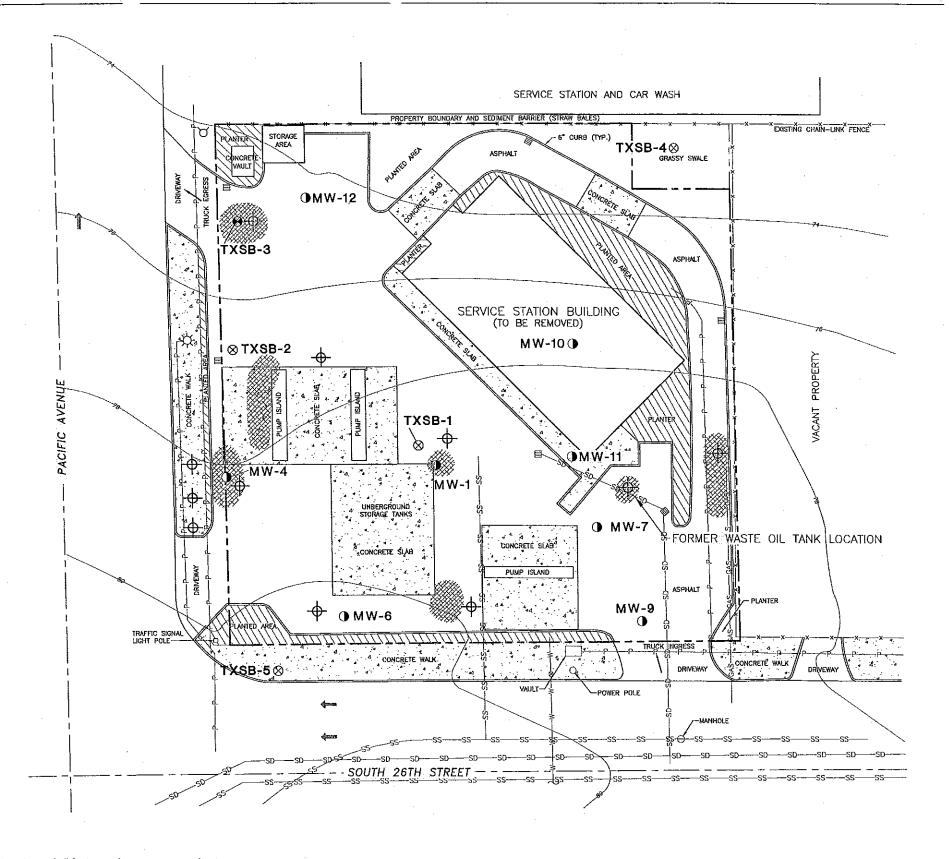
	(
Name:			
Relation to site owner/operator:			
Firm:			
Street address:			
City:	State:	Zip code:	
Phone:	Fax:	E-mail address:	
Date of involvement with site:	to	<u> </u>	

Publication #020-73 (revised 10/02)

Ecology is an Equal Opportunity and Affirmative Action employer.







Notes

- 1. The locations of all features shown are approximate.
- 2. This drawing is for information purposes. It is intended to assist in showing features discussed in an attached document. GeoEngineers, Inc. can not guarantee the accuracy and content of electronic files. The master file is stored by GeoEngineers, Inc. and will serve as the official record of this communication.

Reference: Drawing by Bush, Roed & Hitchings, Inc., entitled "ALTA/ACSM Land Title Survey, Texaco, USA, Project Site No. 48, 2523 Pacific Avenue, Tacoma, Pierce County, Wash." dated Oct. 1990. Elevation contours are based on 1990 data obtained from the City of Tacoma's website (http://govme.cityoftacoma.org/govme/mapguidecs/). and drawing by Secor entitled "Groundwater Elevation Contour and Analytical Results (3/26/02), Former Shell Service Station SAP#121007" dated 05/08/02.

Legend

Proposed Boring

URS Boring With Soil Analyte Concentration Exceeding the MTCA Method A Cleanup Level.

URS Boring With Soil Analyte Concentrations
 Either Not Detected or Detected at Concentrations
 Less Than the MTCA Method A Cleanup Level.

MW-1 Groundwater Monitoring Well

Areas Identified by 2002 URS ESA With Petroleum
Hydrocarbon Concentrations Exceeding Current
MTCA Method A Cleanup Levels

MTCA Model Toxics Control Act

Fire Hydrant

☼ Street Light

Catch Basin

UST Underground Storage Tank

-GAS--- Buried Gas/Oil Line

Buried Power Line

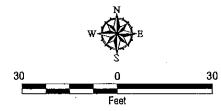
sp-- Storm Drain

--- Sanitary Sewer Line

Buried Water Line

Water Meter

___80 Contour Line (Feet)



Site Plan Shell OPUS Station #121007

2523 Pacific Avenue Tacoma, Washington



Figure 2



UNDERGROUND STORAGE TANK

30 DAY NOTICE

See back of form for instructions

Please ✓ the appropriate box: ☐ Intent ☐ Intent ☐ Both to Install to Close

Site Information

SWRO - Pierce 3342 FS# 47212644 FOR OFFICE USE ONLY Site ID #:_____ Owner ID #:_____ SEP 0 9 2005 ECOLOGY

Owner Information

(This form will be returned to this address

					(1113 101	III WIII DE TELUTILEO	to this address	,
Site ID Num (Available from	nber <u>472)</u> m Ecology if the ta	2644 inks are registere	ed)	UST	Owner/Operat	or <u>Shell Oil</u>	Products	<u>, u.s.</u>
Site/Busines	ss Name _Sh	ell Fuclio Street	g Station	<u> </u>	g Address <u>2</u>	6828 Mag	ple Valley treet	Hwy. #279
Site Address	s <u>2523</u>	Pacific A	Ave.					
0'' ''' '			•	011.70	rar ka		.O. Box	
		,				ple Valle		
Zip Code	98402	_ Telephone	()	Zip C	ode <u>980</u>	<u>38</u> Telep	hone (<u>206</u>) <u></u>	123-0143
			-					
Tank Inst	aliation Co	mpany (if kr	nown). Fill out t	his section Of	NLY if tanks a	re being install	ed.	
Service Con	npany			Conta	ct Name			<u> </u>
Address								
Stre	eet			P.C	. Box	**************************************		
City			State	7in	Code	Telephone	()	· · · · · · · ·
Oity	<i>,</i>		State	Ziβ	Code			
	mpany <u>To</u>		State	Co			· · · · · · · · · · · · · · · · · · ·	
			losure Info				Infor Fill out this s	stallation mation section ONLY if eing installed.
Tank ID	Projected Closure Date	Tank Capacity	Substance Stored	Date Tank Last Used	Is There Product in the Tank (Yes/No)	if No, Date Tank Was Pumped	Tank ID	Approx. Install Date
1	10/17/05	10,000	Gasoline	la Use	<u>Yes</u>			
	10/17/05	10,000	Gasoline	<u>la Use</u>	<u>Yes</u>			
3	10/17/05	10,000	Basoline	In Use	<u>Yes</u>	***		
·		 						<u></u>
						Ì		
-					•			

To receive this document in an alternative format, contact the TOXICS CLEANUP PROGRAM at 1-800-826-7716 (VOICE) OR (360) 407-6006 (TDD). ECY 020-95 (Rev. 3-01)



State of Washington Department of Ecology UST Site Inspection

0 1 1 1 0 T	LOGY	, ,	<u>031 31(e 11</u>	<u>Ispection</u>				
		5/11/05	Time: 99.m. Ins	nector(s):	, A.S.	m7Hh		
	on Type:			Assist. Follow-di		her		
Site Name: Shell Stoffen UST #: 3342								
	s: 252		2c Avenue	Site Contact: Ka	ry Ho	1/Ng2	EV M	gyemi
	Tacom		78402	Phone: (206) 7	81-121	3		/
Tank #	Gallons	Fuel Type	Tank Model (i.e. STI-I	⊃3, Xerxes)	Compart	ment/Ma	nifold	
1	IOK	nAleod	TRP-	SW	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1		
2	18K	Super				<u>L</u>		
3	10K	plus	4			1_		
	1010	171.3	<u> </u>			and Trade to		
		, ,	0.00		~/~/~/~/			
Fuel Dist	ributor:	Shell C	11 Products-US	Distr. Phone: / -	866-H	I-She	<u>//</u>	
I. RECO	RDKEE	PING REQ	UIREMENTS					
A. Gene	ral Docui	ments:				Compli		
1. TAG v	visible to c	distributor: (173-360-130(4)		N (XX	N/A	
2. MBL c	ompliant:	(UBI# 601-	· <i>850</i> — <u>954</u>) (exp. c	date <u>2/28/06)</u> WAC 173-36		Y N	N/A	
3. Fin. R	esp. in co	mpliance: <i>(ci</i>	ircle) (insur. co.) self-insur			(Λ) N	N/A	
	~		LAnakan As. CExpir	ation Date <u>01 07 </u>	06			
		<u>Corrosion i</u>	Protection:	20 00 100 100				
Tank Ma	ateriai <i>(circ</i>	ile) Stee	Coated Steel FI	RP Steel Clad w/ Co	orr Hesist			
*	Du		<u>ile-W</u> all Double-W		Resist			
	orr. Prot. <i>(d</i> Material <i>(ci</i>	•			1103/31			
riping i	viateriai (ci		le-Wall Double-Wa	_				
Piping (Corr. Prot.	(circle) Galve		Corr. Resist.				
Interio	r lining ins	tall date	Int. Lining ins					
4. Interio	r lining me	ets 10 & 5	yr. inspection frequer	ncy: WAC 173-360-310(2))(a)(ii)	YN	(N/A)	
5. Interio	r lining ins	pection has	Pass or equivalent r	esults: WAC 173-360-310	(2)(a)(li)	YN	(N/A)	
		t date	for: (circle) S	teel Tank(s) Stee	l Line(s)			
6. Catho	dic Protec	tion test fred	quency in compliance	: WAC 173-360-320(2)(a)		Y N	(VA)	
7. CP test has Passing or equivalent results: WAC 173-360-320(1)						Y N	NA	
				orotected: WAC173-360-	305/310	(Y)N	N/A	
C Tank I	nventory	Control is	conducted: (circle)	Daily Weekly	Monthly			
			ned correctly: WAC 173			ΥN	(V/A)	
40 Topke	do not ev	voeed 10 vr	limit for inventory co	ntrol: wac 173-360-345(2))	(Y)N	N/A	
			otection requirements		,			
			ompliant: (last date) WAC 173-360-345(5)	/(6)(a)(b)(c)	YN	(N/A)	
D.Tank I	<u>Vionthly n</u>	<u>nonitoring:</u>	(circle) (ATG) Vapor	GW Interstitial SIF	Other_	(V)N	N/A	
12. Rel. L	et. Metho	d is checke	a or conducts test mo	onthly: WAC 173-360-335	(2)(a)		N/A	
		necks per n	nnictr's instruct.: (date	2/4/01) WAC 173-360-3	34E(6)(i)	Y N	(N/A)	j
14. SIR V				cy compliant: WAC 173-	·343(0)(I)	1 IV	11/1	
Commer	nts: <u>6.</u>	P.S; 1	1 19,10.) ^U	• • • • • • • • • • • • • • • • • • • •	····		
		دع	0 100 00	17				

ECY 070-100 (5/03)

UST # 3342 Insp. Date 5/11/05

		nplia	ant?
E Dining Dumning System: (circle) Pressure Suction(Tank) Suction(Pump) Other	171	N	N/A
15. Pressure Lines have annual ALLD test: (date2/9/163) WAC 173-360-360(3)(a)		IV	19/7
ALLD Type: (circle) Manual Electronic			
16. Pressurized Lines use (circle) Annual Line TT Elec. ALLD Line TT Vapor GW (nterstitial) SIR Other	<u> </u>		
17. Press. Lines annual line tight. test compliant: (date) WAC 173-360-350(3)(b)	Υ	N	(N/A)
18. Press. Lines Elec. ALLD tight. test compliant: (date) WAC 173-360-350(3)(b)	Y	N	N/A
19. Pressure Lines VM, GWM, Interstitial, or SIR compliant: wac 173-360-350(3)(c)		N(N/A
20. Int. sump sensor service check per mnftr's instruct: (date 2 4 65) WAC 173-360-335(1)(b)	(Y		N/A
21 Suction Line (tank valve) 3 vr. Tight. Test: (date) WAC 173-360-350(2)(0)	Υ.	N	N/A
22. Suction Line (tank valve) VM, GW, Intst. or SIR compliant: wac 173-360-350(2)(b)	Υ	N	N/A
II. EQUIPMENT CHECKS			\smile
A Postifier for Impressed Current System:			7
23. Imp. Curr. system operated and maintained continuously: wac 173-360-320(1)	Υ	N	(N/A)
24 Imp. Curr. system inspected every 60 days: wac 173-360-320(3)	Υ	N (N/A
25. Imp. Curr. Amp/Volt readings within specified range: wac 173-360-320(3)	Υ	N	(N/A
Readings: Amp Volt Meter/Clock			
Inctall 1910		•	
B Monthly monitoring: (circle) ATG Vapor GW Interstitial SIR Other	-		
Release Detection Model Verter Roof 7 LS 350			1 - 1 (- 1
26. Rel. Det. Equip. is NOT in alarm: wac 173-360-335(1)(b)	Y	N	N/A
If no, why is it in alarm	1	N	1 1 1 2 1
27 Rel. Det equipment and/or alarms operational : WAC 173-360-335(1)(b)	LY,)N	N/A
38 Rel. Det equipment printer or modem operational: WAC 173-360-335(1)(b)	Y	Ŋ	N/A
29. Vapor or GW MWs placed around tanks and piping runs: wac 173-360-335(1)(a)	Y	N	(N/A ')
C. Lines:		N	N/A
30. Pressurized Lines ALLD is present: WAC 173-360-350(3)(a)	7	N	N/A
31. Corr. Res. lines verified:(circle) at sump at dispenser records WAC 173-360-305(2)	\bowtie		<u> </u>
32. Interstitial Line sump sensors are placed correctly: WAC 173-360-335(1)(a)	K	Z	N/A
33. Turbine Sumps are free of liquid: wac 173-360-335(1)(b)	Y	N	N/A
D Spill/Overfill:			1
34. Spill Bucket does NOT have obvious cracks, holes. wac 173-360-305(3)(a)(i)	Y	N	N/A
35 Overfill device used: (circle) Auto-Shut. (Alarm) Ball-float WAC 173-360-305(3)(a)(ii)	(Y)	N	N/A
as Overfill auto, shut-off device is NOT tampered with: WAC 173-360-305(3)(a)(ii)(A)	Y	N	(N/A)
37. Overfill alarm set at 90% and audible to delivery driver: wac173-360-305(3)(a)(ii)(B)	(Y)	N	N/A
38. Overfill ball-float valve present: (circle) visual records WAC 173-360-305(3)(a)(ii)(B)	Y	N	(N/A)
Ob. Overmi ban noat valvo processa ()			
Comments:			
THE STATE OF THE S	$\widehat{\mathbf{v}}$) NI	N/A
Significant Operational Compliance with Overspill/Overfill/Corr. Prot.:	ʹ	N	N/A
Cignificant Operational Compliance With Helease Delection:	'ٺ	_ 4	
Photos Taken X Tech, Assist, Materials Provided (FNA of In, State	ر ب	7 1	(<u>25</u> 0)
Action Taken: (circle) Notice of Noncompliance Field Citation#			
1 /- ti	111.	6	-
Photos Taken X Tech. Assist. Materials Provided (FNA of In, Steen Action Taken: (circle) Notice of Noncompliance Field Citation#	/ 	<u>ر پ</u>	