11000 N. MoPac Expressway, Suite 500
Austin, Texas 78759
Phone: (512) 451-6334
Fax: (512) 459-1459

Date Printed and Mailed: 2/29/2024

UNDERGROUND STORAGE TANK SECTION
WASHINGTON DEPT. OF ECOLOGY
P.O. BOX 47655
OLYMPIA, WA 98504

Test Date: 2/27/2024
Order Number: 2367385

Dear Regulator,

Enclosed are the results of recent testing performed at the following facility:

7-Eleven 38699
2631 S 38th St
Tacoma, WA 98409

Testing performed:
MONITOR CERTIFICATION

Sincerely,

Dawn Kohlmeyer

Dawn Kohlmeyer
Manager, Field Reporting

DEPARTMENT OF ECOLOGY
State of Washington

LEAK TESTING CHECKLIST
FOR UNDERGROUND STORAGE TANKS (USTs)

UST ID #: 8801
County: PIERCE

This checklist certifies testing activities conducted in accordance with Chapter 173-360A WAC. Read instructions on pages 4-7.

☑ **PASS** – All Section VI services performed have passing results. ☐ **FAIL** – One or more components tested in Section VI require repair and re-testing.	**DATE TESTS CONDUCTED:** 02/27/2024

I. UST FACILITY	**II. CERTIFIED SERVICE PROVIDER**
Facility Compliance Tag #: A 5871	Service Provider Name: Brian Chambers
UST ID #: 8801	Company Name: TANKNOLOGY, INC.
Site Name: 7-Eleven 38699	Address: 11000 N. MOPAC EXPRESSWAY #500
Site Address: 2631 S 38th St	City: AUSTIN State: TX Zip: 78759
City: Tacoma	Phone: (800)800-4633 Email: info@tanknology.com
County: PIERCE	ICC Certification Type: ICC UST Tank Tightness Testing
Site Phone: 253-310-5783	ICC Cert. #: 9873244 Exp. Date: 01/31/2025

III. UST OWNER/OPERATOR

Name: Marc Westfall Phone: 214-415-0146 Email: marc.westfall@7-11.com

IV. UST SYSTEM INFORMATION
Observations on test day.

1. Tank ID #, as registered with Ecology or identified on ATG	T2	T3		
2. Tank Status. OP (Operational); TC (Temporary Closure)	OP	OP		
3. Product stored, including % of alternative fuels	PUL	DSL		
4. Tank or compartment capacity (gallons)	8039	11897		
5. Product pumping/flow method. Note as: P (Pressurized); NS (Non-safe Suction); SS (Safe Suction); Si (Siphon); GR (Gravity Fed)	P	P		
Abbreviations for lines 5 and 6 below: Steel (ST); Fiberglass (FRP); Clad Steel (CLAD); Flexible (FLEX); Double Wall (DW); Single Wall (SW); Not Visible (NV)				
6. Tank material and construction observed	FRP DW	FRP DW		
7. Pipe material and construction observed	NV	NV		

V. REASON FOR SERVICES PERFORMED
(Check all that apply)

☑ Annual testing	☑ Test after install/repair	☐ Other (explain):
☐ 3-year testing	☐ Return UST system to operation	

VI. SERVICES PERFORMED

Required: Include verification for each test performed.

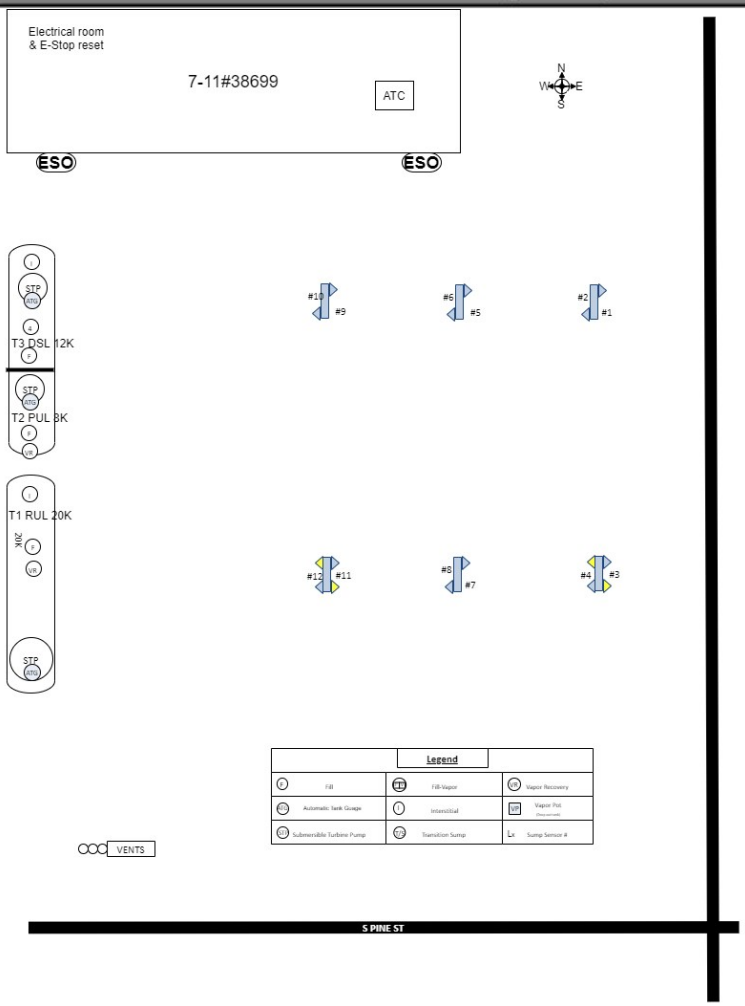
SERVICES:	# PASS	# FAIL	# REPAIRED & PASSING	DESCRIPTIONS REQUIRED: (SEE INSTRUCTIONS P. 4-7)
ALLD Test **(attach data)** Test method used: LDT-5000 Test method cert. exp. date:	—	—	—	
Line Tightness Test **(attach data)** Test method used: TLD-1 Test method cert. exp. date: 11/16/2026	—	—	—	
Electronic Monitoring System Tests Controller manufacturer/model: VR TLS-350R Controller cert. exp. date: 10/17/2025				Follow up testing from initial annual compliance date of 10/19/23 where T2 PUL/T3 DSL combo tank interstitial was not tested due to grade level lid bolts round and unable to remove for sensor testing.
Monitor/controller	1	—	—	
Probe	—	—	—	PUL/DSL combo tank interstitial sensor (L11) tested today and confirmed operable. VR 409 sensor.
Sump Sensor Functionality	—	—	—	
Tank Annular Sensor Functionality	1	—	—	No other sensors tested today.
Overfill Equipment Test ☐ Auto shutoff	—	—	—	
☐ Ball float valve	—	—		
☐ Overfill alarm	—	—	—	
Fill/Spill Bucket Test (**attach data**)	—	—	—	
Tank-Top or Transition Sump Test (**attach data**)	—	—	—	
UDC Sump Test (**attach data**)	—	—	—	
Tank Tightness Test **(attach data)** 3rd-party certified test: Test method used: VacuTect Test method cert. exp. date:	—	—	—	
Other	—	—	—	

VII. EXPLANATIONS/PROBLEMS ENCOUNTERED:

Provide additional test information. Explain irregularities. Describe problems encountered and how addressed.

VIII. UST Site and System Diagram

Diagram required. Include North arrow.



Persons submitting false information are subject to formal enforcement and/or penalties under Chapter 173-360A WAC.

IX. Final Check

Mark the following:	YES	NO	N/A
1. All checked services tested per recommended practices, code and/or manufacturer's requirements, and in accordance with state regulations.	☑	☐	☐
2. Owner/operator provided with copy of the checklist and testing results.	☑	☐	☐
3. Any faulty equipment or necessary repairs explained to owner/operator or site contact.	☐	☐	☑

X. Required Signatures

02/27/2024		Brian Chambers
Date	Signature of Certified Service Provider	Print or Type Name
02/27/2024		Jerry Belloli
Date	Signature of Tank Owner or Authorized Representative	Print or Type Name

MONITORING SYSTEM CERTIFICATION

This form is used to document testing and servicing of tank and piping leak monitoring equipment. If required by applicable law, a copy of the completed form must be provided by the Testing Contractor or owner to the governing UST agency as required by regulation.

A. General Information

Facility Name: 7-Eleven 38699 Bldg. No.:

Site Address: 2631 S 38th St City: Tacoma State: WA Zip: 98409

Facility Contact Person: Contact Phone No.: 253-310-5783

Make/Model of Monitoring System: Veeder Root TLS-350R Date of Testing/Servicing: 2/27/2024

B. Inventory of Equipment Tested/Certified Check the appropriate boxes to indicate specific equipment inspected/serviced:

Tank ID: T2: Premium - PUL		**Tank ID:** T3: Diesel - Diesel	
☐ In-Tank Gauging Probe.	Model:	☐ In-Tank Gauging Probe.	Model:
☑ Annular Space or Vault Sensor.	Model: Shared w/ T3 DSL	☑ Annular Space or Vault Sensor.	Model: 794390-409
☐ Piping Sump / Trench Sensor(s).	Model:	☐ Piping Sump / Trench Sensor(s).	Model:
☐ Fill Sump Sensor(s).	Model:	☐ Fill Sump Sensor(s).	Model:
☑ Mechanical Line Leak Detector.	Model: Vaporless LD-2000	☑ Mechanical Line Leak Detector.	Model: Vaporless LD-2000
☐ Electronic Line Leak Detector.	Model:	☐ Electronic Line Leak Detector.	Model:
☐ Tank Overfill / High-Level Sensor.	Model:	☐ Tank Overfill / High-Level Sensor.	Model:
☐ Other (specify equipment type and model in Section E on Page 2).		☐ Other (specify equipment type and model in Section E on Page 2).	
Tank ID:		**Tank ID:**	
☐ In-Tank Gauging Probe.	Model:	☐ In-Tank Gauging Probe.	Model:
☐ Annular Space or Vault Sensor.	Model:	☐ Annular Space or Vault Sensor.	Model:
☐ Piping Sump / Trench Sensor(s).	Model:	☐ Piping Sump / Trench Sensor(s).	Model:
☐ Fill Sump Sensor(s).	Model:	☐ Fill Sump Sensor(s).	Model:
☐ Mechanical Line Leak Detector.	Model:	☐ Mechanical Line Leak Detector.	Model:
☐ Electronic Line Leak Detector.	Model:	☐ Electronic Line Leak Detector.	Model:
☐ Tank Overfill / High-Level Sensor.	Model:	☐ Tank Overfill / High-Level Sensor.	Model:
☐ Other (specify equipment type and model in Section E on Page 2).		☐ Other (specify equipment type and model in Section E on Page 2).	
Dispenser ID:		**Dispenser ID:**	
☐ Dispenser Containment Sensor(s).	Model:	☐ Dispenser Containment Sensor(s).	Model:
☐ Shear Valve(s).		☐ Shear Valve(s).	
☐ Dispenser Containment Float(s) and Chain(s).		☐ Dispenser Containment Float(s) and Chain(s).	
Dispenser ID:		**Dispenser ID:**	
☐ Dispenser Containment Sensor(s).	Model:	☐ Dispenser Containment Sensor(s).	Model:
☐ Shear Valve(s).		☐ Shear Valve(s).	
☐ Dispenser Containment Float(s) and Chain(s).		☐ Dispenser Containment Float(s) and Chain(s).	
Dispenser ID:		**Dispenser ID:**	
☐ Dispenser Containment Sensor(s).	Model:	☐ Dispenser Containment Sensor(s).	Model:
☐ Shear Valve(s).		☐ Shear Valve(s).	
☐ Dispenser Containment Float(s) and Chain(s).		☐ Dispenser Containment Float(s) and Chain(s).	

*If the facility contains more tanks or dispensers, copy this form. Include information for every tank and dispenser at the facility.

C. Certification - I certify that the equipment identified in this document was inspected/serviced in accordance with the manufacturers' guidelines. Attached to this Certification is a Plot Plan showing the layout of monitoring equipment. For any equipment capable of generating such reports, I have also attached a copy of the report; *(check all that apply)*: ☑ System set-up ☑ Alarm history report

Technician Name (print): Brian Chambers Signature:

Certification No.: C23444 License. No.:

Testing Company Name: Tanknology Phone No.: (800) 800-4633

Testing Company Address: 11000 N. MoPac Expressway Suite 500 Date of Testing/Servicing: 2/27/2024

D. Results of Testing/Servicing

Software Version Installed: _____

Complete the following checklist:

☑ Yes	☐ No* ☐ N/A	Is the **visual** alarm on the console operational?
☑ Yes	☐ No* ☐ N/A	Is the **audible** alarm on the console operational?
☐ Yes	☑ No	Is the external **visual** overfill alarm (light unit) present?
☐ Yes	☐ No* ☑ N/A	Is the external **visual** overfill alarm operating properly?
☐ Yes	☑ No	Is the external **audible** overfill alarm present?
☐ Yes	☐ No* ☑ N/A	Is the external **audible** overfill alarm operating properly?
%	☑ N/A	At what percent of tank(s) capacity is the external alarm programmed to trigger? *If different % between tanks, clarify in section E.*
☑ Yes	☐ No* ☐ N/A	Were all sensors visually inspected, functionally tested, and confirmed operational?
☑ Yes	☐ No* ☐ N/A	Were all sensors installed at lowest point of secondary containment and positioned so that other equipment will not interfere with their proper operation?
☐ Yes	☐ No* ☑ N/A	For pressurized piping systems, does the turbine automatically shut down if the piping secondary containment monitoring system detects a leak, fails to operate, or is electrically disconnected? If yes: which sensors initiate positive shut-down? *(Check all that apply)* ☐ Sump/Trench Sensors; ☐ Dispenser Containment Sensors. Did you confirm positive shut-down due to leaks and sensor failure/disconnection? ☐ Yes; ☐ No
☐ Yes*	☑ No	Was any monitoring equipment replaced? If yes, identify specific sensors, probes, or other equipment replaced and list the manufacturer name and model for all replacement parts in Section E, below.
☐ Yes*	☑ No	Was liquid found inside any secondary containment systems designed as dry systems? *(Check all that apply)* ☐ Product; ☐ Water. If yes, describe causes in Section E, below.
☑ Yes	☐ No*	Was monitoring system set-up reviewed to ensure proper settings? Attach set up reports, if applicable
☑ Yes	☐ No*	Is all monitoring equipment operational per manufacturer's specifications?

* In Section E below, describe how and when these deficiencies were or will be corrected.

E. Comments:

Backup Battery reading, if applicable (Required for VR TLS 300/350): NA (follow up testing only)

Follow up testing from initial annual compliance test date of 10/16/23 where PUL/DSL combo tank interstitial was unable to be tested due to grade level lid bolts were rounded and unable to remove for sensor testing. L11 PUL/DSL combo tank interstitial was only sensor tested today.

F. In-Tank Gauging / SIR Equipment:

☐ Check this box if tank gauging is used only for inventory control.
☐ Check this box if no tank gauging or SIR equipment is installed.

This section must be completed if in-tank gauging equipment is used to perform leak detection monitoring.

Complete the following checklist:

☐ Yes	☑ No*	Were all tank gauging probes visually inspected for damage and residue buildup?
☐ Yes	☑ No*	Was accuracy of system product level readings tested?
☐ Yes	☑ No*	Was accuracy of system water level readings tested?
☐ Yes	☑ No*	Were all probes reinstalled properly?
☐ Yes	☑ No*	Were all items on the equipment manufacturer's maintenance checklist completed?

* In the Section G, below, describe how and when these deficiencies were or will be corrected.

G. Comments:

Follow up testing only. No probes were tested on today's date.

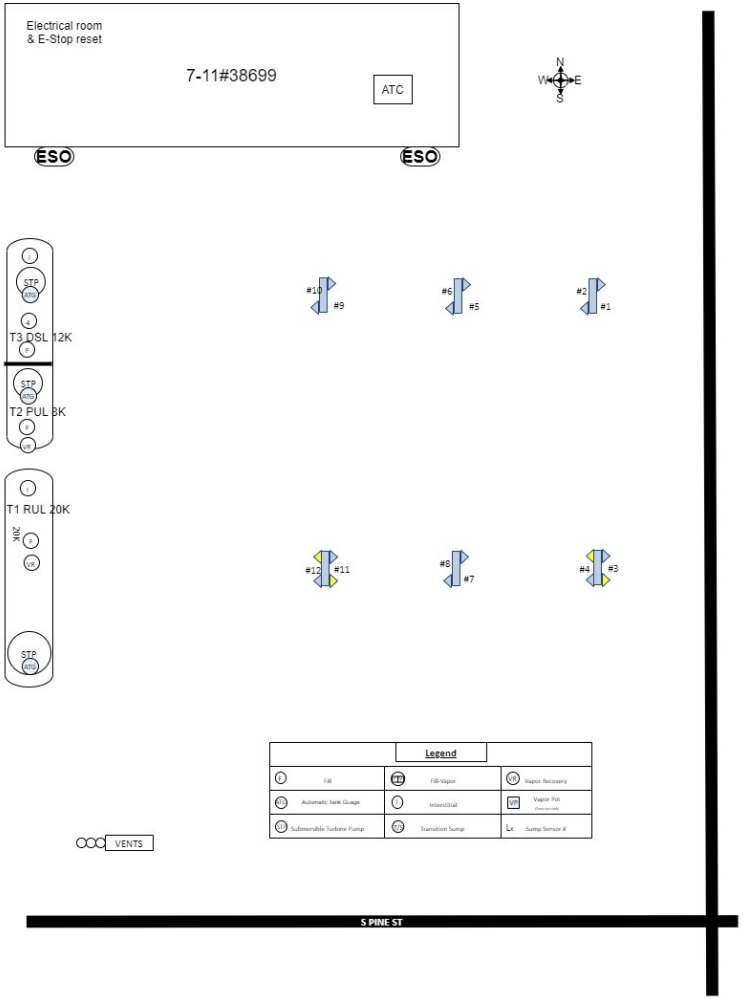
DID OVERALL MONITOR SYSTEM TESTING PASS (Check One)? YES☑ NO ☐ INCONCLUSIVE ☐

Site Diagram

(This site diagram is for reference only and is not drawn to scale)

Work Order:	2367385
Site ID / Name:	38699 / 7-Eleven 38699
Address:	2631 S 38th St
City:	Tacoma

State: WA Zip: 98409



W.O.# NW1-2367385

203096 7-11 38699
2631 S 38TH ST
TACOMA WA 98409
U11268752605001

FEB 27, 2024 10:46 AM

SYSTEM STATUS REPORT

ALL FUNCTIONS NORMAL

INVENTORY REPORT

T 1:RUL
VOLUME = 16641 GALS
ULLAGE = 3289 GALS
90% ULLAGE= 1296 GALS
TC VOLUME = 16794 GALS
HEIGHT = 92.46 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 46.7 DEG F

T 2:PUL
VOLUME = 3586 GALS
ULLAGE = 4453 GALS
90% ULLAGE= 3649 GALS
TC VOLUME = 3605 GALS
HEIGHT = 54.43 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 52.3 DEG F

T 3:DSL
VOLUME = 3825 GALS
ULLAGE = 8072 GALS
90% ULLAGE= 6882 GALS
TC VOLUME = 3836 GALS
HEIGHT = 42.97 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 53.3 DEG F

* * * * * END * * * * *

----- SYSTEM ALARM -----
SERVICE NOTICE
FEB 27, 2024 10:46 AM

203096 7-11 38699
2631 S 38TH ST
TACOMA WA 98409
U11268752605001

FEB 27, 2024 11:19 AM

SYSTEM STATUS REPORT

ALL FUNCTIONS NORMAL

INVENTORY REPORT

T 1:RUL
VOLUME = 16602 GALS
ULLAGE = 3328 GALS
90% ULLAGE= 1335 GALS
TC VOLUME = 16754 GALS
HEIGHT = 92.24 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 46.7 DEG F

T 2:PUL
VOLUME = 3574 GALS
ULLAGE = 4465 GALS
90% ULLAGE= 3661 GALS
TC VOLUME = 3593 GALS
HEIGHT = 54.30 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 52.3 DEG F

T 3:DSL
VOLUME = 3819 GALS
ULLAGE = 8078 GALS
90% ULLAGE= 6888 GALS
TC VOLUME = 3830 GALS
HEIGHT = 42.92 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 53.3 DEG F

* * * * * END * * * * *

203096 7-11 38699
2631 S 38TH ST
TACOMA WA 98409
U11268752605001

FEB 27, 2024 10:46 AM

LIQUID STATUS

FEB 27, 2024 10:46 AM

L 1:DISP 1-2
SENSOR NORMAL

L 2:DISP 3-4
SENSOR NORMAL

L 3:DISP 5-6
SENSOR NORMAL

L 4:DISP 7-8
SENSOR NORMAL

L 5:DISP 9-10
SENSOR NORMAL

L 6:DISP 11-12
SENSOR NORMAL

L 7:RUL STP SUMP
SENSOR NORMAL

L 8:PUL STP SUMP
SENSOR NORMAL

L 9:DSL STP SUMP
SENSOR NORMAL

L10:RUL ANNULAR
SENSOR NORMAL

L11:DSL-PUL ANNULAR
SENSOR NORMAL

L12:DSL FILL
SENSOR NORMAL

L13:PUL FILL
SENSOR NORMAL

L14:RUL FILL
SENSOR NORMAL

* * * * * END * * * * *

203096 7-11 38699
2631 S 38TH ST
TACOMA WA 98409
U11268752605001

FEB 27, 2024 11:19 AM

LIQUID STATUS

FEB 27, 2024 11:19 AM

L 1:DISP 1-2
SENSOR NORMAL

L 2:DISP 3-4
SENSOR NORMAL

L 3:DISP 5-6
SENSOR NORMAL

L 4:DISP 7-8
SENSOR NORMAL

L 5:DISP 9-10
SENSOR NORMAL

L 6:DISP 11-12
SENSOR NORMAL

L 7:RUL STP SUMP
SENSOR NORMAL

L 8:PUL STP SUMP
SENSOR NORMAL

L 9:DSL STP SUMP
SENSOR NORMAL

L10:RUL ANNULAR
SENSOR NORMAL

L11:DSL-PUL ANNULAR
SENSOR NORMAL

L12:DSL FILL
SENSOR NORMAL

L13:PUL FILL
SENSOR NORMAL

L14:RUL FILL
SENSOR NORMAL

* * * * * END * * * * *

W.O.# NW1-2367385

----- SENSOR ALARM -----
L11:DSL-PUL ANNULAR
ANNULAR SPACE
FUEL ALARM
FEB 27, 2024 10:51 AM

ALARM HISTORY REPORT

----- SENSOR ALARM -----
L11:DSL-PUL ANNULAR
ANNULAR SPACE
FUEL ALARM
FEB 27, 2024 10:51 AM

FUEL ALARM
NOV 2, 2022 6:53 AM

FUEL ALARM
NOV 10, 2021 12:55 PM

* * * * * END * * * * *