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ECOLOGY

NW King  
2009 VST

ENVIRONMENTAL SITE ASSESSMENT  
And  
Site Closure Report

C & L AUTO REPAIR  
2901 17<sup>th</sup> Avenue South  
Seattle, Washington 98144  
ORION Project Number 2010437 (Task 1)

Prepared For:

Mr. Wally Carter  
Gator Foaming Systems  
3930 "A" Street Southeast  
Auburn, Washington 98002

*Report sent to  
the Northwest  
Regional Office  
Joyce*

July 5, 2001

July 5, 2001

Mr. Wally Carter  
Gator Foaming  
3930 "A" Street Southeast  
Auburn, Washington 98002

**Re: Environmental Site Assessment – In-Place Tank Closure**  
C & L Auto Repair  
2901 17<sup>th</sup> Avenue South  
Seattle, Washington 98144  
ORION Project Number 2010437 (Task 1)

Dear Mr. Carter:

ORION Environmental Services (OES) has completed the Modified Environmental Site Assessment and In-Place Closure (MESAC) report for the above-referenced site in substantial compliance with the scope and limitations of the American Society of Testing and Materials, *Standard Practice for ESAs: The Phase I ESA Process, Designation E1527-01*. This report was compiled by Tyrone Woolfolk, registered with the Washington State Department of Ecology to perform site assessments in accordance with WAC 173-360, thru the International Fire Code Institute. The purpose of this MESAC was to identify recognized environmental conditions associated with the site and assess site conditions following the in-place closure of one (1) underground storage tank (UST). To achieve this objective, the MESAC included visual observations of the site and surrounding properties, review of regulatory database listings, geologic and hydrogeologic information, and interviews with local agency representatives. The following sections describe our findings during the performance of this MESA. A site vicinity (United States Geological Survey (USGS)) topographic map, a site location map, and site photographs are included as attachments to this report.

## 1.0 INTRODUCTION

OES visually observed the site to identify potential sources or indications of chemical contamination such as underground storage tanks (USTs), aboveground storage tanks (ASTs), polychlorinated biphenyls (PCBs), chemicals and hazardous waste/materials, and areas with surficial staining or distressed vegetation. The immediately adjacent properties were observed from the site, without being entered, for possible sources of contamination or environmental impairment which could migrate to the site via surface water runoff, groundwater transport, or other pathways. OES conducted a regulatory records review, and interviewed local regulatory agency personnel.

## **2.0 SITE OBSERVATION**

On March 7, 2001, Mr. Tyrone Woolfolk, OES Project Manager, conducted a walk-through of the site located at 2901 17<sup>th</sup> Avenue South in Seattle, King County, Washington, hereinafter referred to as the site (see Attachment A). The OES representative conducted the site visit during normal business hours and was accompanied by a representative of C&L Auto Repair and Gator Foaming Systems. In addition, a walk along the perimeter of the site and a drive around streets in the immediate site area was conducted. At the time of the site visit, the weather was warm with good visibility.

## **3.0 SITE DESCRIPTION**

The site is located in Section 44, Township 24 North, Range 3 East in King County, Washington in a predominantly residential area, within the city limits of Seattle. At the time of this assessment, the site was situated along the southwestern corner of 17<sup>th</sup> Avenue South and South Forest Street. At the time of our assessment a repair facility was identified at the site. A residential community bordered to the site to the west and south of the site. No stressed vegetation, staining or debris piles were observed on site.

Water and sewer are provided to the site area by the City of Seattle. Electricity and Natural Gas are supplied to the site area by Puget Sound Energy.

Based on the USGS 7.5 Minute Series Tacoma, Washington, Seattle South Quadrangle Topographic Map (see Attachment A, Figure 1), the site is approximately 230 feet above mean sea level (MSL) with a topography that slopes gently to the northeast. Storm water runoff from the site would likely percolate down into the ground surface or drain into stormwater inlets located along eastern portion of the site.

## **4.0 UNDERGROUND STORAGE TANKS (USTs)**

The C & L Auto Repair (CLR) shop site was listed in state and local UST databases reviewed during our assessment. CLR performs automobile repair and maintenance, to include oil changes, engine repair and tire maintenance. The CLR site was documented as having three underground storage tanks prior to decommissioning activities at the site. In July 1990, two (2) USTs were removed by Lee Morse General Contractor, Inc. (see Attachment B). Laboratory results indicated that no contamination was found following the July 1990 tank removal operation.

In March 2001, Gator Foaming Systems was retained to perform an in-place closure of a 285 gallon waste oil tank at the site. The waste oil tank was pumped and properly closed in-place as required by local and state regulations. Subsurface soil sampling was collected at the site, which found a petroleum contaminant concentration of 789 ppm. The sample was collected at a depth of 4 feet, and approximately 9 feet north of the tank. Because of the difficulty of sample collection beneath the UST, the sample was collected along the northern property line of the site and adjacent to the building exterior (See Attachment E site drawing). It appears that the UST may be the source of petroleum contaminants, however without further subsurface exploration, we are unable to determine the direction of petroleum migration and extent of subsurface contamination.

Soil sampling was conducted in accordance with Washington State Department of Ecology guidelines. The soil sample was collected utilizing hand tools and clean equipment. The sample was then placed into clean, wide-mouth amber glass containers, with teflon lids, then submitted with a chain-of-custody to the laboratory. The sample was analyzed by ORION Environmental Services, 34004 9<sup>th</sup> Avenue South, Federal Way, Washington. The soil sample was tested utilizing the WTPH-Dx method. This analytical method tests for diesel petroleum hydrocarbons in the soil.

## 5.0 ABOVEGROUND STORAGE TANKS (ASTs)

No visual evidence that would indicate past or present ASTs (e.g., concrete foundations or steel pedestals) was observed on site during the site visit.

## 6.0 CONCLUSIONS

OES has performed this environmental site assessment in conformance with the scope and limitations of ASTM Practice E 1527-01 and recommended guidelines prescribed by the Department of Ecology for the C&L Auto Repair shop located at 2901 South 17<sup>th</sup> Avenue South, Seattle, King County, Washington. This assessment has revealed evidence of a recognized environmental condition at the site including past or present release(s) or potential release(s) of hazardous substances at the site, or other potential or existing environmental conditions on site.


The waste oil tank identified at the site has been properly closed in-place using prescribed methods recommended by federal, state and local regulations. It appears that petroleum contamination still exist at the site, and may be migrating to an adjacent property.

## 7.0 RECOMMENDATIONS

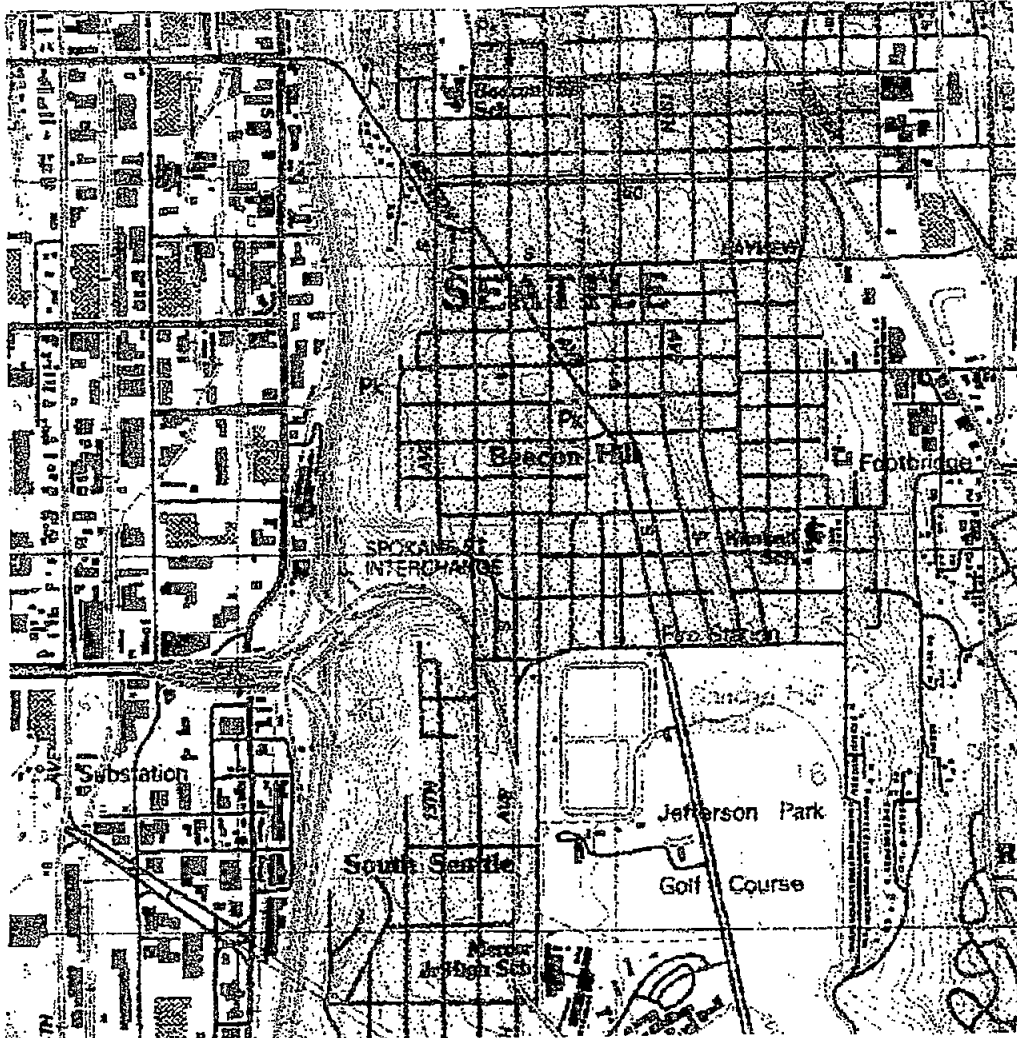
Based upon the findings of this assessment, a Phase II subsurface investigation is recommended at this site.

We appreciate the opportunity to be of service to Gator Foaming Systems for this project and look forward to working with you on future assignments. In the meantime, if you have questions regarding the information in this report or if we can be of further assistance, please do not hesitate to contact the OES Federal Way, Washington, office at (253) 952-6717.

Sincerely,  
**ORION Environmental Services**

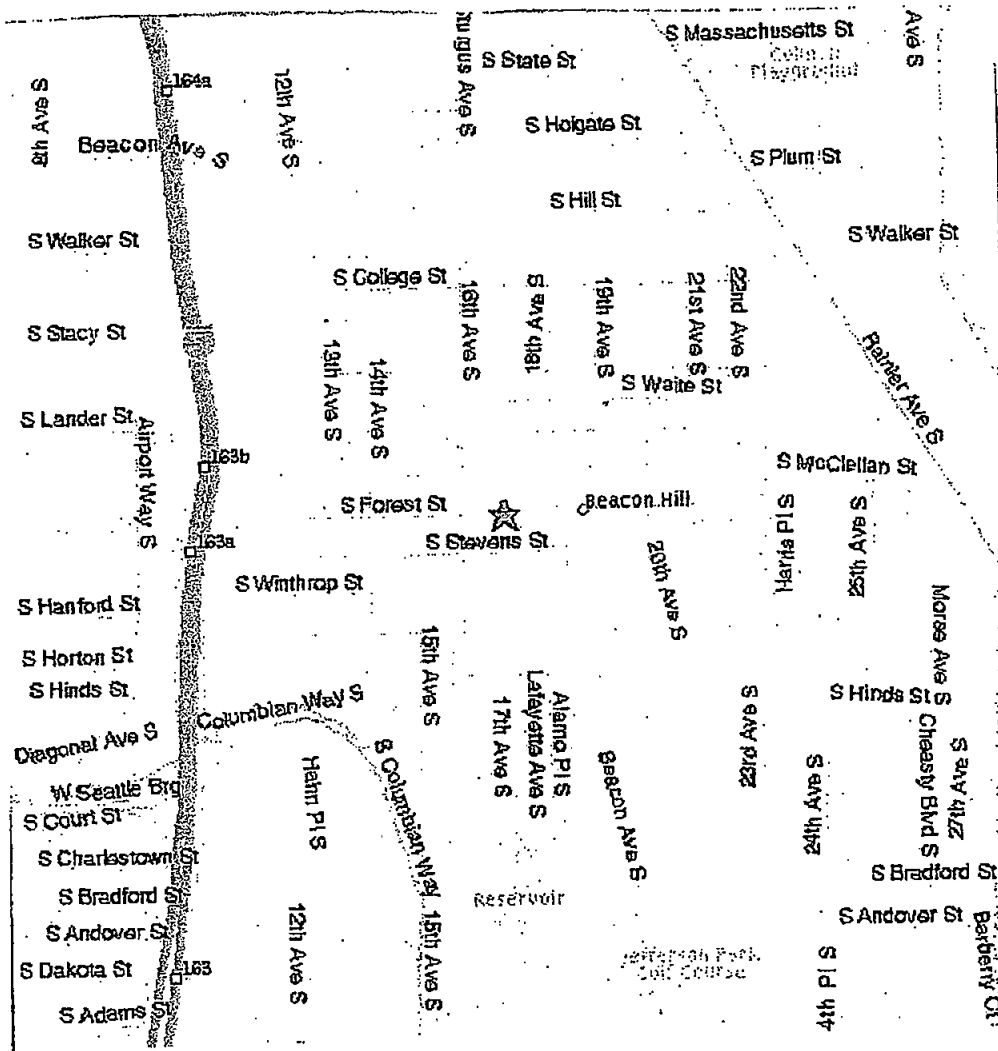
  
Tyronne Woolfolk  
Registered Site Assessor

<i>Attachments:</i>	
<i>Attachment A:</i>	<i>Figures</i>
<i>Attachment B:</i>	<i>Morse General Contractor Report</i>
<i>Attachment C:</i>	<i>Site Photographs</i>
<i>Attachment D:</i>	<i>Limitations Statement</i>
<i>Attachment E:</i>	<i>UST In-Place Closure Forms</i>



## TOPOGRAPHY MAP

**C & L Auto Repair**  
2901 17<sup>th</sup> Avenue South  
Seattle, Washington 98144



## SITE VICINITY MAP

**C & L Auto Repair**  
 2901 17<sup>th</sup> Avenue South  
 Seattle, Washington 98144



#2099

12/6/00

C.L. Auto Repair

Technical Assistance Visit

Notice of Correction

The Department of Ecology is responsible for overseeing environmental laws that protect human health and the environment in Washington state. During this visit, Ecology observed the violation(s) recorded below. Listed with each are the steps required to correct the violation and the dates by which they must be completed.

WAC 173-360-310 - Failure to upgrade waste oil tank by  
Dec. 22 1998.

1) Must temporarily close waste oil tank & empty all product by January 31, 2001. Mail closure notice

2) Must permanently close in place waste oil tank by IFCI certified personnel with minimum 2 soil samples by 4/30/2001. If need to go thru tank, I waive sample down to only 1 soil sample for site assessment.

If there are good reasons why you cannot complete the corrections by the date(s) shown, please submit a written request for an extension to the Ecology contact person listed below by above (date). Include an explanation of why the extension is needed, an account of the steps you've already taken, and a description of the remaining actions planned to complete the corrections.

You will be notified if an extension will be granted prior to the correction dates noted above.

For further technical assistance to help you complete these corrections, call the Ecology contact at the number listed below.

Department of Ecology Contact

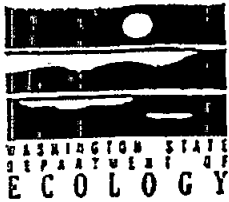
On-Site Contact Information

Name Annette Ademasu  
 Region (address on back) NW/PO  
 Phone (425) 649-7189  
 Fax (425) 649-7098  
 Signature Annette Ademasu  
 Date/Time 12-6-00 11:00 AM

Name Mr. Chow (C.L. Auto Repair)  
 Title \_\_\_\_\_  
 Address \_\_\_\_\_  
 Phone (206) 320-0088  
 Signature [Signature]  
 (Acknowledges Receipt)

- Photos Taken     Samples Collected     Samples Split     Tech. Assist. Materials Provided  
 Ecology Enforcement Authority Explained     Copy of Notice Given to Facility Contact

Ecology is an Equal Opportunity and Affirmative Action employer. If you have special accommodation needs, contact the Ecology regional office for your county (phone numbers listed on back).



# UNDERGROUND STORAGE TANK

# 30 DAY NOTICE

See back of form for instructions  
Please  the appropriate box

Intent to Install

Intent to Close

or Office Use Only

Owner # \_\_\_\_\_

Site # \_\_\_\_\_

Both

### SITE INFORMATION:

Site ID Number (on invoice or available from Ecology if the tank is registered): 2099 NW King UST

Site/Business Name: C+L Auto Repair

Site Address: 2901-17<sup>th</sup> Ave South Seattle WA 98144

Owner/Operator Telephone: (206) 232-5980

### TANK INFORMATION:

### TANKS TO BE CLOSED

This section to be filled out ONLY if tanks are being removed.

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
<u>4</u>	<u>ASAP 2/2001</u>	<u>28560</u>	<u>Waste Oil</u>	<u>Dec 2000</u>	<u>NO</u>	<u>Dec 2000</u>

### TANKS TO BE INSTALLED

This section to be filled out ONLY if tanks are being installed

Tank ID	Approx. Install Date

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### TANK INSTALLATION TO BE PERFORMED BY (if known):

This section to be filled out ONLY if tanks are being installed

Service Provider: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_  
Street P.O. Box  
 \_\_\_\_\_  
City State ZIP-Code

### TANK PERMANENT CLOSURE TO BE PERFORMED BY (if known):

This section to be filled out ONLY if tanks are being removed

Service Provider: Gator Foaming Systems

Contact Name: Wally Carter

Telephone: (253) 229-4597

Address: 3950 A-SE Suite 305-105 Auburn WA 98002

This form will be returned to this address

UST OWNER/OPERATOR Henry Chin

MAILING ADDRESS: 3719-80<sup>th</sup> AVE SE  
Mercer Island WA 98040

Once validated by Ecology, this form serves as your temporary permit for the tanks above.

Please type or print information



**LEE MORSE**  
GENERAL CONTRACTOR, INC.

August 21, 1990

Chin Bros.  
2901 17th Ave. S.  
Seattle, WA 98144

RE: Removal of 1-8000 & 2-6000 gallon tanks.

Dear Henry,

Having completed the removal of the underground storage tanks as per our contract #24574, we are now providing the paperwork generated during the removal process. Our report from Friedman & Bruya, Inc., indicates that contamination was not found above the Department of Ecology's detection limit. Included also, is your proof that the tanks have been removed, scraped, and cleaned in an approved method. Please review the information provided and contact me if you should have any questions. It has been a pleasure being of service to your company.

Sincerely,

*Scott T. Brown*

Scott T. Brown  
Project Coordinator  
LEE MORSE GENERAL CONTRACTOR, INC.

Your  
Seattle  
Fire Department

SEATTLE FIRE DEPARTMENT



PERMIT CODE: 799 I Title: TEMPORARY UNDERGROUND TANK REMOVAL/ABANDONMENT PERMIT

FEE: \$60.00 + TIME CHARGE \$ \_\_\_\_\_ Code Reference: 79.113 AUG 2 1990 AUG 9 1990  
Date Received Date Issued

Receipt # 150900 or Data Entry # \_\_\_\_\_

Firm Name: CHIN BROS Phone: 763-8956

Firm Address: 2901 17th So. SEATTLE Zip: 98144

Job Site: SAME

Person in Charge LEE MORSE Phone: 763-8956

Number/size of tanks: 1 - 8000 2 - 6000

Product last contained: GASOLINE

Type of rinse: SOapy WATER

CONDITIONS:

1. TANKS MAY BE REMOVED ONLY AFTER FIRE DEPARTMENT INSPECTION.
2. Two (2) 20 BC portable fire extinguishers are to be on site within 50' of the operation.
3. Rope or ribbon barricades must be provided circling 10' from the operation or be enclosed in a fenced yard.
4. "No Smoking" signs must be posted in readily visible locations.
5. No hot works allowed unless the tanks are certified gas free. A separate Fire Department permit (Code 491) is required for cutting and welding operations.

PROCEDURES:

1. Call 386-1450, 24 hours prior to removal to arrange for an appointment. Appointments must be confirmed by an Inspector.
2. Permits may cover multiple tanks located at a single inspection area. If additional tanks are to be removed at later dates, separate permits shall be obtained.
3. Additional fees will be charged if inspectors are required to work other than normal business hours. (Normal business hours are 7:30 a.m. to 4:30 p.m.)
4. To ensure tanks are completely free of all flammable or combustible liquids, a receipt or certificate must be on site indicating the tank has been pumped and rinsed with an approved material. Product and rinse water must be disposed of in an approved manner.

5. To ensure that the tank atmosphere has been inerted, one (1) pound of dry ice (Carbon Dioxide) per 50-gallon capacity of the tank must be inserted in the tank. (A 1,000-gallon tank would require 20 pounds of dry ice.) This should be done prior to the use of heavy equipment for excavating.
  - a. Wait a minimum of 60 minutes for dry ice to vaporize. Vapors should begin to show at the fill pipe at this time.
  - b. A Fire Marshal's Office Inspector will test with a Carbon Dioxide Tester. When a reading of 60% CO<sub>2</sub> is achieved, tank removal may begin.
  - c. CO<sub>2</sub> fire extinguishers or compressed gas are not to be used for inerting purposes. This produces static electricity which may result in an explosion.
6. Tanks with baffles to prevent movement of liquid (or tanks without baffles larger than 10,000 gallons) must be certified gas free by a Marine Chemist or a Petroleum Industry Safety Engineer regularly engaged in that business prior to removal.
7. Tanks must be removed from the ground and relocated to a remote, approved facility on the day that the permit is issued.
8. After the tanks are removed, the openings should be sealed so the CO<sub>2</sub> gas will remain in the tank during transit. In addition, tanks large enough to allow a person to enter it to do repair work should be marked on one side with spray paint "NO AIR - INERT GAS".

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

SEATTLE FIRE DEPARTMENT

Expiration Date:

August 1, 1990

By

Inspector

Date: 6-7-90

Storage Tank Unit  
Department of Ecology  
M/S P.V. 11  
Olympia, WA 98504-8711

NOTICE OF UNDERGROUND STORAGE TANK REMOVAL

Date of removal: 7-7-90

Method of closure: Removal  or In-place closure

TANK SIZE:

1-8000  
2-6,000  
\_\_\_\_\_  
\_\_\_\_\_

CONTENTS OF TANK:

GASOLINE  
"  
\_\_\_\_\_  
\_\_\_\_\_

Owners Name: Henry Chin

Address: 2901 17<sup>th</sup> AVE. S.

City: Seattle State: WA

Phone: 324-4646

Lee Morse General Contractor, Inc.



STATE OF WASHINGTON  
DEPARTMENT OF ECOLOGY

Mail Stop PV-11 • Olympia, Washington 98504-8711 • (206) 459-6000

June 12, 1990

Contractor  
Lee Morse General Contractor, Inc.  
9434 Delridge Way S.W.  
Suite B  
Seattle, Washington 98106

Dear Contractor :

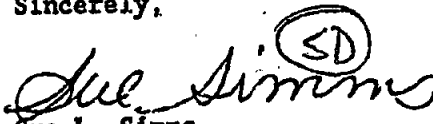
This is to acknowledge receipt of your 30-day notice of intent to close underground storage tank(s) located at 2901 17th Ave. S., Seattle, Washington.

We received your letter on June 11, 1990.

Your 30-day notice has been forwarded to the appropriate regional office. Field people with the Underground Storage Tank Program may visit your site within the 30-day period. However, with the many tank closures now taking place, it will not be possible to visit every site. If you have not been contacted by the time thirty days have elapsed from the date we received your notice letter (noted above), you may proceed with closure.

If you did not request a full closure packet, but would like to receive one, you may do so by calling 1-800-826-7716 (in Washington state only) or 206-459-6293. This closure packet contains a form entitled "Notice of Permanent Closure of Underground Storage Tank(s)". For your convenience, we have enclosed a copy of this form. Please complete this form and return it to the Department of Ecology when tank closure is complete.

Sincerely,

  
Sue L. Simms  
Regulatory Specialist

SLS:sd

Enclosure



**Northwest  
EnviroService  
Inc.**

00494

**BILL OF LADING AND  
GALLONAGE REPORT**

CUSTOMER Chin Bros Auto Parts DATE 8/2/90

JOB LOCATION 2902-17th Ave. S, Seattle WA

DRIVER (PB) EQUIP Ko 1

JOB NO 32-15615 DOCUMENT NO \_\_\_\_\_

PRODUCT Gas & H<sub>2</sub>O GALS 200

PRODUCT \_\_\_\_\_ GALS \_\_\_\_\_

DRUMS \_\_\_\_\_ NO \_\_\_\_\_

OTHER \_\_\_\_\_ EST SLUDGE \_\_\_\_\_

[Signature]  
CUSTOMER SIGNATURE

**N.W.E.S. DISPOSAL**

WASH OUT: YES  NO  TIME IN \_\_\_\_\_ TIME OUT \_\_\_\_\_

WATER \_\_\_\_\_ GAL LOCATION \_\_\_\_\_ TEST \_\_\_\_\_

SLUDGE \_\_\_\_\_ GAL LOCATION \_\_\_\_\_

OIL/DIESEL \_\_\_\_\_ GAL LOCATION \_\_\_\_\_ TEST \_\_\_\_\_

HOC'S \_\_\_\_\_ PCB'S \_\_\_\_\_ B.S.&W. \_\_\_\_\_ API. \_\_\_\_\_ LAB: YES  NO

GAS \_\_\_\_\_ GAL LOCATION \_\_\_\_\_

HWP \_\_\_\_\_ GAL LOCATION \_\_\_\_\_

OTHER \_\_\_\_\_

OTHER \_\_\_\_\_

NW118 FACILITY REPRESENTATIVE \_\_\_\_\_

DRIVER SIGNATURE \_\_\_\_\_

CUSTOMER



**Northwest  
EnviroService  
Inc.**

**PUMP AND RINSE CERTIFICATION**

DATE: 8-2-90

TO WHOM IT MAY CONCERN

This letter is to certify that tank(s), size(s)

(1-8000) (2-6000)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

have been pumped and rinsed for removal.

Work was performed at:

Chin Bros. Auto Parts 2902-17<sup>th</sup> AVE. S.  
Seattle, WA.

For:

Lee Morse Court.  
Seattle, Wa.

Please note that this letter does not certify that the above tank(s) have been cleaned for disposal or that it (they) should be considered gas-free.

Sincerely,

Northwest EnviroService, Inc.

Underground Tank Division  
762-1190

TANK DUMP SLIPS

DATE: AUG 9, 1990  
TIME: 1:35 PM  
COMPANY: LEE MORSE  
JOB NO.: \_\_\_\_\_  
NAME OF JOB: CHIN 17745  
TANK SIZE (GAL): 6,000  
SIGNATURE: Tom Lee

HAS TANKS BEEN CLEANED AND PAPERS DELIVERED? YES OR NO

TANK DUMP SLIPS

DATE: August 10, 1990  
TIME: 0800  
COMPANY: Lee Morse  
JOB NO.: Chin Prod  
NAME OF JOB: Chin Prod  
TANK SIZE (GAL): 6000 Gal 8,000 Gal  
SIGNATURE: Ray Hutson

HAS TANKS BEEN CLEANED AND PAPERS DELIVERED? YES OR NO



TANK DUMP SLIPS

DATE: AUG 9, 1990  
TIME: 1:35 PM  
COMPANY: LEE MORSE  
JOB NO.: \_\_\_\_\_  
NAME OF JOB: CHIN 17TH S  
TANK SIZE (G): 6,000  
SIGNATURE: Tom Lee

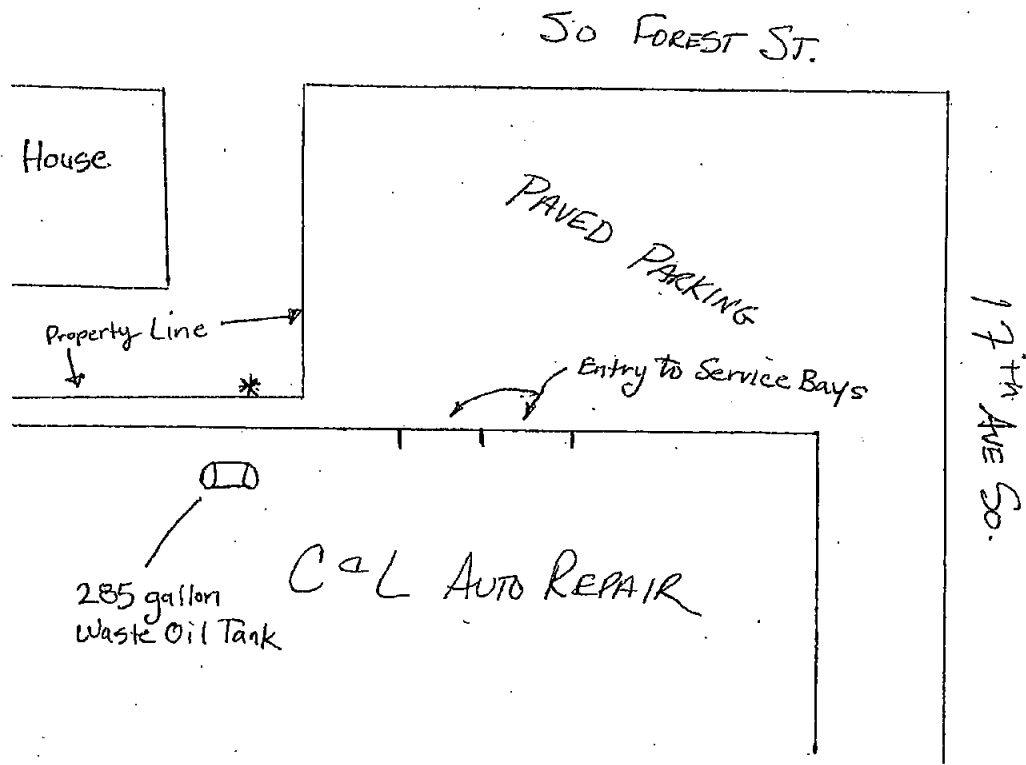
HAS TANKS BEEN CLEANED AND PAPERS DELIVERED?  YES OR NO

TANK DUMP SLIPS

DATE: August 10, 1990  
TIME: 0800  
COMPANY: Lee Morse  
JOB NO.: Chin Prod  
NAME OF JOB: Chin Prod  
TANK SIZE (G): 6000 Gal      8,000 Gal  
SIGNATURE: Ray Kustson

HAS TANKS BEEN CLEANED AND PAPERS DELIVERED?  YES OR NO

\* Soil Sample @ 4' depth, approximately 9' from UST  
Clay soils, with little to no fine sand or silt.



SITE DRAWING  
CAL Auto Repair  
March 2001  
Tjuskopalle

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# GATOR FOAMING SYSTEMS

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Underground Residential Oil Tank Closure Service  
Specializing in Foam Fill in Place

3930 A St. S.E. Suite 305-105  
Auburn, Wa. 98002-3857  
Main Office (253) 891-1912  
Toll Free (800) 645-8657

Wally Carter

www.gatorfoaming.com  
Tacoma (253) 229-4597  
Seattle (206) 910-8739  
Fax (800) 493-5011

## GATOR FOAMING CERTIFICATION OF TANK CLEANING

THE COMMERCIAL UNDERGROUND WASTE OIL STORAGE TANK AT THE ADDRESS LISTED BELOW HAS BEEN PUMPED OUT AND TRIPLE RINSE CLEANED IN ACCORDANCE WITH THE DEPARTMENT OF ECOLOGY'S RECOMMENDATIONS AND THE LOCAL FIRE MARSHAL'S RULES AND REGULATIONS.

ADDRESS: 2901-17th Ave South  
CITY, ST: Seattle, Wa, 98144  
SIGNED: Wally Carter  
DATED: March 23, 2001



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# GATOR FOAMING SYSTEMS

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Underground Residential Oil Tank Closure Service  
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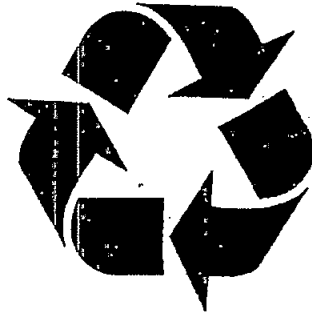
Wally Carter

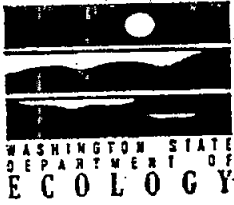
www.gatorfoaming.com  
Tacoma (253) 229-4597  
Seattle (206) 910-8739  
Fax (800) 493-5011

## GATOR FOAMING CERTIFICATION OF TANK ABANDONMENT

THE COMMERCIAL UNDERGROUND WASTE OIL STORAGE TANK AT THE ADDRESS LISTED BELOW HAS BEEN FOREVER ABANDONED IN ACCORDANCE WITH THE DEPARTMENT OF ECOLOGY'S RECOMMENDATIONS AND THE LOCAL FIRE MARSHAL'S RULES AND REGULATIONS.

ADDRESS: 2901-17th Ave South  
CITY, ST: Seattle, Wa. 98144  
SIGNED: Wally Carter  
DATED: March 23, 2001





# UNDERGROUND STORAGE TANK 30 DAY NOTICE

See back of form for instructions  
Please  the appropriate box

Intent to Install  Intent to Close

For Office Use Only

Owner # \_\_\_\_\_  
Site # \_\_\_\_\_

Both

## SITE INFORMATION:

Site ID Number (on invoice or available from Ecology if the tank is registered): 2099 NW King UST  
 Site/Business Name: C+L Auto Repair  
 Site Address: 2901-17<sup>th</sup> Ave South Seattle Wa 98144  
Street City State ZIP-Code  
 Owner/Operator Telephone: (206) 232-5980

## TANK INFORMATION:

### TANKS TO BE CLOSED

This section to be filled out ONLY if tanks are being removed.

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
<u>4</u>	<u>ASAP 2/01</u>	<u>285 Gal</u>	<u>Wasteoil</u>	<u>Dec 2000</u>	<u>NO</u>	<u>Dec 2000</u>

RECEIVED  
JAN 29 2001  
ECOLOGY

### TANKS TO BE INSTALLED

This section to be filled out ONLY if tanks are being installed

Tank ID	Approx. Install Date

## TANK INSTALLATION TO BE PERFORMED BY (if known):

This section to be filled out ONLY if tanks are being installed

Service Provider: \_\_\_\_\_ Contact Name: \_\_\_\_\_  
 Telephone: (\_\_\_\_) \_\_\_\_\_  
 Address: \_\_\_\_\_  
Street City State P.O. Box ZIP-Code

## TANK PERMANENT CLOSURE TO BE PERFORMED BY (if known):

This section to be filled out ONLY if tanks are being removed

Service Provider: Gator Foaming Systems  
 Contact Name: Wally Carter  
 Telephone: (253) 229-4597  
 Address: 3930 A<sup>th</sup> SE, Suite 305-105 Auburn Wa 98002  
Street City State P.O. Box ZIP-Code

This form will be returned to this address  
 UST OWNER/ OPERATOR Henry Chin  
 MAILING ADDRESS 3719-80<sup>th</sup> AVE SE. Mercer Island Wa 98040  
Street City State ZIP-Code

Once validated by Ecology, this form serves as your temporary permit for the tanks listed above.

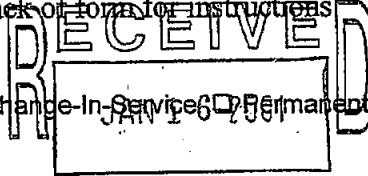
Please type or print information



# UNDERGROUND STORAGE TANK Closure and Site Assessment Notice

FOR OFFICE USE ONLY  
Site ID: 2099 UST  
Owner ID: \_\_\_\_\_

See back of form for instructions



NW King

Please check the appropriate box(es)  
 Temporary Tank Closure    Change-In-Service    Permanent Tank Closure    Site Check/Site Assessment

### Site Information

ECOLOGY

### Owner Information

(This form will be returned to this address)

Site ID Number 2099  
(Available from Ecology if the tanks are registered)  
Site/Business Name CL AUTO REPAIR  
Street  
Site Address 2901-17TH AVE. SO.  
City/State SEATTLE, WA.  
Zip Code 98144 Telephone (206) 320-0088

UST Owner/Operator HENRY CHIN  
Mailing Address 3719-80TH AVE. S.E.  
Street  
MERCER ISLAND, WA. 98040  
P.O. Box  
City/State \_\_\_\_\_  
Zip Code \_\_\_\_\_ Telephone (206) 232-5980

### Tank Closure/Change-In-Service Company

~~Service Company \_\_\_\_\_  
Certified Supervisor \_\_\_\_\_ Decommissioning Certification No. \_\_\_\_\_  
Supervisor's Signature \_\_\_\_\_ Date \_\_\_\_\_  
Address \_\_\_\_\_  
Street \_\_\_\_\_ P.O. Box \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Telephone ( ) \_\_\_\_\_~~

### Site Check/Site Assessor

~~Certified Site Assessor \_\_\_\_\_  
Address \_\_\_\_\_  
Street \_\_\_\_\_ P.O. Box \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Telephone ( ) \_\_\_\_\_~~

### Tank Information

Tank ID	Closure Date	Closure Method	Tank Capacity	Substance Stored
<u>4</u>	<u>1-15-01</u>	<u>NOT USING DRAINED TANK</u>	<u>275 GAL?</u>	<u>WASTE OIL</u>

### Contamination Present at the Time of Closure

Yes    No    Unknown  
Check unknown if no obvious contamination was observed and sample results have not yet been received from analytical lab.  
  
 Yes    No  
If contamination is present, has the release been reported to the appropriate regional office?

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



STATE OF WASHINGTON  
DEPARTMENT OF ECOLOGY

Mail Stop PV-11 • Olympia, Washington 98504-8711 •

12-18-92  
Sent note indicating  
that I am refunding  
\$75 for tank fees  
in 1992 but that  
tank fees for 1990  
& 1991 are past due.  
JAV

December 18, 1992

Dear Underground Storage Tank Owner:

We recently received information on the following site and tank(s) which indicates that the tank(s) have been closed:

Site Address: 2901 - 17th Ave S., Seattle

Site No: 002099 Tank Ids: 1, 2, 3, 4

Until we receive documentation that the tank(s) have been permanently closed in accordance with federal and state regulations, we are unable to consider them closed for regulatory and billing purposes. If such closure has been completed, please fill out the enclosed form(s) as marked below and return them to our office as soon as possible. We will then be able to correct our records and resolve any outstanding fee payment issues relating to this site.

For tanks closed before March 1, 1991:

Permanent Closure/Change-in-Service Checklist

For tanks closed after March 1, 1991:

- Permanent Closure/Change-in-Service Checklist
- Site Check/Site Assessment Checklist
- A copy of the Site Assessment Report

Please complete the forms and return them to:

Washington State Department of Ecology  
Underground Storage Tank Section  
PO Box 47655  
Olympia, WA 98504-7655

Thank you for your cooperation. If you have any questions, please call me at (206) 438-7520.

Sincerely,

Tammie McClure  
Data Management Unit  
Toxics Cleanup Program

Enclosures



STATE OF WASHINGTON  
DEPARTMENT OF ECOLOGY

Mail Stop PV-11 • Olympia, Washington 98504-8711 • (206) 459-6000

10/14/91

Dear Underground Storage Tank Owner:

We recently received information on the following site and tank(s) which indicates that the tank(s) have been closed:

Site Address: 2901 - 17<sup>th</sup> Ave. Seattle

Site No: 002099 Tank Ids: 1-4

Until we receive documentation that the tank(s) have been permanently closed in accordance with federal and state regulations, we are unable to consider them closed for regulatory and billing purposes. If such closure has been completed, please fill out the enclosed form(s) as marked below and return them to our office as soon as possible. We will then be able to correct our records and resolve any outstanding fee payment issues relating to this site.

For tanks closed before April 1, 1991:

Permanent Closure/Change-in-Service Checklist

For tanks closed after April 1, 1991:

Permanent Closure/Change-in-Service Checklist  
 Site Check/Site Assessment Checklist  
 2 copies of Site Assessment Report

Please complete the forms and return them to:

Washington State Department of Ecology  
Underground Storage Tank Section  
Mail Stop PV-11  
Olympia, WA 98504-8711

Thank you for your cooperation. If you have any questions, please call me at (206) 459-6288.

Sincerely,

Melissa Underwood  
Data Management Unit

DEPARTMENT OF ECOLOGY  
UNDERGROUND STORAGE TANKS

JAN 19 1993

Enclosures

UNDEGROUND STORAGE TANK SECTION  
DEPT. OF ECOLOGY  
FILED - FORM 10/14/91 & HANDLED TO





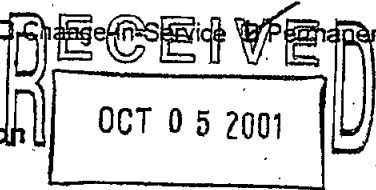
UNDERGROUND STORAGE TANK  
Closure and Site Assessment Notice

FOR OFFICE USE ONLY  
Site ID #: \_\_\_\_\_  
Owner ID #: \_\_\_\_\_

See back of form for instructions

Please check the appropriate box(es)

- Temporary Tank Closure  Change-In-Service  Permanent Tank Closure  Site Check/Site Assessment



Site Information

Owner Information

(This form will be returned to this address)

Site ID Number 2099 (Available from Ecology if the tanks are registered)  
Site/Business Name C&C AUTO REPAIR Mailing Address 3719 80th AVE S.E.  
Street Street  
Site Address 2901 17th Ave So  
City/State Seattle WA City/State MERCER IS. WA P.O. Box  
Zip Code 98144 Telephone 206 320-0088 Zip Code 98040 Telephone 206 320-0088  
Owners Signature HENRY CHIN

Tank Closure/Change-In-Service Company

Service Company GATOR FOAMING SYSTEMS  
Certified Supervisor WALLY CARTER Decommissioning Certification No. 1039390-26  
Supervisor's Signature Wally Carter Date 10-1-2001  
Address 3930 "A" STREET SE Ste # 305-105  
Street P.O. Box  
City AUBURN State WA Zip Code 98002 Telephone 253 686-4002  
253 222-3154

Site Check/Site Assessor

Certified Site Assessor Tyrone Woolfolk  
Address 34004 9th Avenue So-A#5  
Street P.O. Box  
City FEDERAL WAY State WA Zip Code 98003 Telephone 253 952-6717

Tank Information

Tank ID	Closure Date	Closure Method	Tank Capacity	Substance Stored
	<u>4/01</u>	<u>In-Place</u>	<u>285 gallons</u>	<u>Waste Oil</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Contamination Present at the Time of Closure

Yes  No  Unknown  
Check unknown if no obvious contamination was observed and sample results have not yet been received from analytical lab.

Yes  No  
If contamination is present, has the release been reported to the appropriate regional office?



# UNDERGROUND STORAGE TANK Site Check/Site Assessment Checklist

FOR OFFICE USE ONLY

Site #: \_\_\_\_\_

Owner #: \_\_\_\_\_

## INSTRUCTIONS

When a release has not been confirmed and reported, this Site Check/Site Assessment Checklist must be completed and signed by a person certified by IFCI or a Washington registered professional engineer who is competent, by means of examination, experience, or education, to perform site assessments. The results of the site check or site assessment must be included with this checklist. This form must be submitted to Ecology at the address shown below within 30 days after completion of the site check/site assessment.

**SITE INFORMATION:** Include the Ecology site ID number if the tanks are registered with Ecology. This number may be found on the tank owner's invoice or tank permit.

**TANK INFORMATION:** Please list all tanks for which the site check or site assessment is being conducted. Use the owner's tank ID numbers if available, and indicate tank capacity and substance stored.

**REASON FOR CONDUCTING SITE CHECK/SITE ASSESSMENT:** Please check the appropriate item.

**CHECKLIST:** Please initial each item in the appropriate box.

**SITE ASSESSOR INFORMATION:** This information must be signed by the registered site assessor who is responsible for conducting the site check/site assessment.

Underground Storage Tank Section  
Department of Ecology  
PO Box 47655  
Olympia WA 98504-7655

## SITE INFORMATION

Site ID Number (Available from Ecology if the tanks are registered): 2099

Site/Business Name: C&L AUTO REPAIR

Site Address: 2901 17th AVE SO. Telephone: 206 320-0088  
Street City State Zip Code

SEATTLE WA 98144

## TANK INFORMATION

Tank ID No.	Tank Capacity	Substance Stored
<u>2099</u>	<u>285 GALLONS</u>	<u>WASTE OIL</u>

## REASON FOR CONDUCTING SITE CHECK/SITE ASSESSMENT

- Check one:
- Investigate suspected release due to on-site environmental contamination.
  - Investigate suspected release due to off-site environmental contamination.
  - Extend temporary closure of UST system for more than 12 months.
  - UST system undergoing change-in-service.
  - UST system permanently closed with tank removed.
  - Abandoned tank containing product.
  - Required by Ecology or delegated agency for UST system closed before 12/22/88.
  - Other (describe): \_\_\_\_\_

**CHECKLIST**

Each item of the following checklist shall be initialed by the person registered with the Department of Ecology whose signature appears below.

	YES	NO
1. The location of the UST site is shown on a vicinity map.	✓	
2. A brief summary of information obtained during the site inspection is provided. (see Section 3.2 in site assessment guidance)	✓	
3. A summary of UST system data is provided. (see Section 3.1.)	✓	
4. The soils characteristics at the UST site are described. (see Section 5.2)	✓	
5. Is there any apparent groundwater in the tank excavation?	✓	✓
6. A brief description of the surrounding land use is provided. (see Section 3.1)	✓	
7. Information has been provided indicating the number and types of samples collected, methods used to collect and analyze the samples and the name and address of the laboratory used to perform the analyses.	✓	
8. A sketch or sketches showing the following items is provided:	✓	
- location and ID number for all field samples collected	✓	
- groundwater samples distinguished from soil samples (if applicable)	✓	
- samples collected from stockpiled excavated soil	✓	
- tank and piping locations and limits of excavation pit	✓	
- adjacent structures and streets	✓	
- approximate locations of any on-site and nearby utilities	✓	
9. If sampling procedures different from those specified in the guidance were used, has justification for using these alternative sampling procedures been provided? (see Section 3.4)	✓	
10. A table is provided showing laboratory results for each sample collected including; sample ID number, constituents analyzed for and corresponding concentration, analytical method and detection limit for that method.	✓	
11. Any factors that may have compromised the quality of the data or validity of the results are described.		✓
12. The results of this site check/site assessment indicate that a confirmed release of a regulated substance has occurred.	✓	

**SITE ASSESSOR INFORMATION**

Tyrone Woolfolk  
Person registered with Ecology

ORION ENVIRONMENTAL SERVICES  
Firm Affiliated with

Business Address: 34004 9th Ave S, #A5 Telephone: 253 952-6717  
FEDERAL WAY WA 98003  
 City State Zip Code

I hereby certify that I have been in responsible charge of performing the site check/site assessment described above. Persons submitting false information are subject to penalties under Chapter 173.360 WAC.

1 Jul 01 Tyrone Woolfolk  
Date Signature of Person Registered with Ecology



# UNDERGROUND STORAGE TANK

# 30 DAY NOTICE

See back of form for instructions  
Please  the appropriate box

Intent to Install

Intent to Close

Both

### For Office Use Only

Owner # \_\_\_\_\_

Site # \_\_\_\_\_

### SITE INFORMATION:

Site ID Number (on invoice or available from Ecology if the tank is registered): 2099 NW King UST

Site/Business Name: C+L Auto Repair

Site Address: 2901-17<sup>th</sup> Ave South

Owner/Operator Telephone: (206) 232-5980

Seattle

Wa

98144

City

State

ZIP-Code

### TANK INFORMATION:

### TANKS TO BE CLOSED

This section to be filled out ONLY if tanks are being removed.

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
<u>4</u>	<u>ASAP 2/2001</u>	<u>2856 gal</u>	<u>Waste oil</u>	<u>Dec 2000</u>	<u>NO</u>	<u>Dec 2000</u>

RECEIVED  
JAN 29 2001  
ECOLOGY

### TANKS TO BE INSTALLED

This section to be filled out ONLY if tanks are being installed

Tank ID      Approx. Install Date

### TANK INSTALLATION TO BE PERFORMED BY (if known):

This section to be filled out ONLY if tanks are being installed

Service Provider: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_

Street

P.O. Box

City

State

ZIP-Code

### TANK PERMANENT CLOSURE TO BE PERFORMED BY (if known):

This section to be filled out ONLY if tanks are being removed

Service Provider: Gator Foaming Systems

Contact Name: Wally Carter

Telephone: (253) 229-4597

Address: 3930-A<sup>th</sup> SE, Suite 305-105

Auburn

Wa

98002

State

ZIP-Code

This form will be returned to this address

UST OWNER/ OPERATOR Henry Chin

MAILING ADDRESS 3719-80<sup>th</sup> Ave SE.

Mercer Island

City

State

Wa 98040

ZIP-Code

Once validated by Ecology, this form serves as your temporary permit for the tanks listed above.

Please type or print information

ECY 020-33

# PLEASE READ CAREFULLY

Return ~~with~~ completed form to:

**Underground Storage Tank  
Section**  
Department of Ecology  
P. O. Box 47655  
Olympia, WA 98504-7655

## INSTRUCTIONS

Check the appropriate box for tank closure, tank installation, or both.

### SITE INFORMATION:

Fill in the site information. Be sure to include the site number for the tank closures. Include the contact telephone number so that any problems may be resolved quickly.

### TANK INFORMATION:

List the tanks to be installed or closed. Please use tank ID number(s) for the tanks to be closed and assign new tank ID number(s) to the tanks being installed. **Do not use existing numbers from closed tanks.**

### TANK INSTALLATION TO BE PERFORMED BY:

List the installation contractor. Firms that provide UST services **MUST** be licensed by Ecology. Once your completed form is received, Ecology will validate it and return it to you. This validated form is your temporary permit. A temporary permit will allow you to receive product. A new notification form must be submitted within 30 days of installation in order to receive permanent permit(s).

### TANK PERMANENT CLOSURE TO BE PERFORMED BY:

List the closure contractor. Firms that provide UST services **MUST** be licensed by Ecology. Ask to see their license. Once a completed 30 day notice closure form is received, Ecology will place the date received on the form and return a copy to the owner.

Closure may proceed 30 days after the date stamped on the form. A site assessment is required at the time of closure unless contamination is confirmed. Any contamination must be reported within 24 hours to the appropriate Ecology Regional Office.

Please fill in the owner's name and address. **Confirmation of receipt of this form and your temporary permit will be sent to this address.**

**Contact your local fire marshal and planning department prior to tank closure to find out about any additional permits that may be required by the county or other local jurisdictions. This may include the need to comply with the State Environmental Policy Act (SEPA) Rules Chapter 197-11 WAC.**

Tanks exempt from notification requirements are:

*Farm or residential tanks, 1100 gallons or less, used to store motor fuel for personal or farm use only. The fuel must not be for resale or used for business purposes.*

*Tanks used for storing heating oil that is used on the premises where the tank is located.*

*Tanks with a capacity of 110 gallons or less.*

*Equipment or machinery tanks such as hydraulic lifts or electrical equipment tanks.*

*Emergency overflow tanks, catch basins, or sumps.*

**For more information call toll free in the state of Washington  
1-800-826-7716 or (206) 438-7137**



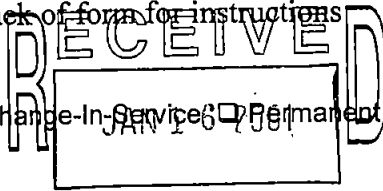
UNDEF -- OUND STORAGE TANK  
**Closure and Site Assessment Notice**

FOR OFFICE USE ONLY  
 UST  
 Owner ID #

NW King

See back of form for instructions

Please check the appropriate box(es)  
 Temporary Tank Closure     Change-In-Service     Permanent Tank Closure     Site Check/Site Assessment



**Site Information**

ECOLOGY

**Owner Information**

(This form will be returned to this address)

Site ID Number 2099  
 (Available from Ecology if the tanks are registered)  
 Site/Business Name CL AUTO REPAIR  
 Street  
 Site Address 2901-17TH AVE. SO.  
 City/State SEATTLE, WA.  
 Zip Code 98144 Telephone (206) 320-0088

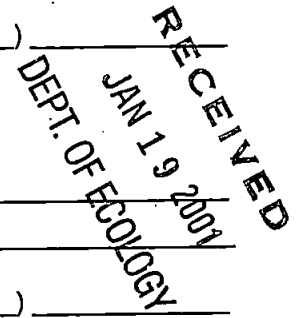
UST Owner/Operator HENRY CHIN  
 Mailing Address 3719-80TH AVE. S.E.  
 Street  
MERCER ISLAND, WA. 98040  
 P.O. Box  
 City/State \_\_\_\_\_  
 Zip Code \_\_\_\_\_ Telephone (206) 232-5980

**Tank Closure/Change-In-Service Company**

~~Service Company \_\_\_\_\_  
 Certified Supervisor \_\_\_\_\_ Decommissioning Certification No. \_\_\_\_\_  
 Supervisor's Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Address \_\_\_\_\_  
 Street P.O. Box  
 City State Zip Code Telephone ( ) \_\_\_\_\_~~

**Site Check/Site Assessor**

~~Certified Site Assessor \_\_\_\_\_  
 Address \_\_\_\_\_  
 Street P.O. Box  
 City State Zip Code Telephone ( ) \_\_\_\_\_~~



**Tank Information**

**Contamination Present at the Time of Closure**

Tank ID	Closure Date	Closure Method	Tank Capacity	Substance Stored
<u>4</u>	<u>1-15-01</u>	<u>NOT USING DRAINED TANK</u>	<u>275 GAL?</u>	<u>WASTE OIL</u>

Yes     No     Unknown  
 Check unknown if no obvious contamination was observed and sample results have not yet been received from analytical lab.  
 Yes     No  
 If contamination is present, has the release been reported to the appropriate regional office?

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

# Instructions

Please Read Carefully

AFTER ( LETTING THIS FORM RETURN TO:

TOXICS CLEANUP PROGRAM  
DEPARTMENT OF ECOLOGY  
P.O. BOX 47655  
OLYMPIA, WA 98504-7655

This form is to be completed by the tank owner and submitted to Ecology within 30 days of tank closure. Mark the appropriate box(es) for temporary tank closure, permanent tank closure, change-in-service, or site assessment.

Permanent Closure and Change-In-Service require a site assessment be performed.

## Site and Owner Information

Fill in the site and owner information. Include the Ecology site number, if known; also, be sure to provide telephone numbers so that any problems can be resolved quickly. **The tank owner MUST sign this form.**

## Tank Closure/Change-In-Service Company and Site Check/Site Assessor

List the closure company and fill in the site assessor information for permanent closure or change-in-service. Ask to see the closure company supervisor's IFCI Certification and make sure that the certified supervisor signs this form.

**Please note: Individuals performing services MUST be certified by the International Fire Code Institute (IFCI), or other nationally recognized association by which they demonstrate appropriate knowledge pertaining to USTs or have passed another qualifying exam approved by the Department.**

## Tank Information and Contamination Present at Time of Closure

Please fill in the tank information requested using tank ID numbers previously reported to Ecology. In the column entitled "Closure Method," indicate what manner of closure was used, such as closure in place or removal. Check the appropriate box(es) indicating if contamination is present and has been reported. Contamination found or suspected at the site must be reported to the appropriate Ecology regional office within 24 hours [see below for telephone numbers]. **If contamination is confirmed, a site characterization report must be submitted to the regional office within 90 days; if contamination is not confirmed, then this form, a site assessment checklist, and a site assessment report must be submitted to the above address within 30 days.**

Central	Eastern	Southwest	Northwest
(509) 574-2490 (voice)	(509) 456-2926 (voice)	(360) 407-6300 (voice)	(425) 649-7000 (voice)
(509) 454-7673 (TDD)	(509) 458-2055 (TDD)	(360) 407-6306 (TDD)	(425) 649-4259 (TDD)

The following tanks are exempt from notification requirements:

- ❖ Farm or residential tanks, 1,100 gallons or less, used to store motor fuel for personal or farm use only. The fuel must not be for resale or used for business purposes.
- ❖ Tanks used for storing heating oil that is used on the premises where the tank is located.
- ❖ Tanks with a capacity of 110 gallons or less.
- ❖ Equipment or machinery tanks such as hydraulic lifts or electrical equipment tanks.
- ❖ Emergency overflow tanks, catch basins, or sumps.

For more information, call toll free in the state of Washington 1-800-826-7716 (Message).

LAST # 2079

**Ademasu, Annette**

---

**From:** Trovillo, Eric  
**Sent:** Tuesday, December 19, 2000 4:08 PM  
**To:** Ademasu, Annette  
**Cc:** Jackson, Janice  
**Subject:** Penalty Payment

Remitter: C.L. Auto Repair

Penalty/ Docket: 00 TC-NW-0312

Date paid: 12/19/00

Amount Paid: \$200.00

Balance remaining: \$0

Eric Trovillo  
Accountant  
Fiscal Office, Revenue/Receivables  
ETRO461@ECY.WA.GOV  
(360)407-7082



U57-7-2099

# Response to Docket Number Request

If you have problems with this process or if you should need to modify any of the information you provided when you requested this docket number please call Leila Anderson (360) 407-7015.

Date of Response 12/07/2000

Hello: ADEMASU, ANNETTE

On 12/07/2000

You requested a Docket Number for a FIELD PENALTY  
action to be issued to C.L. AUTO REPAIR

The Docket Number for this action is 00TCPNR-1874

Please write this down now, or print the page!

Corresponds to Field Action Number



Washington State  
Department of Ecology

**ENTERED**

**Notice of Penalty**

UST  
Site # **2099** Docket # **00 TC-NW-0312**

Date Issued <b>12-6-00</b>	Time <b>11:00am</b>	Field Staff Name <b>A. Ademasu</b>	Region <b>NW</b>
-------------------------------	------------------------	---------------------------------------	---------------------

Name of Violator  
**C.L. Auto Repair**

Location Of Violation  
**2901-17th Aves.**

Mailing Address of Violator (Street)  
**Same**

(City) <b>Seattle</b>	(Zip Code) <b>98144-5803</b>	Unit Assess	Total Fine
--------------------------	---------------------------------	-------------	------------

RCW 90.76.020 (1) (a) Failure to notify of UST system in use.	<b>\$100</b>		
--	--------------	--	--

RCW 90.76.020 (4) Operating UST without a valid permit.	<b>\$100</b>	<b>1</b>	<b>\$100</b>
--	--------------	----------	--------------

RCW 90.76.050 Delivering to UST without a valid permit.	<b>\$500</b>		
--	--------------	--	--

RCW 90.76.050 RCW 90.76.020(4) Waste oil UST emptied without a valid permit.	<b>\$100</b>		
---	--------------	--	--

RCW 90.76.020 (1) (d) Failure to provide release detection.	<b>\$100</b>		
--	--------------	--	--

RCW 90.76.020(5) Providing services without a license.	<b>\$500</b>		
---	--------------	--	--

RCW 90.76.020 (5) Failure to have a licensed supervisor on site.	<b>\$500</b>		
---	--------------	--	--

RCW 90.76.020 Failure to provide cathodic protection	<b>\$100</b>	<b>1</b>	<b>\$100</b>
---	--------------	----------	--------------

Total Fine for above violation(s) <b>\$200</b>	Evidence Collected <b>site inspection</b>
---	--

I personally observed or investigated the violations noted above.

**Arnette Ademasu**  
(Signature of Field Staff)

You have the right to appeal this action. Refer to the back of this action for detailed instructions. Immediately contact the field staff that issued this action if you do not understand the appeal process.

I acknowledge receipt of this action, signature does not imply guilt.

**X [Signature]**  
(Signature of Owner or Operator)

## You have the right to appeal this action:

Respond to this action to avoid being assessed additional penalties for the violations cited. You must respond in one of the three following ways.

(Appeals Process Described in RCW 43.21B.300)

### 1. To pay the penalty and waive your right to appeal:

- Make cashiers check or money order payable to Department of Ecology, Fiscal Cashier
- Print the docket number on the check or money order
- Enclose payment with this notice and mail to Department of Ecology, Cashiering, P.O. Box 5128, Lacey, Washington, 98503-0210

### 2. To appeal this action directly to the Department of Ecology:

*To be accepted the following steps must be done within 15 days from the date the action was served.*

- Prepare a statement describing why you think the penalty should be reduced or canceled. This statement is called an Application for Relief. (AFR).
- Sign the statement in the presence of a notary and have the statement notarized.
- Print the docket number on the statements.
- Mail the statement to the field staff which issued the action.

Based on the information in your statement (AFR), Ecology will prepare a response which will be sent to you.

### 3. To appeal Ecology's response to your statement (AFR), or to directly appeal this action to the Pollution Control Hearings Board:

*To be accepted the following steps must be done within 30 days from the date the action was served or within 30 days from the date you received Ecology's response to your statement, (AFR):*

- Prepare an appeal.
- Print the docket number on the appeal.
- Mail the appeal to, Pollution Control Hearings Board, P.O. Box 40903, Lacey, Washington, 98504-0903.
- Mail a Copy of the Appeal to Enforcement Officer, Department of Ecology, P.O. Box 47600, Olympia, Washington, 98504-7600.

The Pollution Control Hearings Board will set a date for a hearing.

(This action in no way limits Ecology's Enforcement options.)



State of Washington  
Department of Ecology  
**UST INSPECTION**

ENTERED  
CA 12/11/00

Inspection Date: 12-6-00 Time: 10:15am

Inspector(s): A. Adams Insp. Type:  T/A  Leak  Other

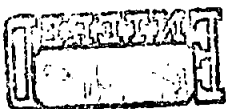
FACILITY INFORMATION		UBI #	
UST #:	<u>2099</u>	County	<u>King</u>
Site Name	<u>Chin Brothers Inc.</u>	Contact	
Address	<u>2901-77th Aves. Seattle 98144-5803</u>	Phone	<u>(206) 200-8888</u>

Tank #	Gal.	Content	Status	Leak Det.	Tank Tight	Line Tight	LLD Test	Test Date
<u>4</u>		<u>Waste Oil</u>	<u>Oper.</u>	INV ATG TT GWM VPM INT SIR	P F	P F	P F	
				INV ATG TT GWM VPM INT SIR	P F	P F	P F	
				INV ATG TT GWM VPM INT SIR	P F	P F	P F	
				INV ATG TT GWM VPM INT SIR	P F	P F	P F	
				INV ATG TT GWM VPM INT SIR	P F	P F	P F	

1.	Have all the USTs been registered? (WAC 173-360-200)	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	N/A
2.	Do all the USTs have current endorsement on license? (WAC 173-360-130)	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	N/A
3.	Are the USTs installed after 12/22/88?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	N/A
4.	Are records of release detection available? (WAC 173-360-140)	<input type="checkbox"/> YES	<input type="checkbox"/> NO	N/A
5.	Are records of tank tightness testing available? (WAC 173-360-345)	<input type="checkbox"/> YES	<input type="checkbox"/> NO	N/A
6.	Are records of line tightness testing available? (WAC 173-360-350 (2) ii)	<input type="checkbox"/> YES	<input type="checkbox"/> NO	N/A
7.	Does the facility have records of annual line leak detector test? (WAC 173-360-350 (2) a ii)	<input type="checkbox"/> YES	<input type="checkbox"/> NO	N/A
8.	Does the facility have proof of financial responsibility? (WAC 173-360-400)	<input type="checkbox"/> YES	<input type="checkbox"/> NO	N/A
9.	Inventory complete? (WAC 173-360-345 (6)) (circle) Daily Weekly Monthly	<input type="checkbox"/> YES	<input type="checkbox"/> NO	N/A
10.	Does the ATG have a test strip run to verify operation?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	N/A
11.	Do ATG records demonstrate monthly leak detection testing done? (WAC 173-360-355 (2))	<input type="checkbox"/> YES	<input type="checkbox"/> NO	N/A
12.	Does the facility have line leak detector(s)? (WAC 173-360-335)	<input type="checkbox"/> YES	<input type="checkbox"/> NO	N/A
13.	Does the tanks have spill/overfill prevention? (circle) Spill Overfill	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
14.	Does the UST system have corrosion protection? (circle) Tanks Piping	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	N/A
15.	Action taken? (circle) <input type="checkbox"/> Warning Letter <input checked="" type="checkbox"/> Notice of Abatement <input checked="" type="checkbox"/> Field Citation			N/A
16.	Date follow up is required?			<u>1/31 - 3/31</u>

Comments: Waste oil tank in use - no corrosion protection; has uninstalled AST on-site needs to be hooked up. Need time to permanently close.  
Inspector's Signature: Annelle Adams

Ecology is an Equal Opportunity and Affirmative Action Employer.  
To receive this message in an alternative format, contact the Toxics Cleanup Program at 1-800-826-7716 (voice) or (360) 407-6006 (TDD).



### Explanation of Codes on Inspection Type

T/A = Technical Assistance Visit  
Leak = Leak Detection Visit  
Other = Enforcement Visit

### Explanation of Codes Under Tank Information

Leak Det = Leak Detection  
LLD = Line Leak Detectors  
INV = Inventory Control  
ATG = Automatic Tank Gauging  
TT = Tank Tightness  
GWM = Ground Water Monitoring  
VPM = Vapor Monitoring  
INT = Interstitial Monitoring  
SIR = Statistical Inventory Reconciliation  
P F = Pass or Fail



#209-1 12/6/00 C.L. Auto Repair

Technical Assistance Visit  Notice of Correction

12-11-00

The Department of Ecology is responsible for overseeing environmental laws that protect human health and the environment in Washington state. During this visit, Ecology observed the violation(s) recorded below. Listed with each are the steps required to correct the violation and the dates by which they must be completed.

WAC 173-360-310 - Failure to upgrade waste oil tank by Dec. 22, 1998.

1) Must temporarily close waste oil tank & empty all product by January 31, 2001. Must close notice.

2) Must permanently close in place waste oil tank by IFC certified personnel with minimum 2 soil samples by 4/30/2001. If need to go thru tank, I waive sample down to only 1 soil sample for site assessment.

If there are good reasons why you cannot complete the corrections by the date(s) shown, please submit a written request for an extension to the Ecology contact person listed below by above (date). Include an explanation of why the extension is needed, an account of the steps you've already taken, and a description of the remaining actions planned to complete the corrections.

You will be notified if an extension will be granted prior to the correction dates noted above.

For further technical assistance to help you complete these corrections, call the Ecology contact at the number listed below.

Department of Ecology Contact

On-Site Contact Information

Name Annette Ademasu  
Region (address on back) NWRD  
Phone (425) 649-7189  
Fax (425) 649-7098  
Signature Annette Ademasu  
Date/Time 12-6-00 11:00 AM

Name Mr. Chow (C.L. Auto Repair)  
Title \_\_\_\_\_  
Address \_\_\_\_\_  
Phone (206) 320-0088  
Signature [Signature]  
(Acknowledges Receipt)

- Photos Taken  Samples Collected  Samples Split  Tech. Assist. Materials Provided
- Ecology Enforcement Authority Explained  Copy of Notice Given to Facility Contact

Ecology is an Equal Opportunity and Affirmative Action employer. If you have special accommodation needs, contact the Ecology regional office for your county (phone numbers listed on back).

UST ADJUSTMENT  
TANK DELETIONS

TO BE USED FOR TANK DELETIONS

Section I

Customer Name Chin Brothers Inc Site Number 002099  
Customer Number U0001132 Invoice Number UST 3225  
UST 13235  
Initiated By USA Shriver Date 5-17-96  
(Name)

Section II

\*\* IF THIS IS A CHANGE IN OWNERSHIP, ATTACH FORM D.

\*\* IF THIS IS A CHANGE THAT CREATES A REFUND, ATTACH FORM B.

Number of Tanks deleted 4 Amount \$ 240.00 + 240.00

Tank ID Number(s) 1, 2, 3, 4

Please Send Statement Y  N

Remove From Pending  Y N

Approved By Risa Shriver Date 5-17-96  
(Name)

COMMENTS 89 + 90 Bellings

NL 4-USA "32  
FE Sup

NW

U000 11 32  
SD/T  
ccv



STATE OF WASHINGTON  
DEPARTMENT OF ECOLOGY

Mail Stop PV-11 • Olympia, Washington 98504-8711 • (206) 459-6000

December 18, 1992

Dear Underground Storage Tank Owner:

We recently received information on the following site and tank(s) which indicates that the tank(s) have been closed:

Site Address: 2901 - 17th Ave S., Seattle

Site No: 002099 Tank Ids: 1, 2, 3, 4

Until we receive documentation that the tank(s) have been permanently closed in accordance with federal and state regulations, we are unable to consider them closed for regulatory and billing purposes. If such closure has been completed, please fill out the enclosed form(s) as marked below and return them to our office as soon as possible. We will then be able to correct our records and resolve any outstanding fee payment issues relating to this site.

For tanks closed before March 1, 1991:

Permanent Closure/Change-in-Service Checklist

For tanks closed after March 1, 1991:

Permanent Closure/Change-in-Service Checklist  
 Site Check/Site Assessment Checklist  
 A copy of the Site Assessment Report

Please complete the forms and return them to:

Washington State Department of Ecology  
Underground Storage Tank Section  
PO Box 47655  
Olympia, WA 98504-7655

Thank you for your cooperation. If you have any questions, please call me at (206) 438-7520.

Sincerely,

Tammie McClure  
Data Management Unit  
Toxics Cleanup Program

DEPARTMENT OF ECOLOGY  
UNDERGROUND STORAGE TANKS

JAN 19 1993

Enclosures





**CHECK LIST FOR PERMANENT CLOSURE OF UNDERGROUND STORAGE TANK(S)**

If closure information is different for individual tanks, please use a separate form for each tank

Business Name: CHIN BROS., INC.  
 Site Owner/Operator: HENRY CHIN  
 Site Address: 2901-17TH AVS. SO.  
 Telephone: (206) 324-9646

Site Identification (on invoice or available from Ecology if tank was reported): 002099

Local closure permit (if any) obtained from: \_\_\_\_\_  
 (Always contact local authorities regarding permit requirements)

Date tank(s) were closed: 8-26-90 ✓

Tank closure performed by:  
 Company/Individual: LEE MORSE  
 Telephone: (206) 241-8265

DEPARTMENT OF ECOLOGY  
 UNDERGROUND STORAGE TANKS

JAN 19 1993

Method of Closure: Removal  In-Place Closure

If closed-in-place, type of fill material used: \_\_\_\_\_

Tank ID Number (on notification form)	Age	Size (Gal.)	Last Material Stored
<u>1</u>	_____	<u>5-10 K</u>	_____
<u>2</u>	_____	<u>5-10 K</u>	_____
<u>3</u>	_____	<u>5-10 K</u>	_____
<u>4</u>	_____	<u>10-1100</u>	_____
_____	_____	_____	_____
_____	_____	_____	_____

If removed, how will the tank(s) be disposed of: Scrap  Landfill  Other \_\_\_\_\_  
please specify

Will the tanks be replaced by new underground tanks? Yes  No

NOTE: If YES, you need to submit a notification form for the new tanks.

Was a site assessment completed? Yes  No  ?

If yes, was contamination found? Yes  No

If yes, was the appropriate Regional Ecology Office Notified? Yes  No

NOTE: The appropriate regional office of the Washington Department of Ecology should be contacted for assistance if contamination is found (see attached map). Records of the site closure must also be maintained at the site and must be available upon an inspector's request for at least three years after closure.

Inspecting Agency: \_\_\_\_\_ Inspector Name: \_\_\_\_\_

NOTE: This is generally the local fire department or agency enforcing the Uniform Fire Code; in some cases (usually involving contamination) it may be Ecology. In some instances there may be no inspecting agency.

Owner's Signature (or designated representative): [Signature]

Title: PRESIDENT Date: 1-18-93

Please return the completed form to:

Underground Storage Tank Section  
 Department of Ecology  
 M/S PV-11  
 Olympia, WA 98504-8711



STATE OF WASHINGTON

DEPARTMENT OF ECOLOGY

Mail Stop PV-11 • Olympia, Washington 98504-8711 • (206) 459-6000

10/10/91

Dear Underground Storage Tank Owner:

We recently received information on the following site and tank(s) which indicates that the tank(s) have been closed:

Site Address: 2901 - 17<sup>th</sup> Ave. Seattle

Site No: 002099 Tank Ids: 1-4

Until we receive documentation that the tank(s) have been permanently closed in accordance with federal and state regulations, we are unable to consider them closed for regulatory and billing purposes. If such closure has been completed, please fill out the enclosed form(s) as marked below and return them to our office as soon as possible. We will then be able to correct our records and resolve any outstanding fee payment issues relating to this site.

For tanks closed before April 1, 1991:

Permanent Closure/Change-in-Service Checklist

For tanks closed after April 1, 1991:

Permanent Closure/Change-in-Service Checklist  
 Site Check/Site Assessment Checklist  
 2 copies of Site Assessment Report

Please complete the forms and return them to:

Washington State Department of Ecology  
Underground Storage Tank Section  
Mail Stop PV-11  
Olympia, WA 98504-8711

Thank you for your cooperation. If you have any questions, please call me at (206) 459-6288.

Sincerely,

*Melissa Underwood*

Melissa Underwood  
Data Management Unit

DEPARTMENT OF ECOLOGY  
UNDERGROUND STORAGE TANKS

JAN 19 1993

Enclosures

FILED FORM 10/14/91 & MAILED TO  
UNDERGROUND STORAGE TANK SECTION  
DEPT. OF ECOLOGY  
M/S PV-11  
OLYMPIA WA 98504-8711

**CHECK LIST FOR PERMANENT CLOSURE OF UNDERGROUND STORAGE TANK(S)**

If closure information is different for individual tanks, please use a separate form for each tank

Business Name: CHIN BROS., INC.  
 Site Owner/Operator: HENRY CHIN  
 Site Address: 2901-17<sup>TH</sup> AVS. SO.  
 Telephone: (206) 324-4646

Site Identification (on invoice or available from Ecology if tank was reported): \_\_\_\_\_

Local closure permit (if any) obtained from: \_\_\_\_\_  
 (Always contact local authorities regarding permit requirements)

Date tank(s) were closed: 8-20-90

Tank closure performed by:  
 Company/Individual: LEE MORSE  
 Telephone: (206) 241-8265

DEPARTMENT OF ECOLOGY  
 UNDERGROUND STORAGE TANKS

JAN 19 1993

Method of Closure: Removal  In-Place Closure

If closed-in-place, type of fill material used: \_\_\_\_\_

Tank(s) Closed			
Tank ID Number (on notification form)	Age	Size (Gal.)	Last Material Stored

If removed, how will the tank(s) be disposed of: Scrap  Landfill  Other \_\_\_\_\_  
please specify

Will the tanks be replaced by new underground tanks? Yes  No

NOTE: If YES, you need to submit a notification form for the new tanks.

Was a site assessment completed? Yes  No

If yes, was contamination found? Yes  No

If yes, was the appropriate Regional Ecology Office Notified? Yes  No

NOTE: The appropriate regional office of the Washington Department of Ecology should be contacted for assistance if contamination is found (see attached map). Records of the site closure must also be maintained at the site and must be available upon an inspector's request for at least three years after closure.

Inspecting Agency: \_\_\_\_\_ Inspector Name: \_\_\_\_\_

NOTE: This is generally the local fire department or agency enforcing the Uniform Fire Code; in some cases (usually involving contamination) it may be Ecology. In some instances there may be no inspecting agency.

Owner's Signature (or designated representative): *Henry Chin*

Title: PRESIDENT Date: 1-18-93

Please return the completed form to:  
 Underground Storage Tank Section  
 Department of Ecology  
 M/S PV-11  
 Olympia, WA 98504-8711

UST ADJUSTMENTS  
OVERPAYMENTS FILE

TO BE USED WHEN A CUSTOMER HAS OVERPAID

Section I.

Customer Name Chin Brothers, Inc. Site Number 002099  
Customer Number U0001132 Invoice Number 24023  
Initiated by Tammie McClure Date 12-18-92  
(Name)  
Remitter Name Chin Brothers Inc Record Number 92-040616  
Amount \$ 75.00

Section II.

PROGRAM ACTION:

- 1)  Refund to Customer  
2)  Post to Invoice Number \_\_\_\_\_

Customer Name \_\_\_\_\_ Site Number \_\_\_\_\_  
Customer Number \_\_\_\_\_

- 3)  Credit/Apply to Next Billing

4) Tank Adjustment:

Number of Tanks deleted 1 Amount \$ 75.00

Tank ID Number(s) 4

Remove From Pending  Y  N

Approved By Tammie McClure Date 12-18-92  
(Name)

Comments Tank was removed 1990

F  
R  
O  
M

WASHINGTON STATE DEPT. OF ECOLOGY  
UNDERGROUND STORAGE TANK SECTION  
PO BOX 5128  
LACEY WA 98503-0210

ADDRESS CORRECTION REQUESTED

UNDERGROUND STORAGE TANK BILLING  
INVOICES 33694 SITECHIN BROTHERS INC  
OWNER: 00001132 ADDR: 2901 17TH AVE SE  
SITE# 002094  
DUE DATE 12/31/92 SEATTLE WA 981445803  
TANK ID ANNUAL FEE  
\$ 75.00

UNDERGROUND STORAGE TANK BILLING  
INVOICE 33694 SITECHIN BROTHERS INC  
OWNER: 00001132 ADDR: 2901 17TH AVE SE  
SITE# 002094  
DUE DATE 12/31/92 SEATTLE WA 981445803  
TANK ID ANNUAL FEE  
\$ 75.00

TOTAL DUE \$75.00  
INVOICE DISPUTES MUST BE WRITTEN INCLUDING ALL DETAILS.  
IF YOU HAVE GENERAL QUESTIONS, CALL 360/493-9225.  
THE ANNUAL FEE IS FOR THE PERIOD 07/01/92 - 06/30/93.

TOTAL DUE \$75.00  
RETURN THIS PART WITH CHECK OR MONEY ORDER. PUT CHECK  
WRITE INVOICE AND SITE NUMBERS ON CHECKS OR LETTERS.  
NO CHECKS PAYABLE TO DEPARTMENT OF ECOLOGY.

SITE# 002094 INVOICED 33694  
CHIN BROTHERS INC  
2901 17TH AVE SE  
SEATTLE WA 98144-5803

'92 NOV 25 AM 10:23

DEPT. OF ECOLOGY  
CASHIERING SECTION

Chin Bothers Inc.  
2901-17th Ave. South  
Seattle, WA 98144-5803  
Site # 002099  
November 17, 1992

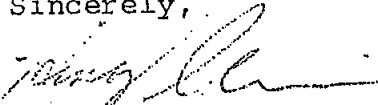
Washington State Dept. Of Ecology  
Underground Storage Tank Section  
PO Box 5128  
Lacey, WA 98503-0210

Re: Your Invoice #33096

Gentlemen;

In compliance with all rules, the storage tanks on site #002099 were removed from our property in September 1990. You have been informed previously about the removal. Please remove our company from your roster.

Sincerely,



Henry Chin

UST ADJUSTMENT  
TANK DELETIONS

TO BE USED FOR TANK DELETIONS

P

Section I

Customer Name Chin Brothers Inc. Site Number 002099  
Customer Number 110061132 Invoice Number 33096  
Initiated By Vern Watson Date 11-25-92  
(Name)

Section II

\*\* IF THIS IS A CHANGE IN OWNERSHIP, ATTACH FORM D.  
\*\* IF THIS IS A CHANGE THAT CREATES A REFUND, ATTACH FORM B.

Number of Tanks deleted 1 Amount \$ 75  
Tank ID Number(s) 4  
Please Send Statement  Y  N  
Remove From Pending  Y  N  
Approved By James McNeil Date 12-18-92  
(Name)

COMMENTS

\_\_\_\_\_

AGENCY USE ONLY	
AGENCY NO.	LOCATION CODE

AGENCY NAME

DEPARTMENT OF ECOLOGY - UST  
MAIL STOP PV-11  
OLYMPIA, WA 98504-8711

CLAIMANT

Chin Brothers Inc.  
2901 - 17th Ave S.  
Seattle WA 98144-5803

DATE	DESCRIPTION	AMOUNT	FOR AGENCY USE
12/18/92	REFUND OF UNDERGROUND STORAGE TANK FEE:	75.00	
	SITE # 002099		
	INVOICE # 24023		
	CHECK # 10449		
	C J # 461X0563		
	OWNER # WOOD1132		
	REC/ADJ # 92-040616		

ISSUED BY: *Laurie Miller* TELEPHONE NUMBER: 438-7520 DATE: 12-18-92 AGENCY APPROVAL: *Joyce M. Smith* DATE: 12/18/92

DOC DATE:      PMT DUE DATE:      CURRENT DOC. NO.:      REFERENCE DOC. NO.:      VENDOR NUMBER:      VENDOR MESSAGE:      UBI NUMBER:

AGENCY USE	TRANS CODE	FUND	PROGRAM INDEX	WORK CLASS	PROJECT	SUB PROJ	PROJ PHAS	MAJ EXP	OBJ	SUB SOURCE	AMOUNT	INVOICE NUMBER

ACCOUNTING APPROVAL FOR PAYMENT: \_\_\_\_\_ DATE: \_\_\_\_\_ WARRANT TOTAL: \_\_\_\_\_ WARRANT NUMBER: \_\_\_\_\_



Before 4/1/91  
MAY/SA/NW

**CHECK LIST FOR PERMANENT CLOSURE OF UNDERGROUND STORAGE TANK(S)**

If closure information is different for individual tanks, please use a separate form for each tank

Business Name: CHIN BROS.  
Site Owner/Operator: HENRY CHIN  
Site Address: 2901- 17TH AVE. So.  
Telephone: (206) 324-4646

Site Identification (on invoice or available from Ecology if tank # 002099 was reported):

Local closure permit (if any) obtained from: \_\_\_\_\_  
(Always contact local authorities regarding permit requirements)

Date tank(s) were closed: 8-2-90

Tank closure performed by:  
Company/Individual: DEE MORSE  
Telephone: (206) 763-8956

DEPARTMENT OF ECOLOGY  
UNDERGROUND STORAGE TANKS

OCT 17 1991

Method of Closure: Removal  In-Place Closure

If closed-in-place, type of fill material used: \_\_\_\_\_

Tank ID Number (on notification form)	Age	Tank(s) Closed Size (Gal.)	Last Material Stored
_____	_____	6000	GASOLINE
_____	_____	6000	GASOLINE
_____	_____	8000	GASOLINE
_____	_____	_____	_____
_____	_____	_____	_____

If removed, how will the tank(s) be disposed of: Scrap  Landfill  Other \_\_\_\_\_

Will the tanks be replaced by new underground tanks? Yes  No

NOTE: If YES, you need to submit a notification form for the new tanks.

Was a site assessment completed? Yes  No

If yes, was contamination found? Yes  No

If yes, was the appropriate Regional Ecology Office Notified? Yes  No

NOTE: The appropriate regional office of the Washington Department of Ecology should be contacted for assistance if contamination is found (see attached map). Records of the site closure must also be maintained at the site and must be available upon an inspector's request for at least three years after closure.

Inspecting Agency: \_\_\_\_\_ Inspector Name: \_\_\_\_\_

NOTE: This is generally the local fire department or agency enforcing the Uniform Fire Code; in some cases (usually involving contamination) it may be Ecology. In some instances there may be no inspecting agency.

Owner's Signature (or designated representative): [Signature]

Title: PRESIDENT Date: 10-14-91

Please return the completed form to:

Underground Storage Tank Section  
Department of Ecology  
M/S PV-11  
Olympia, WA 98504-8711

RECEIVED

OCT 27 1993

DEPT. OF ECOLOGY

9MB/6

UST ADJUSTMENT  
TANK DELETIONS

TO BE USED FOR TANK DELETIONS

Section I

Customer Name CHOW BROTHERS INC Site Number 002099

Customer Number U0001132 Invoice Number 13235

Initiated By Mark Beban Date 11/19/90  
(Name)

Section II

\*\* IF THIS IS A CHANGE IN OWNERSHIP, ATTACH FORM D.

\*\* IF THIS IS A CHANGE THAT CREATES A REFUND, ATTACH FORM B.

Number of Tanks deleted \_\_\_\_\_ Amount \$ \_\_\_\_\_

Tank ID Number(s) \_\_\_\_\_

Please Send Statement  N  NO

Remove From Pending  Y  N

Approved By Melissa Underwood Date 10/10/91  
(Name)

COMMENTS \_\_\_\_\_

CHIN BROTHERS  
2901 - 17th Avenue So  
Seattle, WA 98144  
324-4646

PLEASE BE INFORMED  
THAT OUR TANK WOULD  
DUG OUT AS OF SEPT.  
1990, & HAS NOT BEEN  
USED SINCE AUG 1989



ALL DETAILS  
9225  
06/30/91

UNDERGROUND STORAGE TANK BILLING  
INVOICE# 13235 SITE# CHIN BROTHERS INC  
OWNER# W0001132 ADDR# 2901 - 17TH AVE SO.  
SITE# 000099  
DUE DATE 12/31/90 SEATTLE, WA 98144  
TANK ID ANNUAL FEE  
1 \$ 60.00  
2 60.00  
3 60.00  
4 60.00

TOTAL DUE 240.00  
RETURN THIS PART WITH CHECK OR MONEY ORDER, NOT CASH.  
WRITE INVOICE AND SITE NUMBERS ON CHECKS OR LETTERS.  
MAKE CHECKS PAYABLE TO "DEPARTMENT OF ECOLOGY".  
TO

SITE# 000099 INVOICE# 13235  
CHIN BROTHERS INC  
2901 - 17TH AVE SO.  
SEATTLE, WA 98144





STATE OF WASHINGTON  
DEPARTMENT OF ECOLOGY

Mail Stop PV-11 • Olympia, Washington 98504-8711 • (206) 459-6000

June 12, 1990

Contractor  
Lee Morse General Contractor, Inc.  
9434 Delridge Way S.W.  
Suite B  
Seattle, Washington 98106

Dear Contractor :

This is to acknowledge receipt of your 30-day notice of intent to close underground storage tank(s) located at 2901 17th Ave. S., Seattle, Washington.

We received your letter on June 11, 1990.

Your 30-day notice has been forwarded to the appropriate regional office. Field people with the Underground Storage Tank Program may visit your site within the 30-day period. However, with the many tank closures now taking place, it will not be possible to visit every site. If you have not been contacted by the time thirty days have elapsed from the date we received your notice letter (noted above), you may proceed with closure.

If you did not request a full closure packet, but would like to receive one, you may do so by calling 1-800-826-7716 (in Washington state only) or 206-459-6293. This closure packet contains a form entitled "Notice of Permanent Closure of Underground Storage Tank(s)". For your convenience, we have enclosed a copy of this form. Please complete this form and return it to the Department of Ecology when tank closure is complete.

Sincerely,

Sue L. Simms  
Regulatory Specialist

SLS:sd

Enclosure

002099

Chin Brothers Inc.

DEPARTMENT OF ECOLOGY  
UNDERGROUND STORAGE TANKS  
RECEIVED

JUN 11 1990

Date: 6-7-90

Storage Tank Unit  
Department of Ecology  
M/S P.V. 11  
Olympia, WA 98504-8711

NOTICE OF UNDERGROUND STORAGE TANK REMOVAL

Date of removal: 7-7-90

Method of closure: Removal  or In-place closure

TANK SIZE:

1-8000  
2-6,000  
\_\_\_\_\_  
\_\_\_\_\_

CONTENTS OF TANK:

GASOLINE  
"  
\_\_\_\_\_  
\_\_\_\_\_

Owners Name: Henry Chin

Address: 2901 17<sup>th</sup> AVE. S.

City: Seattle State: WA

Phone: 324-4646

**LEE MORSE**  
GENERAL CONTRACTOR, INC.  
Commercial & Industrial Construction  
9434 Delridge Way S.W. • Suite B • Seattle, Washington 98106



# WASHINGTON STATE UNDERGROUND STORAGE TANK NOTIFICATION FORM



**IMPORTANT: PLEASE READ ALL INSTRUCTIONS ON PAGES I-1 AND I-2 BEFORE ENTERING INFORMATION.**

- ABOVEGROUND TANKS MUST BE REPORTED IF THE CONNECTED UNDERGROUND PIPING COMPRISES AT LEAST 10% OF THE OVERALL STORAGE SYSTEM (TANK AND PIPING).
- A SEPARATE FORM MUST BE USED FOR EACH SITE, EXCEPT FOR SITES WITH ONLY ONE TANK EACH. SEE THE GENERAL INSTRUCTIONS (PAGE I-2) FOR THE DEFINITION OF A SITE AND DETAILS ON REPORTING SITES WITH ONE TANK EACH.
- THERE IS ROOM IN SECTION VI FOR INFORMATION CONCERNING 15 TANKS. IF YOU HAVE MORE THAN 15 TANKS, PHOTOCOPY BOTH PAGES OF SECTION VI BEFORE ENTERING ANY INFORMATION. (IF YOU HAVE MORE THAN ONE SITE, EITHER OBTAIN MORE FORMS FROM THE DEPARTMENT OF ECOLOGY OR BE SURE TO ALSO PHOTOCOPY THIS PAGE.)
- PLEASE TYPE, OR PRINT IN INK; THE SIGNATURE UNDER "CERTIFICATION" (SECTION V) MUST BE SIGNED IN INK.

DEPT. OF ECOLOGY  
 APR -7 86 0 0 2 0 9 9  
 STATE USE ONLY

### I. OWNERSHIP OF THE TANK(S)

Please enter information regarding the owner of the tank(s). If the ownership of the tank(s) is uncertain, enter information regarding the owner of the property where the tanks are located, or information regarding the former owner of the tanks. Please circle the correct letter, indicating who the information given below refers to:

A. OWNERSHIP UNCERTAIN **B. CURRENT OWNER OF TANK(S)** C. FORMER OWNER OF TANK(S) D. PROPERTY OWNER

E. OTHER (PLEASE SPECIFY):

C A I N B R O T H E R S I N C

Owner Name (Corporation, Individual, Public Agency, or Other Entity)

2 9 0 1 - 1 7 T H A V E S O .

Street Address

S E A T T L E W A 9 8 1 4 4

City

State

ZIP Code

K I N G 2 0 6 - 3 2 4 - 4 6 4 6

County

Area Code

Phone Number

Type of Owner or Facility: CIRCLE CORRECT CODE(S)

CODE	TYPE	CODE	TYPE	CODE	TYPE	CODE	TYPE
<b>A.</b>	Service Station	G.	Industrial/Manufacturing	M.	City/Town	S.	Port District
B.	Bulk Plant	H.	Private Institution	N.	County	T.	Utility District
C.	Petroleum Distributor	I.	Residence (Non-Farm)	O.	State	U.	Fire Dept./District
D.	Convenience Store	J.	Farm	P.	Federal (Military)*	V.	Other Special Service District (e.g., sewer, water)
E.	Auto Dealer	K.	Airport	Q.	Federal (Non-Military)*	W.	Other
F.	Other Commercial/Retail	L.	Marina	R.	School District		

\*FEDERAL FACILITIES ONLY: Please give your GSA Facility ID Number (Building Number).

### II. CONTACT PERSON AT THE TANK LOCATION

The contact person should be the individual responsible for regularly monitoring the operation of the tank(s).

H E N R Y C H I N

Name (If same as Section I, mark box here )

P R E S I D E N T 2 0 6 - 3 2 4 - 4 6 4 6

Job Title

Area Code

Phone Number

### III. SITE OF THE TANK(S)

(If the same as Section I, mark box here ) See the General Instructions (Page I-2, 2.a.) for the definition of a site.

Facility Name or Company Site Identifier, as applicable. (IF THE FACILITY IS OPERATED BY A LEASEE OR RENTER, THE NAME OF THE CORPORATION, INDIVIDUAL, PUBLIC AGENCY, OR OTHER ENTITY WHICH OPERATES THE FACILITY SHOULD BE ENTERED HERE.)

Street Address or State Road where the tanks are located. (IF NO STREET ADDRESS OR STATE ROAD, PLEASE ENTER THE LONGITUDE AND LATITUDE OR TOWNSHIP, RANGE, AND QUARTER SECTION WHERE THE TANKS ARE LOCATED.)

City State ZIP Code

County Area Code Phone Number

### IV. THE TOTAL NUMBER OF TANKS AT THIS SITE

- Number of tanks containing petroleum, which are now in use: 4
- Number of tanks which have stored petroleum, but are not now in use: \_\_\_\_\_
- Number of tanks containing regulated chemicals, which are now in use: \_\_\_\_\_
- Number of tanks which have stored regulated chemicals, but are not now in use: \_\_\_\_\_

TOTAL NUMBER OF TANKS 4

Please mark this box if the site is located on land within an Indian reservation or on other Indian trust lands

### V. CERTIFICATION (Please read and sign after completing Section VI.)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents. To the best of my knowledge and belief, the submitted information is true, accurate, and complete.

HENRY CHIN

PRESIDENT

Name and official title of owner or owner's authorized representative or, in cases where the ownership is unknown, the name and title of the person signing the form. (PLEASE TYPE OR PRINT IN INK)

3-31-86

Date Signed

*Henry Chin*  
 Signature (PLEASE SIGN IN INK)

## VI. INFORMATION REGARDING INDIVIDUAL TANKS (See instructions regarding individual tanks, Page I-2)

<u>a. Tank Identification</u>	<u>b. Tank Status</u>	<u>c. Age of the Tank</u>	<u>d. Capacity of the Tank</u>	<u>e. Tank Construction</u>	<u>f. Leak Detection</u>	<u>g. Cathodic Protection</u>	<u>h. Internal Protection</u>
Please list your tanks numerically (1, 2, 3, etc.) or use an established tank identification number or code. The information in the following columns should apply to the tank identified in the corresponding row of this column.	Please put the correct letter for each tank in the appropriate row of the column below. A. Currently in use. B. Temporarily out of use. C. Permanently out of use. D. Brought into use after 5/8/88.	If the year of installation of the tank is known, please enter the last 2 digits of that year in the appropriate row. If the exact year of installation is not known, please estimate as closely as possible, using the groupings shown below (choose a letter and put it in the appropriate row.) A. Less than 1 year B. 1-2 years C. 3-5 years D. 6-10 years E. 11-15 years F. 16-20 years G. 21-30 years H. More than 30 years	Please put the correct letter for each tank in the appropriate row of the column below. If the exact capacity isn't known, please choose an estimate. A. Under 600 gallons B. 600-999 gallons C. 1,000-4,999 gallons D. 5,000-9,999 gallons E. 10,000-19,999 gallons F. Over 20,000 gallons	Please put all the letters which apply to each tank in the appropriate row of the column below. (If "Other" (H) please enter type of material) A. Carbon Steel B. Stainless Steel C. Steel, type unknown D. Fiberglass Reinforced Plastic E. Plastic F. Concrete G. Aluminum H. Other Material (please specify) I. Unknown Material J. Single Walled K. Double Walled L. Has secondary containment M. Has overfill protection	Please put all the letters which apply to each tank in the appropriate row of the column below. (If "Other" (N) please also enter type of detection.) A. Daily inventory B. Tightness/Leak test within past year C. In-tank system D. In-piping system E. Product gauge F. Electronic sensor G. Manually sampled well(s) H. Automatically sampled well(s) I. Well or detector in secondary containment J. In-ground detector K. Between walls of double-walled tank L. Groundwater monitoring plan M. Spill Prevention Control and Countermeasure Plan N. Other (please specify) O. None	Please put the correct letter for each tank in the appropriate row of the column below. (If "Other" (C) please also enter the type of protection.) A. Sacrificial Anode/Galvanic Type B. Impressed Current Type C. Other Type (please specify) D. Cathodically Protected, Type Unknown E. None F. Unknown	Please put the correct letter for each tank in the appropriate row of the column below. (If "Other" (F or I) please also enter the type of protection.) A. Rubber Lining B. Alkyd Lining C. Epoxy Lining D. Phenolic Lining E. Glass Lining F. Other Lining (please specify) G. Lined, type unknown H. Unlined I. Other internal protection (please specify) J. Unknown
1	A	H	D	H	A	F	J
2	A	H	D	H	A	F	J
3	A	F	D	H	A	F	J
4	A	H	A	H	A	F	J

<b>Tank Identification</b> Please enter the same identification used in column a.	<b>I. External Protection of the Tank</b> Please put the correct letter for each tank in the appropriate row of the column below. (If "Other" (O or G) please also enter the type of coating and/or wrapping.)	<b>J. Piping</b> Please enter all the letters which apply to the portion of the piping which is underground. (If "Other" (O) please also enter the type of material.)	<b>K. Type of Substance Currently or Last Stored in the Tank</b> Please put the correct letter for each tank in the appropriate row of the column below. 1. If the substance is a hazardous substance (J) rather than a petroleum product, please also enter the name of the substance or its Chemical Abstract Service (CAS) number. (See "What Substances Are Covered?" on page 1-1 of the instructions for information regarding hazardous substances.) 2. If different substances are stored in the tank at different times, or if a mixture of substances is stored, please enter all letters which apply.	<b>THESE ITEMS REFER ONLY TO TANKS PERMANENTLY OUT OF SERVICE. PLEASE LEAVE THE ROWS FOR THE TANKS STILL IN SERVICE BLANK.</b>		
				<b>l. Date of Last Use</b> If the exact month and year of last use isn't known, please enter an estimate. (Use two digits for the month and two for the year; e.g., 08-84.)	<b>m. Quantity Left in the Tank</b> If the exact amount left in the tank isn't known, please enter an estimate, in gallons.	<b>n. Was the Tank Filled?</b> Was the tank filled with an inert material, such as sand or concrete? Was it filled with water? Please put the correct letter in the appropriate row of the column below. A. The tank was filled with an inert material. B. The tank was filled with water. C. The tank was not filled. D. Unknown
1	I	L	B			
2	I	L	B			
3	A	L	A			
4	I	L	I			