UST Compliance Assistance Checklist

PART I. OWNER/OPERATOR INFORMATION

1. Facility Name: _____
2. Owner: Gregg Zimmerman
3. Operator: "
5. Contact Person: "
6. UST Site Phone #: 320-815-6111

6. Date of Visit: 7/11/13 7. Marketer: ___ Non-Marketer: X
8. Site Arrival/Departure (Time): 9:45 / 10:41
9. Facility Address: 507 Main St. Ortonia, MN.
10: Team Members: Scott Hansen, Gregg Zimmerman

PART II. UST SITE INFORMATION

	1	2	3	4	5	6	7
1. Tank #:	1	2	3				
2. Tank Type:	Steel						
3. Piping Type:	Steel						
4. Size of Tank:							
5. Tank Contents:							
6. Install Date:							
7. TTT Date:							
8. LTT Date:							
9: LD (Tank):							
10: LD (Pipe):							
11. Closure Date:	Perm ___ Temp ___	Perm ___ Temp ___	Perm ___ Temp ___	Perm ___ Temp ___	Perm ___ Temp ___	Perm ___ Temp ___	Perm ___ Temp ___
12. Spill:	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___
13. Overfill:	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___
Type:							
14. CP (Tank):	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___
Date:	10-6-10 Pass - retest by 10-6-13						
Type:							
15. CP (Piping):	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___
Date:	10-6-10 Pass - retest by 10-6-13						
Type:							

16. CP Monitoring: [For all cathodic protection systems (Galvanic Anodes and Impressed Current Systems)]

	1	2	3	4	5	6	7
6 Mo./3 Yrs:	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___
Six Months:	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___
Records:	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___

Note: Monitoring conducted within six month of installation and three years after initial monitoring. [280.31(b)(1)]

Note: Monitoring conducted within six month of any repairs to UST system. [280.33(e)]

Note: Records on file of last two monitoring results. [280.31(d)(2)]

17. CP Monitoring: [For Impressed Current Systems Only]

	1	2	3	4	5	6	7
60 Day Insp.:	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___
Records:	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___

Note: System is inspected ever 60 days, involvers reading and recording systems voltage and amperage. [280.31(c)]

Note: Records on file of last three voltage and amperage readings. [280.33(d)(1)]

(5/9/2011)

UST Compliance Assistance Checklist

PART III. RECOMMENDATION(S) & NARRATIVE COMMENTS

1. Facility to provide info. on compliance: Yes X No ___

Notes: ___

2. Follow-up visit recommended Yes X No ___

Notes: Verify diesel is pumped

3. Financial Responsibility (FR): Yes ___ No ___ Expiration Date: ___

4. Inspector's Remarks: Check with Petrofund on removal of tanks.

5. Additional Remarks/Comments:

- rain water in fill buckets that will be pumped out
- CP test to be conducted by 10-6-13 (Raleigh's local)?
- need to remove product ✓ from Diesel, currently slightly >4 inch of product in diesel tank follow-up in 1 week

Prod	Level
Diesel	>4 inchs
Unleaded	<1 inch
Premium	<1 inch

1.) All fill ports locked
2.) Dispensers locked
3.) Gave & discussed 10-6-10 CP test
4.) Gave & discussed UST (CP) Contractors list

Scott Hansa 7/11/2013

Inspector Signature Date