UST Compliance Assistance Checklist

PART I. OWNER/OPERATOR INFORMATION

1. Facility Name: Trailside Convience Bait & Tackle
2. Owner: Dee Ann KaCon
3. Operator:
5. Contact Person:
6. UST Site Phone #:

6. Date of Visit: May 6 2013 7. Marketer: X Non-Marketer:
8. Site Arrival/Departure (Time): 10:30 / 10:55
9. Facility Address:
Dee Ann KaCon
10. Team Members: Scott Hansen
Cutler Rowland - Mgr.

PART II. UST SITE INFORMATION

	1	2	3	4	5	6	7
1. Tank #:	1	2	3	4	5	6	7
2. Tank Type:	ST IP3						
3. Piping Type:			9 out GAS	mid	off road diesel	Kerosene	
4. Size of Tank:	10K	4K	4K	2K	1K	1K	
5. Tank Contents:	87 unleaded	Diesel	GAS 9 out				
6. Install Date:					Check on Underfill		
7. TTT Date:					Cummings		
8. LTT Date:							
9: LD (Tank):							8-29-12 due 8-29-13 Functionality Test
10: LD (Pipe):	SIR				SIR		
11. ~~Closure Date~~:	ALLD	ALLD	ALLD	ALLD	SUCTION	SUCTION	
	Perm ___ Temp ___	Perm ___ Temp ___	Perm ___ Temp ___	Perm ___ Temp ___	Perm ___ Temp ___	Perm ___ Temp ___	Perm ___ Temp ___
12. Spill:	Yes X No ___	Yes X No ___	Yes X No ___	Yes X No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___
13. Overfill:	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___
Type:	Flapper				(Check on Underfill) ?		
14. CP (Tank):	Yes X No ___	Yes X No ___	Yes X No ___	Yes X No ___	Yes X No ___	Yes X No ___	Yes ___ No ___
Date:	9-15-2011 CP Test — next one due 9-15-2014 *						
Type:							
15. CP (Piping):	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___
Date:							
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 ___ No ___

Notes: _____

2. Follow-up visit recommended Yes X No ___

Notes: June - outside inspection

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

4. Inspector's Remarks: _____

5. Additional Remarks/Comments:

1.) Discussed that a functionality test was needed by 8-29-13.
2.) CP test was good next inspection period until 9-15-2014.
3.) Was going to follow-up w/ M. Restaino on "locked fill" by vendor Cumanin Oil for off road diesel (1K) & Kerosene (1K) tanks.
4.) Told Dee Ann I would be back in June to walk through fills, dispensers.
5.) SIR records were going well. did not review just discussed.
6.) Dee Ann said she experienced slow fuel dispense, had vendor there last week April 29 — May 3, 2013 "no problem with flow" from vendor.

Scott Hauser May 6, 2013

Inspector Signature Date

1998 Requirements Inspection Checklist

PART I. OWNER/OPERATOR INFORMATION

1. Facility Name: Trailside Convience Bait and Tackle
2. Owner: Dee Ann Kacon
3. Operator: ↑
4. Contact Person: Dee Ann Kacon
5. UST Site Phone #: 320-676-3746
6. Date of Visit: 8/13/12 7. Marketer. X Non-Mktr. ___
8. Site Arrive/Depart (Time): 2:25 / 3:42
9. Facility Address: 750 Highway 47 South Isle, MN. 56342
10. Team Member(s): Scott Hansen

PART II. UST SITE INFORMATION Dee Ann Kacon (owner) Cathy Rowland - mgr.

	1	2	3	4	5	6	7
1. Tank #:	1	2	3	4	5	6	
2. Tank Type:	STIP. 3						
3. Piping Type:	STEEL						
	Pressure				suction	suction	
4. Size of Tank:	10K	4K	4K	2K	1K	1K	
5. Tank Contents:	unleaded 87 oct	Diesel ~~GAS~~	91 oct Prem GAS	mid ~~Diesel~~	off road ~~GAS~~ diesel	Kerosene ~~GAS~~	
6. Install Date:	4/1/92	/ /	/ /	/ /	/ /	/ /	/ /
7. Closure Date:	/ /	/ /	/ /	/ /	/ /	/ /	/ /
Type:	Perm__Temp__	Perm__Temp__	Perm__Temp__	Perm__Temp__	Perm__Temp__	Perm__Temp__	Perm__Temp__
State Form:	Yes__No__	Yes__No__	Yes__No__	Yes__No__	Yes__No__	Yes__No__	Yes__No__
8. Spill:	Yes X No__	Yes X No__	Yes X No__	Yes X No__	Yes X No__	Yes X No__	Yes__No__
9. Overfill:	Yes__No__	Yes__No__	Yes__No__	Yes__No__	Yes__No__	Yes__No__	Yes__No__
Type:	Flapper						
10. System Repair:	Yes__No__	Yes__No__	Yes__No__	Yes__No__	Yes__No__	Yes__No__	Yes__No__
Repair Date:	/ /	/ /	/ /	/ /	/ /	/ /	/ /
11. CP (Tank):	Yes X No__	Yes X No__	Yes X No__	Yes X No__	Yes X No__	Yes X No__	Yes__No__
Date:	/ /	/ /	/ /	/ /	/ /	/ /	/ /
Type:	Anode	9-15-2011	see attached copy				
12. CP (Piping):	Yes X No__	Yes X No__	Yes X No__	Yes X No__	Yes X No__	Yes X No__	Yes__No__
Date:	/ /	/ /	/ /	/ /	/ /	/ /	/ /
Type:		9-15-2011 see attached copy. 9-14-2010 - prior to repairs - fail					
13. CP Monitoring: [For all cathodic protection systems (Galvanic Anodes and Impressed Current Systems)]							
6 Mo./ 3 Yrs:	Yes__No__	Yes__No__	Yes__No__	Yes__No__	Yes__No__	Yes__No__	Yes__No__
Note: Monitoring conducted within six months of installation and three years after initial monitoring. [§280.31(b)(1)]							
Six Months:	Yes__No__	Yes__No__	Yes__No__	Yes__No__	Yes__No__	Yes__No__	Yes__No__
Note: Monitoring conducted within six months of any repairs to UST system. [§280.33(e)]							
Records:	Yes__No__	Yes__No__	Yes__No__	Yes__No__	Yes__No__	Yes__No__	Yes__No__
Note: Records on file of last two monitoring results. [§280.31(d)(2)]							
14. CP Monitoring: [For Impressed Current Systems only]							
60 Day Inspect:	Yes__No__	Yes__No__	Yes__No__	Yes__No__	Yes__No__	Yes__No__	Yes__No__
Note: System is inspected every 60 days, involves reading and recording system voltage and amperage. [§280.31(c)]							
Records:	Yes__No__	Yes__No__	Yes__No__	Yes__No__	Yes__No__	Yes__No__	Yes__No__
Note: Records on file of last three voltage and amperage readings. [§280.31(d)(1)]							
	1	2	3	4	5	6	

LD Tank SIR (see copy)

LD Pipe AIID AIID AIID AIID

1998 Requirements Inspection Checklist

PART III. DOCUMENTS DELIVERED (Please ✓)

40 CFR Part 280 __ Musts for USTs __ Straight Talk On Tanks __ State Closure Form __

Other: _____

PART IV. RECOMMENDATION(S) AND NARRATIVE COMMENTS

1. No further action is recommended/necessary: Yes X No __

Notes: Need Functionality Test for (4) mech LLD - last test 8/8/11
[If yes, indicate below.] Dee Ann was lining that up.

2. Facility will provide information certifying compliance with 1998 requirements: Yes__ No__ n/a__ Due Date: __/__/__

Notes: _____

3. Follow-up inspection recommended: Yes __ No __ Est. Date: __/__/__ [If yes, state reason(s) why.]

Notes: _____

4. Information Request Letter (IRL): Yes __ No __ Date: __/__/__ [If yes, a full narrative report is required in addition to this checklist.]

Notes: _____

5. Notice of Violation (NOV): Yes __ No __ Date: __/__/__ [If yes, a full narrative report is required in addition to this checklist.]

Notes: _____

6. Field Citation (FC): Yes __ No __ Date: __/__/__ [If yes, a full narrative report is required in addition to this checklist.]

Notes: _____

7. Administrative Order (AO): Yes __ No __ Est. Date: __/__/__ [If yes, a full narrative report is required in addition to this checklist.]

Notes: _____

8. Refer to State Agency: Yes __ No __ Est. Date: __/__/__ [If yes, a full narrative report may be required in addition to this checklist.]

Notes: Dee Ann and Cathy passed MPCA A/B Training

9. Lead Inspector's Remarks: SIR - 2012 - Copies

Jan 2012 all pass
Feb 2012 all pass, except DSL
March 2012 All pass
April 2012 All pass
May 2012 All pass
June 2012 - All pass
July - have not received as of 8/13/12

10. Additional Remarks/Comments:

✓ ~~Need~~ CP-Test good till (9/15/2014)
✓ Mech LLD - Functionality - Dee Ann will fax new Function test to mark
✓ SIR / Dec 2011 Pass (Took copies attached) 2012
Nov 2011
Oct 2011 middle shear value bolts
Sept 2011 a little loose at 2 dispensers - they said
Aug 2011 they would have them tightened
July 2011

Required

FILE NUMBER: _____

Scott Hansen 8/13/12
Lead Inspector Signature Date

_____ __/__/__
Supervisor Signature Date