DEPARTMENT OF THE NAVY
COMMANDER
NAVY REGION HAWAII
850 TICONDEROGA ST STE 110
JBPHH, HAWAII 96860-5101

JUL 22 2021

5000-45A
N45
July 16, 2021

CERTIFIED NO: 9489 0090 0027 6232 9870 23

Ms. Roxanne Kwan
Hawaii State Department of Health
Solid and Hazardous Waste Branch
Underground Storage Tank Section
2827 Waimano Home Road #100
Pearl City, HI 96782

Dear Ms. Kwan:

SUBJECT: NOTIFICATION FOR UNDERGROUND STORAGE TANKS, RED HILL BULK FUEL STORAGE FACILITY, JBPHH, OAHU, DOH FACILITY ID NO. 9-102271

As required by Hawaii Administrative Rules 11-280.1-34, the Navy is submitting written notification for the return to currently-in-use status of Surge Tank 1 (F-ST1). DOH Form No. 1, Notification for Underground Storage Tanks, is being submitted as Enclosure 1.

Enterprise Engineering, Inc. performed a post-repair inspection of Surge Tank 1 and determined repairs were completed in accordance with repair design documents. A Suitability of Service Testament for Surge Tank 1 is being submitted as Enclosure 2.

A leak detection test was conducted on Surge Tank 1 with passing results. The tank tightness test summary is being submitted as Enclosure 3. In accordance with Exemption (b) of the Freedom of Information Act, the name of the subcontractor who performed the leak detection test has been redacted.

If you have any questions regarding this matter or need any additional information, contact (b) (6).

Sincerely,

(b) (6)

Director
Regional Environmental Department
By direction of the
Commander

DEPARTMENT OF THE NAVY
COMMANDER
NAVY REGION HAWAII
850 TICONDEROGA ST STE 110
JBPHH, HAWAII 96860-5101

MAY 29 2020 CER

5750
Ser N4/00258
20 May 20

CERTIFIED NO: 7019 2970 0001 7433 3530
Ms. Roxanne Kwan
Hawaii State Department of Health
Environmental Management Division
Solid and Hazardous Waste Branch
Underground Storage Tank Section
2827 Waimano Home Road #100
Pearl City, HI 96782

Dear Ms. Kwan:

SUBJECT: NOTIFICATION FOR UNDERGROUND STORAGE TANKS, RED HILL BULK FUEL STORAGE FACILITY, JBPHH, OAHU, DOH FACILITY ID NO. 9-102271

As required by Hawaii Administrative Rules 11-280.1-34, the Navy is submitting written notification for the return to currently-in-use status of Tank 5 (F-5) and Surge Tank 4 (F-ST4), and the temporary closure of Tank 18 (F-18) and Surge Tank 3 (F-ST3). DOH Form No. 1, Notification for Underground Storage Tanks, is being submitted as Enclosure 1.

Enterprise Engineering, Inc. (EEI) performed a post-repair inspection of Tank 5 and determined repairs were completed in accordance with repair design documents. A Suitability of Service Testament for Tank 5 is being submitted as Enclosure 2.

Tank tightness testing was completed during the filling of Tank 5 when fuel reached the 70-foot, 110-foot, 150-foot and 202-foot levels in the tank. Each tank tightness test consisted of monitoring the tank for 24 consecutive hours over five straight days. Tank 5 passed each of the tank tightness tests at each level. The executive summary of the leak detection testing report is being submitted as Enclosure 3. In accordance with Exemption (b)(4) of the Freedom of Information Act, the name of the subcontractor who performed the leak detection test has been redacted.

EEI performed a post-repair inspection of Surge Tank 4 and determined repairs were completed in accordance with repair design documents. A Suitability of Service Testament for Surge Tank 4 is being submitted as Enclosure 4.

A leak detection test was conducted on Surge Tank 4 with passing results. The executive summary of the leak detection testing report is being submitted as Enclosure 5. In accordance with Exemption (b)(4) of the Freedom of Information Act, the name of the subcontractor who performed the leak detection test has been redacted.

5750
Ser N4/00258
20 May 20

If you have any questions regarding this matter or need any additional information, contact (b) (6) or by email at (b) (6)

Sincerely,

M. R. DELAO
Captain, CEC, U.S. Navy
Regional Engineer
By direction of the
Commander

Enclosures:
1. DOH Form No. 1, Notification for Underground Storage Tanks for Red Hill Bulk Fuel Storage Facility, JBPHH, Oahu, DOH Facility ID No. 9-102271
2. Suitability for Service Testament for Tank 5, prepared by Enterprise Engineering, Inc., 08 Jan 2020
3. Executive Summary, 2020 Leak Detection Testing Report of Bulk Field-Constructed Underground Storage Tank 5 at Red Hill Fuel Storage Complex, submitted by Michael Baker International, 30 Apr 2020 (Redacted)
4. Suitability for Service Testament for Surge Tank 4 (Facility No. 1227), prepared by Enterprise Engineering, Inc., 08 Jul 2020
5. Executive Summary, 2019 Annual Leak Detection Testing Report of 17 Bulk Field-Constructed Underground Storage Tanks at Red Hill Fuel Storage Complex, submitted by Michael Baker International, 08 Jan 2020 (Redacted)

Copy to: U.S. Environmental Protection Agency Region 9
Commander, Navy Region Hawaii
Navy Facilities Engineering Command, Hawaii
U.S. Naval Supply Systems Command Fleet Logistics Center Pearl Harbor

SOLID AND HAZARDOUS WASTE BRANCH
Underground Storage Tank Program
2827 Waimano Home Road #100 • Pearl City, Hawaii 96782
Phone: 808 - 586- 4226 • Fax: 808-586-7509 • http://www.hawaii.gov/health/environmental/waste/ust

NOTIFICATION FOR UNDERGROUND STORAGE TANKS

Return completed form to:
Solid and Hazardous Waste Branch
Underground Storage Tank Program
2827 Waimano Home Road #100
Pearl City, Hawaii 96782

Facility ID Number: 9-102271

Permit Number:

Type of Notification/s: (Check all that apply)

- [x] **UST Status Change (temporary or permanent closure or return to use)**
- [ ] **Change in Piping**
- [ ] **Change in Spill and/or Overfill Prevention Method**
- [ ] **Change in Release Detection Method**
- [ ] **Change in Financial Responsibility Mechanism**
- [ ] **Other:**

Date Activity Occurred: 04/20/2020 (F-5), 7/03/2020 (F-18), 10/26/2019 (F-ST3), 10/26/2019 (F-ST4)

State Use Only

Date received:

Date Entered into Computer:

Data Clerk's Initials:

Comments:

I. LOCATION OF TANK(S)

Facility Name or Company Site identifiers	Location Contact Person
Red Hill Bulk Fuel Storage Facility	(b) (6)

Location Address (P.O. Box not acceptable)	City	State	Zip Code	Island	Tax Map Key #
Red Hill	Aiea	Hawaii	96701	Oahu	99010006, 99010001, 11012003, 11012004

Location Phone # (w/ area code)	Location Fax # (w/ area code)
(808)473-7801	(808)473-7815

II. CONTACT PERSON IN CHARGE OF TANK(S)

Name	Job / Position Title
(b) (6)	Regional Fuels Officer

Mailing Address	City	State	Zip Code
1942 Gaffney Street, (b) (6)	JBPHH	HI	96860

Phone # (w/ area code)	Fax # (w/ area code)	E-mail Address
(b) (6)	(808)473-7815	(b) (6)

ENCLOSURE( )

Facility ID No. 9-102271

III. OWNER OF TANK(S)

US Navy - COMNAVREG HI
Owner Name (Corporation, Individual, Public Agency, or Other Entity)

850 Ticonderoga Street, Suite 110	JBPHH	HI	96860
Mailing Address	City	State	Zip Code

(808)471-3926	(808)473-5024	marc.delao@navy.mil
Phone # (w/ area code)	Fax # (w/ area code)	E-mail Address

IV. OPERATOR OF TANK(S) (if same as Section III, check here ☐)

Naval Supply Systems Command Fleet Logistics Center Pearl Harbor
Operator Name (Corporation, Individual, Public Agency, or Other Entity)

1942 Gaffney Street, (b) (6)	JBPHH	HI	96860
Mailing Address	City	State	Zip Code

(b) (6)	(808)473-7815	(b) (6)
Phone # (w/ area code)	Fax # (w/ area code)	E-mail Address

V. TYPE OF FACILITY (Select the appropriate facility description)

☐ Airline	☐ Contractor	☐ Petroleum Distributor	☐ Service Centers/Auto Repair/Maintenance
☐ Auto Dealership	☐ Farm	☐ Police Station	☐ Trucking/Transporter
☐ Baseyard	☐ Fire Station	☐ Residential	☐ Utilities
☐ Car Rental	☐ Gas Station	☐ Resort/Hotel	☐ Wastewater Treatment Plants
☐ Cleaner/Laundromat	☐ Golf Course	☐ School	☐ Wholesaler/Retailer
☐ Communication Sites	☐ Hospital	☑ Other (Explain) Fuel Storage and Airfield Hydrant System	

VI. FINANCIAL RESPONSIBILITY (Check all that apply)

☐ Commercial Insurance	☐ Letter of Credit	☐ Local Government Bond Rating Test
☐ Financial Test of Self Insurance	☐ Surety Bond	☐ Other Method Allowed (Specify) _____
☐ Guarantee	☐ Trust Fund	☑ Exempt: ☐ State or ☑ Federal Agency

Checking one or more of the above boxes attests to the fact that the financial responsibility requirements in subchapter 8 of chapter 11-280.1, Hawaii Administrative Rules, are met using the selected mechanism(s) as of the date of the certification below.

VII. FACILITY DRAWING

Include a drawing showing the general layout of the facility. This drawing should be no larger than 11 by 17 inches and preferably to scale. This drawing should show the following:

A. The property boundaries of the facility;
B. Identification of streets, roads and nearby bodies of water;
C. Identification of nearby facilities;
D. Tax Map Key (TMK) Numbers;
E. Location of buildings at the facility;
F. The approximate dimensions of the property boundaries and major buildings;
G. Location of all USTs and dispenser pumps (identified by number/s consistent with the tank & dispenser pump numbers in Sections IX and X), and associated pipings; and
H. Indication of North/South direction.

VIII. LOCATION MAP

Include a map showing the location of the tanks with respect to nearby landmarks. The map should indicate roads and landmarks to a level of detail such that the site would be easily located

IX. DESCRIPTION OF TANK(S) (Complete for each tank at this location)

Tank Number	Tank No. F-1	Tank No. F-2	Tank No. F-3	Tank No. F-4	Tank No. F-5
1. Status of Tank (Mark only one)					
A. Currently in Use	☐	☑	☑	☑	☑
B. Temporarily Out of Use (Also complete Section XI)	☑	☐	☐	☐	☐
C. Permanently Out of Use (Also complete Section XI)	☐	☐	☐	☐	☐
2. Date of Installation (mo/year)	10/1942	09/1942	01/1943	11/1942	12/1942
3. Estimated Capacity (gallons)	12,000,000	12,000,000	12,000,000	12,000,000	12,700,000
A. Compartmentalized? Yes/No	No	No	No	No	No
Estimated compartment capacity (gallons)					
B. Manifolded? Yes/No	No	No	No	No	No
4. Substance Currently or Last Stored in Greatest Quantity by Volume					
A. Gasoline (Specify product grade)	N/A	N/A	N/A	N/A	N/A
B. Diesel	☐	☐	☐	☐	☐
C. Gasohol (Including ethanol blends) Specify product grade	N/A	N/A	N/A	N/A	N/A
D. Kerosene	☐	☐	☐	☐	☐

Tank Number	Tank No. F-1	Tank No. F-2	Tank No. F-3	Tank No. F-4	Tank No. F-5
E. Used Oil/Waste Oil	☐	☐	☐	☐	☐
F. JP-4	☐	☐	☐	☐	☐
G. Non-Petroleum Hazardous Substance (CERCLA name and/or CAS #)	N/A	N/A	N/A	N/A	N/A
H. Mixture of Substances (Please specify)	N/A	N/A	N/A	N/A	N/A
I. Other, please specify.	EMPTY	F-24	F-24	F-24	F-24
5. Substance Compatible with Tank and Piping? Yes/No	N/A	Yes	Yes	Yes	Yes
6. Tank (Mark all that apply)					
A. Manufacturer and Model	Field-constructed	Field-constructed	Field-constructed	Field-constructed	Field-constructed
B. Underwriters Laboratory No.	N/A	N/A	N/A	N/A	N/A
C. Primary Containment Material or Single-Walled Tank					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Steel	☑	☑	☑	☑	☑
iii. Other, please specify.	N/A	N/A	N/A	N/A	N/A
D. Secondary Containment Material					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Steel	☐	☐	☐	☐	☐
iii. Other, please specify.	N/A	N/A	N/A	N/A	N/A
iv. None	☑	☑	☑	☑	☑
E. Corrosion Protection (except fiberglass reinforced plastic tanks)					
i. Fiberglass coated steel	☐	☐	☐	☐	☐
ii. Double-walled steel	☐	☐	☐	☐	☐
iii. Impressed current system	☐	☐	☐	☐	☐
iv. Sacrificial anode system	☐	☐	☐	☐	☐
v. Corrosion expert determination	☐	☐	☐	☐	☐
vi. Other, please specify.	N/A	N/A	N/A	N/A	N/A
7. Piping					
A. Manufacturer and Model	Unknown	Unknown	Unknown	Unknown	Unknown
B. Underwriters Laboratory No.	Unknown	Unknown	Unknown	Unknown	Unknown

Tank Number	Tank No. F-1	Tank No. F-2	Tank No. F-3	Tank No. F-4	Tank No. F-5
C. Primary Containment Material or Single-Walled Piping					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Flex piping	☐	☐	☐	☐	☐
iii. Steel	☑	☑	☑	☑	☑
iv. Other, please specify.	Piping is above ground	Piping is above ground	Piping is above ground	Piping is above ground	Piping is above ground
D. Secondary Containment Material					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Flex piping	☐	☐	☐	☐	☐
iii. Lined trench	☐	☐	☐	☐	☐
iv. Other, please specify.	N/A	N/A	N/A	N/A	N/A
v. None	☑	☑	☑	☑	☑
E. Corrosion Protection (except fiberglass reinforced plastic piping)					
i. Fiberglass coated steel	☐	☐	☐	☐	☐
ii. Impressed current system	☐	☐	☐	☐	☐
iii. Sacrificial anode system	☐	☐	☐	☐	☐
iv. Corrosion expert determination	☐	☐	☐	☐	☐
v. Other, please specify.	N/A	N/A	N/A	N/A	N/A
8. Method of Product Dispensing					
A. Unsafe Suction (valve at tank)	☐	☐	☐	☐	☐
B. Safe Suction (no valve at tank)	☐	☐	☐	☐	☐
C. Pressure	☑	☑	☑	☑	☑
D. Not Applicable	☐	☐	☐	☐	☐
9. Spill prevention equipment	☐	☐	☐	☐	☐
A. Manufacturer and Model	N/A	N/A	N/A	N/A	N/A
B. Capacity (gallons)	N/A	N/A	N/A	N/A	N/A
10. Overfill prevention equipment	☑	☑	☑	☑	☑
A. Automatic shutoff device (flapper) Make and Model	☐	☐	☐	☐	☐
B. Overfill alarm Make and Model	☑	☑	☑	☑	☑
C. Ball float valve Make and Model	☐	☐	☐	☐	☐

Tank Number	Tank No. F-1		Tank No. F-2		Tank No. F-3		Tank No. F-4		Tank No. F-5	
11. Release Detection (Mark all that apply)	TANK	PIPE	TANK	PIPE	TANK	PIPE	TANK	PIPE	TANK	PIPE
A. Manual tank gauging	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
B. Tank tightness testing	☐	NA	☑	NA	☑	NA	☑	NA	☑	NA
C. Inventory control	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
D. Automatic tank gauging	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
E. Vapor monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
F. Groundwater monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
G. Interstitial monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
H. Statistical inventory reconciliation	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
I. Automatic line leak detectors (Yes/No)	NA	N/A	NA	N/A	NA	N/A	NA	N/A	NA	N/A
If **YES**, specify type.										
J. Line tightness testing	NA	☐	NA	☐	NA	☐	NA	☐	NA	☐
K. Other method approved by the Department. Please specify	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

X. DESCRIPTION OF DISPENSER AND UNDER DISPENSER CONTAINMENT

(Attach additional sheet if necessary.)

Dispenser Unit	Manufacturer of Dispenser	Dispenser Serial #	Under Dispenser Containment installed (Yes/No) - Installation Date
1			N/A
2			N/A
3			N/A
4			N/A
5			N/A
6			N/A
7			N/A
8			N/A
9			N/A
10			N/A
11			N/A
12			N/A

XI. TANK(S) OUT OF USE OR CHANGE IN SERVICE

Tank Number	Tank No. F-1	Tank No. F-2	Tank No. F-3	Tank No. F-4	Tank No. F-5
1. Closing of Tank A. Estimated date last used (mo./day/year)	N/A	N/A	N/A	N/A	N/A
B. Estimated date tank closed (mo./day/year)					
C. Tank was removed from ground					
D. Tank was closed in ground					
E. Tank filled with inert material Describe					
F. Change in service					
2. Site Assessment Completed (Y/N)					
3. Evidence of a Leak Detected (Y/N)					

XII. CERTIFICATION OF COMPLIANCE FOR REPAIRS (Complete for each tank at this location)

Tank Number	Tank No. F-1	Tank No. F-2	Tank No. F-3	Tank No. F-4	Tank No. F-5
A. Date Repaired	N/A	N/A	N/A	N/A	01/13/2020

B. Provide description of repair along with the Tank Number (Attach additional sheet if necessary.)

Tank F-5:

Contractor completed a comprehensive out-of-service internal integrity inspection and repair of Tank 5. Completed shell repairs included weld repairs, patch plate repairs, pipe cap repairs, weld repairs after grinding. Based on inspection of the repairs and review of documentation of the repairs, the Engineer of Record determined Tank 5 is suitable to return to service, as specified in the Contractor's Suitability for Service Testament (attached).

Leak detection testing of Tank 5 was performed at four (4) different product levels, with no detectable leak above the test method's minimum detectable leak rate, resulting in passing tests. The leak detection testing conducted meets the regulatory requirements in HAR 11-280.1-43(10). The Executive Summary of the 2020 Leak Detection Testing Report of Bulk Field-Constructed Underground Storage Tank 5 at Red Hill Fuel Storage Complex is attached.

C. Select one of the following: i. Installation certified by tank and piping manufacturers	N/A	N/A	N/A	N/A	N/A
ii. Installation inspected by a registered engineer.	N/A	N/A	N/A	N/A	Yes
iii. Manufacturer's installation checklists have been completed and documented	N/A	N/A	N/A	N/A	N/A
iv. Another method allowed by the department. Please specify	N/A	N/A	N/A	N/A	N/A

VII. FACILITY DRAWING

Include a drawing showing the general layout of the facility. This drawing should be no larger than 11 by 17 inches and preferably to scale. This drawing should show the following:

A. The property boundaries of the facility;
B. Identification of streets, roads and nearby bodies of water;
C. Identification of nearby facilities;
D. Tax Map Key (TMK) Numbers;
E. Location of buildings at the facility;
F. The approximate dimensions of the property boundaries and major buildings;
G. Location of all USTs and dispenser pumps (identified by number/s consistent with the tank & dispenser pump numbers in Sections IX and X), and associated pipings; and
H. Indication of North/South direction.

VIII. LOCATION MAP

Include a map showing the location of the tanks with respect to nearby landmarks. The map should indicate roads and landmarks to a level of detail such that the site would be easily located

IX. DESCRIPTION OF TANK(S) (Complete for each tank at this location)

Tank Number	Tank No. F-6	Tank No. F-7	Tank No. F-8	Tank No. F-9	Tank No. F-10
1. Status of Tank (Mark only one)					
A. Currently in Use	☑	☑	☑	☑	☑
B. Temporarily Out of Use (Also complete Section XI)	☐	☐	☐	☐	☐
C. Permanently Out of Use (Also complete Section XI)	☐	☐	☐	☐	☐
2. Date of Installation (mo/year)	12/1942	05/1943	03/1943	02/1943	01/1943
3. Estimated Capacity (gallons)	12,700,000	12,700,000	12,700,000	12,700,000	12,700,000
A. Compartmentalized? Yes/No	No	No	No	No	No
Estimated compartment capacity (gallons)					
B. Manifolded? Yes/No	No	No	No	No	No
4. Substance Currently or Last Stored in Greatest Quantity by Volume					
A. Gasoline (Specify product grade)	N/A	N/A	N/A	N/A	N/A
B. Diesel	☐	☐	☐	☐	☐
C. Gasohol (Including ethanol blends) Specify product grade	N/A	N/A	N/A	N/A	N/A
D. Kerosene	☐	☐	☐	☐	☐

Tank Number	Tank No. F-6	Tank No. F-7	Tank No. F-8	Tank No. F-9	Tank No. F-10
E. Used Oil/Waste Oil	☐	☐	☐	☐	☐
F. JP-4	☐	☐	☐	☐	☐
G. Non-Petroleum Hazardous Substance (CERCLA name and/or CAS #)	N/A	N/A	N/A	N/A	N/A
H. Mixture of Substances (Please specify)	N/A	N/A	N/A	N/A	N/A
I. Other, please specify.	F-24	JP-5	JP-5	JP-5	JP-5
5. Substance Compatible with Tank and Piping? Yes/No	Yes	Yes	Yes	Yes	Yes
6. Tank (Mark all that apply)					
A. Manufacturer and Model	Field-constructed	Field-constructed	Field-constructed	Field-constructed	Field-constructed
B. Underwriters Laboratory No.	N/A	N/A	N/A	N/A	N/A
C. Primary Containment Material or Single-Walled Tank					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Steel	☑	☑	☑	☑	☑
iii. Other, please specify.	N/A	N/A	N/A	N/A	N/A
D. Secondary Containment Material					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Steel	☐	☐	☐	☐	☐
iii. Other, please specify.	N/A	N/A	N/A	N/A	N/A
iv. None	☑	☑	☑	☑	☑
E. Corrosion Protection (except fiberglass reinforced plastic tanks)					
i. Fiberglass coated steel	☐	☐	☐	☐	☐
ii. Double-walled steel	☐	☐	☐	☐	☐
iii. Impressed current system	☐	☐	☐	☐	☐
iv. Sacrificial anode system	☐	☐	☐	☐	☐
v. Corrosion expert determination	☐	☐	☐	☐	☐
vi. Other, please specify.	N/A	N/A	N/A	N/A	N/A
7. Piping					
A. Manufacturer and Model	Unknown	Unknown	Unknown	Unknown	Unknown
B. Underwriters Laboratory No.	Unknown	Unknown	Unknown	Unknown	Unknown

Tank Number	Tank No. F-6	Tank No. F-7	Tank No. F-8	Tank No. F-9	Tank No. F-10
C. Primary Containment Material or Single-Walled Piping					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Flex piping	☐	☐	☐	☐	☐
iii. Steel	☑	☑	☑	☑	☑
iv. Other, please specify.	Piping is above ground	Piping is above ground	Piping is above ground	Piping is above ground	Piping is above ground
D. Secondary Containment Material					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Flex piping	☐	☐	☐	☐	☐
iii. Lined trench	☐	☐	☐	☐	☐
iv. Other, please specify.	N/A	N/A	N/A	N/A	N/A
v. None	☑	☑	☑	☑	☑
E. Corrosion Protection (except fiberglass reinforced plastic piping)					
i. Fiberglass coated steel	☐	☐	☐	☐	☐
ii. Impressed current system	☐	☐	☐	☐	☐
iii. Sacrificial anode system	☐	☐	☐	☐	☐
iv. Corrosion expert determination	☐	☐	☐	☐	☐
v. Other, please specify.	N/A	N/A	N/A	N/A	N/A
8. Method of Product Dispensing					
A. Unsafe Suction (valve at tank)	☐	☐	☐	☐	☐
B. Safe Suction (no valve at tank)	☐	☐	☐	☐	☐
C. Pressure	☑	☑	☑	☑	☑
D. Not Applicable	☐	☐	☐	☐	☐
9. Spill prevention equipment	☐	☐	☐	☐	☐
A. Manufacturer and Model	N/A	N/A	N/A	N/A	N/A
B. Capacity (gallons)	N/A	N/A	N/A	N/A	N/A
10. Overfill prevention equipment	☑	☑	☑	☑	☑
A. Automatic shutoff device (flapper) Make and Model	☐	☐	☐	☐	☐
B. Overfill alarm Make and Model	☑	☑	☑	☑	☑
C. Ball float valve Make and Model	☐	☐	☐	☐	☐

Tank Number	Tank No. F-6		Tank No. F-7		Tank No. F-8		Tank No. F-9		Tank No. F-10	
11. Release Detection (Mark all that apply)	TANK	PIPE	TANK	PIPE	TANK	PIPE	TANK	PIPE	TANK	PIPE
A. Manual tank gauging	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
B. Tank tightness testing	☑	NA	☑	NA	☑	NA	☑	NA	☑	NA
C. Inventory control	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
D. Automatic tank gauging	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
E. Vapor monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
F. Groundwater monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
G. Interstitial monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
H. Statistical inventory reconciliation	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
I. Automatic line leak detectors (Yes/No)	NA	N/A	NA	N/A	NA	N/A	NA	N/A	NA	N/A
If **YES**, specify type.										
J. Line tightness testing	NA	☐	NA	☐	NA	☐	NA	☐	NA	☐
K. Other method approved by the Department. Please specify	N/A	N/A	N/A	N/A	NA	N/A	N/A	N/A	N/A	N/A

X. DESCRIPTION OF DISPENSER AND UNDER DISPENSER CONTAINMENT

(Attach additional sheet if necessary.)

Dispenser Unit	Manufacturer of Dispenser	Dispenser Serial #	Under Dispenser Containment installed (Yes/No) - Installation Date
1			N/A
2			N/A
3			N/A
4			N/A
5			N/A
6			N/A
7			N/A
8			N/A
9			N/A
10			N/A
11			N/A
12			N/A

XI. TANK(S) OUT OF USE OR CHANGE IN SERVICE

Tank Number	Tank No. F-6	Tank No. F-7	Tank No. F-8	Tank No. F-9	Tank No. F-10
1. Closing of Tank A. Estimated date last used (mo./day/year)	N/A	N/A	N/A	N/A	N/A
B. Estimated date tank closed (mo./day/year)					
C. Tank was removed from ground					
D. Tank was closed in ground					
E. Tank filled with inert material Describe					
F. Change in service					
2. Site Assessment Completed (Y/N)					
3. Evidence of a Leak Detected (Y/N)					

XII. CERTIFICATION OF COMPLIANCE FOR REPAIRS (Complete for each tank at this location)

Tank Number	Tank No. F-6	Tank No. F-7	Tank No. F-8	Tank No. F-9	Tank No. F-10
A. Date Repaired	N/A	N/A	N/A	N/A	N/A
B. Provide description of repair along with the Tank Number (Attach additional sheet if necessary.)					
C. Select one of the following: i. Installation certified by tank and piping manufacturers					
ii. Installation inspected by a registered engineer.					
iii. Manufacturer's installation checklists have been completed and documented					
iv. Another method allowed by the department. Please specify					

VII. FACILITY DRAWING

Include a drawing showing the general layout of the facility. This drawing should be no larger than 11 by 17 inches and preferably to scale. This drawing should show the following:

A. The property boundaries of the facility;
B. Identification of streets, roads and nearby bodies of water;
C. Identification of nearby facilities;
D. Tax Map Key (TMK) Numbers;
E. Location of buildings at the facility;
F. The approximate dimensions of the property boundaries and major buildings;
G. Location of all USTs and dispenser pumps (identified by number/s consistent with the tank & dispenser pump numbers in Sections IX and X), and associated pipings; and
H. Indication of North/South direction.

VIII. LOCATION MAP

Include a map showing the location of the tanks with respect to nearby landmarks. The map should indicate roads and landmarks to a level of detail such that the site would be easily located

IX. DESCRIPTION OF TANK(S) (Complete for each tank at this location)

Tank Number	Tank No. F-11	Tank No. F-12	Tank No. F-13	Tank No. F-14	Tank No. F-15
1. Status of Tank (Mark only one)					
A. Currently in Use	☑	☑	☐	☐	☑
B. Temporarily Out of Use (Also complete Section XI)	☐	☐	☑	☑	☐
C. Permanently Out of Use (Also complete Section XI)	☐	☐	☐	☐	☐
2. Date of Installation (mo/year)	02/1943	03/1943	03/1943	03/1943	04/1943
3. Estimated Capacity (gallons)	12,700,000	12,700,000	12,700,000	12,700,000	12,700,000
A. Compartmentalized? Yes/No	No	No	No	No	No
Estimated compartment capacity (gallons)					
B. Manifolded? Yes/No	No	No	No	No	No
4. Substance Currently or Last Stored in Greatest Quantity by Volume					
A. Gasoline (Specify product grade)	N/A	N/A	N/A	N/A	N/A
B. Diesel	☐	☐	☐	☐	☐
C. Gasohol (Including ethanol blends) Specify product grade	N/A	N/A	N/A	N/A	N/A
D. Kerosene	☐	☐	☐	☐	☐

Tank Number	Tank No. F-11	Tank No. F-12	Tank No. F-13	Tank No. F-14	Tank No. F-15
E. Used Oil/Waste Oil	☐	☐	☐	☐	☐
F. JP-4	☐	☐	☐	☐	☐
G. Non-Petroleum Hazardous Substance (CERCLA name and/or CAS #)	N/A	N/A	N/A	N/A	N/A
H. Mixture of Substances (Please specify)	N/A	N/A	N/A	N/A	N/A
I. Other, please specify.	JP-5	JP-5	EMPTY	EMPTY	F-76
5. Substance Compatible with Tank and Piping? Yes/No	Yes	Yes	N/A	N/A	Yes
6. Tank (Mark all that apply)					
A. Manufacturer and Model	Field-constructed	Field-constructed	Field-constructed	Field-constructed	Field-constructed
B. Underwriters Laboratory No.	N/A	N/A	N/A	N/A	N/A
C. Primary Containment Material or Single-Walled Tank					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Steel	☑	☑	☑	☑	☑
iii. Other, please specify.	N/A	N/A	N/A	N/A	N/A
D. Secondary Containment Material					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Steel	☐	☐	☐	☐	☐
iii. Other, please specify.	N/A	N/A	N/A	N/A	N/A
iv. None	☑	☑	☑	☑	☑
E. Corrosion Protection (except fiberglass reinforced plastic tanks)					
i. Fiberglass coated steel	☐	☐	☐	☐	☐
ii. Double-walled steel	☐	☐	☐	☐	☐
iii. Impressed current system	☐	☐	☐	☐	☐
iv. Sacrificial anode system	☐	☐	☐	☐	☐
v. Corrosion expert determination	☐	☐	☐	☐	☐
vi. Other, please specify.	N/A	N/A	N/A	N/A	N/A
7. Piping					
A. Manufacturer and Model	Unknown	Unknown	Unknown	Unknown	Unknown
B. Underwriters Laboratory No.	Unknown	Unknown	Unknown	Unknown	Unknown

Tank Number	Tank No. F-11	Tank No. F-12	Tank No. F-13	Tank No. F-14	Tank No. F-15
C. Primary Containment Material or Single-Walled Piping					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Flex piping	☐	☐	☐	☐	☐
iii. Steel	☑	☑	☑	☑	☑
iv. Other, please specify.	Piping is above ground	Piping is above ground	Piping is above ground	Piping is above ground	Piping is above ground
D. Secondary Containment Material					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Flex piping	☐	☐	☐	☐	☐
iii. Lined trench	☐	☐	☐	☐	☐
iv. Other, please specify.	N/A	N/A	N/A	N/A	N/A
v. None	☑	☑	☑	☑	☑
E. Corrosion Protection (except fiberglass reinforced plastic piping)					
i. Fiberglass coated steel	☐	☐	☐	☐	☐
ii. Impressed current system	☐	☐	☐	☐	☐
iii. Sacrificial anode system	☐	☐	☐	☐	☐
iv. Corrosion expert determination	☐	☐	☐	☐	☐
v. Other, please specify.	N/A	N/A	N/A	N/A	N/A
8. Method of Product Dispensing					
A. Unsafe Suction (valve at tank)	☐	☐	☐	☐	☐
B. Safe Suction (no valve at tank)	☐	☐	☐	☐	☐
C. Pressure	☑	☑	☑	☑	☑
D. Not Applicable	☐	☐	☐	☐	☐
9. Spill prevention equipment	☐	☐	☐	☐	☐
A. Manufacturer and Model	N/A	N/A	N/A	N/A	N/A
B. Capacity (gallons)	N/A	N/A	N/A	N/A	N/A
10. Overfill prevention equipment	☑	☑	☑	☑	☑
A. Automatic shutoff device (flapper) Make and Model	☐	☐	☐	☐	☐
B. Overfill alarm Make and Model	☑	☑	☑	☑	☑
C. Ball float valve Make and Model	☐	☐	☐	☐	☐

Tank Number	Tank No. F-11		Tank No. F-12		Tank No. F-13		Tank No. F-14		Tank No. F-15	
11. Release Detection (Mark all that apply)	TANK	PIPE	TANK	PIPE	TANK	PIPE	TANK	PIPE	TANK	PIPE
A. Manual tank gauging	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
B. Tank tightness testing	☑	NA	☑	NA	☑	NA	☑	NA	☑	NA
C. Inventory control	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
D. Automatic tank gauging	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
E. Vapor monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
F. Groundwater monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
G. Interstitial monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
H. Statistical inventory reconciliation	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
I. Automatic line leak detectors (Yes/No)	NA	N/A	NA	N/A	NA	N/A	NA	N/A	NA	N/A
If **YES**, specify type.										
J. Line tightness testing	NA	☐	NA	☐	NA	☐	NA	☐	NA	☐
K. Other method approved by the Department. Please specify	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

X. DESCRIPTION OF DISPENSER AND UNDER DISPENSER CONTAINMENT

(Attach additional sheet if necessary.)

Dispenser Unit	Manufacturer of Dispenser	Dispenser Serial #	Under Dispenser Containment installed (Yes/No) - Installation Date
1			N/A
2			N/A
3			N/A
4			N/A
5			N/A
6			N/A
7			N/A
8			N/A
9			N/A
10			N/A
11			N/A
12			N/A

XI. TANK(S) OUT OF USE OR CHANGE IN SERVICE

Tank Number	Tank No. F-11	Tank No. F-12	Tank No. F-13	Tank No. F-14	Tank No. F-15
1. Closing of Tank A. Estimated date last used (mo./day/year)	N/A	N/A	N/A	N/A	N/A
B. Estimated date tank closed (mo./day/year)					
C. Tank was removed from ground					
D. Tank was closed in ground					
E. Tank filled with inert material Describe					
F. Change in service					
2. Site Assessment Completed (Y/N)					
3. Evidence of a Leak Detected (Y/N)					

XII. CERTIFICATION OF COMPLIANCE FOR REPAIRS (Complete for each tank at this location)

Tank Number	Tank No. F-11	Tank No. F-12	Tank No. F-13	Tank No. F-14	Tank No. F-15
A. Date Repaired	N/A	N/A	N/A	N/A	N/A
B. Provide description of repair along with the Tank Number (Attach additional sheet if necessary.)					
C. Select one of the following: i. Installation certified by tank and piping manufacturers					
ii. Installation inspected by a registered engineer.					
iii. Manufacturer's installation checklists have been completed and documented					
iv. Another method allowed by the department. Please specify					

VII. FACILITY DRAWING

Include a drawing showing the general layout of the facility. This drawing should be no larger than 11 by 17 inches and preferably to scale. This drawing should show the following:

A. The property boundaries of the facility;
B. Identification of streets, roads and nearby bodies of water;
C. Identification of nearby facilities;
D. Tax Map Key (TMK) Numbers;
E. Location of buildings at the facility;
F. The approximate dimensions of the property boundaries and major buildings;
G. Location of all USTs and dispenser pumps (identified by number/s consistent with the tank & dispenser pump numbers in Sections IX and X), and associated pipings; and
H. Indication of North/South direction.

VIII. LOCATION MAP

Include a map showing the location of the tanks with respect to nearby landmarks. The map should indicate roads and landmarks to a level of detail such that the site would be easily located

IX. DESCRIPTION OF TANK(S) (Complete for each tank at this location)

Tank Number	Tank No. F-16	Tank No. F-17	Tank No. F-18	Tank No. F-19	Tank No. F-20
1. Status of Tank (Mark only one)					
A. Currently in Use	☑	☐	☐	☐	☑
B. Temporarily Out of Use (Also complete Section XI)	☐	☑	☑	☑	☐
C. Permanently Out of Use (Also complete Section XI)	☐	☐	☐	☐	☐
2. Date of Installation (mo/year)	05/1943	05/1943	05/1943	06/1943	07/1943
3. Estimated Capacity (gallons)	12,700,000	12,700,000	12,700,000	12,700,000	12,700,000
A. Compartmentalized? Yes/No	No	No	No	No	No
Estimated compartment capacity (gallons)					
B. Manifolded? Yes/No	No	No	No	No	No
4. Substance Currently or Last Stored in Greatest Quantity by Volume					
A. Gasoline (Specify product grade)	N/A	N/A	N/A	N/A	N/A
B. Diesel	☐	☐	☐	☐	☐
C. Gasohol (Including ethanol blends) Specify product grade	N/A	N/A	N/A	N/A	N/A
D. Kerosene	☐	☐	☐	☐	☐

Tank Number	Tank No. F-16	Tank No. F-17	Tank No. F-18	Tank No. F-19	Tank No. F-20
E. Used Oil/Waste Oil	☐	☐	☐	☐	☐
F. JP-4	☐	☐	☐	☐	☐
G. Non-Petroleum Hazardous Substance (CERCLA name and/or CAS #)	N/A	N/A	N/A	N/A	N/A
H. Mixture of Substances (Please specify)	N/A	N/A	N/A	N/A	N/A
I. Other, please specify.	F-76	EMPTY	EMPTY	EMPTY	JP-5
5. Substance Compatible with Tank and Piping? Yes/No	Yes	N/A	N/A	N/A	Yes
6. Tank (Mark all that apply)					
A. Manufacturer and Model	Field-constructed	Field-constructed	Field-constructed	Field-constructed	Field-constructed
B. Underwriters Laboratory No.	N/A	N/A	N/A	N/A	N/A
C. Primary Containment Material or Single-Walled Tank					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Steel	☑	☑	☑	☑	☑
iii. Other, please specify.	N/A	N/A	N/A	N/A	N/A
D. Secondary Containment Material					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Steel	☐	☐	☐	☐	☐
iii. Other, please specify.	N/A	N/A	N/A	N/A	N/A
iv. None	☑	☑	☑	☑	☑
E. Corrosion Protection (except fiberglass reinforced plastic tanks)					
i. Fiberglass coated steel	☐	☐	☐	☐	☐
ii. Double-walled steel	☐	☐	☐	☐	☐
iii. Impressed current system	☐	☐	☐	☐	☐
iv. Sacrificial anode system	☐	☐	☐	☐	☐
v. Corrosion expert determination	☐	☐	☐	☐	☐
vi. Other, please specify.	N/A	N/A	N/A	N/A	N/A
7. Piping					
A. Manufacturer and Model	Unknown	Unknown	Unknown	Unknown	Unknown
B. Underwriters Laboratory No.	Unknown	Unknown	Unknown	Unknown	Unknown

Tank Number	Tank No. F-16	Tank No. F-17	Tank No. F-18	Tank No. F-19	Tank No. F-20
C. Primary Containment Material or Single-Walled Piping					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Flex piping	☐	☐	☐	☐	☐
iii. Steel	☑	☑	☑	☑	☑
iv. Other, please specify.	Piping is above ground	Piping is above ground	Piping is above ground	Piping is above ground	Piping is above ground
D. Secondary Containment Material					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Flex piping	☐	☐	☐	☐	☐
iii. Lined trench	☐	☐	☐	☐	☐
iv. Other, please specify.	N/A	N/A	N/A	N/A	N/A
v. None	☑	☑	☑	☑	☑
E. Corrosion Protection (except fiberglass reinforced plastic piping)					
i. Fiberglass coated steel	☐	☐	☐	☐	☐
ii. Impressed current system	☐	☐	☐	☐	☐
iii. Sacrificial anode system	☐	☐	☐	☐	☐
iv. Corrosion expert determination	☐	☐	☐	☐	☐
v. Other, please specify.	N/A	N/A	N/A	N/A	N/A
8. Method of Product Dispensing					
A. Unsafe Suction (valve at tank)	☐	☐	☐	☐	☐
B. Safe Suction (no valve at tank)	☐	☐	☐	☐	☐
C. Pressure	☑	☑	☑	☑	☑
D. Not Applicable	☐	☐	☐	☐	☐
9. Spill prevention equipment	☐	☐	☐	☐	☐
A. Manufacturer and Model	N/A	N/A	N/A	N/A	N/A
B. Capacity (gallons)	N/A	N/A	N/A	N/A	N/A
10. Overfill prevention equipment	☑	☑	☑	☑	☑
A. Automatic shutoff device (flapper) Make and Model	☐	☐	☐	☐	☐
B. Overfill alarm Make and Model	☑	☑	☑	☑	☑
C. Ball float valve Make and Model	☐	☐	☐	☐	☐

Tank Number	Tank No. F-16		Tank No. F-17		Tank No. F-18		Tank No. F-19		Tank No. F-20	
11. Release Detection (Mark all that apply)	TANK	PIPE	TANK	PIPE	TANK	PIPE	TANK	PIPE	TANK	PIPE
A. Manual tank gauging	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
B. Tank tightness testing	☑	NA	☑	NA	☑	NA	☐	NA	☑	NA
C. Inventory control	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
D. Automatic tank gauging	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
E. Vapor monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
F. Groundwater monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
G. Interstitial monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
H. Statistical inventory reconciliation	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
I. Automatic line leak detectors (Yes/No)	NA	N/A	NA	N/A	NA	N/A	NA	N/A	NA	N/A
If **YES**, specify type.										
J. Line tightness testing	NA	☐	NA	☐	NA	☐	NA	☐	NA	☐
K. Other method approved by the Department. Please specify	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

X. DESCRIPTION OF DISPENSER AND UNDER DISPENSER CONTAINMENT

(Attach additional sheet if necessary.)

Dispenser Unit	Manufacturer of Dispenser	Dispenser Serial #	Under Dispenser Containment installed (Yes/No) - Installation Date
1			N/A
2			N/A
3			N/A
4			N/A
5			N/A
6			N/A
7			N/A
8			N/A
9			N/A
10			N/A
11			N/A
12			N/A

XI. TANK(S) OUT OF USE OR CHANGE IN SERVICE

Tank Number	Tank No. F-16	Tank No. F-17	Tank No. F-18	Tank No. F-19	Tank No. F-20
1. Closing of Tank A. Estimated date last used (mo./day/year)	N/A	N/A	05/04/2020	N/A	N/A
B. Estimated date tank closed (mo./day/year)			07/03/2020		
C. Tank was removed from ground					
D. Tank was closed in ground					
E. Tank filled with inert material Describe					
F. Change in service					
2. Site Assessment Completed (Y/N)			N/A		
3. Evidence of a Leak Detected (Y/N)			No		

XII. CERTIFICATION OF COMPLIANCE FOR REPAIRS (Complete for each tank at this location)

Tank Number	Tank No. F-16	Tank No. F-17	Tank No. F-18	Tank No. F-19	Tank No. F-20
A. Date Repaired	N/A	N/A	N/A	N/A	N/A
B. Provide description of repair along with the Tank Number (Attach additional sheet if necessary.)					
C. Select one of the following: i. Installation certified by tank and piping manufacturers					
ii. Installation inspected by a registered engineer.					
iii. Manufacturer's installation checklists have been completed and documented					
iv. Another method allowed by the department. Please specify					

VII. FACILITY DRAWING

Include a drawing showing the general layout of the facility. This drawing should be no larger than 11 by 17 inches and preferably to scale. This drawing should show the following:

A. The property boundaries of the facility;
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C. Identification of nearby facilities;
D. Tax Map Key (TMK) Numbers;
E. Location of buildings at the facility;
F. The approximate dimensions of the property boundaries and major buildings;
G. Location of all USTs and dispenser pumps (identified by number/s consistent with the tank & dispenser pump numbers in Sections IX and X), and associated pipings; and
H. Indication of North/South direction.

VIII. LOCATION MAP

Include a map showing the location of the tanks with respect to nearby landmarks. The map should indicate roads and landmarks to a level of detail such that the site would be easily located

IX. DESCRIPTION OF TANK(S) (Complete for each tank at this location)

Tank Number	Tank No. F-ST1	Tank No. F-ST2	Tank No. F-ST3	Tank No. F-ST4	Tank No. Ppel
1. Status of Tank (Mark only one)					
A. Currently in Use	☑	☑	☐	☑	☑
B. Temporarily Out of Use (Also complete Section XI)	☐	☐	☑	☐	☐
C. Permanently Out of Use (Also complete Section XI)	☐	☐	☐	☐	☐
2. Date of Installation (mo/year)	07/1942	07/1942	07/1942	07/1942	
3. Estimated Capacity (gallons)	400,000	400,000	400,000	400,000	31,665
A. Compartmentalized? Yes/No	No	No	No	No	No
Estimated compartment capacity (gallons)					
B. Manifolded? Yes/No	No	No	No	No	No
4. Substance Currently or Last Stored in Greatest Quantity by Volume					
A. Gasoline (Specify product grade)	N/A	N/A	N/A	N/A	N/A
B. Diesel	☐	☐	☐	☐	☐
C. Gasohol (Including ethanol blends) Specify product grade	N/A	N/A	N/A	N/A	N/A
D. Kerosene	☐	☐	☐	☐	☐

Tank Number	Tank No. F-ST1	Tank No. F-ST2	Tank No. F-ST3	Tank No. F-ST4	Tank No. Pipeli
E. Used Oil/Waste Oil	☐	☐	☐	☐	☐
F. JP-4	☐	☐	☐	☐	☐
G. Non-Petroleum Hazardous Substance (CERCLA name and/or CAS #)	N/A	N/A	N/A	N/A	N/A
H. Mixture of Substances (Please specify)	N/A	N/A	N/A	N/A	N/A
I. Other, please specify.	F-24	JP-5	EMPTY	F-76	F-24, F-76, JP-5
5. Substance Compatible with Tank and Piping? Yes/No	Yes	Yes	N/A	Yes	Yes
6. Tank (Mark all that apply)					
A. Manufacturer and Model	Field-constructed	Field-constructed	Field-constructed	Field-constructed	N/A
B. Underwriters Laboratory No.	N/A	N/A	N/A	N/A	N/A
C. Primary Containment Material or Single-Walled Tank					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Steel	☑	☑	☑	☑	☐
iii. Other, please specify.	N/A	N/A	N/A	N/A	N/A
D. Secondary Containment Material					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Steel	☐	☐	☐	☐	☐
iii. Other, please specify.	N/A	N/A	N/A	N/A	N/A
iv. None	☑	☑	☑	☑	☐
E. Corrosion Protection (except fiberglass reinforced plastic tanks)					
i. Fiberglass coated steel	☐	☐	☐	☐	☐
ii. Double-walled steel	☐	☐	☐	☐	☐
iii. Impressed current system	☐	☐	☐	☐	☐
iv. Sacrificial anode system	☐	☐	☐	☐	☐
v. Corrosion expert determination	☐	☐	☐	☐	☐
vi. Other, please specify.	N/A	N/A	N/A	N/A	N/A
7. Piping					
A. Manufacturer and Model	Unknown	Unknown	Unknown	Unknown	Unknown
B. Underwriters Laboratory No.	Unknown	Unknown	Unknown	Unknown	Unknown

Tank Number	Tank No. F-ST1	Tank No. F-ST2	Tank No. F-ST3	Tank No. F-ST4	Tank No. Pipelin
C. Primary Containment Material or Single-Walled Piping					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Flex piping	☐	☐	☐	☐	☐
iii. Steel	☑	☑	☑	☑	☑
iv. Other, please specify.	Piping is above ground	Piping is above ground	Piping is above ground	Piping is above ground	
D. Secondary Containment Material					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Flex piping	☐	☐	☐	☐	☐
iii. Lined trench	☐	☐	☐	☐	☐
iv. Other, please specify.	N/A	N/A	N/A	N/A	N/A
v. None	☑	☑	☑	☑	☑
E. Corrosion Protection (except fiberglass reinforced plastic piping)					
i. Fiberglass coated steel	☐	☐	☐	☐	☐
ii. Impressed current system	☐	☐	☐	☐	☑
iii. Sacrificial anode system	☐	☐	☐	☐	☐
iv. Corrosion expert determination	☐	☐	☐	☐	☐
v. Other, please specify.	N/A	N/A	N/A	N/A	N/A
8. Method of Product Dispensing					
A. Unsafe Suction (valve at tank)	☐	☐	☐	☐	☐
B. Safe Suction (no valve at tank)	☐	☐	☐	☐	☐
C. Pressure	☐	☐	☐	☐	☑
D. Not Applicable	☑	☑	☑	☑	☐
9. Spill prevention equipment	☐	☐	☐	☐	☐
A. Manufacturer and Model	N/A	N/A	N/A	N/A	N/A
B. Capacity (gallons)	N/A	N/A	N/A	N/A	N/A
10. Overfill prevention equipment	☑	☑	☑	☑	☐
A. Automatic shutoff device (flapper) Make and Model	☐	☐	☐	☐	☐
B. Overfill alarm Make and Model	☑	☑	☑	☑	☐
C. Ball float valve Make and Model	☐	☐	☐	☐	☐

Tank Number	Tank No. F-ST1		Tank No. F-ST2		Tank No. F-ST3		Tank No. F-ST4		Tank No. Pipe1	
11. Release Detection (Mark all that apply)	TANK	PIPE	TANK	PIPE	TANK	PIPE	TANK	PIPE	TANK	PIPE
A. Manual tank gauging	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
B. Tank tightness testing	☑	NA	☑	NA	☑	NA	☑	NA	☐	NA
C. Inventory control	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
D. Automatic tank gauging	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
E. Vapor monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
F. Groundwater monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
G. Interstitial monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
H. Statistical inventory reconciliation	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
I. Automatic line leak detectors (Yes/No)	NA	N/A	NA	N/A	NA	N/A	NA	N/A	NA	N/A
If **YES**, specify type.										
J. Line tightness testing	NA	☐	NA	☐	NA	☐	NA	☐	NA	☑
K. Other method approved by the Department. Please specify	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

X. DESCRIPTION OF DISPENSER AND UNDER DISPENSER CONTAINMENT

(Attach additional sheet if necessary.)

Dispenser Unit	Manufacturer of Dispenser	Dispenser Serial #	Under Dispenser Containment installed (Yes/No) - Installation Date
1			N/A
2			N/A
3			N/A
4			N/A
5			N/A
6			N/A
7			N/A
8			N/A
9			N/A
10			N/A
11			N/A
12			N/A

XI. TANK(S) OUT OF USE OR CHANGE IN SERVICE

Tank Number	Tank No. F-ST1	Tank No. F-ST2	Tank No. F-ST3	Tank No. F-ST4	Tank No. Pipe
1. Closing of Tank A. Estimated date last used (mo./day/year)	N/A	N/A	08/27/2019	N/A	N/A
B. Estimated date tank closed (mo./day/year)			10/26/2019		
C. Tank was removed from ground					
D. Tank was closed in ground					
E. Tank filled with inert material Describe					
F. Change in service					
2. Site Assessment Completed (Y/N)			N/A		
3. Evidence of a Leak Detected (Y/N)			No		

XII. CERTIFICATION OF COMPLIANCE FOR REPAIRS (Complete for each tank at this location)

Tank Number	Tank No. F-ST1	Tank No. F-ST2	Tank No. F-ST3	Tank No. F-ST4	Tank No. Pipe
A. Date Repaired	N/A	N/A	N/A	07/25/2019	N/A
B. Provide description of repair along with the Tank Number (Attach additional sheet if necessary.) Tank F-ST4: Contractor completed a comprehensive out-of-service internal integrity inspection and repair of Surge Tank 4. Completed shell repairs included various weld and patch plate repairs. Based on inspection of the repairs and review of documentation of the repairs, the Engineer of Record determined Surge Tank 4 is suitable to return to service, as specified in the Contractor's Suitability for Service Testament (attached). Leak detection testing of Surge Tank 4 was performed, with no detectable leak above the test method's minimum detectable leak rate, resulting in a passing test. The leak detection testing conducted meets the regulatory requirements in HAR 11-280.1-43(10). The Executive Summary of the 2019 Annual Leak Detection Testing Report of 17 Bulk Field-Constructed Underground Storage Tanks at Red Hill Fuel Storage Complex is attached.					
C. Select one of the following: i. Installation certified by tank and piping manufacturers	N/A	N/A	N/A	N/A	N/A
ii. Installation inspected by a registered engineer.	N/A	N/A	N/A	Yes	N/A
iii. Manufacturer's installation checklists have been completed and documented	N/A	N/A	N/A	N/A	N/A
iv. Another method allowed by the department. Please specify	N/A	N/A	N/A	N/A	N/A

VII. FACILITY DRAWING

Include a drawing showing the general layout of the facility. This drawing should be no larger than 11 by 17 inches and preferably to scale. This drawing should show the following:

A. The property boundaries of the facility;
B. Identification of streets, roads and nearby bodies of water;
C. Identification of nearby facilities;
D. Tax Map Key (TMK) Numbers;
E. Location of buildings at the facility;
F. The approximate dimensions of the property boundaries and major buildings;
G. Location of all USTs and dispenser pumps (identified by number/s consistent with the tank & dispenser pump numbers in Sections IX and X), and associated pipings; and
H. Indication of North/South direction.

VIII. LOCATION MAP

Include a map showing the location of the tanks with respect to nearby landmarks. The map should indicate roads and landmarks to a level of detail such that the site would be easily located

IX. DESCRIPTION OF TANK(S) (Complete for each tank at this location)

Tank Number	Tank No. PRT-1	Tank No. PRT-2	Tank No. Diamond	Tank No. Ewa Beach	Tank No. ____
1. Status of Tank (Mark only one)					
A. Currently in Use	☑	☑	☑	☑	☐
B. Temporarily Out of Use (Also complete Section XI)	☐	☐	☐	☐	☐
C. Permanently Out of Use (Also complete Section XI)	☐	☐	☐	☐	☐
2. Date of Installation (mo/year)	07/2010	05/2006	09/2011	06/2006	
3. Estimated Capacity (gallons)	2,000	4,000	59,500	236,579	
A. Compartmentalized? Yes/No	No	No	No	No	
Estimated compartment capacity (gallons)					
B. Manifolded? Yes/No	No	No	No	No	
4. Substance Currently or Last Stored in Greatest Quantity by Volume					
A. Gasoline (Specify product grade)	N/A	N/A	N/A	N/A	
B. Diesel	☐	☐	☐	☐	☐
C. Gasohol (Including ethanol blends) Specify product grade	N/A	N/A	N/A	N/A	
D. Kerosene	☐	☐	☐	☐	☐

Tank Number	Tank No. PRT	Tank No. PRT	Tank No. Diam	Tank No. Ewa	Tank No.
E. Used Oil/Waste Oil	☐	☐	☐	☐	☐
F. JP-4	☐	☐	☐	☐	☐
G. Non-Petroleum Hazardous Substance (CERCLA name and/or CAS #)	N/A	N/A	N/A	N/A	
H. Mixture of Substances (Please specify)	N/A	N/A	N/A	N/A	
I. Other, please specify.	F-24	F-24	F-24	F-24	
5. Substance Compatible with Tank and Piping? Yes/No	Yes	Yes	Yes	Yes	
6. Tank (Mark all that apply)					
A. Manufacturer and Model	Steel Tank Institute/STI-P3	Steel Tank Institute/STI-P3	N/A	N/A	
B. Underwriters Laboratory No.	UL-58	UL-58	N/A	N/A	
C. Primary Containment Material or Single-Walled Tank					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Steel	☑	☑	☐	☐	☐
iii. Other, please specify.	N/A	N/A	N/A	N/A	
D. Secondary Containment Material					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Steel	☑	☑	☐	☐	☐
iii. Other, please specify.	N/A	N/A	N/A	N/A	
iv. None	☐	☐	☐	☐	☐
E. Corrosion Protection (except fiberglass reinforced plastic tanks)					
i. Fiberglass coated steel	☐	☐	☐	☐	☐
ii. Double-walled steel	☑	☑	☐	☐	☐
iii. Impressed current system	☑	☑	☐	☐	☐
iv. Sacrificial anode system	☐	☐	☐	☐	☐
v. Corrosion expert determination	☐	☐	☐	☐	☐
vi. Other, please specify.	N/A	N/A	N/A	N/A	
7. Piping					
A. Manufacturer and Model	Unknown	Unknown	Unknown	Unknown	
B. Underwriters Laboratory No.	Unknown	Unknown	Unknown	Unknown	

Facility ID No. 9-102271

Tank Number	Tank No. PRT-1	Tank No. PRT-2	Tank No. Diam	Tank No. Ewa	Tank No.
C. Primary Containment Material or Single-Walled Piping					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Flex piping	☐	☐	☐	☐	☐
iii. Steel	☑	☑	☑	☑	☐
iv. Other, please specify.	N/A	N/A	N/A	N/A	
D. Secondary Containment Material					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Flex piping	☐	☐	☐	☐	☐
iii. Lined trench	☑	☑	☐	☐	☐
iv. Other, please specify.	N/A	N/A	N/A	N/A	
v. None	☐	☐	☑	☑	☐
E. Corrosion Protection (except fiberglass reinforced plastic piping)					
i. Fiberglass coated steel	☐	☐	☐	☐	☐
ii. Impressed current system	☑	☑	☑	☑	☐
iii. Sacrificial anode system	☐	☐	☐	☐	☐
iv. Corrosion expert determination	☐	☐	☐	☐	☐
v. Other, please specify.	N/A	N/A	N/A	N/A	
8. Method of Product Dispensing					
A. Unsafe Suction (valve at tank)	☐	☐	☐	☐	☐
B. Safe Suction (no valve at tank)	☐	☐	☐	☐	☐
C. Pressure	☐	☐	☑	☑	☐
D. Not Applicable	☑	☑	☐	☐	☐
9. Spill prevention equipment	☐	☐	☐	☐	☐
A. Manufacturer and Model	N/A	N/A	N/A	N/A	
B. Capacity (gallons)	N/A	N/A	N/A	N/A	
10. Overfill prevention equipment	☑	☑	☐	☐	☐
A. Automatic shutoff device (flapper) Make and Model	☐	☐	☐	☐	☐
B. Overfill alarm Make and Model	☑ Veeder-Root TLS-350 PLUS	☑ Veeder-Root TLS-350 PLUS	☐	☐	☐
C. Ball float valve Make and Model	☐	☐	☐	☐	☐

Tank Number	Tank No. PRT		Tank No. PRT		Tank No. Diam		Tank No. Ewa		Tank No.	
11. Release Detection (Mark all that apply)	TANK	PIPE	TANK	PIPE	TANK	PIPE	TANK	PIPE	TANK	PIPE
A. Manual tank gauging	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
B. Tank tightness testing	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
C. Inventory control	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
D. Automatic tank gauging	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
E. Vapor monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
F. Groundwater monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
G. Interstitial monitoring	☑	☐	☑	☐	☐	☐	☐	☐	☐	☐
H. Statistical inventory reconciliation	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
I. Automatic line leak detectors (Yes/No)	NA	N/A	NA	N/A	NA	N/A	NA	N/A	NA	N/A
If **YES**, specify type.										
J. Line tightness testing	NA	☑	NA	☑	NA	☑	NA	☑	NA	☐
K. Other method approved by the Department. Please specify	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A		

X. DESCRIPTION OF DISPENSER AND UNDER DISPENSER CONTAINMENT

(Attach additional sheet if necessary.)

Dispenser Unit	Manufacturer of Dispenser	Dispenser Serial #	Under Dispenser Containment installed (Yes/No) - Installation Date
1			N/A
2			N/A
3			N/A
4			N/A
5			N/A
6			N/A
7			N/A
8			N/A
9			N/A
10			N/A
11			N/A
12			N/A

Facility ID No. 9-102271

XI. TANK(S) OUT OF USE OR CHANGE IN SERVICE

Tank Number	Tank No. PRT-1	Tank No. PRT-2	Tank No. Diamond	Tank No. Ewa	Tank No. ____
1. Closing of Tank A. Estimated date last used (mo./day/year)	N/A	N/A	N/A	N/A	
B. Estimated date tank closed (mo./day/year)					
C. Tank was removed from ground					
D. Tank was closed in ground					
E. Tank filled with inert material Describe					
F. Change in service					
2. Site Assessment Completed (Y/N)					
3. Evidence of a Leak Detected (Y/N)					

XII. CERTIFICATION OF COMPLIANCE FOR REPAIRS (Complete for each tank at this location)

Tank Number	Tank No. PRT-1	Tank No. PRT-2	Tank No. Diamond	Tank No. Ewa	Tank No. ____
A. Date Repaired	N/A	N/A	N/A	N/A	
B. Provide description of repair along with the Tank Number (Attach additional sheet if necessary.)					
C. Select one of the following: i. Installation certified by tank and piping manufacturers					
ii. Installation inspected by a registered engineer.					
iii. Manufacturer's installation checklists have been completed and documented					
iv. Another method allowed by the department. Please specify					

Facility ID No. 9-102271

XIII. CERTIFICATION (Read and sign after completing all sections)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

CAPT Marc Delao	Regional Engineer
Print or Type Name of owner or owner's authorized representative	Official Title
Signature	20 May 20 Date Signed

Status of Signatory (Mark as appropriate)

1.	Corporation:	☐ principal executive officer ☐ duly authorized representative
2.	Partnership:	☐ general partner
3.	Sole proprietorship:	☐ proprietor
4.	Government entity:	☑ principal executive officer ☐ ranking elected official

ENTERPRISE
ENGINEERING, INC.

SUITABILITY FOR SERVICE TESTAMENT
TANK 5

Enterprise Engineering, Inc. (EEI), under contract to APTIM (NAVFAC EXWC Contract No. N39430-15-D-1632, Task Order N3943019F4021), completed a comprehensive, out-of-service, internal integrity inspection and suitability for service evaluation of Tank 5 at the Red Hill Fuel Storage Facility, NAVSUP FLC, Pearl Harbor, Hawaii. EEI performed an inspection of Tank 5 October 2017 through January 2018 under a separate contract to NAVFAC EXWC (N39430-15-D-1678 Delivery Order 0011). Subsequently, APTIM completed repairs identified in EEI's Final Condition Assessment Report (Pre-Repair) dated November 2019 and Government Issued RFP documents dated 07 May 2018.

EEI performed a post-repair inspection of Tank 5 April 2019 through October 2019. The post-repair inspection determined repairs have been completed in accordance with the repair design documents. This report provides a status of the repairs performed, Non-Destructive Evaluation performed, a revised DLA-E Tank Condition Form (Post-Repair), a final repair list with repair location and size and certificates of EEI personnel who worked in Tank 5. EEI's Final Condition Assessment Report (Pre-Repair) is included in the appendices for historical information.

EEI recommends the next internal out-of-service inspection be scheduled no later than April 2040 (20 years from the return to service (RTS) date April 2020) or sooner if a change in condition has occurred.

Based on the inspection of the repairs and review of documentation of the repairs, EEI has determined Tank 5 is suitable to return to service.

POST-REPAIR

(b) (4)

Storage Tank Engineer and Inspector of Record
API 653 AST Inspector Certificate No. (b) (4)

8 January 2020
Date

Falmouth, ME 04105 • 400 Route 1, North Suite B• 207.869.8006 • Fax 207.869.8015
Anchorage, AK 99503 • 2525 Gambell Street, Suite 200 • 907.563.3835 • Fax 907.563.3817
Honolulu, HI 96819 • 3375 Koapaka Street, Suite B232 • 808.260.1481

ENCLOSURE(2)

(b) (3) (A)

2020 LEAK DETECTION TESTING REPORT OF BULK FIELD-CONSTRUCTED UNDERGROUND STORAGE TANK 5 AT RED HILL FUEL STORAGE COMPLEX

JOINT BASE PEARL HARBOR-HICKAM, HAWAII

Prepared for:
Defense Logistics Agency Energy
Fort Belvoir, Virginia

Prepared under:
Naval Facilities Engineering Command
Atlantic Contract N62470-16-D-9007
Delivery Order N6247020F4015

Submitted by:
Michael Baker International
Virginia Beach, Virginia

Date:
30 April 2020

Michael Baker
INTERNATIONAL
Project: 176419
Task: 3.0

ENCLOSURE(3)

[redacted]

EXECUTIVE SUMMARY

The scope of this project is to perform leak detection testing of bulk field-constructed underground storage tank (BFCUST) 5, at four different product levels, at the Red Hill Fuel Storage Complex at Joint Base (JB) Pearl Harbor-Hickam, Hawaii. The leak detection testing is being conducted at the direction of the Naval Facilities Engineering Command (NAVFAC) Atlantic and the Defense Logistics Agency (DLA) Energy's Leak Detection Centrally Managed Program and meets the regulatory requirements stated in the Hawaii Administrative Rules, Title 11, Chapter 280.1 (HAR 11-280.1), Subchapter 4, §11-280.1-43(10).

The leak detection testing of BFCUST 5 was performed, by [redacted] between 4 March and 20 April 2020, at four different product levels, with no detectable leak above the test method's minimum detectable leak rate, resulting in passing tests.

In accordance with HAR 11-280.1, annual leak detection testing of BFCUST 5 must be initiated on or before 4 March 2021; however, testing should be initiated on or before 16 October 2020 to align with annual leak detection testing of 22 BFCUSTs.

Environmental regulatory compliance of this site is the responsibility of the base and the service.

ENTERPRISE
ENGINEERING, INC.

SUITABILITY FOR SERVICE TESTAMENT
SURGE TANK 4 (FACILITY NO. 1227)

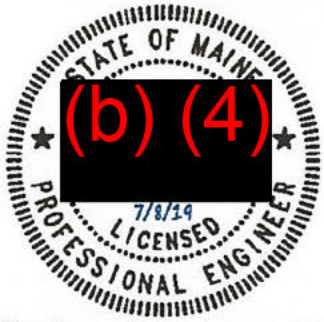
Enterprise Engineering Inc. (EEI), under contract to APTIM under (NAVFAC EXWC Contract No. N39430-15-D-1632, Task Order 3974318F4132), completed a comprehensive, out-of-service external and internal integrity inspection and suitability for service evaluation of Surge Tank 4 at NAVSUP FLC Pearl Harbor, Hawaii. The out-of-service inspection was performed November 13 through November 27, 2018. Subsequently, APTIM completed repairs identified in EEI's Final Condition Assessment Report (Pre-Repair) dated June 2019.

EEI performed a post-repair inspection of Tank 4 on June 28, 2019. The inspection determined repairs are complete and in accordance with the repair design documents. This report provides a summary of the repairs identified in EEI's Final Condition Assessment Report (Pre-Repair), status of repairs, a revised DLA-E Tank Condition Form (Post-Repair), and the Final Condition Assessment Report (Pre-Repair).

EEI recommends the next internal out-of-service inspection be scheduled no later than November 2028 (10 years after the November 2018 inspection), or sooner if a change in condition has occurred.

Based on the inspection of the repairs and review of the repair documentation of the repairs, EEI has determined Tank 4 is suitable to return to service.

POST-REPAIR



(b) (4), P.E.
API 653 AST Inspector Certificate No. (b) (4)

July 8, 2019
Date

(b) (4)
API 653 AST Inspector Certificate No. (b) (4)

July 8, 2019
Date

ENCLOSURE(4)

[redacted]

2019 ANNUAL LEAK DETECTION TESTING REPORT OF 17 BULK FIELD-CONSTRUCTED UNDERGROUND STORAGE TANKS AT RED HILL FUEL STORAGE COMPLEX

JOINT BASE PEARL HARBOR-HICKAM, HAWAII

Prepared for:
Defense Logistics Agency Energy
Fort Belvoir, Virginia

Prepared under:
Naval Facilities Engineering Command
Atlantic Contract N62470-16-D-9007
Delivery Order 0004

Submitted by:
Michael Baker International
Virginia Beach, Virginia

Date:
8 January 2020

Michael Baker
INTERNATIONAL
Project: 155858
Task: 3.0

ENCLOSURE(5)

[redacted]

EXECUTIVE SUMMARY

The scope of this project is to perform annual leak detection testing of 22 bulk field-constructed underground storage tanks (BFCUSTs) at the Red Hill Fuel Storage Complex at Joint Base (JB) Pearl Harbor-Hickam, Hawaii. The annual leak detection testing is being conducted in accordance with the Administrative Order on Consent (AOC), signed September 2015, between the Commander Navy Region Hawaii, Defense Logistics Agency (DLA) Energy, the State of Hawaii Department of Health, and the United States Environmental Protection Agency Region 9 and meets the regulatory requirements stated in the Hawaii Administrative Rules, Title 11, Chapter 280.1 (HAR 11-280.1), Subchapter 4, §11-280.1-43(10).

Upon mobilization and system review, five BFCUSTs (BFCUSTs 5, 13, 14, 17, and S1226) were removed from testing due to being temporarily out-of-service. Consequently, the final 2019 annual leak detection testing event included 17 BFCUSTs at the Red Hill Fuel Storage Complex at JB Pearl Harbor-Hickam.

The annual leak detection testing of 17 BFCUSTs was performed, by [redacted] between 16 October and 27 November 2019, with no detectable leak above the test method's minimum detectable leak rate, resulting in passing tests. BFCUSTs 7, 8, 15, 16, 18, and 20 were tested at less than tank high level, per base request, due to operational issues at the time of testing.

NAVFAC Atlantic and DLA Energy's Leak Detection Centrally Managed Program (CMP) should be notified immediately when BFCUSTs 5, 13, 14, 17, and S1226 are returned to service and when BFCUSTs 7, 8, 15, 16, 18, and 20 product levels are returned to normal operating levels to facilitate immediate testing, to comply with the AOC.

In accordance with the DLA Energy's Leak Detection CMP, as a pollution prevention Best Management Practice, semi-annual leak detection testing of 18 BFCUSTs should be performed on or before 16 April 2020.

In accordance with the AOC, annual leak detection testing of 22 BFCUSTs at JB Pearl Harbor-Hickam must be initiated on or before the anniversary date of 16 October 2020. Environmental regulatory compliance of this site is the responsibility of the base and Naval Supply Systems Command.

DEPARTMENT OF THE NAVY
COMMANDER
NAVY REGION HAWAII
850 TICONDEROGA ST STE 110
JBPHH, HAWAII 96860-5101

SEP 24 2020 OER

5000-45A
N45
September 15, 2020

CERTIFIED NO: 7015 0640 0002 4678 0561

Ms. Roxanne Kwan
Hawaii State Department of Health
Solid and Hazardous Waste Branch
Underground Storage Tank Section
2827 Waimano Home Road #100
Pearl City, HI 96782

Dear Ms. Kwan:

SUBJECT: NOTIFICATION FOR UNDERGROUND STORAGE TANKS, RED HILL BULK FUEL STORAGE FACILITY, JBPHH, OAHU, DOH FACILITY ID NO. 9-102271

As required by Hawaii Administrative Rules 11-280.1-34, the Navy is submitting written notification for the return to currently-in-use status of Surge Tank 3 (F-ST3) and the temporary closure of Surge Tank 1 (F-ST1). DOH Form No. 1, Notification for Underground Storage Tanks, is being submitted as Enclosure 1.

Enterprise Engineering, Inc. performed a post-repair inspection of Surge Tank 3 and determined repairs were completed in accordance with repair design documents. A Suitability of Service Testament for Surge Tank 3 is being submitted as Enclosure 2.

A leak detection test was conducted on Surge Tank 3 with passing results. The tank tightness test summary is being submitted as Enclosure 3. In accordance with Exemption (b)(4) of the Freedom of Information Act, the name of the subcontractor who performed the leak detection test has been redacted.

If you have any questions regarding this matter or need any additional information, contact (b) (6) [redacted]

Sincerely,

(b) (6) [redacted]
Director
Regional Environmental Department
By direction of the
Commander

5000-45A
N45
September 15, 2020

Enclosures: 1. DOH Form No. 1, Notification for Underground Storage Tanks for Red Hill Bulk Fuel Storage Facility, JBPHH, Oahu, DOH Facility ID No. 9-102271
2. Suitability for Service Testament for Surge Tank 3 (Facility No. 1226), prepared by Enterprise Engineering, Inc., 22 Jul 2020
3. Tank Tightness Test Summary, 24 Aug 2020 (Redacted)

Copy to:
U.S. Environmental Protection Agency Region 9
Commander, Navy Region Hawaii
Naval Facilities Engineering Command, Hawaii
U.S. Naval Supply Systems Command Fleet Logistics Center Pearl Harbor

SOLID AND HAZARDOUS WASTE BRANCH
Underground Storage Tank Program
2827 Waimano Home Road #100 • Pearl City, Hawaii 96782
Phone: 808 - 586- 4226 • Fax: 808-586-7509 • http://www.hawaii.gov/health/environmental/waste/ust

NOTIFICATION FOR UNDERGROUND STORAGE TANKS

Return completed form to:

Solid and Hazardous Waste Branch
Underground Storage Tank Program
2827 Waimano Home Road #100
Pearl City, Hawaii 96782

Facility ID Number: 9-102271

Permit Number: _____

Type of Notification/s: (Check all that apply)

- [x] **UST Status Change (temporary or permanent closure or return to use)**
- [ ] **Change in Piping**
- [ ] **Change in Spill and/or Overfill Prevention Method**
- [ ] **Change in Release Detection Method**
- [ ] **Change in Financial Responsibility Mechanism**
- [ ] **Other:** _____

Date Activity Occurred: 09/13/2020 (F-ST1), 08/17/2020 (F-ST3)

State Use Only

Date received: _____

Date Entered into Computer: _____

Data Clerk's Initials: _____

Comments: _____

I. LOCATION OF TANK(S)

Facility Name or Company Site identifiers	Location Contact Person
Red Hill Bulk Fuel Storage Facility	(b) (6)

Location Address (P.O. Box not acceptable)	City	State	Zip Code	Island	Tax Map Key #
Red Hill	Aiea	Hawaii	96701	Oahu	99010006, 99010001, 11012003, 11012004

Location Phone # (w/ area code)	Location Fax # (w/ area code)
(808)473-7801	(808)473-7815

II. CONTACT PERSON IN CHARGE OF TANK(S)

Name	Job / Position Title
(b) (6)	Regional Fuels Officer

Mailing Address	City	State	Zip Code
1942 Gaffney Street, (b) (6)	JBPHH	HI	96860

Phone # (w/ area code)	Fax # (w/ area code)	E-mail Address
(b) (6)	(808)473-7815	(b) (6)

ENCLOSURE(/)

Facility ID No. 9-102271

III. OWNER OF TANK(S)

US Navy - COMNAVREG HI
Owner Name (Corporation, Individual, Public Agency, or Other Entity)

850 Ticonderoga Street, Suite 110	JBPHH	HI	96860
Mailing Address	City	State	Zip Code

(808)471-3926	(808)473-5024	james.meyer@navy.mil
Phone # (w/ area code)	Fax # (w/ area code)	E-mail Address

IV. OPERATOR OF TANK(S) (if same as Section III, check here ☐)

Naval Supply Systems Command Fleet Logistics Center Pearl Harbor
Operator Name (Corporation, Individual, Public Agency, or Other Entity)

1942 Gaffney Street, (b) (6)	JBPHH	HI	96860
Mailing Address	City	State	Zip Code

(b) (6)	(808)473-7815	(b) (6)
Phone # (w/ area code)	Fax # (w/ area code)	E-mail Address

V. TYPE OF FACILITY (Select the appropriate facility description)

☐ Airline	☐ Contractor	☐ Petroleum Distributor	☐ Service Centers/Auto Repair/Maintenance
☐ Auto Dealership	☐ Farm	☐ Police Station	☐ Trucking/Transporter
☐ Baseyard	☐ Fire Station	☐ Residential	☐ Utilities
☐ Car Rental	☐ Gas Station	☐ Resort/Hotel	☐ Wastewater Treatment Plants
☐ Cleaner/Laundromat	☐ Golf Course	☐ School	☐ Wholesaler/Retailer
☐ Communication Sites	☐ Hospital	☑ Other (Explain) Fuel Storage and Airfield Hydrant System	

VI. FINANCIAL RESPONSIBILITY (Check all that apply)

☐ Commercial Insurance	☐ Letter of Credit	☐ Local Government Bond Rating Test
☐ Financial Test of Self Insurance	☐ Surety Bond	☐ Other Method Allowed (Specify) _____
☐ Guarantee	☐ Trust Fund	☑ Exempt: ☐ State or ☑ Federal Agency

Checking one or more of the above boxes attests to the fact that the financial responsibility requirements in subchapter 8 of chapter 11-280.1, Hawaii Administrative Rules, are met using the selected mechanism(s) as of the date of the certification below.

VII. FACILITY DRAWING

Include a drawing showing the general layout of the facility. This drawing should be no larger than 11 by 17 inches and preferably to scale. This drawing should show the following:

A. The property boundaries of the facility;
B. Identification of streets, roads and nearby bodies of water;
C. Identification of nearby facilities;
D. Tax Map Key (TMK) Numbers;
E. Location of buildings at the facility;
F. The approximate dimensions of the property boundaries and major buildings;
G. Location of all USTs and dispenser pumps (identified by number/s consistent with the tank & dispenser pump numbers in Sections IX and X), and associated pipings; and
H. Indication of North/South direction.

VIII. LOCATION MAP

Include a map showing the location of the tanks with respect to nearby landmarks. The map should indicate roads and landmarks to a level of detail such that the site would be easily located

IX. DESCRIPTION OF TANK(S) (Complete for each tank at this location)

Tank Number	Tank No. F-1	Tank No. F-2	Tank No. F-3	Tank No. F-4	Tank No. F-5
1. Status of Tank (Mark only one)					
A. Currently in Use	☐	☑	☑	☑	☑
B. Temporarily Out of Use (Also complete Section XI)	☑	☐	☐	☐	☐
C. Permanently Out of Use (Also complete Section XI)	☐	☐	☐	☐	☐
2. Date of Installation (mo/year)	10/1942	09/1942	01/1943	11/1942	12/1942
3. Estimated Capacity (gallons)	12,000,000	12,000,000	12,000,000	12,000,000	12,700,000
A. Compartmentalized? Yes/No	No	No	No	No	No
Estimated compartment capacity (gallons)					
B. Manifolded? Yes/No	No	No	No	No	No
4. Substance Currently or Last Stored in Greatest Quantity by Volume					
A. Gasoline (Specify product grade)					
B. Diesel	☐	☐	☐	☐	☐
C. Gasohol (Including ethanol blends) Specify product grade					
D. Kerosene	☐	☐	☐	☐	☐

Tank Number	Tank No. F-1	Tank No. F-2	Tank No. F-3	Tank No. F-4	Tank No. F-5
E. Used Oil/Waste Oil	☐	☐	☐	☐	☐
F. JP-4	☐	☐	☐	☐	☐
G. Non-Petroleum Hazardous Substance (CERCLA name and/or CAS #)	N/A	N/A	N/A	N/A	N/A
H. Mixture of Substances (Please specify)	N/A	N/A	N/A	N/A	N/A
I. Other, please specify.	EMPTY	F-24	F-24	F-24	F-24
5. Substance Compatible with Tank and Piping? Yes/No		Yes	Yes	Yes	Yes
6. Tank (Mark all that apply)					
A. Manufacturer and Model	Field-constructed	Field-constructed	Field-constructed	Field-constructed	Field-constructed
B. Underwriters Laboratory No.	N/A	N/A	N/A	N/A	N/A
C. Primary Containment Material or Single-Walled Tank					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Steel	☑	☑	☑	☑	☑
iii. Other, please specify.	N/A	N/A	N/A	N/A	N/A
D. Secondary Containment Material					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Steel	☐	☐	☐	☐	☐
iii. Other, please specify.	N/A	N/A	N/A	N/A	N/A
iv. None	☑	☑	☑	☑	☑
E. Corrosion Protection (except fiberglass reinforced plastic tanks)					
i. Fiberglass coated steel	☐	☐	☐	☐	☐
ii. Double-walled steel	☐	☐	☐	☐	☐
iii. Impressed current system	☐	☐	☐	☐	☐
iv. Sacrificial anode system	☐	☐	☐	☐	☐
v. Corrosion expert determination	☐	☐	☐	☐	☐
vi. Other, please specify.	N/A	N/A	N/A	N/A	N/A
7. Piping					
A. Manufacturer and Model	Unknown	Unknown	Unknown	Unknown	Unknown
B. Underwriters Laboratory No.	Unknown	Unknown	Unknown	Unknown	Unknown

Tank Number	Tank No. F-1	Tank No. F-2	Tank No. F-3	Tank No. F-4	Tank No. F-5
C. Primary Containment Material or Single-Walled Piping					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Flex piping	☐	☐	☐	☐	☐
iii. Steel	☑	☑	☑	☑	☑
iv. Other, please specify.	Piping is above ground	Piping is above ground	Piping is above ground	Piping is above ground	Piping is above ground
D. Secondary Containment Material					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Flex piping	☐	☐	☐	☐	☐
iii. Lined trench	☐	☐	☐	☐	☐
iv. Other, please specify.	N/A	N/A	N/A	N/A	N/A
v. None	☑	☑	☑	☑	☑
E. Corrosion Protection (except fiberglass reinforced plastic piping)					
i. Fiberglass coated steel	☐	☐	☐	☐	☐
ii. Impressed current system	☐	☐	☐	☐	☐
iii. Sacrificial anode system	☐	☐	☐	☐	☐
iv. Corrosion expert determination	☐	☐	☐	☐	☐
v. Other, please specify.	N/A	N/A	N/A	N/A	N/A
8. Method of Product Dispensing					
A. Unsafe Suction (valve at tank)	☐	☐	☐	☐	☐
B. Safe Suction (no valve at tank)	☐	☐	☐	☐	☐
C. Pressure	☑	☑	☑	☑	☑
D. Not Applicable	☐	☐	☐	☐	☐
9. Spill prevention equipment	☐	☐	☐	☐	☐
A. Manufacturer and Model	N/A	N/A	N/A	N/A	N/A
B. Capacity (gallons)	N/A	N/A	N/A	N/A	N/A
10. Overfill prevention equipment	☑	☑	☑	☑	☑
A. Automatic shutoff device (flapper) Make and Model	☐	☐	☐	☐	☐
B. Overfill alarm Make and Model	☑	☑	☑	☑	☑
C. Ball float valve Make and Model	☐	☐	☐	☐	☐

Tank Number	Tank No. F-1		Tank No. F-2		Tank No. F-3		Tank No. F-4		Tank No. F-5	
11. Release Detection (Mark all that apply)	TANK	PIPE	TANK	PIPE	TANK	PIPE	TANK	PIPE	TANK	PIPE
A. Manual tank gauging	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
B. Tank tightness testing	☐	NA	☑	NA	☑	NA	☑	NA	☑	NA
C. Inventory control	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
D. Automatic tank gauging	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
E. Vapor monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
F. Groundwater monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
G. Interstitial monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
H. Statistical inventory reconciliation	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
I. Automatic line leak detectors (Yes/No)	NA	N/A	NA	N/A	NA	N/A	NA	N/A	NA	N/A
If **YES**, specify type.										
J. Line tightness testing	NA	☐	NA	☐	NA	☐	NA	☐	NA	☐
K. Other method approved by the Department. Please specify	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

X. DESCRIPTION OF DISPENSER AND UNDER DISPENSER CONTAINMENT

(Attach additional sheet if necessary.)

Dispenser Unit	Manufacturer of Dispenser	Dispenser Serial #	Under Dispenser Containment installed (Yes/No) - Installation Date
1			N/A
2			N/A
3			N/A
4			N/A
5			N/A
6			N/A
7			N/A
8			N/A
9			N/A
10			N/A
11			N/A
12			N/A

XI. TANK(S) OUT OF USE OR CHANGE IN SERVICE

Tank Number	Tank No. F-1	Tank No. F-2	Tank No. F-3	Tank No. F-4	Tank No. F-5
1. Closing of Tank A. Estimated date last used (mo./day/year)					
B. Estimated date tank closed (mo./day/year)					
C. Tank was removed from ground					
D. Tank was closed in ground					
E. Tank filled with inert material Describe					
F. Change in service					
2. Site Assessment Completed (Y/N)					
3. Evidence of a Leak Detected (Y/N)					

XII. CERTIFICATION OF COMPLIANCE FOR REPAIRS (Complete for each tank at this location)

Tank Number	Tank No. F-1	Tank No. F-2	Tank No. F-3	Tank No. F-4	Tank No. F-5
A. Date Repaired	N/A	N/A	N/A	N/A	N/A
B. Provide description of repair along with the Tank Number (Attach additional sheet if necessary.)					
C. Select one of the following: i. Installation certified by tank and piping manufacturers					
ii. Installation inspected by a registered engineer.					
iii. Manufacturer's installation checklists have been completed and documented					
iv. Another method allowed by the department. Please specify					

VII. FACILITY DRAWING

Include a drawing showing the general layout of the facility. This drawing should be no larger than 11 by 17 inches and preferably to scale. This drawing should show the following:

A. The property boundaries of the facility;
B. Identification of streets, roads and nearby bodies of water;
C. Identification of nearby facilities;
D. Tax Map Key (TMK) Numbers;
E. Location of buildings at the facility;
F. The approximate dimensions of the property boundaries and major buildings;
G. Location of all USTs and dispenser pumps (identified by number/s consistent with the tank & dispenser pump numbers in Sections IX and X), and associated pipings; and
H. Indication of North/South direction.

VIII. LOCATION MAP

Include a map showing the location of the tanks with respect to nearby landmarks. The map should indicate roads and landmarks to a level of detail such that the site would be easily located

IX. DESCRIPTION OF TANK(S) (Complete for each tank at this location)

Tank Number	Tank No. F-6	Tank No. F-7	Tank No. F-8	Tank No. F-9	Tank No. F-10
1. Status of Tank (Mark only one)					
A. Currently in Use	☑	☑	☑	☑	☑
B. Temporarily Out of Use (Also complete Section XI)	☐	☐	☐	☐	☐
C. Permanently Out of Use (Also complete Section XI)	☐	☐	☐	☐	☐
2. Date of Installation (mo/year)	12/1942	05/1943	03/1943	02/1943	01/1943
3. Estimated Capacity (gallons)	12,700,000	12,700,000	12,700,000	12,700,000	12,700,000
A. Compartmentalized? Yes/No	No	No	No	No	No
Estimated compartment capacity (gallons)					
B. Manifolded? Yes/No	No	No	No	No	No
4. Substance Currently or Last Stored in Greatest Quantity by Volume					
A. Gasoline (Specify product grade)					
B. Diesel	☐	☐	☐	☐	☐
C. Gasohol (Including ethanol blends) Specify product grade					
D. Kerosene	☐	☐	☐	☐	☐

Tank Number	Tank No. F-6	Tank No. F-7	Tank No. F-8	Tank No. F-9	Tank No. F-10
E. Used Oil/Waste Oil	☐	☐	☐	☐	☐
F. JP-4	☐	☐	☐	☐	☐
G. Non-Petroleum Hazardous Substance (CERCLA name and/or CAS #)	N/A	N/A	N/A	N/A	N/A
H. Mixture of Substances (Please specify)	N/A	N/A	N/A	N/A	N/A
I. Other, please specify.	F-24	JP-5	JP-5	JP-5	JP-5
5. Substance Compatible with Tank and Piping? Yes/No	Yes	Yes	Yes	Yes	Yes
6. Tank (Mark all that apply)					
A. Manufacturer and Model	Field-constructed	Field-constructed	Field-constructed	Field-constructed	Field-constructed
B. Underwriters Laboratory No.	N/A	N/A	N/A	N/A	N/A
C. Primary Containment Material or Single-Walled Tank					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Steel	☑	☑	☑	☑	☑
iii. Other, please specify.	N/A	N/A	N/A	N/A	N/A
D. Secondary Containment Material					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Steel	☐	☐	☐	☐	☐
iii. Other, please specify.	N/A	N/A	N/A	N/A	N/A
iv. None	☑	☑	☑	☑	☑
E. Corrosion Protection (except fiberglass reinforced plastic tanks)					
i. Fiberglass coated steel	☐	☐	☐	☐	☐
ii. Double-walled steel	☐	☐	☐	☐	☐
iii. Impressed current system	☐	☐	☐	☐	☐
iv. Sacrificial anode system	☐	☐	☐	☐	☐
v. Corrosion expert determination	☐	☐	☐	☐	☐
vi. Other, please specify.	N/A	N/A	N/A	N/A	N/A
7. Piping					
A. Manufacturer and Model	Unknown	Unknown	Unknown	Unknown	Unknown
B. Underwriters Laboratory No.	Unknown	Unknown	Unknown	Unknown	Unknown

Tank Number	Tank No. F-6	Tank No. F-7	Tank No. F-8	Tank No. F-9	Tank No. F-10
C. Primary Containment Material or Single-Walled Piping					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Flex piping	☐	☐	☐	☐	☐
iii. Steel	☑	☑	☑	☑	☑
iv. Other, please specify.	Piping is above ground	Piping is above ground	Piping is above ground	Piping is above ground	Piping is above ground
D. Secondary Containment Material					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Flex piping	☐	☐	☐	☐	☐
iii. Lined trench	☐	☐	☐	☐	☐
iv. Other, please specify.	N/A	N/A	N/A	N/A	N/A
v. None	☑	☑	☑	☑	☑
E. Corrosion Protection (except fiberglass reinforced plastic piping)					
i. Fiberglass coated steel	☐	☐	☐	☐	☐
ii. Impressed current system	☐	☐	☐	☐	☐
iii. Sacrificial anode system	☐	☐	☐	☐	☐
iv. Corrosion expert determination	☐	☐	☐	☐	☐
v. Other, please specify.	N/A	N/A	N/A	N/A	N/A
8. Method of Product Dispensing					
A. Unsafe Suction (valve at tank)	☐	☐	☐	☐	☐
B. Safe Suction (no valve at tank)	☐	☐	☐	☐	☐
C. Pressure	☑	☑	☑	☑	☑
D. Not Applicable	☐	☐	☐	☐	☐
9. Spill prevention equipment	☐	☐	☐	☐	☐
A. Manufacturer and Model	N/A	N/A	N/A	N/A	N/A
B. Capacity (gallons)	N/A	N/A	N/A	N/A	N/A
10. Overfill prevention equipment	☑	☑	☑	☑	☑
A. Automatic shutoff device (flapper) Make and Model	☐	☐	☐	☐	☐
B. Overfill alarm Make and Model	☑	☑	☑	☑	☑
C. Ball float valve Make and Model	☐	☐	☐	☐	☐

Tank Number	Tank No. F-6		Tank No. F-7		Tank No. F-8		Tank No. F-9		Tank No. F-10	
11. Release Detection (Mark all that apply)	TANK	PIPE	TANK	PIPE	TANK	PIPE	TANK	PIPE	TANK	PIPE
A. Manual tank gauging	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
B. Tank tightness testing	☑	NA	☑	NA	☑	NA	☑	NA	☑	NA
C. Inventory control	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
D. Automatic tank gauging	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
E. Vapor monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
F. Groundwater monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
G. Interstitial monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
H. Statistical inventory reconciliation	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
I. Automatic line leak detectors (Yes/No)	NA	N/A	NA	N/A	NA	N/A	NA	N/A	NA	N/A
If **YES**, specify type.										
J. Line tightness testing	NA	☐	NA	☐	NA	☐	NA	☐	NA	☐
K. Other method approved by the Department. Please specify	N/A	N/A	N/A	N/A	NA	N/A	N/A	N/A	N/A	N/A

X. DESCRIPTION OF DISPENSER AND UNDER DISPENSER CONTAINMENT

(Attach additional sheet if necessary.)

Dispenser Unit	Manufacturer of Dispenser	Dispenser Serial #	Under Dispenser Containment installed (Yes/No) - Installation Date
1			N/A
2			N/A
3			N/A
4			N/A
5			N/A
6			N/A
7			N/A
8			N/A
9			N/A
10			N/A
11			N/A
12			N/A

XI. TANK(S) OUT OF USE OR CHANGE IN SERVICE

Tank Number	Tank No. F-6	Tank No. F-7	Tank No. F-8	Tank No. F-9	Tank No. F-10
1. Closing of Tank A. Estimated date last used (mo./day/year)					
B. Estimated date tank closed (mo./day/year)					
C. Tank was removed from ground					
D. Tank was closed in ground					
E. Tank filled with inert material Describe					
F. Change in service					
2. Site Assessment Completed (Y/N)					
3. Evidence of a Leak Detected (Y/N)					

XII. CERTIFICATION OF COMPLIANCE FOR REPAIRS (Complete for each tank at this location)

Tank Number	Tank No. F-6	Tank No. F-7	Tank No. F-8	Tank No. F-9	Tank No. F-10
A. Date Repaired	N/A	N/A	N/A	N/A	N/A
B. Provide description of repair along with the Tank Number (Attach additional sheet if necessary.)					
C. Select one of the following: i. Installation certified by tank and piping manufacturers					
ii. Installation inspected by a registered engineer.					
iii. Manufacturer's installation checklists have been completed and documented					
iv. Another method allowed by the department. Please specify					

VII. FACILITY DRAWING

Include a drawing showing the general layout of the facility. This drawing should be no larger than 11 by 17 inches and preferably to scale. This drawing should show the following:

A. The property boundaries of the facility;
B. Identification of streets, roads and nearby bodies of water;
C. Identification of nearby facilities;
D. Tax Map Key (TMK) Numbers;
E. Location of buildings at the facility;
F. The approximate dimensions of the property boundaries and major buildings;
G. Location of all USTs and dispenser pumps (identified by number/s consistent with the tank & dispenser pump numbers in Sections IX and X), and associated pipings; and
H. Indication of North/South direction.

VIII. LOCATION MAP

Include a map showing the location of the tanks with respect to nearby landmarks. The map should indicate roads and landmarks to a level of detail such that the site would be easily located

IX. DESCRIPTION OF TANK(S) (Complete for each tank at this location)

Tank Number	Tank No. F-11	Tank No. F-12	Tank No. F-13	Tank No. F-14	Tank No. F-15
1. Status of Tank (Mark only one)					
A. Currently in Use	☑	☑	☐	☐	☑
B. Temporarily Out of Use (Also complete Section XI)	☐	☐	☑	☑	☐
C. Permanently Out of Use (Also complete Section XI)	☐	☐	☐	☐	☐
2. Date of Installation (mo/year)	02/1943	03/1943	03/1943	03/1943	04/1943
3. Estimated Capacity (gallons)	12,700,000	12,700,000	12,700,000	12,700,000	12,700,000
A. Compartmentalized? Yes/No	No	No	No	No	No
Estimated compartment capacity (gallons)					
B. Manifolded? Yes/No	No	No	No	No	No
4. Substance Currently or Last Stored in Greatest Quantity by Volume					
A. Gasoline (Specify product grade)					
B. Diesel	☐	☐	☐	☐	☐
C. Gasohol (Including ethanol blends) Specify product grade					
D. Kerosene	☐	☐	☐	☐	☐

Tank Number	Tank No. F-11	Tank No. F-12	Tank No. F-13	Tank No. F-14	Tank No. F-15
E. Used Oil/Waste Oil	☐	☐	☐	☐	☐
F. JP-4	☐	☐	☐	☐	☐
G. Non-Petroleum Hazardous Substance (CERCLA name and/or CAS #)	N/A	N/A	N/A	N/A	N/A
H. Mixture of Substances (Please specify)	N/A	N/A	N/A	N/A	N/A
I. Other, please specify.	JP-5	JP-5	EMPTY	EMPTY	F-76
5. Substance Compatible with Tank and Piping? Yes/No	Yes	Yes			Yes
6. Tank (Mark all that apply)					
A. Manufacturer and Model	Field-constructed	Field-constructed	Field-constructed	Field-constructed	Field-constructed
B. Underwriters Laboratory No.	N/A	N/A	N/A	N/A	N/A
C. Primary Containment Material or Single-Walled Tank					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Steel	☑	☑	☑	☑	☑
iii. Other, please specify.	N/A	N/A	N/A	N/A	N/A
D. Secondary Containment Material					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Steel	☐	☐	☐	☐	☐
iii. Other, please specify.	N/A	N/A	N/A	N/A	N/A
iv. None	☑	☑	☑	☑	☑
E. Corrosion Protection (except fiberglass reinforced plastic tanks)					
i. Fiberglass coated steel	☐	☐	☐	☐	☐
ii. Double-walled steel	☐	☐	☐	☐	☐
iii. Impressed current system	☐	☐	☐	☐	☐
iv. Sacrificial anode system	☐	☐	☐	☐	☐
v. Corrosion expert determination	☐	☐	☐	☐	☐
vi. Other, please specify.	N/A	N/A	N/A	N/A	N/A
7. Piping					
A. Manufacturer and Model	Unknown	Unknown	Unknown	Unknown	Unknown
B. Underwriters Laboratory No.	Unknown	Unknown	Unknown	Unknown	Unknown

Tank Number	Tank No. F-11	Tank No. F-12	Tank No. F-13	Tank No. F-14	Tank No. F-15
C. Primary Containment Material or Single-Walled Piping					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Flex piping	☐	☐	☐	☐	☐
iii. Steel	☑	☑	☑	☑	☑
iv. Other, please specify.	Piping is above ground	Piping is above ground	Piping is above ground	Piping is above ground	Piping is above ground
D. Secondary Containment Material					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Flex piping	☐	☐	☐	☐	☐
iii. Lined trench	☐	☐	☐	☐	☐
iv. Other, please specify.					
v. None	☑	☑	☑	☑	☑
E. Corrosion Protection (except fiberglass reinforced plastic piping)					
i. Fiberglass coated steel	☐	☐	☐	☐	☐
ii. Impressed current system	☐	☐	☐	☐	☐
iii. Sacrificial anode system	☐	☐	☐	☐	☐
iv. Corrosion expert determination	☐	☐	☐	☐	☐
v. Other, please specify.	N/A	N/A	N/A	N/A	N/A
8. Method of Product Dispensing					
A. Unsafe Suction (valve at tank)	☐	☐	☐	☐	☐
B. Safe Suction (no valve at tank)	☐	☐	☐	☐	☐
C. Pressure	☑	☑	☑	☑	☑
D. Not Applicable	☐	☐	☐	☐	☐
9. Spill prevention equipment	☐	☐	☐	☐	☐
A. Manufacturer and Model	N/A	N/A	N/A	N/A	N/A
B. Capacity (gallons)	N/A	N/A	N/A	N/A	N/A
10. Overfill prevention equipment	☑	☑	☑	☑	☑
A. Automatic shutoff device (flapper) Make and Model	☐	☐	☐	☐	☐
B. Overfill alarm Make and Model	☑	☑	☑	☑	☑
C. Ball float valve Make and Model	☐	☐	☐	☐	☐

Tank Number	Tank No. F-11		Tank No. F-12		Tank No. F-13		Tank No. F-14		Tank No. F-15	
11. Release Detection (Mark all that apply)	TANK	PIPE	TANK	PIPE	TANK	PIPE	TANK	PIPE	TANK	PIPE
A. Manual tank gauging	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
B. Tank tightness testing	☑	NA	☑	NA	☑	NA	☑	NA	☑	NA
C. Inventory control	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
D. Automatic tank gauging	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
E. Vapor monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
F. Groundwater monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
G. Interstitial monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
H. Statistical inventory reconciliation	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
I. Automatic line leak detectors (Yes/No)	NA	N/A	NA	N/A	NA	N/A	NA	N/A	NA	N/A
If **YES**, specify type.										
J. Line tightness testing	NA	☐	NA	☐	NA	☐	NA	☐	NA	☐
K. Other method approved by the Department. Please specify	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

X. DESCRIPTION OF DISPENSER AND UNDER DISPENSER CONTAINMENT

(Attach additional sheet if necessary.)

Dispenser Unit	Manufacturer of Dispenser	Dispenser Serial #	Under Dispenser Containment installed (Yes/No) - Installation Date
1			N/A
2			N/A
3			N/A
4			N/A
5			N/A
6			N/A
7			N/A
8			N/A
9			N/A
10			N/A
11			N/A
12			N/A

XI. TANK(S) OUT OF USE OR CHANGE IN SERVICE

Tank Number	Tank No. F-11	Tank No. F-12	Tank No. F-13	Tank No. F-14	Tank No. F-15
1. Closing of Tank A. Estimated date last used (mo./day/year)					
B. Estimated date tank closed (mo./day/year)					
C. Tank was removed from ground					
D. Tank was closed in ground					
E. Tank filled with inert material Describe					
F. Change in service					
2. Site Assessment Completed (Y/N)					
3. Evidence of a Leak Detected (Y/N)					

XII. CERTIFICATION OF COMPLIANCE FOR REPAIRS (Complete for each tank at this location)

Tank Number	Tank No. F-11	Tank No. F-12	Tank No. F-13	Tank No. F-14	Tank No. F-15
A. Date Repaired	N/A	N/A	N/A	N/A	N/A
B. Provide description of repair along with the Tank Number (Attach additional sheet if necessary.)					
C. Select one of the following: i. Installation certified by tank and piping manufacturers					
ii. Installation inspected by a registered engineer.					
iii. Manufacturer's installation checklists have been completed and documented					
iv. Another method allowed by the department. Please specify					

VII. FACILITY DRAWING

Include a drawing showing the general layout of the facility. This drawing should be no larger than 11 by 17 inches and preferably to scale. This drawing should show the following:

A. The property boundaries of the facility;
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C. Identification of nearby facilities;
D. Tax Map Key (TMK) Numbers;
E. Location of buildings at the facility;
F. The approximate dimensions of the property boundaries and major buildings;
G. Location of all USTs and dispenser pumps (identified by number/s consistent with the tank & dispenser pump numbers in Sections IX and X), and associated pipings; and
H. Indication of North/South direction.

VIII. LOCATION MAP

Include a map showing the location of the tanks with respect to nearby landmarks. The map should indicate roads and landmarks to a level of detail such that the site would be easily located

IX. DESCRIPTION OF TANK(S) (Complete for each tank at this location)

Tank Number	Tank No. F-16	Tank No. F-17	Tank No. F-18	Tank No. F-19	Tank No. F-20
1. Status of Tank (Mark only one)					
A. Currently in Use	☑	☐	☐	☐	☑
B. Temporarily Out of Use (Also complete Section XI)	☐	☑	☑	☑	☐
C. Permanently Out of Use (Also complete Section XI)	☐	☐	☐	☐	☐
2. Date of Installation (mo/year)	05/1943	05/1943	05/1943	06/1943	07/1943
3. Estimated Capacity (gallons)	12,700,000	12,700,000	12,700,000	12,700,000	12,700,000
A. Compartmentalized? Yes/No	No	No	No	No	No
Estimated compartment capacity (gallons)					
B. Manifolded? Yes/No	No	No	No	No	No
4. Substance Currently or Last Stored in Greatest Quantity by Volume					
A. Gasoline (Specify product grade)					
B. Diesel	☐	☐	☐	☐	☐
C. Gasohol (Including ethanol blends) Specify product grade					
D. Kerosene	☐	☐	☐	☐	☐

Tank Number	Tank No. F-16	Tank No. F-17	Tank No. F-18	Tank No. F-19	Tank No. F-20
E. Used Oil/Waste Oil	☐	☐	☐	☐	☐
F. JP-4	☐	☐	☐	☐	☐
G. Non-Petroleum Hazardous Substance (CERCLA name and/or CAS #)	N/A	N/A	N/A	N/A	N/A
H. Mixture of Substances (Please specify)	N/A	N/A	N/A	N/A	N/A
I. Other, please specify.	F-76	EMPTY	EMPTY	EMPTY	JP-5
5. Substance Compatible with Tank and Piping? Yes/No	Yes				Yes
6. Tank (Mark all that apply)					
A. Manufacturer and Model	Field-constructed	Field-constructed	Field-constructed	Field-constructed	Field-constructed
B. Underwriters Laboratory No.	N/A	N/A	N/A	N/A	N/A
C. Primary Containment Material or Single-Walled Tank					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Steel	☑	☑	☑	☑	☑
iii. Other, please specify.	N/A	N/A	N/A	N/A	N/A
D. Secondary Containment Material					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Steel	☐	☐	☐	☐	☐
iii. Other, please specify.	N/A	N/A	N/A	N/A	N/A
iv. None	☑	☑	☑	☑	☑
E. Corrosion Protection (except fiberglass reinforced plastic tanks)					
i. Fiberglass coated steel	☐	☐	☐	☐	☐
ii. Double-walled steel	☐	☐	☐	☐	☐
iii. Impressed current system	☐	☐	☐	☐	☐
iv. Sacrificial anode system	☐	☐	☐	☐	☐
v. Corrosion expert determination	☐	☐	☐	☐	☐
vi. Other, please specify.	N/A	N/A	N/A	N/A	N/A
7. Piping					
A. Manufacturer and Model	Unknown	Unknown	Unknown	Unknown	Unknown
B. Underwriters Laboratory No.	Unknown	Unknown	Unknown	Unknown	Unknown

Tank Number	Tank No. F-16	Tank No. F-17	Tank No. F-18	Tank No. F-19	Tank No. F-20
C. Primary Containment Material or Single-Walled Piping					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Flex piping	☐	☐	☐	☐	☐
iii. Steel	☑	☑	☑	☑	☑
iv. Other, please specify.	Piping is above ground	Piping is above ground	Piping is above ground	Piping is above ground	Piping is above ground
D. Secondary Containment Material					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Flex piping	☐	☐	☐	☐	☐
iii. Lined trench	☐	☐	☐	☐	☐
iv. Other, please specify.	N/A	N/A	N/A	N/A	N/A
v. None	☑	☑	☑	☑	☑
E. Corrosion Protection (except fiberglass reinforced plastic piping)					
i. Fiberglass coated steel	☐	☐	☐	☐	☐
ii. Impressed current system	☐	☐	☐	☐	☐
iii. Sacrificial anode system	☐	☐	☐	☐	☐
iv. Corrosion expert determination	☐	☐	☐	☐	☐
v. Other, please specify.	N/A	N/A	N/A	N/A	N/A
8. Method of Product Dispensing					
A. Unsafe Suction (valve at tank)	☐	☐	☐	☐	☐
B. Safe Suction (no valve at tank)	☐	☐	☐	☐	☐
C. Pressure	☑	☑	☑	☑	☑
D. Not Applicable	☐	☐	☐	☐	☐
9. Spill prevention equipment	☐	☐	☐	☐	☐
A. Manufacturer and Model	N/A	N/A	N/A	N/A	N/A
B. Capacity (gallons)	N/A	N/A	N/A	N/A	N/A
10. Overfill prevention equipment	☑	☑	☑	☑	☑
A. Automatic shutoff device (flapper) Make and Model	☐	☐	☐	☐	☐
B. Overfill alarm Make and Model	☑	☑	☑	☑	☑
C. Ball float valve Make and Model	☐	☐	☐	☐	☐

Tank Number	Tank No. F-16		Tank No. F-17		Tank No. F-18		Tank No. F-19		Tank No. F-20	
11. Release Detection (Mark all that apply)	TANK	PIPE	TANK	PIPE	TANK	PIPE	TANK	PIPE	TANK	PIPE
A. Manual tank gauging	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
B. Tank tightness testing	☑	NA	☑	NA	☑	NA	☐	NA	☑	NA
C. Inventory control	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
D. Automatic tank gauging	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
E. Vapor monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
F. Groundwater monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
G. Interstitial monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
H. Statistical inventory reconciliation	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
I. Automatic line leak detectors (Yes/No)	NA	N/A	NA	N/A	NA	N/A	NA	N/A	NA	N/A
If **YES**, specify type.										
J. Line tightness testing	NA	☐	NA	☐	NA	☐	NA	☐	NA	☐
K. Other method approved by the Department. Please specify	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

X. DESCRIPTION OF DISPENSER AND UNDER DISPENSER CONTAINMENT

(Attach additional sheet if necessary.)

Dispenser Unit	Manufacturer of Dispenser	Dispenser Serial #	Under Dispenser Containment installed (Yes/No) - Installation Date
1			N/A
2			N/A
3			N/A
4			N/A
5			N/A
6			N/A
7			N/A
8			N/A
9			N/A
10			N/A
11			N/A
12			N/A

XI. TANK(S) OUT OF USE OR CHANGE IN SERVICE

Tank Number	Tank No. F-16	Tank No. F-17	Tank No. F-18	Tank No. F-19	Tank No. F-20
1. Closing of Tank A. Estimated date last used (mo./day/year)					
B. Estimated date tank closed (mo./day/year)					
C. Tank was removed from ground					
D. Tank was closed in ground					
E. Tank filled with inert material Describe					
F. Change in service					
2. Site Assessment Completed (Y/N)			No		
3. Evidence of a Leak Detected (Y/N)			No		

XII. CERTIFICATION OF COMPLIANCE FOR REPAIRS (Complete for each tank at this location)

Tank Number	Tank No. F-16	Tank No. F-17	Tank No. F-18	Tank No. F-19	Tank No. F-20
A. Date Repaired	N/A	N/A	N/A	N/A	N/A
B. Provide description of repair along with the Tank Number (Attach additional sheet if necessary.)					
C. Select one of the following: i. Installation certified by tank and piping manufacturers					
ii. Installation inspected by a registered engineer.					
iii. Manufacturer's installation checklists have been completed and documented					
iv. Another method allowed by the department. Please specify					

VII. FACILITY DRAWING

Include a drawing showing the general layout of the facility. This drawing should be no larger than 11 by 17 inches and preferably to scale. This drawing should show the following:

A. The property boundaries of the facility;
B. Identification of streets, roads and nearby bodies of water;
C. Identification of nearby facilities;
D. Tax Map Key (TMK) Numbers;
E. Location of buildings at the facility;
F. The approximate dimensions of the property boundaries and major buildings;
G. Location of all USTs and dispenser pumps (identified by number/s consistent with the tank & dispenser pump numbers in Sections IX and X), and associated pipings; and
H. Indication of North/South direction.

VIII. LOCATION MAP

Include a map showing the location of the tanks with respect to nearby landmarks. The map should indicate roads and landmarks to a level of detail such that the site would be easily located

IX. DESCRIPTION OF TANK(S) (Complete for each tank at this location)

Tank Number	Tank No. F-ST1	Tank No. F-ST2	Tank No. F-ST3	Tank No. F-ST4	Tank No. Piping
1. Status of Tank (Mark only one)					
A. Currently in Use	☐	☑	☑	☑	☑
B. Temporarily Out of Use (Also complete Section XI)	☑	☐	☐	☐	☐
C. Permanently Out of Use (Also complete Section XI)	☐	☐	☐	☐	☐
2. Date of Installation (mo/year)	07/1942	07/1942	07/1942	07/1942	
3. Estimated Capacity (gallons)	400,000	400,000	400,000	400,000	31,665
A. Compartmentalized? Yes/No	No	No	No	No	No
Estimated compartment capacity (gallons)					
B. Manifolded? Yes/No	No	No	No	No	No
4. Substance Currently or Last Stored in Greatest Quantity by Volume					
A. Gasoline (Specify product grade)					
B. Diesel	☐	☐	☐	☐	☐
C. Gasohol (Including ethanol blends) Specify product grade					
D. Kerosene	☐	☐	☐	☐	☐

Tank Number	Tank No. F-ST1	Tank No. F-ST2	Tank No. F-ST3	Tank No. F-ST4	Tank No. Pipeli
E. Used Oil/Waste Oil	☐	☐	☐	☐	☐
F. JP-4	☐	☐	☐	☐	☐
G. Non-Petroleum Hazardous Substance (CERCLA name and/or CAS #)	N/A	N/A	N/A	N/A	N/A
H. Mixture of Substances (Please specify)	N/A	N/A	N/A	N/A	N/A
I. Other, please specify.	EMPTY	JP-5	F-24	F-76	F-24, F-76, JP-5
5. Substance Compatible with Tank and Piping? Yes/No		Yes	Yes	Yes	Yes
6. Tank (Mark all that apply)					
A. Manufacturer and Model	Field-constructed	Field-constructed	Field-constructed	Field-constructed	N/A
B. Underwriters Laboratory No.	N/A	N/A	N/A	N/A	N/A
C. Primary Containment Material or Single-Walled Tank					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Steel	☑	☑	☑	☑	☐
iii. Other, please specify.	N/A	N/A	N/A	N/A	N/A
D. Secondary Containment Material					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Steel	☐	☐	☐	☐	☐
iii. Other, please specify.	N/A	N/A	N/A	N/A	N/A
iv. None	☑	☑	☑	☑	☐
E. Corrosion Protection (except fiberglass reinforced plastic tanks)					
i. Fiberglass coated steel	☐	☐	☐	☐	☐
ii. Double-walled steel	☐	☐	☐	☐	☐
iii. Impressed current system	☐	☐	☐	☐	☐
iv. Sacrificial anode system	☐	☐	☐	☐	☐
v. Corrosion expert determination	☐	☐	☐	☐	☐
vi. Other, please specify.	N/A	N/A	N/A	N/A	N/A
7. Piping					
A. Manufacturer and Model	Unknown	Unknown	Unknown	Unknown	Unknown
B. Underwriters Laboratory No.	Unknown	Unknown	Unknown	Unknown	Unknown

Tank Number	Tank No. F-ST1	Tank No. F-ST2	Tank No. F-ST3	Tank No. F-ST4	Tank No. Pipeline
C. Primary Containment Material or Single-Walled Piping					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Flex piping	☐	☐	☐	☐	☐
iii. Steel	☑	☑	☑	☑	☑
iv. Other, please specify.	Piping is above ground	Piping is above ground	Piping is above ground	Piping is above ground	
D. Secondary Containment Material					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Flex piping	☐	☐	☐	☐	☐
iii. Lined trench	☐	☐	☐	☐	☐
iv. Other, please specify.	N/A	N/A	N/A	N/A	N/A
v. None	☑	☑	☑	☑	☑
E. Corrosion Protection (except fiberglass reinforced plastic piping)					
i. Fiberglass coated steel	☐	☐	☐	☐	☐
ii. Impressed current system	☐	☐	☐	☐	☑
iii. Sacrificial anode system	☐	☐	☐	☐	☐
iv. Corrosion expert determination	☐	☐	☐	☐	☐
v. Other, please specify.	N/A	N/A	N/A	N/A	N/A
8. Method of Product Dispensing					
A. Unsafe Suction (valve at tank)	☐	☐	☐	☐	☐
B. Safe Suction (no valve at tank)	☐	☐	☐	☐	☐
C. Pressure	☐	☐	☐	☐	☑
D. Not Applicable	☑	☑	☑	☑	☐
9. Spill prevention equipment	☐	☐	☐	☐	☐
A. Manufacturer and Model	N/A	N/A	N/A	N/A	N/A
B. Capacity (gallons)	N/A	N/A	N/A	N/A	N/A
10. Overfill prevention equipment	☑	☑	☑	☑	☐
A. Automatic shutoff device (flapper) Make and Model	☐	☐	☐	☐	☐
B. Overfill alarm Make and Model	☑	☑	☑	☑	☐
C. Ball float valve Make and Model	☐	☐	☐	☐	☐

Tank Number	Tank No. F-ST1		Tank No. F-ST2		Tank No. F-ST3		Tank No. F-ST4		Tank No. Pipe1	
11. Release Detection (Mark all that apply)	TANK	PIPE	TANK	PIPE	TANK	PIPE	TANK	PIPE	TANK	PIPE
A. Manual tank gauging	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
B. Tank tightness testing	☑	NA	☑	NA	☑	NA	☑	NA	☐	NA
C. Inventory control	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
D. Automatic tank gauging	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
E. Vapor monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
F. Groundwater monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
G. Interstitial monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
H. Statistical inventory reconciliation	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
I. Automatic line leak detectors (Yes/No)	NA	N/A	NA	N/A	NA	N/A	NA	N/A	NA	N/A
If **YES**, specify type.										
J. Line tightness testing	NA	☐	NA	☐	NA	☐	NA	☐	NA	☑
K. Other method approved by the Department. Please specify	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

X. DESCRIPTION OF DISPENSER AND UNDER DISPENSER CONTAINMENT

(Attach additional sheet if necessary.)

Dispenser Unit	Manufacturer of Dispenser	Dispenser Serial #	Under Dispenser Containment installed (Yes/No) - Installation Date
1			N/A
2			N/A
3			N/A
4			N/A
5			N/A
6			N/A
7			N/A
8			N/A
9			N/A
10			N/A
11			N/A
12			N/A

XI. TANK(S) OUT OF USE OR CHANGE IN SERVICE

Tank Number	Tank No. F-ST1	Tank No. F-ST2	Tank No. F-ST3	Tank No. F-ST4	Tank No. Pipe
1. Closing of Tank A. Estimated date last used (mo./day/year)	07/15/2020				
B. Estimated date tank closed (mo./day/year)	09/13/2020				
C. Tank was removed from ground					
D. Tank was closed in ground					
E. Tank filled with inert material Describe					
F. Change in service					
2. Site Assessment Completed (Y/N)	No				
3. Evidence of a Leak Detected (Y/N)	No				

XII. CERTIFICATION OF COMPLIANCE FOR REPAIRS (Complete for each tank at this location)

Tank Number	Tank No. F-ST1	Tank No. F-ST2	Tank No. F-ST3	Tank No. F-ST4	Tank No. Pipe
A. Date Repaired	N/A	N/A	08/17/2020	N/A	N/A
B. Provide description of repair along with the Tank Number (Attach additional sheet if necessary.) Tank F-ST3: Contractor completed a comprehensive out-of-service integrity inspection and repair of Surge Tank 3. Completed internal repairs included new steel floor, one shell patch plate and new stilling well and drain line. Installation of new steel floor included geotextile fabric, flexible membrane liner, and concrete infill, which was slotted to create a leak detection system. Based on inspection of the repairs and review of documentation of the repairs, the Engineer of Record determined Surge Tank 3 is suitable to return to service, as specified in the Contractor's Suitability for Service Testament (attached). Leak detection testing of Surge Tank 3 was performed, with no detectable leak above test method's minimum detectable leak rate, resulting in a passing test. The leak detection testing conducted meets the regulatory requirements in HAR 11-280.1-43(10). The Executive Summary of the 2020 Annual Leak Detection Testing Report of Bulk Field-Constructed Surge Tank 3 is attached.					
C. Select one of the following: i. Installation certified by tank and piping manufacturers	N/A	N/A	N/A	N/A	N/A
ii. Installation inspected by a registered engineer.	N/A	N/A	Yes	N/A	N/A
iii. Manufacturer's installation checklists have been completed and documented	N/A	N/A	N/A	N/A	N/A
iv. Another method allowed by the department. Please specify	N/A	N/A	N/A	N/A	N/A

VII. FACILITY DRAWING

Include a drawing showing the general layout of the facility. This drawing should be no larger than 11 by 17 inches and preferably to scale. This drawing should show the following:

A. The property boundaries of the facility;
B. Identification of streets, roads and nearby bodies of water;
C. Identification of nearby facilities;
D. Tax Map Key (TMK) Numbers;
E. Location of buildings at the facility;
F. The approximate dimensions of the property boundaries and major buildings;
G. Location of all USTs and dispenser pumps (identified by number/s consistent with the tank & dispenser pump numbers in Sections IX and X), and associated pipings; and
H. Indication of North/South direction.

VIII. LOCATION MAP

Include a map showing the location of the tanks with respect to nearby landmarks. The map should indicate roads and landmarks to a level of detail such that the site would be easily located

IX. DESCRIPTION OF TANK(S) (Complete for each tank at this location)

Tank Number	Tank No. PRT	Tank No. PRT	Tank No. Diam	Tank No. Ewa	Tank No. ____
1. Status of Tank (Mark only one)					
A. Currently in Use	☑	☑	☑	☑	☐
B. Temporarily Out of Use (Also complete Section XI)	☐	☐	☐	☐	☐
C. Permanently Out of Use (Also complete Section XI)	☐	☐	☐	☐	☐
2. Date of Installation (mo/year)	07/2010	05/2006	09/2011	06/2006	
3. Estimated Capacity (gallons)	2,000	4,000	59,500	236,579	
A. Compartmentalized? Yes/No	No	No	No	No	
Estimated compartment capacity (gallons)					
B. Manifolded? Yes/No	No	No	No	No	
4. Substance Currently or Last Stored in Greatest Quantity by Volume					
A. Gasoline (Specify product grade)					
B. Diesel	☐	☐	☐	☐	☐
C. Gasohol (Including ethanol blends) Specify product grade					
D. Kerosene	☐	☐	☐	☐	☐

Tank Number	Tank No. PRT-5	Tank No. PRT-6	Tank No. Diamond	Tank No. Ewa Pier	Tank No. ____
E. Used Oil/Waste Oil	☐	☐	☐	☐	☐
F. JP-4	☐	☐	☐	☐	☐
G. Non-Petroleum Hazardous Substance (CERCLA name and/or CAS #)	N/A	N/A	N/A	N/A	
H. Mixture of Substances (Please specify)	N/A	N/A	N/A	N/A	
I. Other, please specify.	F-24	F-24	F-24	F-24	
5. Substance Compatible with Tank and Piping? Yes/No	Yes	Yes	Yes	Yes	
6. Tank (Mark all that apply)					
A. Manufacturer and Model	Steel Tank Institute/STI-P3	Steel Tank Institute/STI-P3	N/A	N/A	
B. Underwriters Laboratory No.	UL-58	UL-58	N/A	N/A	
C. Primary Containment Material or Single-Walled Tank					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Steel	☑	☑	☐	☐	☐
iii. Other, please specify.	N/A	N/A	N/A	N/A	
D. Secondary Containment Material					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Steel	☑	☑	☐	☐	☐
iii. Other, please specify.	N/A	N/A	N/A	N/A	
iv. None	☐	☐	☐	☐	☐
E. Corrosion Protection (except fiberglass reinforced plastic tanks)					
i. Fiberglass coated steel	☐	☐	☐	☐	☐
ii. Double-walled steel	☑	☑	☐	☐	☐
iii. Impressed current system	☑	☑	☐	☐	☐
iv. Sacrificial anode system	☐	☐	☐	☐	☐
v. Corrosion expert determination	☐	☐	☐	☐	☐
vi. Other, please specify.	N/A	N/A	N/A	N/A	
7. Piping					
A. Manufacturer and Model	Unknown	Unknown	Unknown	Unknown	
B. Underwriters Laboratory No.	Unknown	Unknown	Unknown	Unknown	

Tank Number	Tank No. PRT-5	Tank No. PRT-6	Tank No. Diamond	Tank No. Ewa Beach	Tank No.
C. Primary Containment Material or Single-Walled Piping					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Flex piping	☐	☐	☐	☐	☐
iii. Steel	☑	☑	☑	☑	☐
iv. Other, please specify.	N/A	N/A	N/A	N/A	
D. Secondary Containment Material					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Flex piping	☐	☐	☐	☐	☐
iii. Lined trench	☑	☑	☐	☐	☐
iv. Other, please specify.	N/A	N/A	N/A	N/A	
v. None	☐	☐	☑	☑	☐
E. Corrosion Protection (except fiberglass reinforced plastic piping)					
i. Fiberglass coated steel	☐	☐	☐	☐	☐
ii. Impressed current system	☑	☑	☑	☑	☐
iii. Sacrificial anode system	☐	☐	☐	☐	☐
iv. Corrosion expert determination	☐	☐	☐	☐	☐
v. Other, please specify.	N/A	N/A	N/A	N/A	
8. Method of Product Dispensing					
A. Unsafe Suction (valve at tank)	☐	☐	☐	☐	☐
B. Safe Suction (no valve at tank)	☐	☐	☐	☐	☐
C. Pressure	☐	☐	☑	☑	☐
D. Not Applicable	☑	☑	☐	☐	☐
9. Spill prevention equipment	☐	☐	☐	☐	☐
A. Manufacturer and Model	N/A	N/A	N/A	N/A	
B. Capacity (gallons)	N/A	N/A	N/A	N/A	
10. Overfill prevention equipment	☑	☑	☐	☐	☐
A. Automatic shutoff device (flapper) Make and Model	☐	☐	☐	☐	☐
B. Overfill alarm Make and Model	☑ Veeder-Root TLS-350 PLUS	☑ Veeder-Root TLS-350 PLUS	☐	☐	☐
C. Ball float valve Make and Model	☐	☐	☐	☐	☐

Tank Number	Tank No. PRT-1		Tank No. PRT-2		Tank No. Diamond		Tank No. Ewa Beach		Tank No. ____	
11. Release Detection (Mark all that apply)	TANK	PIPE	TANK	PIPE	TANK	PIPE	TANK	PIPE	TANK	PIPE
A. Manual tank gauging	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
B. Tank tightness testing	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
C. Inventory control	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
D. Automatic tank gauging	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
E. Vapor monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
F. Groundwater monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
G. Interstitial monitoring	☑	☐	☑	☐	☐	☐	☐	☐	☐	☐
H. Statistical inventory reconciliation	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
I. Automatic line leak detectors (Yes/No)	NA	N/A	NA	N/A	NA	N/A	NA	N/A	NA	N/A
If **YES**, specify type.										
J. Line tightness testing	NA	☑	NA	☑	NA	☑	NA	☑	NA	☐
K. Other method approved by the Department. Please specify	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A		

X. DESCRIPTION OF DISPENSER AND UNDER DISPENSER CONTAINMENT

(Attach additional sheet if necessary.)

Dispenser Unit	Manufacturer of Dispenser	Dispenser Serial #	Under Dispenser Containment installed (Yes/No) - Installation Date
1			N/A
2			N/A
3			N/A
4			N/A
5			N/A
6			N/A
7			N/A
8			N/A
9			N/A
10			N/A
11			N/A
12			N/A

Facility ID No. 9-102271

XI. TANK(S) OUT OF USE OR CHANGE IN SERVICE

Tank Number	Tank No. PRT-5	Tank No. PRT-6	Tank No. Diam	Tank No. Ewa	Tank No. ____
1. Closing of Tank A. Estimated date last used (mo./day/year)					
B. Estimated date tank closed (mo./day/year)					
C. Tank was removed from ground					
D. Tank was closed in ground					
E. Tank filled with inert material Describe					
F. Change in service					
2. Site Assessment Completed (Y/N)					
3. Evidence of a Leak Detected (Y/N)					

XII. CERTIFICATION OF COMPLIANCE FOR REPAIRS (Complete for each tank at this location)

Tank Number	Tank No. PRT-5	Tank No. PRT-6	Tank No. Diam	Tank No. Ewa	Tank No. ____
A. Date Repaired	N/A	N/A	N/A	N/A	
B. Provide description of repair along with the Tank Number (Attach additional sheet if necessary.)					
C. Select one of the following: i. Installation certified by tank and piping manufacturers					
ii. Installation inspected by a registered engineer.					
iii. Manufacturer's installation checklists have been completed and documented					
iv. Another method allowed by the department. Please specify					

Facility ID No. 9-102271

XIII. CERTIFICATION (Read and sign after completing all sections)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

(b) (6)	Regional Environmental Program Director
Print or Ty[redacted]zed representative	Official Title
(b) (6)	15 Sept 2020
Signature	Date Signed

Status of Signatory (Mark as appropriate)

1. Corporation:
   - ☐ principal executive officer
   - ☐ duly authorized representative
2. Partnership:
   - ☐ general partner
3. Sole proprietorship:
   - ☐ proprietor
4. Government entity:
   - ☐ principal executive officer
   - ☐ ranking elected official

ENTERPRISE
ENGINEERING, INC.

SUITABILITY FOR SERVICE TESTAMENT
SURGE TANK 3 (FACILITY NO. 1226)

Enterprise Engineering Inc. (EEI), under contract to APTIM (NAVFAC EXWC Contract No. N39430-15-D-1632, Task Order 3974318F4132), completed a comprehensive, out-of-service external and internal integrity inspection and suitability for service evaluation of Surge Tank 3 at NAVSUP FLC Pearl Harbor, Hawaii. The out-of-service inspection was performed September 25 through October 3, 2019. Subsequently, APTIM completed repairs identified in the Statement of Work and EEI's Final Condition Assessment Report (Pre-Repair) dated December 2019.

EEI performed a post-repair inspection of Tank 3 on June 23, 2020. The inspection determined repairs are complete and in accordance with the repair design documents. This report provides a summary of the repairs identified in EEI's Final Condition Assessment Report (Pre-Repair), the status of repairs, a revised DLA-E Tank Condition Form (Post-Repair), and the Final Condition Assessment Report (Pre-Repair).

EEI recommends the next internal out-of-service inspection be scheduled no later than June 2030 (10 years after the June 2020 inspection), or sooner if a change in condition has occurred.

Based on the inspection of the repairs and review of the repair documentation, EEI has determined Tank 3 is suitable to return to service

POST-REPAIR

(b) (4), P.E.
API 653 AST Inspector Certificate No. (b) (4)

July 22, 2020
Date

(b) (4)

(b) (4)
API 653 AST Inspector Certificate No. (b) (4)

July 21, 2020
Date

ENCLOSURE(2)

[redacted]

[redacted]

APTIM | Government Services
12005 Ford Road; Suite 600
Dallas, TX 75234

FISC Red Hill
Pearl Harbor, HI

[redacted]

[redacted]

Scope of Work: Furnish all required management, labor, services, materials and equipment to perform the required annual tightness testing of Tank S1226 (Surge 3) an underground fuel storage tank located at FISC Red Hill, Pearl Harbor, HI.

[redacted]

Date: 8-24-2020

Summary

Testing of Tank S1226 (Surge 3) a 420,000 gal underground storage tank located at FISC Red Hill, Pearl Harbor, Hawaii commenced August 11, 2020 and was completed August 14, 2020. The result of that testing is that the tank system is determined to be tight to isolation. Testing was performed using the [redacted] protocols set out in the third party evaluations. All tank valves were adequately secured such that any fluid loss was isolated to leakage. Therefore, the containment integrity of the tank was not compromised and the test is considered conclusive.

Tank S1226 (Surge 3): After 72 hours of testing the tank is certified to be tight.

[redacted]

ENCLOSURE(3)

5000-45A
N45
July 16, 2021

Enclosures: 1. DOH Form No. 1, Notification for Underground Storage Tanks for Red Hill Bulk Fuel Storage Facility, JBPHH, Oahu, DOH Facility ID No. 9-102271
2. Suitability for Service Testament for Surge Tank 1 (Facility No. 1224), prepared by Enterprise Engineering, Inc., April 28, 2021
3. Tank Tightness Test Summary, June 19, 2021 (Redacted)

Copy to:
U.S. Environmental Protection Agency Region 9
Commander, Navy Region Hawaii
Naval Facilities Engineering Systems Command, Hawaii
U.S. Naval Supply Systems Command Fleet Logistics Center Pearl Harbor

JUL 2 2 2021

SOLID AND HAZARDOUS WASTE BRANCH
Underground Storage Tank Program
2827 Waimano Home Road #100 • Pearl City, Hawaii 96782
Phone: 808 - 586- 4226 • Fax: 808-586-7509 • http://www.hawaii.gov/health/environmental/waste/ust

NOTIFICATION FOR UNDERGROUND STORAGE TANKS

Return completed form to:

Solid and Hazardous Waste Branch
Underground Storage Tank Program
2827 Waimano Home Road #100
Pearl City, Hawaii 96782

Facility ID Number: 9-102271

Permit Number:

Type of Notification/s: (Check all that apply)

- [x] **UST Status Change (temporary or permanent closure or return to use)**
- [ ] **Change in Piping**
- [ ] **Change in Spill and/or Overfill Prevention Method**
- [ ] **Change in Release Detection Method**
- [ ] **Change in Financial Responsibility Mechanism**
- [ ] **Other:**

Date Activity Occurred: 06/19/2021 (F-ST1)

State Use Only

Date received:

Date Entered into Computer:

Data Clerk's Initials:

Comments:

I. LOCATION OF TANK(S)

Facility Name or Company Site identifiers	Location Contact Person
Red Hill Bulk Fuel Storage Facility	(b) (6)

Location Address (P.O. Box not acceptable)	City	State	Zip Code	Island	Tax Map Key #
Red Hill	Aiea	Hawaii	96701	Oahu	99010006, 99010001, 11012003, 11012004

Location Phone # (w/ area code)	Location Fax # (w/ area code)
(808)473-7801	(808)473-7815

II. CONTACT PERSON IN CHARGE OF TANK(S)

Name	Job / Position Title
(b) (6)	Deputy Fuels Director

Mailing Address	City	State	Zip Code
1942 Gaffney Street, (b) (6)	JBPHH	HI	96860

Phone # (w/ area code)	Fax # (w/ area code)	E-mail Address
(b) (6)	(808)473-7815	(b) (6)

ENCLOSURE(/)

Facility ID No. 9-102271

III. OWNER OF TANK(S)

US Navy - COMNAVREG HI
Owner Name (Corporation, Individual, Public Agency, or Other Entity)

850 Ticonderoga Street, Suite 110	JBPHH	HI	96860
Mailing Address	City	State	Zip Code

(808)471-3926	(808)473-5024	james.meyer@navy.mil
Phone # (w/ area code)	Fax # (w/ area code)	E-mail Address

IV. OPERATOR OF TANK(S) (if same as Section III, check here ☐)

Naval Supply Systems Command Fleet Logistics Center Pearl Harbor
Operator Name (Corporation, Individual, Public Agency, or Other Entity)

1942 Gaffney Street, [redacted] (b) (6)	JBPHH	HI	96860
Mailing Address	City	State	Zip Code

(b) (6)	(808)473-7815	(b) (6)
Phone # (w/ area code)	Fax # (w/ area code)	E-mail Address

V. TYPE OF FACILITY (Select the appropriate facility description)

☐ Airline	☐ Contractor	☐ Petroleum Distributor	☐ Service Centers/Auto Repair/Maintenance
☐ Auto Dealership	☐ Farm	☐ Police Station	☐ Trucking/Transporter
☐ Baseyard	☐ Fire Station	☐ Residential	☐ Utilities
☐ Car Rental	☐ Gas Station	☐ Resort/Hotel	☐ Wastewater Treatment Plants
☐ Cleaner/Laundromat	☐ Golf Course	☐ School	☐ Wholesaler/Retailer
☐ Communication Sites	☐ Hospital	☑ Other (Explain) Fuel Storage and Airfield Hydrant System	

VI. FINANCIAL RESPONSIBILITY (Check all that apply)

☐ Commercial Insurance	☐ Letter of Credit	☐ Local Government Bond Rating Test
☐ Financial Test of Self Insurance	☐ Surety Bond	☐ Other Method Allowed (Specify) _____
☐ Guarantee	☐ Trust Fund	☑ Exempt: ☐ State or ☑ Federal Agency

Checking one or more of the above boxes attests to the fact that the financial responsibility requirements in subchapter 8 of chapter 11-280.1, Hawaii Administrative Rules, are met using the selected mechanism(s) as of the date of the certification below.

VII. FACILITY DRAWING

Include a drawing showing the general layout of the facility. This drawing should be no larger than 11 by 17 inches and preferably to scale. This drawing should show the following:

A. The property boundaries of the facility;
B. Identification of streets, roads and nearby bodies of water;
C. Identification of nearby facilities;
D. Tax Map Key (TMK) Numbers;
E. Location of buildings at the facility;
F. The approximate dimensions of the property boundaries and major buildings;
G. Location of all USTs and dispenser pumps (identified by number/s consistent with the tank & dispenser pump numbers in Sections IX and X), and associated pipings; and
H. Indication of North/South direction.

VIII. LOCATION MAP

Include a map showing the location of the tanks with respect to nearby landmarks. The map should indicate roads and landmarks to a level of detail such that the site would be easily located

IX. DESCRIPTION OF TANK(S) (Complete for each tank at this location)

Tank Number	Tank No. F-1	Tank No. F-2	Tank No. F-3	Tank No. F-4	Tank No. F-5
1. Status of Tank (Mark only one)					
A. Currently in Use	☐	☑	☑	☑	☑
B. Temporarily Out of Use (Also complete Section XI)	☑	☐	☐	☐	☐
C. Permanently Out of Use (Also complete Section XI)	☐	☐	☐	☐	☐
2. Date of Installation (mo/year)	10/1942	09/1942	01/1943	11/1942	12/1942
3. Estimated Capacity (gallons)	12,000,000	12,000,000	12,000,000	12,000,000	12,700,000
A. Compartmentalized? Yes/No	No	No	No	No	No
Estimated compartment capacity (gallons)					
B. Manifolded? Yes/No	No	No	No	No	No
4. Substance Currently or Last Stored in Greatest Quantity by Volume					
A. Gasoline (Specify product grade)					
B. Diesel	☐	☐	☐	☐	☐
C. Gasohol (Including ethanol blends) Specify product grade					
D. Kerosene	☐	☐	☐	☐	☐

Tank Number	Tank No. F-1	Tank No. F-2	Tank No. F-3	Tank No. F-4	Tank No. F-5
E. Used Oil/Waste Oil	☐	☐	☐	☐	☐
F. JP-4	☐	☐	☐	☐	☐
G. Non-Petroleum Hazardous Substance (CERCLA name and/or CAS #)	N/A	N/A	N/A	N/A	N/A
H. Mixture of Substances (Please specify)	N/A	N/A	N/A	N/A	N/A
I. Other, please specify.	EMPTY	F-24	F-24	F-24	F-24
5. Substance Compatible with Tank and Piping? Yes/No		Yes	Yes	Yes	Yes
6. Tank (Mark all that apply)					
A. Manufacturer and Model	Field-constructed	Field-constructed	Field-constructed	Field-constructed	Field-constructed
B. Underwriters Laboratory No.	N/A	N/A	N/A	N/A	N/A
C. Primary Containment Material or Single-Walled Tank					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Steel	☑	☑	☑	☑	☑
iii. Other, please specify.	N/A	N/A	N/A	N/A	N/A
D. Secondary Containment Material					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Steel	☐	☐	☐	☐	☐
iii. Other, please specify.	N/A	N/A	N/A	N/A	N/A
iv. None	☑	☑	☑	☑	☑
E. Corrosion Protection (except fiberglass reinforced plastic tanks)					
i. Fiberglass coated steel	☐	☐	☐	☐	☐
ii. Double-walled steel	☐	☐	☐	☐	☐
iii. Impressed current system	☐	☐	☐	☐	☐
iv. Sacrificial anode system	☐	☐	☐	☐	☐
v. Corrosion expert determination	☐	☐	☐	☐	☐
vi. Other, please specify.	N/A	N/A	N/A	N/A	N/A
7. Piping					
A. Manufacturer and Model	Unknown	Unknown	Unknown	Unknown	Unknown
B. Underwriters Laboratory No.	Unknown	Unknown	Unknown	Unknown	Unknown

Tank Number	Tank No. F-1	Tank No. F-2	Tank No. F-3	Tank No. F-4	Tank No. F-5
C. Primary Containment Material or Single-Walled Piping					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Flex piping	☐	☐	☐	☐	☐
iii. Steel	☑	☑	☑	☑	☑
iv. Other, please specify.	Piping is above ground	Piping is above ground	Piping is above ground	Piping is above ground	Piping is above ground
D. Secondary Containment Material					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Flex piping	☐	☐	☐	☐	☐
iii. Lined trench	☐	☐	☐	☐	☐
iv. Other, please specify.	N/A	N/A	N/A	N/A	N/A
v. None	☑	☑	☑	☑	☑
E. Corrosion Protection (except fiberglass reinforced plastic piping)					
i. Fiberglass coated steel	☐	☐	☐	☐	☐
ii. Impressed current system	☐	☐	☐	☐	☐
iii. Sacrificial anode system	☐	☐	☐	☐	☐
iv. Corrosion expert determination	☐	☐	☐	☐	☐
v. Other, please specify.	N/A	N/A	N/A	N/A	N/A
8. Method of Product Dispensing					
A. Unsafe Suction (valve at tank)	☐	☐	☐	☐	☐
B. Safe Suction (no valve at tank)	☐	☐	☐	☐	☐
C. Pressure	☑	☑	☑	☑	☑
D. Not Applicable	☐	☐	☐	☐	☐
9. Spill prevention equipment	☐	☐	☐	☐	☐
A. Manufacturer and Model	N/A	N/A	N/A	N/A	N/A
B. Capacity (gallons)	N/A	N/A	N/A	N/A	N/A
10. Overfill prevention equipment	☑	☑	☑	☑	☑
A. Automatic shutoff device (flapper) Make and Model	☐	☐	☐	☐	☐
B. Overfill alarm Make and Model	☑	☑	☑	☑	☑
C. Ball float valve Make and Model	☐	☐	☐	☐	☐

Tank Number	Tank No. F-1		Tank No. F-2		Tank No. F-3		Tank No. F-4		Tank No. F-5	
11. Release Detection (Mark all that apply)	TANK	PIPE	TANK	PIPE	TANK	PIPE	TANK	PIPE	TANK	PIPE
A. Manual tank gauging	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
B. Tank tightness testing	☐	NA	☑	NA	☑	NA	☑	NA	☑	NA
C. Inventory control	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
D. Automatic tank gauging	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
E. Vapor monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
F. Groundwater monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
G. Interstitial monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
H. Statistical inventory reconciliation	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
I. Automatic line leak detectors (Yes/No)	NA	N/A	NA	N/A	NA	N/A	NA	N/A	NA	N/A
If **YES**, specify type.										
J. Line tightness testing	NA	☐	NA	☐	NA	☐	NA	☐	NA	☐
K. Other method approved by the Department. Please specify	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

X. DESCRIPTION OF DISPENSER AND UNDER DISPENSER CONTAINMENT

(Attach additional sheet if necessary.)

Dispenser Unit	Manufacturer of Dispenser	Dispenser Serial #	Under Dispenser Containment installed (Yes/No) - Installation Date
1			N/A
2			N/A
3			N/A
4			N/A
5			N/A
6			N/A
7			N/A
8			N/A
9			N/A
10			N/A
11			N/A
12			N/A

XI. TANK(S) OUT OF USE OR CHANGE IN SERVICE

Tank Number	Tank No. F-1	Tank No. F-2	Tank No. F-3	Tank No. F-4	Tank No. F-5
1. Closing of Tank A. Estimated date last used (mo./day/year)					
B. Estimated date tank closed (mo./day/year)					
C. Tank was removed from ground					
D. Tank was closed in ground					
E. Tank filled with inert material Describe					
F. Change in service					
2. Site Assessment Completed (Y/N)					
3. Evidence of a Leak Detected (Y/N)					

XII. CERTIFICATION OF COMPLIANCE FOR REPAIRS (Complete for each tank at this location)

Tank Number	Tank No. F-1	Tank No. F-2	Tank No. F-3	Tank No. F-4	Tank No. F-5
A. Date Repaired	N/A	N/A	N/A	N/A	N/A
B. Provide description of repair along with the Tank Number (Attach additional sheet if necessary.)					
C. Select one of the following: i. Installation certified by tank and piping manufacturers					
ii. Installation inspected by a registered engineer.					
iii. Manufacturer's installation checklists have been completed and documented					
iv. Another method allowed by the department. Please specify					

VII. FACILITY DRAWING

Include a drawing showing the general layout of the facility. This drawing should be no larger than 11 by 17 inches and preferably to scale. This drawing should show the following:

A. The property boundaries of the facility;
B. Identification of streets, roads and nearby bodies of water;
C. Identification of nearby facilities;
D. Tax Map Key (TMK) Numbers;
E. Location of buildings at the facility;
F. The approximate dimensions of the property boundaries and major buildings;
G. Location of all USTs and dispenser pumps (identified by number/s consistent with the tank & dispenser pump numbers in Sections IX and X), and associated pipings; and
H. Indication of North/South direction.

VIII. LOCATION MAP

Include a map showing the location of the tanks with respect to nearby landmarks. The map should indicate roads and landmarks to a level of detail such that the site would be easily located

IX. DESCRIPTION OF TANK(S) (Complete for each tank at this location)

Tank Number	Tank No. F-6	Tank No. F-7	Tank No. F-8	Tank No. F-9	Tank No. F-10
1. Status of Tank (Mark only one)					
A. Currently in Use	☑	☑	☑	☑	☑
B. Temporarily Out of Use (Also complete Section XI)	☐	☐	☐	☐	☐
C. Permanently Out of Use (Also complete Section XI)	☐	☐	☐	☐	☐
2. Date of Installation (mo/year)	12/1942	05/1943	03/1943	02/1943	01/1943
3. Estimated Capacity (gallons)	12,700,000	12,700,000	12,700,000	12,700,000	12,700,000
A. Compartmentalized? Yes/No	No	No	No	No	No
Estimated compartment capacity (gallons)					
B. Manifolded? Yes/No	No	No	No	No	No
4. Substance Currently or Last Stored in Greatest Quantity by Volume					
A. Gasoline (Specify product grade)					
B. Diesel	☐	☐	☐	☐	☐
C. Gasohol (Including ethanol blends) Specify product grade					
D. Kerosene	☐	☐	☐	☐	☐

Tank Number	Tank No. F-6	Tank No. F-7	Tank No. F-8	Tank No. F-9	Tank No. F-10
E. Used Oil/Waste Oil	☐	☐	☐	☐	☐
F. JP-4	☐	☐	☐	☐	☐
G. Non-Petroleum Hazardous Substance (CERCLA name and/or CAS #)	N/A	N/A	N/A	N/A	N/A
H. Mixture of Substances (Please specify)	N/A	N/A	N/A	N/A	N/A
I. Other, please specify.	F-24	JP-5	JP-5	JP-5	JP-5
5. Substance Compatible with Tank and Piping? Yes/No	Yes	Yes	Yes	Yes	Yes
6. Tank (Mark all that apply)					
A. Manufacturer and Model	Field-constructed	Field-constructed	Field-constructed	Field-constructed	Field-constructed
B. Underwriters Laboratory No.	N/A	N/A	N/A	N/A	N/A
C. Primary Containment Material or Single-Walled Tank					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Steel	☑	☑	☑	☑	☑
iii. Other, please specify.	N/A	N/A	N/A	N/A	N/A
D. Secondary Containment Material					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Steel	☐	☐	☐	☐	☐
iii. Other, please specify.	N/A	N/A	N/A	N/A	N/A
iv. None	☑	☑	☑	☑	☑
E. Corrosion Protection (except fiberglass reinforced plastic tanks)					
i. Fiberglass coated steel	☐	☐	☐	☐	☐
ii. Double-walled steel	☐	☐	☐	☐	☐
iii. Impressed current system	☐	☐	☐	☐	☐
iv. Sacrificial anode system	☐	☐	☐	☐	☐
v. Corrosion expert determination	☐	☐	☐	☐	☐
vi. Other, please specify.	N/A	N/A	N/A	N/A	N/A
7. Piping					
A. Manufacturer and Model	Unknown	Unknown	Unknown	Unknown	Unknown
B. Underwriters Laboratory No.	Unknown	Unknown	Unknown	Unknown	Unknown

Tank Number	Tank No. F-6	Tank No. F-7	Tank No. F-8	Tank No. F-9	Tank No. F-10
C. Primary Containment Material or Single-Walled Piping					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Flex piping	☐	☐	☐	☐	☐
iii. Steel	☑	☑	☑	☑	☑
iv. Other, please specify.	Piping is above ground	Piping is above ground	Piping is above ground	Piping is above ground	Piping is above ground
D. Secondary Containment Material					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Flex piping	☐	☐	☐	☐	☐
iii. Lined trench	☐	☐	☐	☐	☐
iv. Other, please specify.	N/A	N/A	N/A	N/A	N/A
v. None	☑	☑	☑	☑	☑
E. Corrosion Protection (except fiberglass reinforced plastic piping)					
i. Fiberglass coated steel	☐	☐	☐	☐	☐
ii. Impressed current system	☐	☐	☐	☐	☐
iii. Sacrificial anode system	☐	☐	☐	☐	☐
iv. Corrosion expert determination	☐	☐	☐	☐	☐
v. Other, please specify.	N/A	N/A	N/A	N/A	N/A
8. Method of Product Dispensing					
A. Unsafe Suction (valve at tank)	☐	☐	☐	☐	☐
B. Safe Suction (no valve at tank)	☐	☐	☐	☐	☐
C. Pressure	☑	☑	☑	☑	☑
D. Not Applicable	☐	☐	☐	☐	☐
9. Spill prevention equipment	☐	☐	☐	☐	☐
A. Manufacturer and Model	N/A	N/A	N/A	N/A	N/A
B. Capacity (gallons)	N/A	N/A	N/A	N/A	N/A
10. Overfill prevention equipment	☑	☑	☑	☑	☑
A. Automatic shutoff device (flapper) Make and Model	☐	☐	☐	☐	☐
B. Overfill alarm Make and Model	☑	☑	☑	☑	☑
C. Ball float valve Make and Model	☐	☐	☐	☐	☐

Tank Number	Tank No. F-6		Tank No. F-7		Tank No. F-8		Tank No. F-9		Tank No. F-10	
11. Release Detection (Mark all that apply)	TANK	PIPE	TANK	PIPE	TANK	PIPE	TANK	PIPE	TANK	PIPE
A. Manual tank gauging	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
B. Tank tightness testing	☑	NA	☑	NA	☑	NA	☑	NA	☑	NA
C. Inventory control	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
D. Automatic tank gauging	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
E. Vapor monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
F. Groundwater monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
G. Interstitial monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
H. Statistical inventory reconciliation	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
I. Automatic line leak detectors (Yes/No)	NA	N/A	NA	N/A	NA	N/A	NA	N/A	NA	N/A
If **YES**, specify type.										
J. Line tightness testing	NA	☐	NA	☐	NA	☐	NA	☐	NA	☐
K. Other method approved by the Department. Please specify	N/A	N/A	N/A	N/A	NA	N/A	N/A	N/A	N/A	N/A

X. DESCRIPTION OF DISPENSER AND UNDER DISPENSER CONTAINMENT

(Attach additional sheet if necessary.)

Dispenser Unit	Manufacturer of Dispenser	Dispenser Serial #	Under Dispenser Containment installed (Yes/No) - Installation Date
1			N/A
2			N/A
3			N/A
4			N/A
5			N/A
6			N/A
7			N/A
8			N/A
9			N/A
10			N/A
11			N/A
12			N/A

XI. TANK(S) OUT OF USE OR CHANGE IN SERVICE

Tank Number	Tank No. F-6	Tank No. F-7	Tank No. F-8	Tank No. F-9	Tank No. F-10
1. Closing of Tank A. Estimated date last used (mo./day/year)					
B. Estimated date tank closed (mo./day/year)					
C. Tank was removed from ground					
D. Tank was closed in ground					
E. Tank filled with inert material Describe					
F. Change in service					
2. Site Assessment Completed (Y/N)					
3. Evidence of a Leak Detected (Y/N)					

XII. CERTIFICATION OF COMPLIANCE FOR REPAIRS (Complete for each tank at this location)

Tank Number	Tank No. F-6	Tank No. F-7	Tank No. F-8	Tank No. F-9	Tank No. F-10
A. Date Repaired	N/A	N/A	N/A	N/A	N/A
B. Provide description of repair along with the Tank Number (Attach additional sheet if necessary.)					
C. Select one of the following: i. Installation certified by tank and piping manufacturers					
ii. Installation inspected by a registered engineer.					
iii. Manufacturer's installation checklists have been completed and documented					
iv. Another method allowed by the department. Please specify					

VII. FACILITY DRAWING

Include a drawing showing the general layout of the facility. This drawing should be no larger than 11 by 17 inches and preferably to scale. This drawing should show the following:

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C. Identification of nearby facilities;
D. Tax Map Key (TMK) Numbers;
E. Location of buildings at the facility;
F. The approximate dimensions of the property boundaries and major buildings;
G. Location of all USTs and dispenser pumps (identified by number/s consistent with the tank & dispenser pump numbers in Sections IX and X), and associated pipings; and
H. Indication of North/South direction.

VIII. LOCATION MAP

Include a map showing the location of the tanks with respect to nearby landmarks. The map should indicate roads and landmarks to a level of detail such that the site would be easily located

IX. DESCRIPTION OF TANK(S) (Complete for each tank at this location)

Tank Number	Tank No. F-11	Tank No. F-12	Tank No. F-13	Tank No. F-14	Tank No. F-15
1. Status of Tank (Mark only one)					
A. Currently in Use	☑	☑	☐	☐	☑
B. Temporarily Out of Use (Also complete Section XI)	☐	☐	☑	☑	☐
C. Permanently Out of Use (Also complete Section XI)	☐	☐	☐	☐	☐
2. Date of Installation (mo/year)	02/1943	03/1943	03/1943	03/1943	04/1943
3. Estimated Capacity (gallons)	12,700,000	12,700,000	12,700,000	12,700,000	12,700,000
A. Compartmentalized? Yes/No	No	No	No	No	No
Estimated compartment capacity (gallons)					
B. Manifolded? Yes/No	No	No	No	No	No
4. Substance Currently or Last Stored in Greatest Quantity by Volume					
A. Gasoline (Specify product grade)					
B. Diesel	☐	☐	☐	☐	☐
C. Gasohol (Including ethanol blends) Specify product grade					
D. Kerosene	☐	☐	☐	☐	☐

Tank Number	Tank No. F-11	Tank No. F-12	Tank No. F-13	Tank No. F-14	Tank No. F-15
E. Used Oil/Waste Oil	☐	☐	☐	☐	☐
F. JP-4	☐	☐	☐	☐	☐
G. Non-Petroleum Hazardous Substance (CERCLA name and/or CAS #)	N/A	N/A	N/A	N/A	N/A
H. Mixture of Substances (Please specify)	N/A	N/A	N/A	N/A	N/A
I. Other, please specify.	JP-5	JP-5	EMPTY	EMPTY	F-76
5. Substance Compatible with Tank and Piping? Yes/No	Yes	Yes			Yes
6. Tank (Mark all that apply)					
A. Manufacturer and Model	Field-constructed	Field-constructed	Field-constructed	Field-constructed	Field-constructed
B. Underwriters Laboratory No.	N/A	N/A	N/A	N/A	N/A
C. Primary Containment Material or Single-Walled Tank					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Steel	☑	☑	☑	☑	☑
iii. Other, please specify.	N/A	N/A	N/A	N/A	N/A
D. Secondary Containment Material					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Steel	☐	☐	☐	☐	☐
iii. Other, please specify.	N/A	N/A	N/A	N/A	N/A
iv. None	☑	☑	☑	☑	☑
E. Corrosion Protection (except fiberglass reinforced plastic tanks)					
i. Fiberglass coated steel	☐	☐	☐	☐	☐
ii. Double-walled steel	☐	☐	☐	☐	☐
iii. Impressed current system	☐	☐	☐	☐	☐
iv. Sacrificial anode system	☐	☐	☐	☐	☐
v. Corrosion expert determination	☐	☐	☐	☐	☐
vi. Other, please specify.	N/A	N/A	N/A	N/A	N/A
7. Piping					
A. Manufacturer and Model	Unknown	Unknown	Unknown	Unknown	Unknown
B. Underwriters Laboratory No.	Unknown	Unknown	Unknown	Unknown	Unknown

Tank Number	Tank No. F-11	Tank No. F-12	Tank No. F-13	Tank No. F-14	Tank No. F-15
C. Primary Containment Material or Single-Walled Piping					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Flex piping	☐	☐	☐	☐	☐
iii. Steel	☑	☑	☑	☑	☑
iv. Other, please specify.	Piping is above ground	Piping is above ground	Piping is above ground	Piping is above ground	Piping is above ground
D. Secondary Containment Material					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Flex piping	☐	☐	☐	☐	☐
iii. Lined trench	☐	☐	☐	☐	☐
iv. Other, please specify.					
v. None	☑	☑	☑	☑	☑
E. Corrosion Protection (except fiberglass reinforced plastic piping)					
i. Fiberglass coated steel	☐	☐	☐	☐	☐
ii. Impressed current system	☐	☐	☐	☐	☐
iii. Sacrificial anode system	☐	☐	☐	☐	☐
iv. Corrosion expert determination	☐	☐	☐	☐	☐
v. Other, please specify.	N/A	N/A	N/A	N/A	N/A
8. Method of Product Dispensing					
A. Unsafe Suction (valve at tank)	☐	☐	☐	☐	☐
B. Safe Suction (no valve at tank)	☐	☐	☐	☐	☐
C. Pressure	☑	☑	☑	☑	☑
D. Not Applicable	☐	☐	☐	☐	☐
9. Spill prevention equipment	☐	☐	☐	☐	☐
A. Manufacturer and Model	N/A	N/A	N/A	N/A	N/A
B. Capacity (gallons)	N/A	N/A	N/A	N/A	N/A
10. Overfill prevention equipment	☑	☑	☑	☑	☑
A. Automatic shutoff device (flapper) Make and Model	☐	☐	☐	☐	☐
B. Overfill alarm Make and Model	☑	☑	☑	☑	☑
C. Ball float valve Make and Model	☐	☐	☐	☐	☐

Tank Number	Tank No. F-11		Tank No. F-12		Tank No. F-13		Tank No. F-14		Tank No. F-15	
11. Release Detection (Mark all that apply)	TANK	PIPE	TANK	PIPE	TANK	PIPE	TANK	PIPE	TANK	PIPE
A. Manual tank gauging	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
B. Tank tightness testing	☑	NA	☑	NA	☑	NA	☑	NA	☑	NA
C. Inventory control	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
D. Automatic tank gauging	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
E. Vapor monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
F. Groundwater monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
G. Interstitial monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
H. Statistical inventory reconciliation	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
I. Automatic line leak detectors (Yes/No)	NA	N/A	NA	N/A	NA	N/A	NA	N/A	NA	N/A
If **YES**, specify type.										
J. Line tightness testing	NA	☐	NA	☐	NA	☐	NA	☐	NA	☐
K. Other method approved by the Department. Please specify	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

X. DESCRIPTION OF DISPENSER AND UNDER DISPENSER CONTAINMENT

(Attach additional sheet if necessary.)

Dispenser Unit	Manufacturer of Dispenser	Dispenser Serial #	Under Dispenser Containment installed (Yes/No) - Installation Date
1			N/A
2			N/A
3			N/A
4			N/A
5			N/A
6			N/A
7			N/A
8			N/A
9			N/A
10			N/A
11			N/A
12			N/A

XI. TANK(S) OUT OF USE OR CHANGE IN SERVICE

Tank Number	Tank No. F-11	Tank No. F-12	Tank No. F-13	Tank No. F-14	Tank No. F-15
1. Closing of Tank A. Estimated date last used (mo./day/year)					
B. Estimated date tank closed (mo./day/year)					
C. Tank was removed from ground					
D. Tank was closed in ground					
E. Tank filled with inert material Describe					
F. Change in service					
2. Site Assessment Completed (Y/N)					
3. Evidence of a Leak Detected (Y/N)					

XII. CERTIFICATION OF COMPLIANCE FOR REPAIRS (Complete for each tank at this location)

Tank Number	Tank No. F-11	Tank No. F-12	Tank No. F-13	Tank No. F-14	Tank No. F-15
A. Date Repaired	N/A	N/A	N/A	N/A	N/A
B. Provide description of repair along with the Tank Number (Attach additional sheet if necessary.)					
C. Select one of the following: i. Installation certified by tank and piping manufacturers					
ii. Installation inspected by a registered engineer.					
iii. Manufacturer's installation checklists have been completed and documented					
iv. Another method allowed by the department. Please specify					

VII. FACILITY DRAWING

Include a drawing showing the general layout of the facility. This drawing should be no larger than 11 by 17 inches and preferably to scale. This drawing should show the following:

A. The property boundaries of the facility;
B. Identification of streets, roads and nearby bodies of water;
C. Identification of nearby facilities;
D. Tax Map Key (TMK) Numbers;
E. Location of buildings at the facility;
F. The approximate dimensions of the property boundaries and major buildings;
G. Location of all USTs and dispenser pumps (identified by number/s consistent with the tank & dispenser pump numbers in Sections IX and X), and associated pipings; and
H. Indication of North/South direction.

VIII. LOCATION MAP

Include a map showing the location of the tanks with respect to nearby landmarks. The map should indicate roads and landmarks to a level of detail such that the site would be easily located

IX. DESCRIPTION OF TANK(S) (Complete for each tank at this location)

Tank Number	Tank No. F-16	Tank No. F-17	Tank No. F-18	Tank No. F-19	Tank No. F-20
1. Status of Tank (Mark only one)					
A. Currently in Use	☑	☐	☐	☐	☑
B. Temporarily Out of Use (Also complete Section XI)	☐	☑	☑	☑	☐
C. Permanently Out of Use (Also complete Section XI)	☐	☐	☐	☐	☐
2. Date of Installation (mo/year)	05/1943	05/1943	05/1943	06/1943	07/1943
3. Estimated Capacity (gallons)	12,700,000	12,700,000	12,700,000	12,700,000	12,700,000
A. Compartmentalized? Yes/No	No	No	No	No	No
Estimated compartment capacity (gallons)					
B. Manifolded? Yes/No	No	No	No	No	No
4. Substance Currently or Last Stored in Greatest Quantity by Volume					
A. Gasoline (Specify product grade)					
B. Diesel	☐	☐	☐	☐	☐
C. Gasohol (Including ethanol blends) Specify product grade					
D. Kerosene	☐	☐	☐	☐	☐

Tank Number	Tank No. F-16	Tank No. F-17	Tank No. F-18	Tank No. F-19	Tank No. F-20
E. Used Oil/Waste Oil	☐	☐	☐	☐	☐
F. JP-4	☐	☐	☐	☐	☐
G. Non-Petroleum Hazardous Substance (CERCLA name and/or CAS #)	N/A	N/A	N/A	N/A	N/A
H. Mixture of Substances (Please specify)	N/A	N/A	N/A	N/A	N/A
I. Other, please specify.	F-76	EMPTY	EMPTY	EMPTY	JP-5
5. Substance Compatible with Tank and Piping? Yes/No	Yes				Yes
6. Tank (Mark all that apply)					
A. Manufacturer and Model	Field-constructed	Field-constructed	Field-constructed	Field-constructed	Field-constructed
B. Underwriters Laboratory No.	N/A	N/A	N/A	N/A	N/A
C. Primary Containment Material or Single-Walled Tank					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Steel	☑	☑	☑	☑	☑
iii. Other, please specify.	N/A	N/A	N/A	N/A	N/A
D. Secondary Containment Material					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Steel	☐	☐	☐	☐	☐
iii. Other, please specify.	N/A	N/A	N/A	N/A	N/A
iv. None	☑	☑	☑	☑	☑
E. Corrosion Protection (except fiberglass reinforced plastic tanks)					
i. Fiberglass coated steel	☐	☐	☐	☐	☐
ii. Double-walled steel	☐	☐	☐	☐	☐
iii. Impressed current system	☐	☐	☐	☐	☐
iv. Sacrificial anode system	☐	☐	☐	☐	☐
v. Corrosion expert determination	☐	☐	☐	☐	☐
vi. Other, please specify.	N/A	N/A	N/A	N/A	N/A
7. Piping					
A. Manufacturer and Model	Unknown	Unknown	Unknown	Unknown	Unknown
B. Underwriters Laboratory No.	Unknown	Unknown	Unknown	Unknown	Unknown

Tank Number	Tank No. F-16	Tank No. F-17	Tank No. F-18	Tank No. F-19	Tank No. F-20
C. Primary Containment Material or Single-Walled Piping					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Flex piping	☐	☐	☐	☐	☐
iii. Steel	☑	☑	☑	☑	☑
iv. Other, please specify.	Piping is above ground	Piping is above ground	Piping is above ground	Piping is above ground	Piping is above ground
D. Secondary Containment Material					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Flex piping	☐	☐	☐	☐	☐
iii. Lined trench	☐	☐	☐	☐	☐
iv. Other, please specify.	N/A	N/A	N/A	N/A	N/A
v. None	☑	☑	☑	☑	☑
E. Corrosion Protection (except fiberglass reinforced plastic piping)					
i. Fiberglass coated steel	☐	☐	☐	☐	☐
ii. Impressed current system	☐	☐	☐	☐	☐
iii. Sacrificial anode system	☐	☐	☐	☐	☐
iv. Corrosion expert determination	☐	☐	☐	☐	☐
v. Other, please specify.	N/A	N/A	N/A	N/A	N/A
8. Method of Product Dispensing					
A. Unsafe Suction (valve at tank)	☐	☐	☐	☐	☐
B. Safe Suction (no valve at tank)	☐	☐	☐	☐	☐
C. Pressure	☑	☑	☑	☑	☑
D. Not Applicable	☐	☐	☐	☐	☐
9. Spill prevention equipment	☐	☐	☐	☐	☐
A. Manufacturer and Model	N/A	N/A	N/A	N/A	N/A
B. Capacity (gallons)	N/A	N/A	N/A	N/A	N/A
10. Overfill prevention equipment	☑	☑	☑	☑	☑
A. Automatic shutoff device (flapper) Make and Model	☐	☐	☐	☐	☐
B. Overfill alarm Make and Model	☑	☑	☑	☑	☑
C. Ball float valve Make and Model	☐	☐	☐	☐	☐

Tank Number	Tank No. F-16		Tank No. F-17		Tank No. F-18		Tank No. F-19		Tank No. F-20	
11. Release Detection (Mark all that apply)	TANK	PIPE	TANK	PIPE	TANK	PIPE	TANK	PIPE	TANK	PIPE
A. Manual tank gauging	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
B. Tank tightness testing	☑	NA	☑	NA	☑	NA	☐	NA	☑	NA
C. Inventory control	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
D. Automatic tank gauging	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
E. Vapor monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
F. Groundwater monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
G. Interstitial monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
H. Statistical inventory reconciliation	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
I. Automatic line leak detectors (Yes/No)	NA	N/A	NA	N/A	NA	N/A	NA	N/A	NA	N/A
If **YES**, specify type.										
J. Line tightness testing	NA	☐	NA	☐	NA	☐	NA	☐	NA	☐
K. Other method approved by the Department. Please specify	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

X. DESCRIPTION OF DISPENSER AND UNDER DISPENSER CONTAINMENT

(Attach additional sheet if necessary.)

Dispenser Unit	Manufacturer of Dispenser	Dispenser Serial #	Under Dispenser Containment installed (Yes/No) - Installation Date
1			N/A
2			N/A
3			N/A
4			N/A
5			N/A
6			N/A
7			N/A
8			N/A
9			N/A
10			N/A
11			N/A
12			N/A

XI. TANK(S) OUT OF USE OR CHANGE IN SERVICE

Tank Number	Tank No. F-16	Tank No. F-17	Tank No. F-18	Tank No. F-19	Tank No. F-20
1. Closing of Tank A. Estimated date last used (mo./day/year)					
B. Estimated date tank closed (mo./day/year)					
C. Tank was removed from ground					
D. Tank was closed in ground					
E. Tank filled with inert material Describe					
F. Change in service					
2. Site Assessment Completed (Y/N)					
3. Evidence of a Leak Detected (Y/N)					

XII. CERTIFICATION OF COMPLIANCE FOR REPAIRS (Complete for each tank at this location)

Tank Number	Tank No. F-16	Tank No. F-17	Tank No. F-18	Tank No. F-19	Tank No. F-20
A. Date Repaired	N/A	N/A	N/A	N/A	N/A
B. Provide description of repair along with the Tank Number (Attach additional sheet if necessary.)					
C. Select one of the following: i. Installation certified by tank and piping manufacturers					
ii. Installation inspected by a registered engineer.					
iii. Manufacturer's installation checklists have been completed and documented					
iv. Another method allowed by the department. Please specify					

VII. FACILITY DRAWING

Include a drawing showing the general layout of the facility. This drawing should be no larger than 11 by 17 inches and preferably to scale. This drawing should show the following:

A. The property boundaries of the facility;
B. Identification of streets, roads and nearby bodies of water;
C. Identification of nearby facilities;
D. Tax Map Key (TMK) Numbers;
E. Location of buildings at the facility;
F. The approximate dimensions of the property boundaries and major buildings;
G. Location of all USTs and dispenser pumps (identified by number/s consistent with the tank & dispenser pump numbers in Sections IX and X), and associated pipings; and
H. Indication of North/South direction.

VIII. LOCATION MAP

Include a map showing the location of the tanks with respect to nearby landmarks. The map should indicate roads and landmarks to a level of detail such that the site would be easily located

IX. DESCRIPTION OF TANK(S) (Complete for each tank at this location)

Tank Number	Tank No. F-ST1	Tank No. F-ST2	Tank No. F-ST3	Tank No. F-ST4	Tank No. Piping
1. Status of Tank (Mark only one)					
A. Currently in Use	☑	☑	☑	☑	☑
B. Temporarily Out of Use (Also complete Section XI)	☐	☐	☐	☐	☐
C. Permanently Out of Use (Also complete Section XI)	☐	☐	☐	☐	☐
2. Date of Installation (mo/year)	07/1942	07/1942	07/1942	07/1942	
3. Estimated Capacity (gallons)	400,000	400,000	400,000	400,000	31,665
A. Compartmentalized? Yes/No	No	No	No	No	No
Estimated compartment capacity (gallons)					
B. Manifolded? Yes/No	No	No	No	No	No
4. Substance Currently or Last Stored in Greatest Quantity by Volume					
A. Gasoline (Specify product grade)					
B. Diesel	☐	☐	☐	☐	☐
C. Gasohol (Including ethanol blends) Specify product grade					
D. Kerosene	☐	☐	☐	☐	☐

Tank Number	Tank No. F-ST1	Tank No. F-ST2	Tank No. F-ST3	Tank No. F-ST4	Tank No. Pipe
E. Used Oil/Waste Oil	☐	☐	☐	☐	☐
F. JP-4	☐	☐	☐	☐	☐
G. Non-Petroleum Hazardous Substance (CERCLA name and/or CAS #)	N/A	N/A	N/A	N/A	N/A
H. Mixture of Substances (Please specify)	N/A	N/A	N/A	N/A	N/A
I. Other, please specify.	F-24	JP-5	F-24	F-76	F-24, F-76, JP-5
5. Substance Compatible with Tank and Piping? Yes/No	Yes	Yes	Yes	Yes	Yes
6. Tank (Mark all that apply)					
A. Manufacturer and Model	Field-constructed	Field-constructed	Field-constructed	Field-constructed	N/A
B. Underwriters Laboratory No.	N/A	N/A	N/A	N/A	N/A
C. Primary Containment Material or Single-Walled Tank					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Steel	☑	☑	☑	☑	☐
iii. Other, please specify.	N/A	N/A	N/A	N/A	N/A
D. Secondary Containment Material					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Steel	☐	☐	☐	☐	☐
iii. Other, please specify.	N/A	N/A	N/A	N/A	N/A
iv. None	☑	☑	☑	☑	☐
E. Corrosion Protection (except fiberglass reinforced plastic tanks)					
i. Fiberglass coated steel	☐	☐	☐	☐	☐
ii. Double-walled steel	☐	☐	☐	☐	☐
iii. Impressed current system	☐	☐	☐	☐	☐
iv. Sacrificial anode system	☐	☐	☐	☐	☐
v. Corrosion expert determination	☐	☐	☐	☐	☐
vi. Other, please specify.	N/A	N/A	N/A	N/A	N/A
7. Piping					
A. Manufacturer and Model	Unknown	Unknown	Unknown	Unknown	Unknown
B. Underwriters Laboratory No.	Unknown	Unknown	Unknown	Unknown	Unknown

Tank Number	Tank No. F-ST1	Tank No. F-ST2	Tank No. F-ST3	Tank No. F-ST4	Tank No. Pipeline
C. Primary Containment Material or Single-Walled Piping					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Flex piping	☐	☐	☐	☐	☐
iii. Steel	☑	☑	☑	☑	☑
iv. Other, please specify.	Piping is above ground	Piping is above ground	Piping is above ground	Piping is above ground	
D. Secondary Containment Material					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Flex piping	☐	☐	☐	☐	☐
iii. Lined trench	☐	☐	☐	☐	☐
iv. Other, please specify.	N/A	N/A	N/A	N/A	N/A
v. None	☑	☑	☑	☑	☑
E. Corrosion Protection (except fiberglass reinforced plastic piping)					
i. Fiberglass coated steel	☐	☐	☐	☐	☐
ii. Impressed current system	☐	☐	☐	☐	☑
iii. Sacrificial anode system	☐	☐	☐	☐	☐
iv. Corrosion expert determination	☐	☐	☐	☐	☐
v. Other, please specify.	N/A	N/A	N/A	N/A	N/A
8. Method of Product Dispensing					
A. Unsafe Suction (valve at tank)	☐	☐	☐	☐	☐
B. Safe Suction (no valve at tank)	☐	☐	☐	☐	☐
C. Pressure	☐	☐	☐	☐	☑
D. Not Applicable	☑	☑	☑	☑	☐
9. Spill prevention equipment	☐	☐	☐	☐	☐
A. Manufacturer and Model	N/A	N/A	N/A	N/A	N/A
B. Capacity (gallons)	N/A	N/A	N/A	N/A	N/A
10. Overfill prevention equipment	☑	☑	☑	☑	☐
A. Automatic shutoff device (flapper) Make and Model	☐	☐	☐	☐	☐
B. Overfill alarm Make and Model	☑	☑	☑	☑	☐
C. Ball float valve Make and Model	☐	☐	☐	☐	☐

Tank Number	Tank No. F-ST1		Tank No. F-ST2		Tank No. F-ST3		Tank No. F-ST4		Tank No. Pipeline	
11. Release Detection (Mark all that apply)	TANK	PIPE	TANK	PIPE	TANK	PIPE	TANK	PIPE	TANK	PIPE
A. Manual tank gauging	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
B. Tank tightness testing	☑	NA	☑	NA	☑	NA	☑	NA	☐	NA
C. Inventory control	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
D. Automatic tank gauging	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
E. Vapor monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
F. Groundwater monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
G. Interstitial monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
H. Statistical inventory reconciliation	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
I. Automatic line leak detectors (Yes/No)	NA	N/A	NA	N/A	NA	N/A	NA	N/A	NA	N/A
If **YES**, specify type.										
J. Line tightness testing	NA	☐	NA	☐	NA	☐	NA	☐	NA	☑
K. Other method approved by the Department. Please specify	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

X. DESCRIPTION OF DISPENSER AND UNDER DISPENSER CONTAINMENT

(Attach additional sheet if necessary.)

Dispenser Unit	Manufacturer of Dispenser	Dispenser Serial #	Under Dispenser Containment installed (Yes/No) - Installation Date
1			N/A
2			N/A
3			N/A
4			N/A
5			N/A
6			N/A
7			N/A
8			N/A
9			N/A
10			N/A
11			N/A
12			N/A

XI. TANK(S) OUT OF USE OR CHANGE IN SERVICE

Tank Number	Tank No. F-ST1	Tank No. F-ST2	Tank No. F-ST3	Tank No. F-ST4	Tank No. Pipeli
1. Closing of Tank A. Estimated date last used (mo./day/year)					
B. Estimated date tank closed (mo./day/year)					
C. Tank was removed from ground					
D. Tank was closed in ground					
E. Tank filled with inert material Describe					
F. Change in service					
2. Site Assessment Completed (Y/N)					
3. Evidence of a Leak Detected (Y/N)					

XII. CERTIFICATION OF COMPLIANCE FOR REPAIRS (Complete for each tank at this location)

Tank Number	Tank No. F-ST1	Tank No. F-ST2	Tank No. F-ST3	Tank No. F-ST4	Tank No. Pipeli
A. Date Repaired	06/19/2021	N/A	N/A	N/A	N/A
B. Provide description of repair along with the Tank Number (Attach additional sheet if necessary.) Tank F-ST1: Contractor completed a comprehensive out-of-service integrity inspection and repair of Surge Tank 1. Completed repairs included weld repairs to inlet/outlet nozzle, new steel floor, six shell patch plates and new stilling well and drain line. Installation of new steel floor included geotextile fabric, flexible membrane liner, and concrete infill, which was slotted to create a leak detection system. Based on inspection of the repairs and review of documentation of the repairs, the Engineer of Record determined Surge Tank 1 is suitable to return to service, as specified in the Contractor's Suitability for Service Testament (attached). Leak detection testing of Surge Tank 1 was performed, with no detectable leak above test method's minimum detectable leak rate, resulting in a passing test. The leak detection testing conducted meets the regulatory requirements in HAR 11-280.1-43 (10). The Executive Summary of the 2021 Annual Leak Detection Testing Report of Bulk Field-Constructed Surge Tank 1 is attached.					
C. Select one of the following: i. Installation certified by tank and piping manufacturers	N/A	N/A	N/A	N/A	N/A
ii. Installation inspected by a registered engineer.	Yes	N/A	N/A	N/A	N/A
iii. Manufacturer's installation checklists have been completed and documented	N/A	N/A	N/A	N/A	N/A
iv. Another method allowed by the department. Please specify	N/A	N/A	N/A	N/A	N/A

VII. FACILITY DRAWING

Include a drawing showing the general layout of the facility. This drawing should be no larger than 11 by 17 inches and preferably to scale. This drawing should show the following:

A. The property boundaries of the facility;
B. Identification of streets, roads and nearby bodies of water;
C. Identification of nearby facilities;
D. Tax Map Key (TMK) Numbers;
E. Location of buildings at the facility;
F. The approximate dimensions of the property boundaries and major buildings;
G. Location of all USTs and dispenser pumps (identified by number/s consistent with the tank & dispenser pump numbers in Sections IX and X), and associated pipings; and
H. Indication of North/South direction.

VIII. LOCATION MAP

Include a map showing the location of the tanks with respect to nearby landmarks. The map should indicate roads and landmarks to a level of detail such that the site would be easily located

IX. DESCRIPTION OF TANK(S) (Complete for each tank at this location)

Tank Number	Tank No. PRT-1	Tank No. PRT-2	Tank No. Diamond	Tank No. Ewa Beach	Tank No. ____
1. Status of Tank (Mark only one)					
A. Currently in Use	☑	☑	☑	☑	☐
B. Temporarily Out of Use (Also complete Section XI)	☐	☐	☐	☐	☐
C. Permanently Out of Use (Also complete Section XI)	☐	☐	☐	☐	☐
2. Date of Installation (mo/year)	07/2010	05/2006	09/2011	06/2006	
3. Estimated Capacity (gallons)	2,000	4,000	59,500	236,579	
A. Compartmentalized? Yes/No	No	No	No	No	
Estimated compartment capacity (gallons)					
B. Manifolded? Yes/No	No	No	No	No	
4. Substance Currently or Last Stored in Greatest Quantity by Volume					
A. Gasoline (Specify product grade)					
B. Diesel	☐	☐	☐	☐	☐
C. Gasohol (Including ethanol blends) Specify product grade					
D. Kerosene	☐	☐	☐	☐	☐

Tank Number	Tank No. PRT-	Tank No. PRT	Tank No. Diam	Tank No. Ewa	Tank No.
E. Used Oil/Waste Oil	☐	☐	☐	☐	☐
F. JP-4	☐	☐	☐	☐	☐
G. Non-Petroleum Hazardous Substance (CERCLA name and/or CAS #)	N/A	N/A	N/A	N/A	
H. Mixture of Substances (Please specify)	N/A	N/A	N/A	N/A	
I. Other, please specify.	F-24	F-24	F-24	F-24	
5. Substance Compatible with Tank and Piping? Yes/No	Yes	Yes	Yes	Yes	
6. Tank (Mark all that apply)					
A. Manufacturer and Model	Steel Tank Institute/STI-P3	Steel Tank Institute/STI-P3	N/A	N/A	
B. Underwriters Laboratory No.	UL-58	UL-58	N/A	N/A	
C. Primary Containment Material or Single-Walled Tank					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Steel	☑	☑	☐	☐	☐
iii. Other, please specify.	N/A	N/A	N/A	N/A	
D. Secondary Containment Material					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Steel	☑	☑	☐	☐	☐
iii. Other, please specify.	N/A	N/A	N/A	N/A	
iv. None	☐	☐	☐	☐	☐
E. Corrosion Protection (except fiberglass reinforced plastic tanks)					
i. Fiberglass coated steel	☐	☐	☐	☐	☐
ii. Double-walled steel	☑	☑	☐	☐	☐
iii. Impressed current system	☑	☑	☐	☐	☐
iv. Sacrificial anode system	☐	☐	☐	☐	☐
v. Corrosion expert determination	☐	☐	☐	☐	☐
vi. Other, please specify.	N/A	N/A	N/A	N/A	
7. Piping					
A. Manufacturer and Model	Unknown	Unknown	Unknown	Unknown	
B. Underwriters Laboratory No.	Unknown	Unknown	Unknown	Unknown	

Tank Number	Tank No. PRT-Bio	Tank No. PRT	Tank No. Diesel	Tank No. Evac Pit	Tank No.
C. Primary Containment Material or Single-Walled Piping					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Flex piping	☐	☐	☐	☐	☐
iii. Steel	☑	☑	☑	☑	☐
iv. Other, please specify.	N/A	N/A	N/A	N/A	
D. Secondary Containment Material					
i. Fiberglass reinforced plastic	☐	☐	☐	☐	☐
ii. Flex piping	☐	☐	☐	☐	☐
iii. Lined trench	☑	☑	☐	☐	☐
iv. Other, please specify.	N/A	N/A	N/A	N/A	
v. None	☐	☐	☑	☑	☐
E. Corrosion Protection (except fiberglass reinforced plastic piping)					
i. Fiberglass coated steel	☐	☐	☐	☐	☐
ii. Impressed current system	☑	☑	☑	☑	☐
iii. Sacrificial anode system	☐	☐	☐	☐	☐
iv. Corrosion expert determination	☐	☐	☐	☐	☐
v. Other, please specify.	N/A	N/A	N/A	N/A	
8. Method of Product Dispensing					
A. Unsafe Suction (valve at tank)	☐	☐	☐	☐	☐
B. Safe Suction (no valve at tank)	☐	☐	☐	☐	☐
C. Pressure	☐	☐	☑	☑	☐
D. Not Applicable	☑	☑	☐	☐	☐
9. Spill prevention equipment	☐	☐	☐	☐	☐
A. Manufacturer and Model	N/A	N/A	N/A	N/A	
B. Capacity (gallons)	N/A	N/A	N/A	N/A	
10. Overfill prevention equipment	☑	☑	☐	☐	☐
A. Automatic shutoff device (flapper) Make and Model	☐	☐	☐	☐	☐
B. Overfill alarm Make and Model	☑ Veeder-Root TLS-350 PLUS	☑ Veeder-Root TLS-350 PLUS	☐	☐	☐
C. Ball float valve Make and Model	☐	☐	☐	☐	☐

Tank Number	Tank No. PRT		Tank No. PRT		Tank No. Diesel		Tank No. Ewa		Tank No.	
11. Release Detection (Mark all that apply)	TANK	PIPE	TANK	PIPE	TANK	PIPE	TANK	PIPE	TANK	PIPE
A. Manual tank gauging	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
B. Tank tightness testing	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
C. Inventory control	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
D. Automatic tank gauging	☐	NA	☐	NA	☐	NA	☐	NA	☐	NA
E. Vapor monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
F. Groundwater monitoring	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
G. Interstitial monitoring	☑	☐	☑	☐	☐	☐	☐	☐	☐	☐
H. Statistical inventory reconciliation	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
I. Automatic line leak detectors (Yes/No)	NA	N/A	NA	N/A	NA	N/A	NA	N/A	NA	N/A
If **YES**, specify type.										
J. Line tightness testing	NA	☑	NA	☑	NA	☑	NA	☑	NA	☐
K. Other method approved by the Department. Please specify	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A		

X. DESCRIPTION OF DISPENSER AND UNDER DISPENSER CONTAINMENT

(Attach additional sheet if necessary.)

Dispenser Unit	Manufacturer of Dispenser	Dispenser Serial #	Under Dispenser Containment installed (Yes/No) - Installation Date
1			N/A
2			N/A
3			N/A
4			N/A
5			N/A
6			N/A
7			N/A
8			N/A
9			N/A
10			N/A
11			N/A
12			N/A

XI. TANK(S) OUT OF USE OR CHANGE IN SERVICE

Tank Number	Tank No. PRT-1	Tank No. PRT-2	Tank No. Diamond	Tank No. Ewa Beach	Tank No. ____
1. Closing of Tank A. Estimated date last used (mo./day/year)					
B. Estimated date tank closed (mo./day/year)					
C. Tank was removed from ground					
D. Tank was closed in ground					
E. Tank filled with inert material Describe					
F. Change in service					
2. Site Assessment Completed (Y/N)					
3. Evidence of a Leak Detected (Y/N)					

XII. CERTIFICATION OF COMPLIANCE FOR REPAIRS (Complete for each tank at this location)

Tank Number	Tank No. PRT-1	Tank No. PRT-2	Tank No. Diamond	Tank No. Ewa Beach	Tank No. ____
A. Date Repaired	N/A	N/A	N/A	N/A	
B. Provide description of repair along with the Tank Number (Attach additional sheet if necessary.)					
C. Select one of the following: i. Installation certified by tank and piping manufacturers					
ii. Installation inspected by a registered engineer.					
iii. Manufacturer's installation checklists have been completed and documented					
iv. Another method allowed by the department. Please specify					

Facility ID No. 9-102271

XIII. CERTIFICATION (Read and sign after completing all sections)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

(b) (6)

Print or Type Name of owner or owner's authorized representative

Regional Environmental Program Director

Official Title

(b) (6)

Signature

16 Jul 2021

Date Signed

Status of Signatory (Mark as appropriate)

1. Corporation:
   - ☐ principal executive officer
   - ☐ duly authorized representative
2. Partnership:
   - ☐ general partner
3. Sole proprietorship:
   - ☐ proprietor
4. Government entity:
   - ☐ principal executive officer
   - ☐ ranking elected official

4

ENTERPRISE ENGINEERING, INC.

JUL 2 2 202

SUITABILITY FOR SERVICE TESTAMENT
SURGE TANK 1 (FACILITY NO. 1224)

Enterprise Engineering Inc. (EEI), under contract to APTIM (NAVFAC EXWC Contract No. N39430-15-D-1632, Task Order 3974318F4132), completed a comprehensive, out-of-service external and internal integrity inspection and suitability for service evaluation of Surge Tank 1 at NAVSUP FLC Pearl Harbor, Hawaii. The out-of-service inspection was performed from August 10 through August 24, 2020. Subsequently, APTIM completed repairs identified in the Statement of Work and EEI's Final Condition Assessment Report (Pre-Repair) dated October 2020.

EEI performed a post-repair inspection of Tank 1 on April 19, 2021. The inspection determined repairs are complete except for the vent line screen which will be completed after the ventilation hose is removed, prior to placing the tank back in service. All repairs are in accordance with the repair design documents. This report provides a summary of the repairs identified in EEI's Final Condition Assessment Report (Pre-Repair), the status of repairs, a revised DLA-E Tank Condition Form (Post-Repair), and the Final Condition Assessment Report (Pre-Repair).

EEI recommends the next internal out-of-service inspection be scheduled no later than April 2031 (10 years after the April 2021 inspection), or sooner if a change in condition has occurred.

Based on the inspection of the repairs and review of the repair documentation, EEI has determined Tank 1 is suitable to return to service

POST-REPAIR

STATE OF MAINE (b) (4) (b) (4) (b) (4) 04/29/2021 LICENSED PROFESSIONAL ENGINEER

April 28, 2021

(b) (4)
API 653 AST Inspector Certificate No. (b) (4)

Date

(b) (4)
(b) (4)
API 653 AST Inspector Certificate No. (b) (4)

April 28, 2021
Date

ENCLOSURE(2)

[redacted] JUL 2 2 2021

[redacted]

[redacted]

APTIM | Government Services
12005 Ford Road; Suite 600
Dallas, TX 75234

FISC Red Hill
Pearl Harbor, HI

[redacted]

[redacted]

Scope of Work: Furnish required management, labor, services, materials and equipment to perform the required annual tightness testing of Tank # S1224 (Surge 1) an underground fuel storage tank located at FISC Red Hill, Pearl Harbor, HI.

[redacted]

Summary

Testing of Tank # S1224 (Surge 1) a 420,000-gal underground storage tank located at FISC Red Hill, Pearl Harbor, Hawaii commenced June 16, 2021 and was completed June 19, 2021. The result of that testing is that the tank system is determined to be tight to isolation. Testing was performed using the [redacted] protocols set out in the third-party evaluations. All tank valves were adequately secured such that any fluid loss was isolated to leakage. Therefore, the containment integrity of the tank was not compromised and the test is considered conclusive.

Tank # S1224 (Surge 1): After 72 hours of testing the tank is certified to be tight.

[redacted]1

ENCLOSURE(3)