

APPENDIX F

UNDERGROUND STORAGE TANK SYSTEM CLOSURE REPORT FORM

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF WASTE MANAGEMENT

**UNDERGROUND STORAGE TANK SYSTEM
CLOSURE REPORT FORM**

Not Registered

Facility I.D.

Reading _____ Berks _____
Municipality County

04/28/08

Date Prepared

Gery W. Webster

Name of Person Submitting Report
(Please Print)

Tank Compliance, Inc.

Company Name
(If Applicable)

Project Manager

Title

Closure Method (Check all that apply):

- Removal
- Closure-In-Place
- Change-In-Service

Site Assessment Results (Check all that apply):

- No Obvious Contamination - Sample Results Meet Standards/Levels
- No Obvious Contamination - Sample Results Do Not Meet Standards/Levels
- Obvious, Localized Contamination - Sample Results Meet Standards/Levels
- Obvious, Localized Contamination - Sample Results Do Not Meet Standards/Levels
- Obvious, Extensive Contamination

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF WASTE MANAGEMENT

DATE RECEIVED: _____

**UNDERGROUND STORAGE TANK SYSTEM
CLOSURE REPORT FORM**

Owners who are permanently closing underground storage tanks may use this form to demonstrate that an underground storage tank closure was performed in accordance with the "Closure Requirements for Underground Storage Tank Systems" document. PLEASE PRINT OR TYPE. COMPLETE ALL QUESTIONS.

SECTION I. Owner/Facility/Tank/Waste Management and Disposal Information

1. Facility ID Number Not Registered
2. Facility Name Navy and Marine Corps Reserve Center
3. Facility County Berks
4. Facility Municipality Reading
5. Facility Address 615 Kenhorst Blvd. Reading, PA 19611
6. Facility Contact Person Gunnery Sergeant Fontenoy
7. Facility Telephone Number (484) 824- 1437
8. Owner Name Robert F. Lewandowski, BRAC Environmental Coordinator, Navy PMO Northeast
9. Owner Mailing Address 4911 South Broad St., Bldg. 679, PNBC, Philadelphia, PA 19112
10. Description of Underground Storage Tanks (Complete for each tank closed)

DATE OF TANK CLOSURE (Month/Day/Year)		-	-	-
		10- 01 -1994		
Tank Registration Number		n/a		
Estimated Total Capacity (Gallons)		8,000		
Substance(s) Stored Throughout Operating Life of Tank (Check All That Apply)	a. Petroleum			
	Unleaded Gasoline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Leaded Gasoline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Aviation Gasoline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Kerosene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Jet Fuel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Diesel Fuel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Fuel Oil No. 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Fuel Oil No. 2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Fuel Oil No. 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Fuel Oil No. 5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Fuel Oil No. 6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	New Motor Oil	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Used Motor Oil	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other, Please Specify				
NOTE: If Hazardous Substance Block is Checked, Attach Material Safety Data Sheets (MSDS)	b. Hazardous Substance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Name of Principal CERCLA Substance			
	AND Chemical Abstract Service (CAS) No.			
	c. Unknown	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Closure Method (Check Only One)	a. Removal	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	b. Closure-in-Place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	c. Change-In-Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Partial System Closure (Yes or No)		Yes		

DATE OF TANK CLOSURE (Month/Day/Year)		- -	- -	- -	- -
Tank Registration Number					
Estimated Total Capacity (Gallons)					
Substance(s) Stored Throughout Operating Life of Tank (Check All That Apply)	a. Petroleum				
	Unleaded Gasoline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Leaded Gasoline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Aviation Gasoline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Kerosene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Jet Fuel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Diesel Fuel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Fuel Oil No. 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Fuel Oil No. 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Fuel Oil No. 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Fuel Oil No. 5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Fuel Oil No. 6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	New Motor Oil	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Used Motor Oil	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other, Please Specify				
NOTE: If Hazardous Substance Block is Checked, Attach Material Safety Data Sheets (MSDS)	b. Hazardous Substance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Name of Principal CERCLA Substance				
	AND Chemical Abstract Service (CAS) No.				
	c. Unknown	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Closure Method (Check Only One)	a. Removal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	b. Closure-in-Place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	c. Change-In-Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Partial System Closure (Yes or No)					

Yes N/A

11. Briefly describe the storage tank facility and the nature of the operations which were conducted at the facility (both historical and present) **including use of tanks:** _____
The facility was used since approximately 1956 as a Navy and Marine Corps Reserve Center.
The 8,000 gallon fuel oil tank was used to store #2 heating oil for use in the buildings heating system.

- 12. A site location and sampling map of the site, drawn to scale, is attached. See page 11 of 11.
- 13. Original, color photographs of the closure process are attached (i.e., inside of excavation/piping runs, pit water, tanks showing condition).
- 14. An amended "Registration of Storage Tanks" form was submitted to the DEP, Bureau of Watershed Conservation, Division of Storage Tanks, P.O. Box 8762, Harrisburg, PA 17105-8762.
Date: n/a
- 15. If a reportable release was confirmed, the appropriate regional office of DEP was notified by the owner or operator.
Date: - - Office: _____

Yes N/A

- 16. If tanks were cleaned on-site:
 - a. Briefly describe the disposition of usable product: The tank system was removed by Direct Environmental Services, Inc. of Harrisburg, Pa. In October 1994. There are no records of the tank removal procedures, site observations, tank or contents disposition or environmental sampling results. Direct Environmental is no longer in business.
 - b. Briefly describe the disposal of unusable product, sludges, sediments, and wastewater generated during cleaning. Provide the name and permit number of the processing, treatment, storage or disposal facility. (Attach documentation of proper disposal):
See comment in 16 above.
 - c. If tank contents were determined/deemed to be hazardous waste, provide:
 - (1) Generator ID Number: n/a
 - (2) Licensed Hazardous Waste Transporter Name and ID Number: n/a

- 17. If tanks were removed from the site for cleaning:
 - a. Provide the name and permit number of the processing, treatment, storage or disposal facility performing the tank cleaning: See comment in 16 above
 - b. If tank contents were d determined/deemed to be hazardous waste, provide:
 - (1) Generator ID Number: n/a
 - (2) Licensed Hazardous Waste Transporter Name and ID Number: n/a

- 18. Briefly describe the disposition of tanks/piping (Attach documentation of proper disposal):
The disposition of the tank is unknown, however, a recent geophysical survey conducted at the site indicates that the piping running from the end of the tank approximately 21 feet to the building wall was left in place.

- 19. If contaminated soil is excavated:
 - a. Briefly describe the disposition and amount n/a (tons) of contaminated soil. Provide the name and permit number of the processing, treatment, storage or disposal facility. (Attach documentation of proper disposal):
See comment in 16 above
 - b. If contaminated soil is determined/deemed to be hazardous waste, provide:
 - (1) Generator ID Number: n/a
 - (2) Licensed Hazardous Waste Transporter Name and ID Number: n/a

Yes N/A

20. Briefly describe the disposition of and amount _____ (tons) of uncontaminated soil (attach analyses):

See comment in 16 above

I, ROBERT F. LEWANDOWSKI, hereby certify, under penalty of law as provided in 18 Pa. C.S. §4904
(Print Name)

(relating to unsworn falsification to authorities) that I am the owner of the above referenced storage tank(s) and that the information provided by me in this closure report (Section I) is true, accurate and complete to the best of my knowledge and belief.



Signature of Tank Owner

8, 30, 2008

Date

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF WASTE MANAGEMENT

**UNDERGROUND STORAGE TANK SYSTEM
CLOSURE REPORT FORM**

SECTION II. Tank Handling Information

Facility ID Number Not Registered

Yes N/A

1. Briefly describe the excavation and initial on-site staging of uncontaminated/contaminated soil:
The tank system was removed in October 1994 by Direct Environmental Services, Inc. of Harrisburg, Pa. There are no records available describing the tank removal program and Direct Environmental is no longer in business.

2. Briefly describe the method of piping system closure and the closure of the piping systems including the quantity and condition of the piping:
A recent geophysical survey conducted at the site indicates that the piping from the tank end to the building (approximately 21 feet) was left in place.

3. Briefly describe the condition of the tanks and any problems encountered during tank removal:
See comment in 1 above

4. Briefly describe the method used to purge the tanks of and monitor for explosive vapors:
See comment in 1 above

5. If tanks were cleaned on-site:
a. Briefly describe the tank cleaning process: See comment in 1 above

b. If subcontracted, name and address of company that performed the tank cleaning:
See comment in 1 above

6. If tanks were closed-in-place, briefly describe the tank fill material: See comment in 1 above

7. If contamination was suspected or observed, the "Notification of Contamination" form was submitted.

SECTION II. (continued)

I, _____, hereby certify, under penalty of law as provided in 18 Pa. C.S. §4904
(Print Name)
(relating to unsworn falsification to authorities) that I am the certified installer who performed the tank handling activities associated with the closure of the above referenced storage tank(s) and that the information provided by me in this closure report (Section I) is true, accurate and complete to the best of my knowledge and belief.

_____ Signature of Certified Installer	_____ Date
_____ Installer Certification Number	_____ Company Certification Number
	_____ Company Name
	_____ Street
	_____ City/Town, State, Zip
	_____ Phone

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF WASTE MANAGEMENT

**UNDERGROUND STORAGE TANK
CLOSURE REPORT FORM**

SECTION III. Site Assessment Information

Tank Registration # n/a (complete one sheet for EACH tank system and attach ALL laboratory sheets pertaining to that system)

Facility ID Number Not Registered

A. Provide depth of *BEDROCK* and *WATER* IF encountered during excavation or soil boring (write "N/A: if NOT encountered).

Bedrock 28.5 feet below land surface Water n/a feet below land surface

B. Provide Length of *PIPING* IF piping was closed-in-place (write "N/A" if NOT closed-in-place).

Length of piping 21 feet

C. TANK SYSTEM REMOVED FROM THE GROUND

1). Was obvious contamination observed while excavating?

NO -----> Conduct confirmatory sampling -----> See end of this section for options on submission and maintenance of closure records -----> Do not complete item C.2. below.

YES-----> Report release to DEP within 2 hours -----> Describe contamination observed and likely source(s) tank, piping, dispenser, spills, overfills):

The information presented in this section was obtained during a soil boring and sampling program conducted on February 21, 2008.

-----> Complete item C.2. below.

2). Was contamination localized (within three feet of the tank system in every direction with no obvious water contamination)?

YES -----> Remove or remediate contaminated soil -----> Conduct confirmatory sampling-----> See end of this section for options on submission and maintenance of closure records -----> Call Indemnification Fund (717-787-0763).

NO-----> Continue interim remedial actions -----> See end of this section for options on submission and maintenance of closure records -----> Call Indemnification Fund (717-787-0763).

D. TANK SYSTEM CLOSED-IN-PLACE OR CHANGED-IN-SERVICE

Was obvious contamination observed during sampling, boring or assessing water depths?

NO -----> Conduct confirmatory sampling -----> See end of this section for options on submission and maintenance of closure records.

YES-----> Report release to DEP within 2 hours -----> Describe contamination observed and likely source(s) tank, piping, dispenser, spills, overfills):

Continue with corrective action -----> See end of this section for options on submission and maintenance of closure records -----> Call Indemnification Fund (717-787-0763).

E. If the answer to C.1. is "no", the answer to C.2. is "yes" or the answer to D. is "no", confirmatory samples are required. Use the sample/analysis information sheet on page 10 of 11 to provide the information on confirmatory sampling and complete the diagram on Page 11 of 11.

Options for Submission and Maintenance of Closure Site Assessment Records

Records of the site assessment must be maintained for at least three years after completion of permanent closure or change-in-service in one of the following ways:

- (a) By the owners and operators who took the UST system out of service;
- (b) By the current owners and operators of the UST system site; or
- (c) By mailing these records to the implementing agency if they cannot be maintained at the closed facility.

At least one option must be chosen. If option (c) is chosen, the closure report form should be sent to the DEP regional office responsible for the county in which the tank is located.

Where the results of the site assessment indicate that obvious, localized soil contamination was encountered and the analytical results of the confirmatory sampling show levels below the statewide standard/action levels, this closure report form (Sections I, II, and III) or some other acceptable site characterization report must be received by the Department within 180 days of verbally reporting the release.

Where the results of the site assessment indicate that no obvious contamination or obvious, localized contamination was encountered, but the analytical results of the confirmatory sampling show levels above the statewide standard/action levels, or where there is obvious, extensive contamination, Section 245.310(a)(8) of the CAP regulation requires that details of removal from service be included in the site characterization report. A copy of the completed closure report form should be submitted as part of the site characterization report to satisfy the requirements of Section 245.310(a)(8) of the CAP regulations.

I, Gery W. Webster, hereby certify, under penalty of law as provided in 18 Pa. C.S. §4904 (relating to unsworn falsification to authorities) that I am the person who performed the site assessment activities associated with the closure of the above referenced storage tank(s) and that the information provided by me in this closure report (Section III) is true, accurate and complete to the best of my knowledge and belief.


Signature of Person Performing Site Assessment

04 / 28 / 2008
Date

Project Manager
Title of Person Performing Site Assessment

Tank Compliance, Inc.
Name of Company Performing Site Assessment

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF WASTE MANAGEMENT

**UNDERGROUND STORAGE TANK SYSTEM
CLOSURE REPORT FORM**
Facility ID Number Not Registered

Sample/Analysis Information
(Attachment for Section III.)

Sample I.D. (See diagram)	Parameter	Analytical Method ¹		Media	Result	Detection Limit	Date Sample Taken	Date Sample Analyzed
SB01 1112	Benzene	8260	E	Soil	ND	50 ug/kg	02 / 21 / 08	02 / 28 / 08
	Ethyl benzene	"	E		ND	50 ug/kg	/ /	02 / 28 / 08
	Isopropyl benzene	"	E		ND	50 ug/kg	/ /	02 / 28 / 08
	Naphthalene	"	E		ND	101 ug/kg	/ /	02 / 28 / 08
	Toluene	"	E		ND	50 ug/kg	/ /	02 / 28 / 08
	Fluorene	8270			ND	124 ug/kg	/ /	02 / 27 / 08
	Phenanthrene	"			ND	124 ug/kg	/ /	02 / 27 / 08
SB02 0405	Benzene	8260	E		ND	52 ug/kg	02/21/08	02 / 28 / 08

	Ethyl benzene	"	E		ND	52 ug/kg	/ /	02 / 28 / 08
	Isopropyl benzene	"	E		ND	52 ug/kg	/ /	02 / 28 / 08
	Naphthalene	"	E		ND	104 ug/kg	/ /	02 / 28 / 08
	Toluene	"	E		ND	62 ug/kg	/ /	02 / 28 / 08
	Fluorene	8270			ND	118 ug/kg	/ /	02 / 29 / 08
	Phenanthrene	"			ND	118 ug/kg	/ /	02 / 29 / 08
SB02 2829	Benzene	8260	E	Soil	ND	62 ug/kg	02/ 21 / 08	02 / 28 / 08
	Ethyl benzene	"	E		ND	62 ug/kg	/ /	02 / 28 / 08
	Isopropyl benzene	"	E		ND	62 ug/kg	/ /	02 / 28 / 08
	Naphthalene	"	E		ND	124 ug/kg	/ /	02 / 28 / 08
	Toluene	"	E		ND	62 ug/kg	/ /	02 / 28 / 08
	Fluorene	8270			ND	99 ug/kg	/ /	02 / 28 / 08

	Phenanthrene	"			ND	994 ug/kg	/ /	02 / 28 / 08
SB03 1112	Benzene	8260	E	Soil	ND	56 ug/kg	02 / 21 / 08	02 / 28 / 08
	Ethylbenzene	"	E		ND	56 ug/kg	/ /	02 / 28 / 08
	Isopropyl benzene	"	E		ND	56 ug/kg	/ /	02 / 28 / 08
	naphthalene	"	E		ND	112 ug/kg	/ /	02 / 28 / 08
	Toluene	"	E		ND	56 ug/kg	/ /	02 / 28 / 08
	Fluorene	8270			ND	122 ug/kg	/ /	02 / 29 / 08
	Phenanthrene	"			ND	122 ug/kg	/ /	02 / 29 / 08
SB04 0405	Benzene	8260	E	Soil	ND	55 ug/kg	02 / 21 / 08	02 / 28 / 08
	Ethylbenzene	"	E		ND	55 ug/kg	/ /	02 / 28 / 08
	Isopropyl benzene	"	E		ND	55 ug/kg	/ /	02 / 28 / 08
	Naphthalene	"	E		ND	108 ug/kg	/ /	02 / 28 / 08

	Toluene	"	E		ND	55 ug/kg	/ /	02 / 28 / 08
	Fluorene	8270			ND	121 ug/kg	/ /	02 / 29 / 08
	Phenanthrene	"			ND	121 ug/kg	/ /	02 / 29 / 08
SB04 2829	Benzene	8260	E	Soil	ND	52 ug/kg	02 / 21 / 08	02 / 28 / 08
	Ethyl benzene	"	E		ND	52 ug/kg	/ /	02 / 28 / 08
	Isopropyl benzene	"	E		ND	52 ug/kg	/ /	02 / 28 / 08
	Naphthalene	"	E		ND	104 ug/kg	/ /	02 / 28 / 08
	Toluene	"	E		ND	52 ug/kg	/ /	02 / 28 / 08
	Fluorene	8270			ND	114 ug/kg	/ /	02 / 28 / 08
	Phenanthrene	"			ND	114 ug/kg	/ /	02 / 28 / 08
SB05 1415	Benzene	8260	E	Soil	ND	58 ug/kg	02 / 21 / 08	02 / 28 / 08
	Ethyl benzene	"	E		ND	58 ug/kg	/ /	02 / 28 / 08

	Isopropyl benzene	"	E		ND	58 ug/kg	/ /	02 / 28 / 08
	Naphthalene	"	E		ND	116 ug/kg	/ /	02 / 28 / 08
	Toluene	"	E		ND	58 ug/kg	/ /	02 / 28 / 08
	Fluorene	8270			ND	123 ug/kg	/ /	02 / 29 / 08
	Phenanthrene	"			ND	123 ug/kg	/ /	02 / 29 / 08

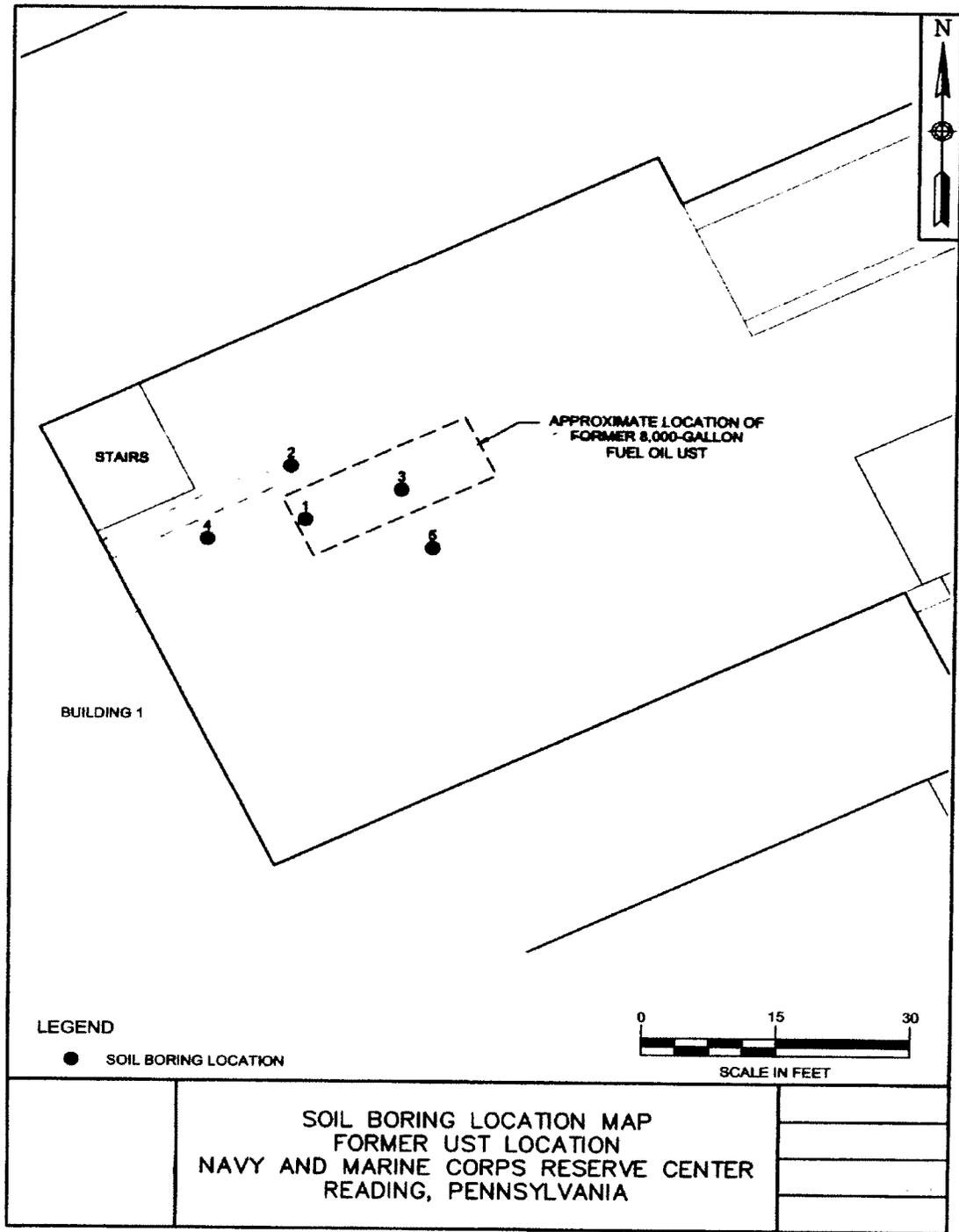
¹ Where EPA Method 5035 is required, indicate sample collection option in the right hand box of this column using the following codes:

P – Samples placed in a soil sample vial with a preservative present.

E – Samples collected and stored in a soil collection device which is airtight and affords little to no headspace.

N – Samples placed in soil sample vial without a preservative present.

Site Location and Sampling Map - Use this page or suitable facsimile to provide a large scale map of the site where tanks were closed. Scales between 1" = 10 and 1" = 100 feet frequently work out well. Include the following information as each applies to the site: facility name and I.D., county, township or borough, property boundaries or area of interest, buildings, roads and streets with names or route numbers, utilities, location and ID number of storage tanks removed including piping and dispensers, soil stockpile locations, excavations or other locations of product recovery, north arrow, approximate map scale and legend. Also show depth and location of samples with sample ID numbers cross-referenced to the same ID numbers shown on Page 10 of 11.



Site Location and Sampling Map - Use this page or suitable facsimile to provide a large scale map of the site where tanks were closed. Scales between 1" = 10 and 1" = 100 feet frequently work out well. Include the following information as each applies to the site: facility name and I.D., county, township or borough, property boundaries or area of interest, buildings, roads and streets with names or route numbers, utilities, location and ID number of storage tanks removed including piping and dispensers. soil stockpile locations. excavations or other locations of product recovery, north arrow, approximate map to the same ID nu

umbers cross-referenced

