
From:

Gas Auto Repair and Mini Mart
4548 Baltimore Avenue
Philadelphia, PA 19143

To:

Regional Hearing Clerk (3RC00)
U.S. EPA Region III
1650 Arch Street
Philadelphia, PA 19103 - 2029

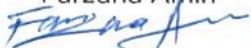
U.S. EPA-REGION 3-RHC
FILED-17OCT2019PM1:22

With Due Respect,

I am sending this paper from 2017 and 2018 before all paperwork on record. Mr. Ezra Rueven, who owns the property and is the landowner of Gas Auto Repair and Mini Mart, and I started this business at the end of April 2017. Before that, Mr. Rueven had all the records, however, when we called him, saying that we needed a copy of this paperwork, he clearly stated that he didn't have it and that he seemed to have lost the records. If need be, and the urge to contact him arises, here is his phone number, 610 - 368 - 4140, and his address, 48th & Spruce STS. Philadelphia, PA 19139. We've already contacted the Mid-Atlantic company, which is located at 609 Meeting House Road, Hockessin, DE 19707, and has done all and current tests.

Sincerely,

Farzana Amin



Determination of 2 Inch WC Static Pressure Performance of Vapor Recovery Systems of Dispensing Facilities

SUMMARY OF SOURCE TEST DATA

SOURCE INFORMATION		FACILITY PARAMETERS		
GDF Name and address <i>Gas + Mini Mart</i> <i>9015. 46th + Belt Ave</i> <i>Phila Pa. 19143</i>	GDF Representative and Title <i>Amin</i> GDF Phone No. ()	PHASE II SYSTEM TYPE (Check One)		
Permit Conditions <i>unknown</i>	Source: GDF Vapor Recovery System <i>Emco Balance System</i> GDF # <i>unknown</i> A/C # <i>unknown</i>	Balance <input checked="" type="checkbox"/> Hirt Red Jacket Hasstech Healy Other	Manifolder? Y or N	
	Operating Parameters Number of Nozzles Served by Tank #1 Number of Nozzles Served by Tank #3 Number of Nozzles Served by Tank #2 Number of Nozzles Served by Tank #4			
Applicable Regulations: <i>CARB + the State of Pa.</i>		VN Recommended <i>none</i>		
Source Test Results and Comments Tank #:				
	1	2	3	4
1. Product Grade	<i>Reg. Reg. Super</i>			
2. Actual Tank Capacity, gallons	<i>6000 6000 6000</i>			
3. Gasoline Volume	<i>1689 1788 714</i>			
4. Ullage, gallons (#2-#3)	<i>Total 13,500</i>			
5. Initial Pressure, inches H ₂ O	<i>2.0</i>			
6. Pressure After 1 Minute, inches H ₂ O	<i>1.99</i>			
7. Pressure After 2 Minutes, inches H ₂ O	<i>1.98</i>			
8. Pressure After 3 Minutes, inches H ₂ O	<i>1.97</i>			
9. Pressure After 4 Minutes, inches H ₂ O	<i>1.96</i>			
10. Final Pressure After 5 Minutes, inches H ₂ O	<i>1.95</i>			
11. Allowable Final Pressure	<i>System passed. 1.92</i>			
Test Conducted by: <i>Dennis Berry</i>	Test Company: <i>Mid-Atlantic</i> <i>Petroken Service Inc</i> <i>302-438-6839</i>		Date of Test: <i>9/13/17</i>	

Form 1

<h3>Dynamic Back Pressure Source Test Results</h3>		Report No.: _____ Test Date: <u>9/13/17</u> Test Times: _____ Run A: <u>Normal</u>
Source Information		Representatives
Station Name and Address: <u>Gas + Mini Mart</u> <u>901 S. 46th St. + Belt Ave</u> <u>Phila. Pa. 19143</u>	Station Representative and Title: <u>Amin</u> Phone No. () _____	Source Test Engineers / Technicians: <u>Dennis Berry</u> <u>Mid-Atlantic Petro. Serv</u> <u>302.438.6839</u>
Permit Conditions: <u>unknown</u>	Source: <u>GDF Vapor Recovery</u> <u>Enco Balance Systems</u> GDF # <u>unknown</u> A/C # <u>unknown</u>	Permit Services Division/Enforcement Division: Test Requested By: <u>Amin</u>
Operating Parameters: <u>Normal</u>		Applicable Regulations: <u>CARB + the State of Pa</u>
		VN Recommended: <u>None</u>

Sources Test Results and Comments:

Nozzle #	Gas Grade	Nozzle Model	Dynamic Back Pressure, Inches H ₂ O wet		
			20 CFH	60 CFH	100 CFH
1	<u>Reg-Super</u>	<u>Enco RA4005</u>	<u>0.03'</u>	<u>0.09'</u>	<u>0.21'</u>
2	<u>Reg-Super</u>	<u>" "</u>	<u>0.04'</u>	<u>0.12'</u>	<u>0.26'</u>
3	<u>Reg-Super</u>	<u>OPW 11UF</u>	<u>0.04'</u>	<u>0.13'</u>	<u>0.28'</u>
4	<u>Reg-Super</u>	<u>" "</u>	<u>0.04'</u>	<u>0.17'</u>	<u>0.27'</u>
5	<u>Reg-Super</u>	<u>" "</u>	<u>0.05'</u>	<u>0.15'</u>	<u>0.31'</u>
6	<u>Reg-Super</u>	<u>Enco RA4005</u>	<u>0.06'</u>	<u>0.18'</u>	<u>0.38'</u>
7	<u>Reg-Super</u>	<u>" "</u>	<u>0.05'</u>	<u>0.15'</u>	<u>0.32'</u>
8	<u>Reg-Super</u>	<u>" "</u>	<u>0.06'</u>	<u>0.17'</u>	<u>0.36'</u>

All nozzles + Awers passed according to CARB and State of Pa. criteria

Dennis R. Berry

Results Received by	Date	Results Reviewed by	Date	Results Approved/Disapproved

PRESSURE VACUUM VALVE

TEST

Date of Test 9/13/17
Location Gas - Mini Mart - 901 S 46th St. + Balt. Ace Phila
Type of valve Fanco A0084, 038 Pa. 19143
Valve settings 3" pressure 8" vacuum

PRESSURE

Did the valve hold pressure up to the cracking setting? Yes No

Did the valve open at the correct cracking setting? Yes NO

VACUUM

Did the valve hold vacuum up to the release setting? Yes No

Did the valve open at the correct cracking setting? Yes NO

Valve Passed? Yes NO

FOR USE WITH

Petro Plus

9015. 46th St + East Ave Philadelphia Pa. 19143

Year 17
 Mo 9
 Day 13
 Name Penny Waive
 City Phila
 State Geo + Minn Markt
 OWNER

1 LOCATION: Geo + Mini Markt, Street No and/or Corner, City, State, Telephone No.
 2 OWNER: Amin, Name, Address, Telephone No.
 3 OPERATOR: Amin, Name, Dealer, Mgr. or Other, Address (if different than Location), Telephone No.
 4 REASON FOR TEST: tower leg tightness
 5 TEST REQUESTED BY: Amin, Name, Position, Order No., Billing Address
 6 SPECIAL INSTRUCTIONS:
 7 CONTRACTOR OR COMPANY MAKING TEST: Mid-Atlantic Petroleum Services Inc. Dennis Barry
 8 THIS A TANK TEST TO BE MADE WITH THIS LINE TEST? YES NO
 9 MAKE AND TYPE OF PUMP OR DISPENSERS: MPD + Red Stack of STP
 10 WEATHER: Temperature in Tanks: Before: 60, After: 60, F, C
 COVER OVER LINES: Concrete
 APPROXIMATE BURIAL DEPTH: _____

11 IDENTIFY EACH LINE AS TESTED	12 TIME (MILITARY)	13 LOG OF TEST PROCEDURES, AMBIENT TEMPERATURE, WEATHER, ETC.	14 PRESSURE		15 VOLUME		16 TEST RESULTS
			BEFORE	AFTER	BEFORE	AFTER	
Regular	1028	Bleedback test	60	0	042	072	+ 030
	1030	Start line test		60			
	1045	Continue line test	57	60	0420	0400	- 0020
	1100	"	57	60	0400	0380	- 0020
	1115	"	58	60	0380	0365	- 0015
	1130	"	54	60	0365	0355	- 0010
	1132	Bleedback test	60	0	035	061	+ 026

Value of STP stored

~ 0065 GPH

line tested tight

according to NFPA and State of Pa. NIS + De orris

Dennis R. Barry

FOR USE WITH

Perforated
with holes

Gas + Mini Mart
2015. 46th St + Balt Ave
Pitkin Pa. 17143

Year 17th Pennsy
Mo. 9 Pitkin
Day 13 Gas + Mini Mart
DATE OF TEST

1 LOCATION: Gas + Mini Mart
2 OWNER: Amin
3 OPERATOR: Amin
4 REASON FOR TEST: too bright
5 TEST REQUESTED BY: Amin
6 SPECIAL INSTRUCTIONS: MWD - Atlantic Petroleum Services Inc. Dennis Barry
7 CONTRACTOR OR COMPANY MAKING TEST: MWD + Red Jacket STP
8 TEST REQUESTED BY: Amin
9 TANK TEST TO BE MADE WITH THIS LINE TEST? YES
10 WEATHER: Concrete

11 IDENTIFY EACH LINE AS TESTED	12 TIME (MILITARY)	13 LOG OF TEST PROCEDURES, AMBIENT TEMPERATURE, WEATHER, ETC.	14 PRESSURE		15 VOLUME		16 TEST RESULTS
			BEFORE	AFTER	BEFORE	AFTER	
Super	1033	Bleedback test	60	0	050	089	+039
	1035	Start line test		60			
	1050	Continue line test	57	60	0500	0480	-0020
	1105	"	58	60	0480	0465	-0015
	1120	"	58	60	0465	0450	-0015
	1135	"	59	60	0450	0440	-0010
	1137	Bleedback test	60	0	044	079	+035

Value at STP stored

-00000 GPH

line tested tight

according to NFPA and State of Pa. NJ + Decker

Dennis R. Barry

LDT 880 - LEAK DETECTOR CHECKLIST

CONTRACTOR <i>Mitch - Atlantic Petroleum Svc. Inc.</i>		CUSTOMER <i>Amin</i>	
DATE <i>9/13/17</i>	PRODUCT <i>Regular</i>	LOCATION <i>Qu + Mini Mart, 901 S. 46th St. + Belt Ave. Ft. Lauderdale, FL 33309</i>	
TECHNICIAN <i>Dennis Barry</i>			

LDT 880 - MINIMART

I SUBMERSIBLE PUMP IDENTIFICATION

CHECK MFG. INDICATE MODEL NO. IF KNOWN					RECORD SERIAL #				
RED JACKET	TOKHEIM	GILBARCO	BENNETT	DRESSER WAYNE	A.O. SMITH	BOWSER KEENE	SOUTH WEST	OTHER	
<input checked="" type="checkbox"/>									

II LEAK DETECTOR IDENTIFICATION

CHECK TYPE				
RED JACKET MODEL 116-030 PLD-2SEC HEX HEAD	RED JACKET MODEL 116-017 DLD 2SEC HEX HEAD	RED JACKET MODEL 116-011A DLD 5SEC ROUND HEAD	TOKHEIM MODEL 585PM DLD 2SEC SQUARE HEAD	OTHER <input checked="" type="checkbox"/>

PRE-TEST CONDITIONS

VOLUME OF PRODUCT FLUSHED THRU LINE _____ GALLONS

OTHER COMMENTS _____

TEST PROCEDURE

<p>LEAK DETECTOR INSTALLED TEST AT DISPENSER</p> <p>III GENERAL LINE AND PUMP INFORMATION</p> <p>RECORD OPERATING PUMP PRESSURE <u>28</u> psig. AIR-VAPOR TEST WITH PUMP OFF MEASURE AND RECORD <u>030g</u></p> <p>IV PRESSURE STEP TEST</p> <p>WITH BOTTOM SELECTOR IN PRESSURE STEP TEST POSITION TURN ON PUMP RECORD TIME IN SECONDS GAUGE NEEDLE REMAINS IN COLORED ZONE <u>2</u> SEC.</p> <p>V 3 GALLON PER HOUR LEAK SIMULATED TEST</p> <p>WITH BOTTOM SELECTOR IN 3 GPH TEST POSITION</p> <p>A) MEASURE AND RECORD VOLUME IN CALIBRATED BEAKER FOR 60 SECOND TEST <u>1.97</u> ML</p> <p>B) OPEN DISPENSER NOZZLE OR PLACE BOTTOM SELECTOR IN DISPENSER NOZZLE POSITION. FLOW RATE OF APPROX. 1 1/2-GAL PER MINUTE WILL BE OBSERVED. DOES GAUGE NEEDLE MOVE TO LOWER END OF COLORED ZONE YES <input checked="" type="checkbox"/> NO _____ DOES FLOW RATE INCREASE TO APPROX. 1 1/2-GAL PER MINUTE YES <input checked="" type="checkbox"/> NO _____</p> <p>C) CLOSE DISPENSER NOZZLE OR PLACE BOTTOM SELECTOR IN 3GPH TEST POSITION: GAUGE RETURN TO COLORED ZONE YES <input checked="" type="checkbox"/> NO _____ GAUGE DOES NOT RETURN TO COLORED ZONE YES _____ NO <input checked="" type="checkbox"/> GAUGE GOES TO OPERATING PRESSURE YES <input checked="" type="checkbox"/> NO _____</p> <p style="text-align: right;">PASS <input checked="" type="checkbox"/> FAIL _____</p>	<p>LEAK DETECTOR ISOLATED FROM PRODUCT LINE - TEST AT PUMP PIT REFER TO LDT INSTRUCTIONS</p> <p>III GENERAL PUMP INFORMATION</p> <p>FLUSH LDT TESTOR RECORD OPERATING PUMP PRESSURE _____ psig.</p> <p>IV PRESSURE STEP TEST - SUBMERSIBLE PUMP REMAINS ON THRU-OUT TEST PROCEDURE</p> <p>WITH BOTTOM SELECTOR IN PRESSURE STEP TEST POSITION ROTATE ISOLATOR FULLY (CCW) RECORD TIME IN SECONDS GAUGE NEEDLE REMAINS IN COLORED ZONE _____ SEC</p> <p>V 3 GALLON PER HOUR LEAK SIMULATED TEST</p> <p>WITH BOTTOM SELECTOR IN 3 GPH TEST POSITION</p> <p>A) MEASURE AND RECORD VOLUME IN CALIBRATED BEAKER FOR 60 SECOND TEST _____ ML</p> <p>B) PLACE BOTTOM SELECTOR IN DISPENSER NOZZLE POSITION. FLOW RATE OF APPROX. 1 1/2-GAL PER MINUTE WILL BE OBSERVED. DOES GAUGE NEEDLE MOVE TO LOWER END OF COLORED ZONE YES _____ NO _____ DOES FLOW RATE INCREASE TO APPROX. 1 1/2-GAL PER MINUTE YES _____ NO _____</p> <p>C) PLACE BOTTOM SELECTOR IN 3GPH TEST POSITION: GAUGE RETURN TO COLORED ZONE YES _____ NO _____ GAUGE DOES NOT RETURN TO COLORED ZONE YES _____ NO _____ GAUGE GOES TO OPERATING PRESSURE YES _____ NO _____</p> <p style="text-align: right;">PASS _____ FAIL _____</p>
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LDT 880 - LEAK DETECTOR CHECKLIST

LDT 880

Gus + Mini Mart

CONTRACTOR <i>Amil - Atlantic Petroleum Services</i>		CUSTOMER <i>Amin</i>	
DATE <i>9/13/17</i>	PRODUCT <i>Supr</i>	LOCATION <i>Gus + Mini Mart Route 90 S. 46th St. + Belt Ave Khalifa TX 75194-3</i>	
TECHNICIAN <i>Dennis Barry</i>			

I SUBMERSIBLE PUMP IDENTIFICATION

CHECK MFG. INDICATE MODEL NO. IF KNOWN					RECORD SERIAL #			
RED JACKET	TOKHEIM	GILBARCO	BENNETT	DRESSER WAYNE	A.O. SMITH	BOWSER KEENE	SOUTH WEST	OTHER
<input checked="" type="checkbox"/>								

II LEAK DETECTOR IDENTIFICATION

CHECK TYPE							
RED JACKET MODEL 116-030 P.L.D-2SEC HEX HEAD		RED JACKET MODEL 116-017 DLD 2SEC HEX HEAD		RED JACKET MODEL 116-011A DLD 5SEC ROUND HEAD		TOKHEIM MODEL 585PM DLD 2SEC SQUARE HEAD	OTHER <input checked="" type="checkbox"/>

PRE-TEST CONDITIONS

VOLUME OF PRODUCT FLUSHED THRU LINE _____ GALLONS

OTHER COMMENTS _____

TEST PROCEDURE

<p>LEAK DETECTOR INSTALLED TEST AT DISPENSER</p> <p>III GENERAL LINE AND PUMP INFORMATION</p> <p>RECORD OPERATING PUMP PRESSURE <u>28</u> psig. AIR-VAPOR TEST WITH PUMP OFF MEASURE AND RECORD <u>039</u> oz</p> <p>IV PRESSURE STEP TEST</p> <p>WITH BOTTOM SELECTOR IN PRESSURE STEP TEST POSITION TURN ON PUMP RECORD TIME IN SECONDS GAUGE NEEDLE REMAINS IN COLORED ZONE <u>2</u> SEC.</p> <p>V 3 GALLON PER HOUR LEAK SIMULATED TEST</p> <p>WITH BOTTOM SELECTOR IN 3 GPH TEST POSITION MEASURE AND RECORD VOLUME IN CALIBRATED BEAKER FOR 60 SECOND TEST <u>1 1/2 gal</u></p> <p>B) OPEN DISPENSER NOZZLE OR PLACE BOTTOM SELECTOR IN DISPENSER NOZZLE POSITION. FLOW RATE OF APPROX. 1 1/2-GAL PER MINUTE WILL BE OBSERVED. DOES GAUGE NEEDLE MOVE TO LOWER END OF COLORED ZONE YES <input checked="" type="checkbox"/> NO _____ DOES FLOW RATE INCREASE TO APPROX. 1 1/2-GAL PER MINUTE YES <input checked="" type="checkbox"/> NO _____</p> <p>C) CLOSE DISPENSER NOZZLE OR PLACE BOTTOM SELECTOR IN 3GPH TEST POSITION: GAUGE RETURN TO COLORED ZONE YES <input checked="" type="checkbox"/> NO _____ GAUGE DOES NOT RETURN TO COLORED ZONE YES _____ NO <input checked="" type="checkbox"/> GAUGE GOES TO OPERATING PRESSURE YES <input checked="" type="checkbox"/> NO _____</p>	<p>LEAK DETECTOR ISOLATED FROM PRODUCT LINE - TEST AT PUMP PIT REFER TO LDT INSTRUCTIONS</p> <p>III GENERAL PUMP INFORMATION</p> <p>FLUSH LOT TESTOR RECORD OPERATING PUMP PRESSURE _____ psig.</p> <p>IV PRESSURE STEP TEST - SUBMERSIBLE PUMP REMAINS ON THRU-OUT TEST PROCEDURE</p> <p>WITH BOTTOM SELECTOR IN PRESSURE STEP TEST POSITION ROTATE ISOLATOR FULLY (CCW) RECORD TIME IN SECONDS GAUGE NEEDLE REMAINS IN COLORED ZONE _____ SEC.</p> <p>V 3 GALLON PER HOUR LEAK SIMULATED TEST</p> <p>WITH BOTTOM SELECTOR IN 3 GPH TEST POSITION MEASURE AND RECORD VOLUME IN CALIBRATED BEAKER FOR 60 SECOND TEST _____ ML</p> <p>B) PLACE BOTTOM SELECTOR IN DISPENSER NOZZLE POSITION. FLOW RATE OF APPROX. 1 1/2-GAL PER MINUTE WILL BE OBSERVED. DOES GAUGE NEEDLE MOVE TO LOWER END OF COLORED ZONE YES _____ NO _____ DOES FLOW RATE INCREASE TO APPROX. 1 1/2-GAL PER MINUTE YES _____ NO _____</p> <p>C) PLACE BOTTOM SELECTOR IN 3GPH TEST POSITION: GAUGE RETURN TO COLORED ZONE YES _____ NO _____ GAUGE DOES NOT RETURN TO COLORED ZONE YES _____ NO _____ GAUGE GOES TO OPERATING PRESSURE YES _____ NO _____</p>
<p>LEAK DETECTOR TEST</p> <p>PASS <input checked="" type="checkbox"/> FAIL</p>	<p>LEAK DETECTOR TEST</p> <p>PASS <input type="checkbox"/> FAIL</p>

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION



BUREAU OF ENVIRONMENTAL CLEANUP AND BROWNFIELDS
DIVISION OF STORAGE TANKS



P.O. BOX 8763
HARRISBURG, PENNSYLVANIA 17105-8763

THIS CERTIFICATION AUTHORIZES THE BELOW NAMED INDIVIDUAL TO CONDUCT TANK HANDLING OR INSPECTION ACTIVITIES PURSUANT TO THE STORAGE TANK AND SPILL PREVENTION ACT, AND DEPARTMENT REGULATIONS AT TITLE 25 PA CODE CHAPTER 245 IN THE SPECIFIC CATEGORIES SHOWN.

CATEGORIES	ISSUE DATE(S)	EXPIRATION DATE(S)
UTT *****	03/12/2010	03/12/2019
*****	*****	*****
*****	*****	*****
*****	*****	*****
*****	*****	*****
*****	*****	*****

Anne Toth
Anne Toth, Chief
Certification Unit

ISSUED TO DENNIS R BERRY
DEP CLIENT ID NUMBER 178511
CERTIFICATION NUMBER 3617



STATE OF NEW JERSEY
DEPARTMENT OF ENVIRONMENTAL PROTECTION
NJDEP

Licensing Programs
Mail Code 401-04E
PO BOX 420
Trenton, NJ 08625-0420



Hereby Certifies the Goodstanding of:

DENNIS R BERRY SSN:
License No. 0009961 Reg No. 0009961

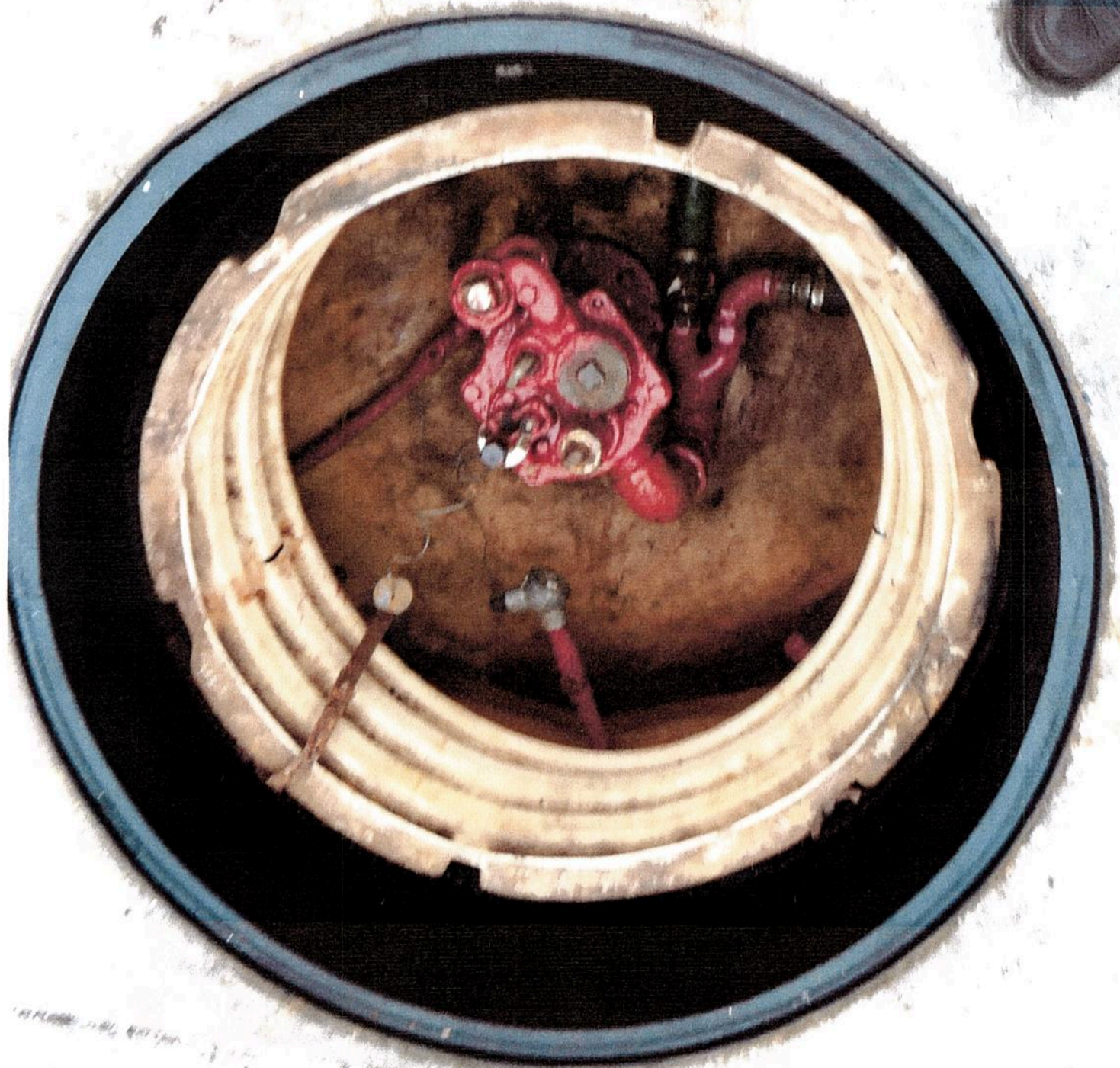
AS A LICENSED:
TANK TESTING

DENNIS R BERRY
609 MEETING HOUSE RD
C/O MID-ATLANTIC PETROLEUM SERVICES INC
HOCKESSIN DE 19707

Expires: 07/31/19 Document#: 161650800











November 1, 2018

VIA FEDEX GROUND

Pennsylvania Department of Environmental Protection
Southeast Regional Office
2 East Main Street
Norristown, Pennsylvania 19401

**Subject: Submittal - PADEP UST Facility Operations Inspection Form
Gas Auto Repair & Mini Mart, PADEP Facility ID #51-42774
4548 Baltimore Avenue
Philadelphia, Pennsylvania 19143**

Dear PADEP:

On October 30, 2018, Mr. David Piercey, Vice President of JD2 Environmental, Inc. (JD2) and PADEP Certified Inspection #1620, visited the above subject location to perform an inspection of the underground storage tank (UST) systems. The inspected tanks, Tank #001, Tank #002, and Tank #003, are all 6,000-gallon Gasoline USTs.

Enclosed please find the completed and signed PADEP Underground Storage Tank Facility Operations Inspection form, along with a photographic log. Issues of concern are addressed in Section V. During the inspection, a weep on the shear valve below Dispenser #8 was discovered. A Notification of Contamination was called in to PADEP due to ~1 gallon of product accumulated in the UDC. Proper paperwork was filed with PADEP on 10/31/18.

If JD2 can provide any additional assistance in the review of this inspection report, please do not hesitate to contact us at (610) 430-8151.

Sincerely yours,
JD2 ENVIRONMENTAL, INC.

David J. Piercey
Vice President
Certified PADEP Inspector #1620

DJP:wc
Enclosures

cc: PADEP Central Office
A. Sadiq/Gas Auto Repair & Mini Mart



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF ENVIRONMENTAL CLEANUP AND BROWNFIELDS
STORAGE TANK DIVISION

FOR DEP USE ONLY
Reviewer _____
Date _____
Entered by _____
Date _____

**UNDERGROUND STORAGE TANK FACILITY
OPERATIONS INSPECTION**

FACILITY INFORMATION

ID Number 51 - 42774
Name Gas Auto Repair & Mini Mart
Location 4548 Baltimore Ave
Address Philadelphia Pa 19143
Municipality Philadelphia

Representative Present During Inspection

Name Amid Sadiq
Phone 215-631-2766
 Owner Operator Employee None

CERTIFIED INSPECTOR

Name David Piercey
ID No. 1620
Phone (610) 430-8151
E-mail dpiercey@jd2env.com

Date of First Site Visit (month/day/year)
10/30/18

OWNER (must be a person)

Name Amid Sadiq

OPERATOR (if different than owner)

Name _____

Financial Responsibility discussed with owner

Yes No

- Provided by USTIF. Owner must have deductibles available as provided in Subchapter H of the regulations.
- Required of all UST owners except state agencies.

Suspected or confirmed contamination observed

Yes (notify proper region within 48 hours) No

Improperly closed or unregistered tanks present

Yes (provide comment) No

Written instructions/notification procedures are available/posted

Yes No

Amended registration form required for (check all that apply):

- Added tanks
- Closed tanks
- Change in tank size
- Change in substance stored
- Change of operational status (in or out of service)
- Change of owner

Inspection summary.

Indicate the compliance status of each item below using the following codes: N = Noncompliant C = Compliant

	Tank No. 001	Tank No. 002	Tank No. 003	Tank No. 004	Tank No. _____
Tank Construction and Corrosion Protection	C	C	C	N	
Piping Construction and Corrosion Protection	C	C	C	N	
Spill Prevention	C	C	C	N	
Overfill Prevention	C	C	C	N	
Registration Certificate Display	C	C	C	N	
Tank Release Detection	N	N	N	N	
Piping Release Detection	N	N	N	N	
Monthly sump checks	N	N	N	N	

I, the DEP Certified Inspector (IUM), have inspected the entire above referenced facility including examining manways, sumps, monitoring wells and dispensers. Based on my personal observation of the facility and documentation provided by the owner, I certify under penalty of law as provided in 18 PA C.S.A. Section 4904 (relating to unsworn falsification to authorities), that the information provided by me is true, accurate and complete to the best of my knowledge and belief.

[Signature]
Certified Inspector's Signature

10/31/18
Date

As the representative of the owner or operator, I have reviewed the completed inspection report. I certify under penalty of law as provided in 18 PA C.S.A. Section 4904 (relating to unsworn falsification to authorities), that the information provided by me is true, accurate and complete to the best of my knowledge and belief.

Signature _____

Title _____

Date _____

- Original: Regional Office - Norristown, Wilkes Barre, Harrisburg, Williamsport, Pittsburgh, or Meadville
- Copy: Owner
- Copy: DEP, Division of Storage Tanks, P.O. Box 8763, Harrisburg, PA 17105-8763
- Copy: Inspector

(See att'd)



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF ENVIRONMENTAL CLEANUP AND BROWNFIELDS
STORAGE TANK DIVISION

FOR DEP USE ONLY	
Reviewer	_____
Date	_____
Entered by	_____
Date	_____

**UNDERGROUND STORAGE TANK FACILITY
OPERATIONS INSPECTION**

FACILITY INFORMATION

ID Number 51 - 42774
Name Gas Auto Repair & Mini Mart
Location 4548 Baltimore Ave
Address Philadelphia, PA 19143
Municipality Philadelphia

CERTIFIED INSPECTOR

Name David Piercey
ID No. 1620
Phone (610) 430-8151
E-mail dpiercey@jd2env.com

Date of First Site Visit (month/day/year)
10/30/18

OWNER (must be a person)

Name Amid Sadiq

OPERATOR (if different than owner)

Name _____

Representative Present During Inspection

Name Amid Sadiq
Phone 215-631-2766

Owner Operator Employee None

Financial Responsibility discussed with owner

Yes No

- Provided by USTIF. Owner must have deductibles available as provided in Subchapter H of the regulations.
- Required of all UST owners except state agencies.

Suspected or confirmed contamination observed

Yes (notify proper region within 48 hours) No

Improperly closed or unregistered tanks present

Yes (provide comment) No

Written instructions/notification procedures are available/posted

Yes No

Amended registration form required for (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Added tanks | <input type="checkbox"/> Change in substance stored |
| <input type="checkbox"/> Closed tanks | <input type="checkbox"/> Change of operational status (in or out of service) |
| <input type="checkbox"/> Change in tank size | <input type="checkbox"/> Change of owner |

Inspection summary.

Indicate the compliance status of each item below using the following codes: N = Noncompliant C = Compliant

	Tank No. 001	Tank No. 002	Tank No. 003	Tank No. 004	Tank No.
Tank Construction and Corrosion Protection	C	C	C	N	
Piping Construction and Corrosion Protection	C	C	C	N	
Spill Prevention	C	C	C	N	
Overfill Prevention	C	C	C	N	
Registration Certificate Display	C	C	C	N	
Tank Release Detection	N	N	N	N	
Piping Release Detection	N	N	N	N	
Monthly sump checks	N	N	N	N	

I, the DEP Certified Inspector (IUM), have inspected the entire above referenced facility including examining manways, sumps, monitoring wells and dispensers. Based on my personal observation of the facility and documentation provided by the owner, I certify under penalty of law as provided in 18 PA C.S.A. Section 4904 (relating to unsworn falsification to authorities), that the information provided by me is true, accurate and complete to the best of my knowledge and belief.

Certified Inspector's Signature _____

Date _____

As the representative of the owner or operator, I have reviewed the completed inspection report. I certify under penalty of law as provided in 18 PA C.S.A. Section 4904 (relating to unsworn falsification to authorities), that the information provided by me is true, accurate and complete to the best of my knowledge and belief.

Amid Sadiq
Signature

David Piercey
Title

11-1-18
Date

(See att'd)

**UNDERGROUND STORAGE TANK FACILITY
OPERATIONS INSPECTION**

Facility Name Gas Auto Repair & Mini Mart Date 10/30/18 Facility ID 51 42774

I. **TANK SYSTEM INFORMATION.** For each tank, fill in the required information and codes from the following list. Where multiple codes are allowed and used for a specific tank component, describe the arrangement in the COMMENTS section. (See FOI form instructions for details.)

	Tank No. 001	Tank No. 002	Tank No. 003	Tank No. 004	Tank No.	DEP Use
1. Tank capacity (name plate gallons)	6000	6000	6000	500		
2. Substance currently stored	Gas	Gas	Gas	WO		
3. Installation date (mm/yyyy)	3/1/83	3/1/83	3/1/83	unk		
4. This drone tank is manifolded to tank number	002	--	--	--		
5. Product level, in inches, at time of inspection	55"	57"	14"	N/A		
6. Total secondary containment on this tank system	Y	Y	Y	N/A		(18)
7. Tank construction and corrosion protection	E	E	E	UNK		(1)
8. Main piping construction and corrosion protection	D	K	K	UNK		(2)
9a. Number of tank top sumps ‡	0	1	1	0		
9b. Number of tank top sumps tested tight ‡	0	0	0	0		(21)
9c. Spill containment tested tight	0	0	0	0		(21)
10a. Number of transition sumps	0	0	0	0		
10b. Number of transition sumps tested tight	0	0	0	0		(21)
11a. Number of connected dispensers	4	4	4	0		
11b. Number of connected dispensers with pans	4	4	4	0		
11c. Number of dispenser pans tested tight	0	0	0	0		(22)
12a. Piping flexible joints/connectors construction at tank	X	X	X	F		(PFLX)
12b. Piping flexible joints/connectors construction at dispenser	I	I	I	F		(PFLX)
13. Pump (product dispensing) system	A	C	C	E		(4)
14. Spill protection	Y	Y	Y	N/A		(6)
15. Overfill type	S	S	S	N/A		(7)
16. Current registration certificate display	Y	Y	Y	Y		(8)
17. Stage I vapor recovery	A	A	A	N/A		(19)
18. Stage II vapor recovery	N	N	N	N/A		(20)
Evaluate the tank system release detection methods carefully before filling in the following rows.						
19. Tank release detection	E	E	E	N/A		(12)
20. Piping small release detection (0.2 gph monthly or 0.1 gph annually)	I	B	B	N/A		(5)
21. Pressure (line 13 is C or D) piping line leak detector (LLD function)	N	A	A	N/A		(5)
22. LLD function includes a positive turbine pump shutoff	N	N	N	N/A		(23)

‡ at tank penetrations that have pipe that routinely contains or conveys product.

Site drawing / manifold schematic (not master-drone system):

SEE ATTACHED FIGURE (LAST PAGE)

Tank System Component Codes

- 6. Total secondary containment**
 Y Yes
 N No
- 7. Tank construction**
 A Single-wall steel, unprotected
 B Single-wall, galvanic anodes
 C Impressed current protection
 D Double-wall steel, unprotected
 E Single-wall fiberglass (FRP)
 F Double-wall fiberglass (FRP)
 G Steel with plastic or fiberglass jacket
 (includes double-wall Act 100)
 H Steel with FRP coating
 (Act 100 or equivalent)
 I Steel with lined interior
 J Concrete
 N Unknown
 O Double-wall, steel primary, galvanic anodes
 P Cathodically protected and lined
 99 Other (must provide written comment)
- 8. Main piping construction**
 A Bare steel
 (including only wrapped or coated)
 B Cathodically protected, metallic
 C Copper, unprotected
 D Fiberglass or rigid non-metallic
 E Single-wall, flexible non-metallic
 F Unknown
 G No dispensing piping (most used oil tanks)
 I Double-wall, metallic primary
 J Double-wall rigid (FRP) primary
 K Double-wall flexible primary
 99 Other (must provide written comment)
- 9c. Spill containment tested tight**
 Y Yes
 N No
- 12. Piping flexible joints/connectors**
 A Unprotected metallic component(s) (including only wrapped or coated)
 B Cathodically protected, metallic
 C Flexible coupling with protected metallic ends
 F Unknown
 I Completely inside a containment sump, secondary pipe or liner
 M Completely jacketed with sealed boot
 N NO jacket, not in contact with the ground
 X None
 99 Other (must provide written comment)
- 13. Pump (delivery) system**
 A Suction, check valve at pump or siphon bar only
 B Suction, check valve at tank
 C Pressure
 D Gravity flow to dispenser/pump
 E None
- 14. Spill protection**
 Y Spill containment
 E Filled in less than 25 gallon increments
 N None present or needs repair
- 15. Overfill type (if code S or B, ensure compatible with delivery method)**
 S Drop tube shut off device
 A Overfill alarm (provide description and location in comment section)
 B Ball float valve
 E Filled in less than 25 gallon increments
 N None present or not usable
- 16. Current registration certificate display**
 Y Properly displayed
 N Not displayed
- 17. Stage I vapor recovery**
 A Coaxial
 B 2 port
 N Not complete or none
- 18. Stage II vapor recovery**
 A Complete balance system
 B Complete assist system
 C UG piping only; not complete
 N None of the above
- 19. Tank release detection**
 C Manual Tank Gauging (36 Hour) and Tank Tightness Testing (TTT) every 5 years
 D Statistical Inventory Reconciliation (SIR)
 E Certified Automatic Tank Gauge (0.2 gph Leak Test)
 F Manual Tank Gauging (36 Hour), no TTT
 G44 Manual Tank Gauging, 44 Hours
 G58 Manual Tank Gauging, 58 Hours
 H Interstitial Monitoring (2 Walls)
 J Groundwater Monitoring
 K Vapor Monitoring
 N None
 O Exempt (must provide written comment)
- 20. Piping small release detection (0.2/0.1 gph)**
 B Annual Line Tightness Test (pressure)
 C Line Tightness Test - 3 years (suction)
 D Interstitial Monitoring (monthly – includes visual checking)
 E Groundwater Monitoring
 F Vapor Monitoring
 H None
 I Exempt (must provide written comment)
 J Statistical Inventory Reconciliation (SIR)
 K Electronic Line Leak Detector (0.1 or 0.2 gph test)
- 21. Piping line leak detection (3 gph within 1 hr.)**
 A Mechanical Line Leak Detector (incl. test)
 H None
 K Electronic Line Leak Detector (3 gph test)
 L Continuous Interstitial Monitoring with alarm or pump shut off
- 22. Positive Turbine pump shutoff**
 Y Yes – present and tested
 P Present
 N Not present

UNDERGROUND STORAGE TANK FACILITY OPERATIONS INSPECTION

Facility Name Gas Auto Repair & Mini Mart Date 10/30/18 Facility ID 51 - 42774

II. Release Detection Reference

- Records may be located at the facility or a readily available alternate site.
- The records include all of the information listed below for chosen release detection methods.
- The inspector has actually seen the records.
- A test with an inconclusive result or failure is an indication of a (suspected) product release.

Tank System Tank System Tank System Tank System Tank System
001 002 003 — —

Instructions: Check the box to indicate that a criterion has been met.
Circle the box to indicate that a criterion has not been met.
Circle with "N/A" when a criterion is not applicable (provide comment).

Automatic Tank Gauging: (Tank only – code E)

ATG manufacturer: Veeder-Root ATG model: TLS-350

Does the automatic tank gauge perform continuous in-tank release detection? Yes, No

<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- valid monthly leak test conducted and documented
- manufacturer's certification of ability to detect 0.2 gph release is available
- probes and gauge software certified for manifolded tank systems
 - when not specifically certified, the siphon must be broken to properly test
- maintenance records, for the last year, including calibration, preventative and repair equipment is operational

Manual Tank Gauging: (Tank only – code C, F, G44 or G58)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- tank capacity is 2,000 gallons or less
- tank installed before 11/10/2007
- performed weekly
- 1/8th inch accuracy stick readings
- average 2 stick readings before and after test
- test length appropriate for each tank
 - 36 hours minimum
 - 44 hours, 551-1000 gallons, 64" diameter
 - 58 hours, 551-1000 gallons, 48" diameter
- variation is within standard (both weekly and monthly)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Precision Tightness Test (TTT): (Tank only – code C)

method used (after 10/11/1994): _____

date of last test: _____, result: _____

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- complete documentation of tightness test available
- performed by UTT certified installer (after 9/28/1996)
- manufacturer's certification of ability to detect 0.1 gph release is available

Interstitial Monitoring: (Tank code H; describe monitoring equipment in comments)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- interstitial area monitored monthly (required for tanks installed after 11/20/2007)
- interstitial sensors properly placed (per manufacturer's instructions)
- monitoring wells (secondary barrier) or ports are clearly marked and secured
- maintenance records, for the last year, including preventative and repair equipment manufacturer's performance claims are available
- secondary barrier is compatible with and impermeable to the stored substance

Statistical Inventory Reconciliation: (Tank code D and/or Piping code J)

test vendor: _____ version: _____

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- manufacturer's certification of ability to detect 0.2 gph release is available
- data is collected according to the test vendor's instructions
- analysis completed monthly and valid results supplied to owner/operator within 20 days
 - valid reports include calculated leak rate, minimum detectable leak rate, leak threshold, probability of detection and probability of false alarm
- suspected releases properly investigated within 7 days of inconclusive or failed report to confirm or deny the occurrence of a release

**UNDERGROUND STORAGE TANK FACILITY
OPERATIONS INSPECTION**

Facility Name Gas Auto Repair & Mini Mart Date 10/30/18 Facility ID 51 - 42774

II. RELEASE DETECTION REFERENCE (continued)

Tank Tank Tank Tank Tank
System System System System System
001 002 003 — —

*Instructions: Check the box to indicate that a criterion has been met.
Circle the box to indicate that a criterion has not been met.
Circle with "N/A" when a criterion is not applicable (provide comment).*

Groundwater or Vapor Monitoring: (Tank code J or K and/or Piping code E or F; describe well locations and monitoring equipment in comments)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

wells are located according to site evaluation; attach page with evaluator authentication to the inspection report
wells are properly installed in accordance with site evaluation and regulations
wells are monitored and results recorded monthly in accordance with site evaluation
monitoring wells are marked and secured
fill material is sufficiently porous to allow expeditious detection at the monitoring wells
substance stored meets regulatory requirements for type of monitoring
equipment manufacturer's performance claims are available
equipment maintenance records, for the last year, including calibration, preventative and repair

Groundwater monitoring:

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

monitoring devices can detect 1/8 inch of product or less on water
groundwater is within 20 feet of surface grade
wells are sealed from ground surface to the top of the filter pack
casing is properly slotted: allows entry of product during all groundwater conditions

Vapor Monitoring:

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

the monitoring device is not rendered inoperative by moisture
background contamination will not interfere with vapor monitoring
vapor monitors will detect increases in concentrations of stored substance

Interstitial Monitoring: (Piping code D and/or L; describe monitoring equipment in comments)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

interstitial area monitored monthly (required for all totally-contained pressurized piping systems)
secondary enters sump and allows a release to be detected
interstitial sensors properly placed (per manufacturer's instructions)
monitoring wells or ports (when used) are clearly marked and secured
maintenance records, for the last year, including preventative and repair
equipment manufacturer's performance claims are available
secondary barrier (pipe) is compatible with and impermeable to the stored substance
(Code L only) continuous monitoring used as line leak detector (gravity or pressurized piping) – capable of detecting 3.0 gph release within 1 hour
(Code L only) system tested for operability within the last year
(Code L only) monthly "sensor status" (or equivalent) records available

Sumps Checked Monthly

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

monthly sump checks for the last 12 months documented
tank top sumps dry and clean
transition sumps dry and clean
dispenser pans/sumps dry and clean

Exempt Suction System: (SUCTION piping only – code I)

NOTE: No further release detection required on piping meeting all these criteria.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

the tank top is lower than the suction pump inlet
the below grade piping slopes uniformly back to the tank
there is no more than one check valve in the piping
the check valve is located close to or inside the suction pump
compliance with above specifications can be readily determined; describe in comments

**UNDERGROUND STORAGE TANK FACILITY
OPERATIONS INSPECTION**

Facility Name Gas Auto Repair & Mini Mart Date 10/30/18 Facility ID 51 - 42774

II. RELEASE DETECTION REFERENCE (continued)

Tank System 001 Tank System 002 Tank System 003 Tank System Tank System

Instructions: Check the box to indicate that a criterion has been met.
Circle the box to indicate that a criterion has not been met.
Circle with "N/A" when a criterion is not applicable (provide comment).

Piping Tightness (Line) Testing: (Piping only – code B or C)

test vendor: _____ version: _____

date of last test: None available result: _____

- | | | | | | |
|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | test certification of ability to detect 0.1 gph release at 1.5 times operating pressure is available |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | performed by UTT certified installer (after 11/10/2008) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | test conducted at proper frequency |
| | | | | | <ul style="list-style-type: none"> conducted annually for pressurized piping without monthly monitoring conducted every 3 years for suction piping not meeting code I requirements |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | if test device permanently installed, maintenance records, for the last year, including calibration, preventative and repair |

Mechanical Line Leak Detector: (PRESSURIZED Piping only – code A)

manufacturer: Red Jacket model: FX1

date last tested: None available result: _____

- | | | | | | |
|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | certification of ability to detect a release of 3 gph at 10 psig within 1 hour is available |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | operational test of leak detector according to manufacturer's instructions in last 12 months |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | maintenance records, in addition to the annual test, for last year, including calibration, preventative and repair |

Electronic Line Leak Detector: (PRESSURIZED Piping only – code K)

manufacturer: _____ model: _____

date of last 3gph test: _____ result: _____

- | | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | self checking or system tested for operability within the last year |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | certification of ability to detect a release of 3 gph at 10 psig within 1 hour is available |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | maintenance records, in addition to annual test, for last year, including calibration, preventative and repair |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | continuously monitors piping |

Is the electronic leak detector performing the "monthly" monitoring function? Yes, No If yes:

date of last 0.2gph test: _____ result: _____

- | | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | third-party certification of ability to detect 0.2 gph release is available |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | documentation of monthly test available for last year |

Is the electronic leak detector performing the "annual" monitoring function? Yes, No If yes:

date of last 0.1gph test: _____ result: _____

- | | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | third-party certification of ability to detect 0.1 gph release is available |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|---|

IUM Release Detection Record Review: (All release detection codes)

- An empty tank (less than 1" of product/sludge) or a tank supplying an emergency generator only is not required to perform release detection. Indicate date emptied or that it is an emergency generator tank in comments.
- Recently installed tank systems must begin performing release detection immediately after receiving product. Indicate date of first product receipt in comments.

- | | | | | | |
|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--|
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | tank release detection records for the last 12 months the system contained product are available |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | tank release detection records are valid and passing |
| N/A | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | piping release detection records for the last 12 months the system contained product are available |
| N/A | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | piping release detection records are valid and passing |

Original: Regional Office – Norristown, Wilkes Barre, Harrisburg, Williamsport, Pittsburgh, or Meadville
Copy: Owner
Copy: DEP, Division of Storage Tanks, P.O. Box 8763, Harrisburg, PA 17105-8763
Copy: Inspector

UNDERGROUND STORAGE TANK FACILITY OPERATIONS INSPECTION

Facility Name Gas Auto Repair & Mini Mart Date 10/30/18 Facility ID 51 - 42774

III. CORROSION PROTECTION COMPLIANCE CRITERIA

Tank Tank Tank Tank Tank
System System System System System
001 002 003 _____

Instructions: Check the box to indicate that a criterion has been met.
Circle the box to indicate that a criterion has not been met.
Circle with "N/A" when a criterion is not applicable (provide comment).

Lined Tanks: (Tank only – code I)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
N/A				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

tank inspected and lined according to national standard
date lined: _____
tank initially inspected 10 years after lining and every 5 years thereafter
date(s) inspected: _____

Galvanic and Impressed Cathodic Protection: (Tank code B, C, O or P and/or Piping)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
N/A				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

tank structure to soil potential greater than 0.85 volts, **or**
meets other nationally recognized protection standard: specify: _____
potential on tank current monitoring (date) _____
potential on tank previously monitored (date) _____
pipe/flex structure to soil potential greater than 0.85 volts, **or**
meets other nationally recognized protection standard: specify: _____
potential on pipe/flex current monitoring (date) _____
potential on pipe/flex previously monitored (date) _____

Impressed Current Design and Rectifier Output: (Tank code C or P and/or Piping)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
N/A				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

system designed by a corrosion expert
system is turned on and functioning within design limits
documentation of last three amp (plus volt and runtime when meters available) readings,
recorded at least once every 60 days:
most recent: volts: _____ amps: _____ runtime: _____ date: _____
60 days prior: volts: _____ amps: _____ runtime: _____ date: _____
120 days prior: volts: _____ amps: _____ runtime: _____ date: _____

If Cathodic Protection or supplemental anodes were added to an existing tank system, fill in the following (Information is Required for Compliance):

Date assessed: _____ Date installed: _____
Tank Shell Assessment Method: _____

IV. Operator Training

- list of trained operators designates a class A operator; includes their training certification
- list of trained operators designates a class B operator; includes their training certification
- list of trained operators designates class C operator(s); date of initial training or last refresher is within the previous 12 months
- written instructions and notification procedures are readily available for class C operators at retail facilities; are posted in a location visible to dispenser operators at other facilities

DESCRIBE INFORMAL TRAINING PROVIDED FOR OWNER, CLASS A AND/OR CLASS B OPERATORS – see instructions.

Provided form to list Class A/B and C Operators; also provided emergency response posting which was filled out onsite.
Instructed location to provide Class C Operator training to all employees

**UNDERGROUND STORAGE TANK FACILITY
OPERATIONS INSPECTION**

Facility Name Gas Auto Repair & Mini Mart Date 10/30/18 Facility ID 51 – 42774

IUM checked for water in tank(s) and sump(s) – results below

V. COMMENTS INCLUDING ACTIONS TO BRING INTO COMPLIANCE (Attach additional sheets where necessary)
See instructions

There is a 500-gallon Used Oil UST onsite that looks like the fill has been sealed with concrete. The vent line is still attached to the tank and comes above grade. The tank is listed as Tank #004 on the tank registration and is listed as "Revoked". No other information is available on this tank.

The other tanks at the site, Tank #001, #002, and #003, are three (3) 6,000-gallon single-wall Gasoline FRP USTs installed in 1983. The following information details the tanks:

- Tanks #001 and #002 are low Unleaded Gasoline with Tank #001 siphoned to Tank #002. The siphon line between the two tanks is single-wall FRP.
- Tank #003 is Premium Gasoline.
- The gas tanks supply four (4) blend dispensers, each has a UDC; no sensors are located in the UDC's.
- Product piping is double-wall Environ Flex (green).
- Tank top sumps on Tanks #002 and #003 are OPW white poly sumps. Each sump has a Veeder-Root sensor.
- Each tank has a single-wall spill bucket with coaxial overflow prevention valve.
- The site has a Veeder-Root TLS-350 that is programmed to perform CSLD testing and monitors the STP sump sensors.
- Leak detection for the piping is annual line test and line leak detector.
- The three (3) tanks are manifolded to one 2" vent.

Areas of Non-Compliance

Physical Issues:

- During the inspection, a weep on the shear valve below Dispenser #8 was discovered. The Inspector shut the shear valve and notified the Operator, who closed off the dispenser. The poly UDC below the dispenser had ~1 gallon of product pooled in the bottom of the sump. The level of the product was below any penetration fitting.
- Based on the review of photographs taken while onsite, the Inspector noted that the piping penetration fitting in UDC #2 is dry rotted and cracked. A photographic log is attached.
- Inspector instructed Operator to make sure all dispenser sumps are free of trash and debris.

Leak Detection:

- The site was able to produce CSLD printouts for the last 8 months, March 2018 to October 2018 (missing April 2018). The Inspector ran a history report which showed passing results for the last 12 months for all gasoline tanks.
- The site was not able to produce annual line and leak detector results for the last year. The Inspector provided the site with references for them to get annual testing performed.
- No records of monthly sump checks have been performed for the last 12 months. The Inspector is providing the facility with a monthly walkthrough checklist and facility personnel were trained on how to complete the form.

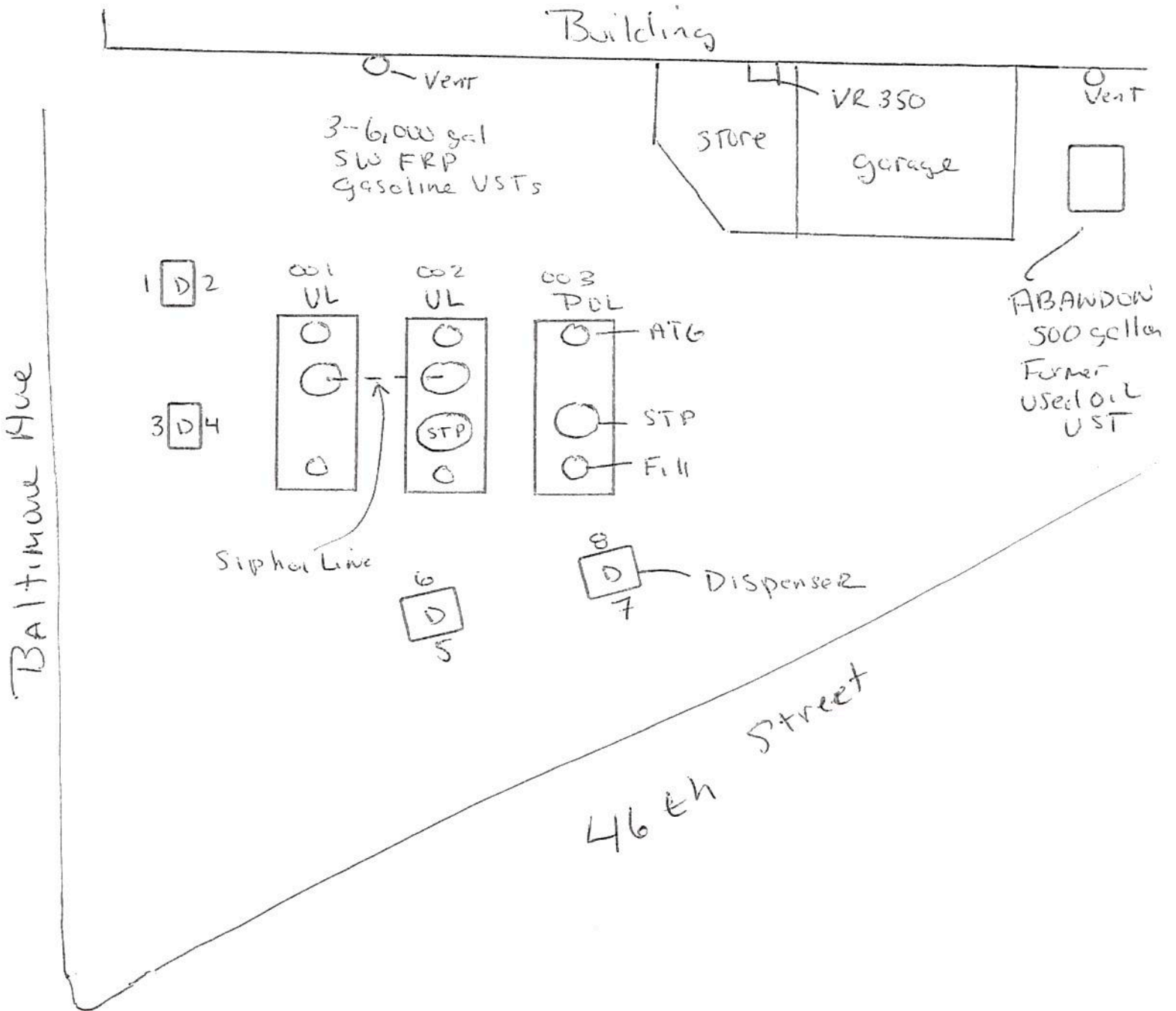
Operator Training:

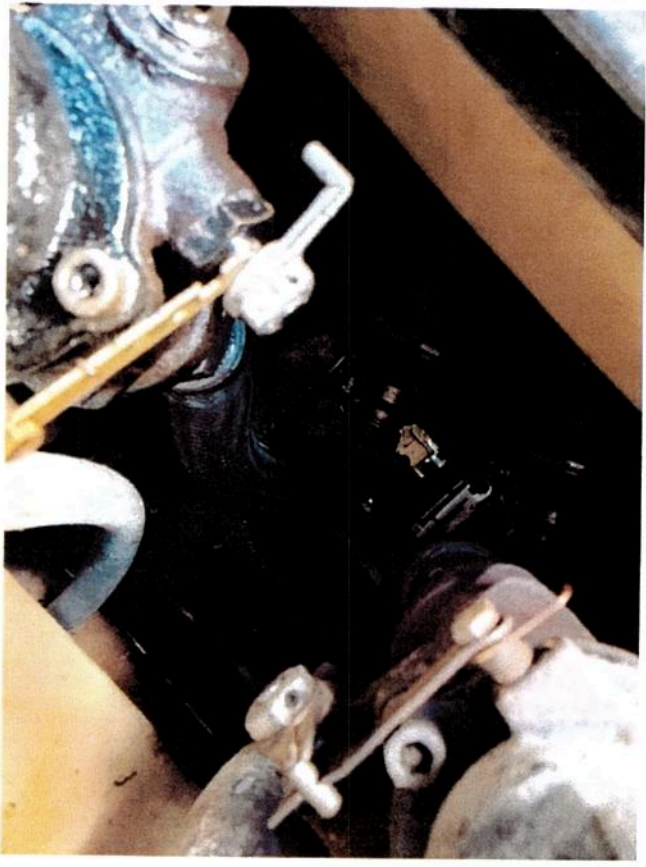
The site has a certified Class A/B Operator, but it was not clear if individuals have been trained as Class C Operators. The Inspector provided the site with the PADEP log for operators and provided and filled out a posting that shows what the Class C Operator needs to know.

UNDERGROUND STORAGE TANK FACILITY
OPERATIONS INSPECTION

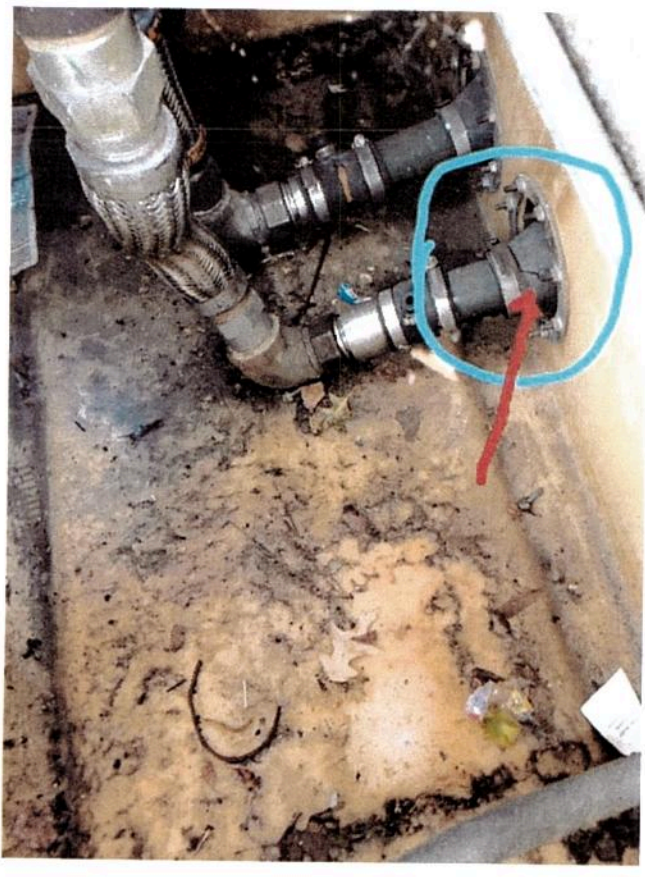
Facility Name Gas Auto Repair & Mini Mart Date 10/30/18 Facility ID 51 - 42774

SITE DRAWING:





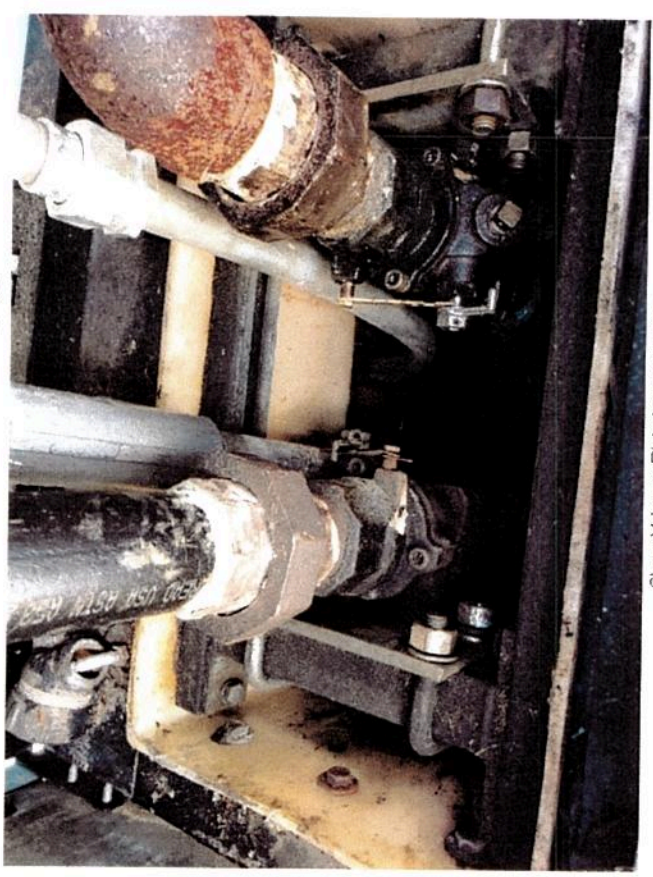
Bottom UDC Disp #8.jpg



Cracked Penetration Boot Disp #2_L1.jpg



Dispenser #8.jpg



Shear Valve on Right is weeping.jpg

For Use With

18 Pennsylvania
 No. 12 Philadelphia
 Day 24 East Mini Mart.
 DATE OF TEST State LOCATION

1 LOCATION: East Mini Mart
 Street No. and/or Corner 301 S. 46th St. City Philadelphia Pa 19143
 2 OWNER: Amin
 Name Address Order, Mgr. or Other Representative Position Telephone No.
 3 OPERATOR: Amin
 Name Address Order, Mgr. or Other Representative Position Telephone No.
 4 REASON FOR TEST: Towel fly tightness
 5 TEST REQUESTED BY: Amin
 Name Position Order No. Billing Address
 6 SPECIAL INSTRUCTIONS: 302. 458-6839
 7 CONTRACTOR OR COMPANY MAKING TEST: Mill - Athletic Petroleum Services Inc. Dennis Barry
 8 MECHANIC(S) NAME: MPD + Red Tacket STP
 9 MAKE AND TYPE OF PUMP OR DISPENSERS: Concrete
 10 WEATHER: Temperature in Tanks _____ °F _____ °C
 COVER OVER LINES APPROXIMATE BURIAL DEPTH

11 IDENTIFY EACH LINE AS TESTED	12 TIME (MILITARY)	13 LOG OF TEST PROCEDURES, AMBIENT TEMPERATURE, WEATHER, ETC.	14 PRESSURE		15 VOLUME		16 TEST RESULTS
			BEFORE	AFTER	BEFORE	AFTER	
1028		Bleedback test	60	0	040	021	+ .031
1030		Start line test.		60			
1045		Continue line test	56	60	0400	0375	- .0025
1100		" "	57	60	0375	0355	- .0020
1115		" "	58	60	0355	0340	- .0015
1130		" "	59	60	0340	0330	- .0010
1132		Bleedback test.	60	0	0330	061	+ .028

Value at STP stored

- .0070 GPH

line tested tight

According to NFPA as State of PA NJ + De or

Amin R Amin

For Use With

Petro-Tite
TESTING

1 LOCATION: Coast Mini Mart 201 S. 46th St. Bill Ave Phila Pa. 19143
Street No. and/or Corner City State Telephone No.

2 OWNER: Amin Amin Amin
Name Address Representative Position Telephone No.

3 OPERATOR: Amin Amin Amin
Name Address Date, Mgr. or Other Address (if different than Location) Position Telephone No.

4 REASON FOR TEST: to verify tightness

5 TEST REQUESTED BY: Amin Amin
Name Position Order No. Billing Address Telephone No.

6 SPECIAL INSTRUCTIONS: 302. 458-6839

7 CONTRACTOR OR COMPANY MAKING TEST: Mid-Atlantic Petroleum Services Inc. Dennis Barry

8 IS A TANK TEST TO BE MADE WITH THIS LINE TEST? YES NO
 9 MAKE AND TYPE OF PUMP OR DISPENSERS: MPD + Red Jacket STP

10 WEATHER: Concrete Concrete
TEMPERATURE IN TANKS °F °C COVER OVER LINES APPROXIMATE BURIAL DEPTH

11 IDENTIFY EACH LINE AS TESTED	12 TIME (MILITARY)	13 LOG OF TEST PROCEDURES, AMBIENT TEMPERATURE, WEATHER, ETC.	14 PRESSURE		15 VOLUME		16 TEST RESULTS
			BEFORE	AFTER	BEFORE	AFTER	
<u>Sept</u>	<u>1033</u>	<u>Bleedback test</u>	<u>60</u>	<u>0</u>	<u>047</u>	<u>072</u>	<u>+ .025</u>
	<u>1035</u>	<u>Start line test.</u>	<u>60</u>	<u>60</u>			
	<u>1050</u>	<u>Continue line test</u>	<u>57</u>	<u>60</u>	<u>0470</u>	<u>0450</u>	<u>- .0020</u>
	<u>1105</u>	<u>"</u>	<u>57</u>	<u>60</u>	<u>0450</u>	<u>0430</u>	<u>- .0020</u>
	<u>1120</u>	<u>"</u>	<u>58</u>	<u>60</u>	<u>0430</u>	<u>0415</u>	<u>- .0015</u>
	<u>1135</u>	<u>"</u>	<u>59</u>	<u>60</u>	<u>0415</u>	<u>0405</u>	<u>- .0010</u>
	<u>1137</u>	<u>Bleedback test.</u>	<u>60</u>	<u>0</u>	<u>040</u>	<u>062</u>	<u>+ .022</u>

Value at STP stored

~.00065 GPH

Line tested by AS

According to NFPA and State of PA NJ + De or

Dennis Barry

LDT 880 - LEAK DETECTOR CHECKLIST

LOCATION

Coop + Mini Mart

CONTRACTOR <i>Mid-Atlantic Petroleum Services Inc.</i>		CUSTOMER <i>Amin</i>	
DATE <i>12/24/18</i>	PRODUCT <i>Regular</i>	LOCATION <i>Coop + Mini Mart 901 S. 46th St. + Balt. Ave Phila, Pa. 19143</i>	
TECHNICIAN <i>Dennis Barry</i>			

I SUBMERSIBLE PUMP IDENTIFICATION *302.438-6839*

CHECK MFG. INDICATE MODEL NO. IF KNOWN					RECORD SERIAL #				
RED JACKET	TOKHEIM	GILBARCO	BENNETT	DRESSER WAYNE	A.O. SMITH	BOWSER KEENE	SOUTH WEST	OTHER	
<input checked="" type="checkbox"/>									

II LEAK DETECTOR IDENTIFICATION

CHECK TYPE				
RED JACKET MODEL 116-030 PLD-2SEC HEX HEAD	RED JACKET MODEL 116-017 DLD 2SEC HEX HEAD	RED JACKET MODEL 116-011A DLD 5SEC ROUND HEAD	TOKHEIM MODEL 585PM DLD 2SEC SQUARE HEAD	OTHER <input checked="" type="checkbox"/>

PRE-TEST CONDITIONS
VOLUME OF PRODUCT FLUSHED THRU LINE _____ GALLONS

OTHER COMMENTS _____

TEST PROCEDURE

<p>LEAK DETECTOR INSTALLED TEST AT DISPENSER</p> <p>III GENERAL LINE AND PUMP INFORMATION</p> <p>RECORD OPERATING PUMP PRESSURE <u>30</u> psig. AIR-VAPOR TEST WITH PUMP OFF MEASURE AND RECORD <u>031</u> sec.</p> <p>IV PRESSURE STEP TEST</p> <p>WITH BOTTOM SELECTOR IN PRESSURE STEP TEST POSITION TURN ON PUMP RECORD TIME IN SECONDS GAUGE NEEDLE REMAINS IN COLORED ZONE <u>2</u> SEC.</p> <p>V 3 GALLON PER HOUR LEAK SIMULATED TEST</p> <p>WITH BOTTOM SELECTOR IN 3 GPH TEST POSITION MEASURE AND RECORD VOLUME IN CALIBRATED BEAKER FOR 60 SECOND TEST <u>17.5</u> ML</p> <p>A) OPEN DISPENSER NOZZLE OR PLACE BOTTOM SELECTOR IN DISPENSER NOZZLE POSITION. FLOW RATE OF APPROX. 1 1/2-3GAL PER MINUTE WILL BE OBSERVED. DOES GAUGE NEEDLE MOVE TO LOWER END OF COLORED ZONE YES <input checked="" type="checkbox"/> NO _____ DOES FLOW RATE INCREASE TO APPROX. 1 1/2-3GAL PER MINUTE YES <input checked="" type="checkbox"/> NO _____</p> <p>B) CLOSE DISPENSER NOZZLE OR PLACE BOTTOM SELECTOR IN 3GPH TEST POSITION: GAUGE RETURN TO COLORED ZONE YES <input checked="" type="checkbox"/> NO _____ GAUGE DOES NOT RETURN TO COLORED ZONE YES _____ NO <input checked="" type="checkbox"/> GAUGE GOES TO OPERATING PRESSURE YES <input checked="" type="checkbox"/> NO _____</p>	<p>LEAK DETECTOR ISOLATED FROM PRODUCT LINE - TEST AT PUMP PIT REFER TO LDT INSTRUCTIONS</p> <p>III GENERAL PUMP INFORMATION</p> <p>FLUSH LDT TESTOR RECORD OPERATING PUMP PRESSURE _____ psig.</p> <p>IV PRESSURE STEP TEST - SUBMERSIBLE PUMP REMAINS ON THRU-OUT TEST PROCEDURE</p> <p>WITH BOTTOM SELECTOR IN PRESSURE STEP TEST POSITION ROTATE ISOLATOR FULLY (CCW) RECORD TIME IN SECONDS GAUGE NEEDLE REMAINS IN COLORED ZONE _____ SEC.</p> <p>V 3 GALLON PER HOUR LEAK SIMULATED TEST</p> <p>WITH BOTTOM SELECTOR IN 3 GPH TEST POSITION MEASURE AND RECORD VOLUME IN CALIBRATED BEAKER FOR 60 SECOND TEST _____ ML</p> <p>A) PLACE BOTTOM SELECTOR IN DISPENSER NOZZLE POSITION. FLOW RATE OF APPROX. 1 1/2-3GAL PER MINUTE WILL BE OBSERVED. DOES GAUGE NEEDLE MOVE TO LOWER END OF COLORED ZONE YES _____ NO _____ DOES FLOW RATE INCREASE TO APPROX. 1 1/2-3GAL PER MINUTE YES _____ NO _____</p> <p>B) PLACE BOTTOM SELECTOR IN 3GPH TEST POSITION: GAUGE RETURN TO COLORED ZONE YES _____ NO _____ GAUGE DOES NOT RETURN TO COLORED ZONE YES _____ NO _____ GAUGE GOES TO OPERATING PRESSURE YES _____ NO _____</p>
--	---

LEAK DETECTOR TEST	PASS <input checked="" type="checkbox"/>
LEAK DETECTOR TEST	PASS <input type="checkbox"/>

LDT 880 - LEAK DETECTOR CHECKLIST

LOCATION

Coas + Mini Mart

CONTRACTOR <i>Amer - Atlantic Petroleum Services Inc.</i>		CUSTOMER <i>Amini</i>	
DATE <i>12/24/18</i>	PRODUCT <i>Super</i>	LOCATION <i>Coas + Mini Mart 901 S. 46th St. + Balt. Ave Phila. Pa. 19143</i>	
TECHNICIAN <i>Dennis Barry</i>			

I SUBMERSIBLE PUMP IDENTIFICATION *302,438-6839*

CHECK MFG. INDICATE MODEL NO. IF KNOWN					RECORD SERIAL #				
RED JACKET	TOKHEIM	GILBARCO	BENNETT	DRESSER WAYNE	A.O. SMITH	BOWSER KEENE	SOUTH WEST	OTHER	
<input checked="" type="checkbox"/>									

II LEAK DETECTOR IDENTIFICATION

CHECK TYPE					
RED JACKET MODEL 116-030 PLD-2SEC HEX HEAD	RED JACKET MODEL 116-017 DLD 2SEC HEX HEAD	RED JACKET MODEL 116-011A DLD 5SEC ROUND HEAD	TOKHEIM MODEL 585PM DLD 2SEC SQUARE HEAD	OTHER	
				<input checked="" type="checkbox"/>	

PRE-TEST CONDITIONS

VOLUME OF PRODUCT FLUSHED THRU LINE _____ GALLONS

OTHER COMMENTS _____

TEST PROCEDURE

<p>LEAK DETECTOR INSTALLED TEST AT DISPENSER</p> <p>III GENERAL LINE AND PUMP INFORMATION</p> <p>RECORD OPERATING PUMP PRESSURE <u>29</u> psig. AIR-VAPOR TEST WITH PUMP OFF MEASURE AND RECORD <u>025</u></p> <p>IV PRESSURE STEP TEST</p> <p>WITH BOTTOM SELECTOR IN PRESSURE STEP TEST POSITION TURN ON PUMP RECORD TIME IN SECONDS GUAGE NEEDLE REMAINS IN COLORED ZONE <u>2</u> SEC.</p> <p>V 3 GALLON PER HOUR LEAK SIMULATED TEST</p> <p>WITH BOTTOM SELECTOR IN 3 GPH TEST POSITION</p> <p>A) MEASURE AND RECORD VOLUME IN CALIBRATED BEAKER FOR 60 SECOND TEST <u>148 ml</u></p> <p>B) OPEN DISPENSER NOZZLE OR PLACE BOTTOM SELECTOR IN DISPENSER NOZZLE POSITION. FLOW RATE OF APPROX. 1 1/2-3GAL PER MINUTE WILL BE OBSERVED. DOES GUAGE NEEDLE MOVE TO LOWER END OF COLORED ZONE YES <input checked="" type="checkbox"/> NO _____ DOES FLOW RATE INCREASE TO APPROX. 1 1/2-3GAL PER MINUTE YES <input checked="" type="checkbox"/> NO _____</p> <p>C) CLOSE DISPENSER NOZZLE OR PLACE BOTTOM SELECTOR IN 3GPH TEST POSITION: GUAGE RETURN TO COLORED ZONE YES <input checked="" type="checkbox"/> NO _____ GUAGE DOES NOT RETURN TO COLORED ZONE YES _____ NO <input checked="" type="checkbox"/> GAUGE GOES TO OPERATING PRESSURE YES <input checked="" type="checkbox"/> NO _____</p>	<p>LEAK DETECTOR ISOLATED FROM PRODUCT LINE - TEST AT PUMP PIT REFER TO LDT INSTRUCTIONS</p> <p>III GENERAL PUMP INFORMATION</p> <p>FLUSH LDT TESTOR RECORD OPERATING PUMP PRESSURE _____ psig.</p> <p>IV PRESSURE STEP TEST - SUBMERSIBLE PUMP REMAINS ON THRU-OUT TEST PROCEDURE</p> <p>WITH BOTTOM SELECTOR IN PRESSURE STEP TEST POSITION ROTATE ISOLATOR FULLY (CCW) RECORD TIME IN SECONDS GUAGE NEEDLE REMAINS IN COLORED ZONE _____ SEC.</p> <p>V 3 GALLON PER HOUR LEAK SIMULATED TEST</p> <p>WITH BOTTOM SELECTOR IN 3 GPH TEST POSITION MEASURE AND RECORD VOLUME IN CALIBRATED BEAKER FOR 60 SECOND TEST _____ ML</p> <p>B) PLACE BOTTOM SELECTOR IN DISPENSER NOZZLE POSITION. FLOW RATE OF APPROX. 1 1/2-3GAL PER MINUTE WILL BE OBSERVED. DOES GUAGE NEEDLE MOVE TO LOWER END OF COLORED ZONE YES _____ NO _____ DOES FLOW RATE INCREASE TO APPROX. 1 1/2-3GAL PER MINUTE YES _____ NO _____</p> <p>C) PLACE BOTTOM SELECTOR IN 3GPH TEST POSITION: GUAGE RETURN TO COLORED ZONE YES _____ NO _____ GUAGE DOES NOT RETURN TO COLORED ZONE YES _____ NO _____ GAUGE GOES TO OPERATING PRESSURE YES _____ NO _____</p>		
LEAK DETECTOR TEST	PASS <input checked="" type="checkbox"/> FAIL <input type="checkbox"/>	LEAK DETECTOR TEST	PASS <input type="checkbox"/> FAIL <input type="checkbox"/>

MONITOR CERTIFICATION FORM

Customer: Amini Site I.D.: _____ Date: 12/24/18

Address: Const Mini Mart.
9013.46th St. + Balt Ave
Phila Pa. 19143 Work Order: 122418

1) Tank Probes:

Manufacturer: Veeder Root Model #: TKS35

Serial #: Various Number of tanks Monitored: 3.

Set up for monthly test (Y/N): yes. Last Test Passed: 12/24/18

Does the system display or print out monthly test results (Y/N): yes. Type. (Display or print out): both

OPERATIONAL (Y/N): yes.

Comments: Tank Test History is perfect for the last year

2) Tank External Probes: Manufacturer: float Veeder Root Model #: float

	Number of Probes	Liquid or Vapor Sensor	Positive Shut Down (Y/N)	Fail Safe (Y/N)	Operational
Annular Probe					
Turbin Sump	<u>2</u>	<u>Liquid</u>	<u>No</u>	<u>yes</u>	<u>yes</u>
Fill Sump					
Fiber Trench					
Monitoring Well					

Annular Space Wet or dry: DNA

3) Product Line Pressure Monitor

Manufacturer: DNA Model #: _____

Number Of Sensors: DNA Mech. Leak Detector (Y/N): yes.

Mech. Leak Detector: _____
Operational (Y/N): yes

Does the system display or print out monthly test results (Y/N): DNA

Type. (Display or print out): DNA

Does the system go into alarm with the simulated leak test (Y/N): DNA

Positive Shut Down (Y/N): N.

OPERATIONAL (Y/N): yes

4) Overall System Performance

Does the fuel system remain operational when power is shut off to the monitoring panel (Y/N): yes.
(FAIL SAFE)

Do all alarms include both audible and visual alarms (Y/N): yes.

The monitoring system is certified operational (Y/N): yes.

Dennis Barry
Technician (Print)

Dennis R Barry
Technician (Signature)

Comments: _____

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION



BUREAU OF ENVIRONMENTAL CLEANUP AND BROWNFIELDS
DIVISION OF STORAGE TANKS
P.O. BOX 8763
HARRISBURG, PENNSYLVANIA 17105-8763



pennsylvania
DEPARTMENT OF ENVIRONMENTAL PROTECTION

THIS CERTIFICATION AUTHORIZES THE BELOW NAMED INDIVIDUAL TO CONDUCT TANK HANDLING OR INSPECTION ACTIVITIES PURSUANT TO THE STORAGE TANK AND SPILL PREVENTION ACT, AND DEPARTMENT REGULATIONS AT TITLE 25 PA CODE CHAPTER 245 IN THE SPECIFIC CATEGORIES SHOWN:

CATEGORIES	ISSUE DATE(S)	EXPIRATION DATE(S)
UTT *****	03/12/2010	03/12/2019
*****	*****	*****
*****	*****	*****
*****	*****	*****
*****	*****	*****
*****	*****	*****

Anne Toth
Anne Toth, Chief
Certification Unit

ISSUED TO DENNIS R BERRY
DEP CLIENT ID NUMBER 178511
CERTIFICATION NUMBER 3617

Let's protect our earth



STATE OF NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION NJDEP

Licensing Programs
Mail Code 401-04E
PO BOX 420
Trenton, NJ 08625-0420



Please detach your license and carry it with you for identification purposes.

Hereby Certifies the Goodstanding of:
DENNIS R BERRY SSN:

License No. 0009961 Reg No. 0009961

AS A LICENSED:
TANK TESTING

DENNIS R BERRY
609 MEETING HOUSE RD
C/O MID-ATLANTIC PETROLEUM SERVICES INC
HOCKESSIN DE 19707

Expires: 07/31/19 Document#: 161650800