Notification/Change in Status for Aboveground/Underground Storage Tanks



Minnesota Pollution Control Agency METRO DISTRICT - REGULAR FACILITIES 520 Lafayette Road North St. Paul, MN 55155 651 | 297-8664 or 800/657-3864

Shorothcease only	[
Site #: 53354	
Leak #:	VFD.
Owner #:	
Received:	V
MAY 15	2000

Please type or use black/blue ink and complete all applicable sections as accurately as possible. If the site has more than 10 tanks, please photocopy this form prior to completion and submit additional sheets as necessary WPCA, Metro District

F									Pequip	<u>r Eəcilit</u>	iac	
	<u>ocation</u>						Tank (<u>Owner</u>				
Name WATER GREMUN CO) _			Name SAME								
Street 1610 WHITAKER A	Street											
CAY LINE BEAR LAKE	City County											
State Zip	State Zip Phone											
<u>Facility Type</u> Service Station	acturing	Automo	tiveD Tr	ansportatio	n Rai	road	UtilityC	Governmen	n:()			
Food Processing/Storzg=0 Agricultura												
Is this facility located on Native A	Food Processing/Storage Agricultural Production Education Petroleum Refinery/Terminal Other											
		Tanta	#Assig	n a # to e	each tank	and 🗸 tl	ie box, if	the act	ion applie	s to that t	ank.)	
Action	Date	#1017	#	#	#	#	#	#	#	#	#	
Initial Notification	912199	JAX'									D	
Site Name/Address Change		0			0					0		
Owner Change		Ω			0		0					
Substance Stored Change			Ο		0							
Installed New Tank	1 1			Ő			a					
Installed New Piping				Ó			0					
Repaired/Upgraded Tank				0				0				
Repaired/Upgraded Piping	_/_/		0			ū	ŭ					
Closed Tank in Place												
Temporarily Closed	<u> </u>			a								
Abandoned Tank in Place	<u> </u>										<u>۱</u>	
Removed Tank	_/_/			α						D		
Disposal Co.										Cr		
Haz. Waste Generator ID#			_									
Tank Information	Tank#:	#	# /	ť	#	Ħ	#	#	#	4	#	
Aboveground/Underground Tan	ik (A/U)	- (-	Ň.]		•		<u> </u>	
Installation Date		1	70	1 /	´							
Capacity in Galions (K=1000, N	1=1,000,000)		-A-(1	\mathcal{N}_{-}						<u> </u>	<u> </u>	

PLEASE BE SURE TO COMPLETE THE BACK PAGE OF THIS FORM BEFORE SIGNING BELOW.

Owner's Signature

Leertify under penalty of law that the information submitted is accurate and complete to the best of my knowledge. For underground storage tank work performed after July 9, 1990, I certify that the contractor was in compliance with the certification requirements of Minn Rules ch 7105 All work completed after Dec 1098 uses accurate accurate a storage and the storage and the	l certify under manufacturer regulations, a compliance w
Dec 1988 was performed in accordance with manufacturer's instructions, industry	
standards, and applicable state and federal regulations	Printed name
DAVID P. ZINSCHLAC EHS MANAGER	Printed name
LAND L. CINSCHURCH CH.S MANAGER	
Printed name of owner or authorized representative Title	Printed name
	Finance name
	Signature of t
Signature of owner or authorized representative Date	Signature of t
	Printed name
UNSIGNED FORMS WILL BE RETURNED	
	1
Please retain a copy for your records.	Signature of s
	Sible of S

Tank Contractor's Signature (USTs Only)

I certify under penalty of law that all work was performed inaccordance with the manufacturer's instructions, industry standards, and applicable state and federal regulations, and is complete to the best of my knowledge I certify that I am in compliance with Minn Rules ch 7105 for work completed after July 9, 1990

Printed name of tank contractor	MPCA Contractor #
Printed name of contractor's authorized representative	Title
Signature of tank contractor's representative	Date
Printed name of supervisor on site during tank work	MPCA Supervisor #
Signature of supervisor	Date

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Tank #	Tank Type	Tank Secondary Contain.	, Tank Cathodic Protection	Tank Spill Protection/	Tank Overfill Protection	Compart-	Substance Stored	Heating Premises Only?	Piping Type	Piping Secondary Cont.	Piping Cathodic Protection
1017	STEEL /	100%	1	YE NO/	GATAIN /	אסא בוץ	WASTE OIL	YD NS	STEEL		
	(7	עם אם/		סא סץ		סא סץ	··		
				י םא םץ		YO NO		YO NO			
				YO NO		YO NO		YO NO			
				YO NO		YO NO		ר סץ			· · · · · · · · · · · · · · · · · · ·
				ר מע		סא בץ		ר חע			
				YO NO		YO NO		םא םץ			
				םא םץ		YO NO		YO NO			
				YO NO		YO NO		אם אם			
				םא מץ		סא סץ	5	םא םץ			

	ONTO A MARK	P. 2400.59809777998	e trata si s					ASTs Only				
Tank #	Pump Type	Tank Release Detection	Tank Precision Test	Piping Release Detection	Piping Precision Test	Tank Base	DIKE BOITIOM	DIKE	SUBSTANCE TRANSFER AREA SAFEGUARD	Labeling	Gauging	Site Diagram
									Y N	YD ND	YO NO	אם אם
								1	Y N	YO NO	YO NO	סא סץ
									Y N	YO NO	סא מץ	YO NO
									Y N	סא סץ	YO NO	ר הא
									Y N	םא םץ	צם אם	טא םץ
									Y N	YD NO	YOND	מא םץ
									Y N	YO NO	סא םץ	מא מץ
									Y N	YO NO	סא מץ	א סץ
								[Y N	םא םץ	YD ND	ר מא
									Y N	םא סץ	YO NO	YO NO

	For Compartmental Tanks Only											
Compartment Capacity in Gallons Compartment Product Heating Premises Only?												
Tank#	Compartment 1	Compartment 2	Compartment 3	Compartment 1	Compartment 2	Compartment 3	Compartment 1	Compartment 2	Compartment 3			
						ž	ר מא מצ	YO NO	YO NO			
					······································		YONO	YO NO	YO NO			
							רם אם	םא סץ	מא םץ			

Additional Comments:

If there are any changes to the reported information, the MPCA must be notified of the changes within 30 days of the change. Questions? Call Joanne Henry at (612) 297-8664