

MINNESOTA PETROLEUM TANK RELEASE COMPER ION BOARD

Supplemental Application for Reimbursement

1. Name of responsible person: DITTMER OIL CO. INC.
(Corporation, Individual, Partnership or other entity)
2. Mailing address: 600 E LINCOLN AVE
FAIRFAX, MN. 55332
3. Phone: (507) 426-~~7796~~ 7374
4. Responsible person is a:
Corporation X Partnership
Individual Other
5. Name of facility at release site: DITTMER OIL CO. INC.
6. Site address: 600 E LINCOLN AVE.
FAIRFAX, MN. 55332
7. Contact person at site: ROBERT A. DITTMER
Phone: (507) 426-7796
8. Date of release: OCT 19, 1989
9. What type of product was in the tank? REGULAR LEADED GASOLINE
10. What was the size of the tank? 12,000 gallons.
11. How many tanks were located at this site at time of release? 3
12. How many tanks contributed to release at this site? 1
13. How many tanks were removed during course of cleaning up this site?
3
14. For each eligible cost category below, list all corrective actions taken, who performed the action, and the corresponding cost of the action. (Attach additional pages as necessary.)

A. Cleanup of releases including, but not limited to, removal, treatment, or disposal of surface and subsurface contamination, program for monitoring of wells and sampling, and provision of a permanent alternative water supply.

Corrective Action	Performed by	Cost
PUTTING IN SAND. REMOVE CONCRETE OVER SPILL SITE DIGGING OUT CONTAMINATED DIRT APRIL 3, 1990 - THROUGH AUG 12, 1990	KUEPPER INC.	1935.00
LANDSPREADING ASSISTANCE, CONSULTATION & MPCA LIAISON AUGUST 13, 1990 - THROUGH DEC 31, 1990	GME CONSULTANT	1642.50
PETROFUND APPX ASSISTANCE, CONSULTATION, MPCA LIAISON	GME CONSULTANT	744.00

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15. Original Application Reimbursable Expenses	\$ 33420.06
Additional Reimbursable Expenses Incurred	+ 5945.50
Total Reimbursable Expenses	= 39365.56
x.90	= 35429.00
 New Petrofund Reimbursement	\$ 35429.00
Less Initial Petrofund Reimbursement	- 30007.06
Additional Reimbursement	= 5421.94

16. Give the following information for all contractors, subcontractors, consultants, engineering firms or others who performed corrective actions at this release site. (Attach additional sheets if necessary.)

A. Name of individual or firm: KUEMPER INC.
Mailing address: 620 E. HWY 212
BIRD ISLAND, MN. 55310
Contact Person: TOM KUEMPER Phone: (612) 365-3260

B. Name of individual or firm: GME CONSULTANTS, INC.
Mailing address: 14000-21ST AVE NORTH
MPLS, MN. 55447
Contact Person: MARK MILSOP Phone: (612) 559-1859

C. Name of individual or firm: FAIRFAX TILE HAULING
Mailing address: P. O. BOX 94
FAIRFAX, MN. 55332
Contact Person: JOHN CLOBES Phone: (507) 426-8362

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17. At this time, do you anticipate incurring any ongoing eligible costs relative to this release? YES If so, explain briefly including estimates of future costs.

<u>ANALYZING SOIL SAMPLES</u>	<u>\$ 4050.00</u>
<u>WORKING & REWORKING CONTAMINATED SOIL</u>	<u>\$ 1200.00</u>

CORRECTIVE ACTION	PERFORMED BY	COST
SANI 91 MPCA LIAISON SERVICES, PETROBOND 2577A PETROBOND APPL ASSISTANCE, CONSULTATION,	GOME CONSL.	\$ 659.00
HAULING AWAY CONTAMINATED DIRT	FAIRFAX TILE HAULING	\$ 280.00
SPREADING CONTAMINATED DIRT	SEROME FAHRTILING	\$ 100.00
HAULING AWAY CONTAMINATED DIRT.	JAMES PALMER	\$ 225.00
LOADING CONTAMINATED SOIL	WAIBEL SAND & GRAVEL	\$ 360.00
TOTAL		\$ 5945.50

State of Minnesota

MAR 08 1991

Dept. of Commerce



D. NAME OF FIRM - JEROME FAHEY TILING INC

MAILING ADDRESS BOX 187

FAIRFAX, MN. 55332

CONTACT PERSON TOM FAHEY PHONE 507-426-7338

OR INDIVIDUAL

E. NAME OF FIRM - JAMES PALMER

MAILING ADDRESS RT 1

FAIRFAX, MN. 55332

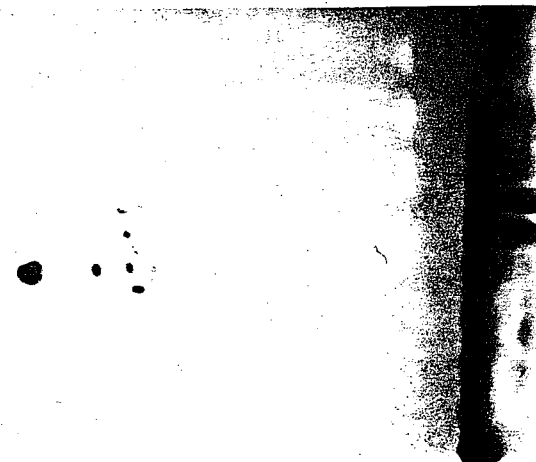
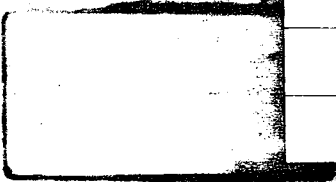
CONTACT PERSON - JAMES PALMER - PHONE 507-426-7611

F. NAME OF FIRM - WAIBEL SAND & GRAVEL

MAILING ADDRESS SE 4TH ST

FAIRFAX, MN. 55332

CONTACT PERSON - MARLIN WAIBEL - PHONE 507-426-7338



18. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I understand that by filing this application with the Board I agree to return to the Board, upon its demand, the entire award or any lesser amount the Board considers appropriate if: (a) I knowingly misrepresented or omitted any fact relevant to the determinations made by the Board or Commissioner, oral or written; or (b) I fail to complete, to the Commissioner's satisfaction, ongoing corrective action which may be underway where the Commissioner has determined, pursuant to Minn. Stat. 115C.09, subd. 2(b)(1) (1986), that the tank release for which I may be reimbursed has been adequately addressed based on my representation that there is ongoing corrective action. I further certify that I have the authority to submit this application on behalf of

DITTMER OIL CO. INC.

Signed: Robert A. Dittmer

Title: PRES.

Dated: 3/7/91

Witnessed by: Mary M. Dittmer

Dated: March 7, 1991

Please send this application and accompanying documents to:

Robin Hanson
Petroleum Tank Release Compensation Board
MN Department of Commerce
133 7th Street East
St. Paul, MN 55101
(612)297-4017