



State Bank of Bird Island

205 SOUTH MAIN STREET, BIRD ISLAND, MINNESOTA 55310
TELEPHONE: (612) 365-4111

September 11, 1996

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SEP 16 1996

MPCA, HAZARDOUS
WASTE DIVISION

Laurie Kania
VPIC Program
MN Pollution Control Agency
520 Lafayette Road North
St Paul MN 55155-4194

Dear Laurie,

Enclosed is our request for assistance form. I am also enclosing Gasoline Discharge Remediation Report on the leak site at Fairfax, Minnesota involving MPCA ID# 00001940.

Included are the procedures of tank removal and accompanying photographs. Hopefully this will provide sufficient evidence that the tanks were removed.

Thank you for your consideration in this matter.

Sincerely,

Gerald Wohler
Loan Officer

GW:gc

enclosures



Minnesota Pollution Control Agency

520 Lafayette Road North
Saint Paul, Minnesota 55155-4194

April 1996

**Voluntary Petroleum Investigation and Cleanup Program
Application/ Request for Assistance Form**

Fact Sheet 5.3

Complete this form to request assistance from the Minnesota Pollution Control Agency (MPCA) staff in the Voluntary Petroleum Investigation and Cleanup (VPIC) Program. If you have any questions about the services offered by the VPIC Program or this form, please contact Laurie Kania at (612) 297-8600 or Bassou Oulgot at (612) 297-8597. The MPCA can also be reached toll free at 1-800-657-3864.

Mail or fax the completed form to: Laurie Kania
VPIC Program
Minnesota Pollution Control Agency
520 Lafayette Road North
St. Paul, Minnesota 55155-4194
fax: (612) 297-8676

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MPCA, HAZARDOUS
WASTE DIVISION

Applicant*

Name State Bank of Bird Island
Organization State Bank
Address 205 South Main
City Bird Island, MN 55310
State MN ZIP code 55310
Phone 320-365-4112
State Taxpayer ID 8164023
Federal Employer ID 410556670
Social Security # _____
(if an individual) Gerald Wohler

Subject Property

Name Weis Oil Company / Dittmer Oil
Address HWY 4 & 19
City (or Township) Fairfax, MN
ZIP code 55332 County Renville
MPCA ID # Leak 00001940

Current Property Owner (if different from applicant)

Name _____
Organization _____
Address _____
City _____
State _____ ZIP code _____

* The applicant is the individual seeking technical assistance and/or a liability assurance letter from the VPIC Program. The applicant is responsible for payment of MPCA costs to provide services as requested by application.

Post-it® Fax Note 7671		Date <u>7/18</u>	# of pages <u>2</u>
To <u>Gerry Wohler</u>	From <u>Laurie Kania</u>		
Co./Dept.	Co.		
Phone #	Phone #		
Fax # <u>320 365 4129</u>	Fax #		

Application/Request for Assistance Form — page 2

Applicant's Interest

- Property owner
- Mortgagee interest in property
- Considering purchasing property
- Renting or leasing property
- Responsible party (as defined under Minn. Stat. 115C)
- Other (explain)

Service applicant is requesting

- Expedited review of a petroleum contamination investigation and/or cleanup.
MPCA ID# LEAK0000 _____
- Review of a development response action plan.
MPCA ID# LEAK0000 _____
- Leak site Tank Removal Verification letter.
MPCA ID# LEAK0000 1940
- Leak site File Closure Confirmation letter.
MPCA ID# LEAK0000 _____
- Off-site Tank Release Determination letter.
Suspected source MPCA ID# LEAK0000 _____
- General Liability letter.
- Other technical assistance not specified above (please describe on a separate sheet).

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MPCA, HAZARDOUS WASTE DIVISION

Authorization and Agreement to Pay for Services

I hereby request the MPCA VPIC staff to provide services to me and the company/organization I represent, as requested by this application. I understand that if an expedited review of a leak site is the required service, VPIC staff will retain review authority until the site file is closed or until the date they receive a written request from me to cease VPIC review. I understand that I will be billed for these services at the rate of \$60.00 per hour and that I am required by Minn. Stat 115C.03, subd. 9 (as amended by Minn. laws, 1994) to reimburse the MPCA for the Agency's costs, as determined by the MPCA Commissioner. I further understand that legal or administrative action may be initiated against me by the State of Minnesota if I do not reimburse the MPCA.

I hereby agree to pay the costs of the MPCA to provide services to the applicant as requested in this application. Furthermore, I hereby certify that I have the authority to submit this application on behalf of the applicant named herein.

Name Gerald Wohler Signature Gerald Wohler
 Title Gen. Mgr. Date Sept. 17, 1996

