MID-STATE OIL COMPANY

1820 South Main Street P. O. Box 849 Lexington, N. C. 27292 Phone: (704) 249-0[illegible]

PLEASE DELIVER THE FOLLOWING [illegible]

NAME: [illegible]

TELEFAX NUMBER: [illegible]

FROM: [illegible]

DATE: [illegible]

TOTAL NUMBER OF PAGES [illegible]

IF YOU DO NOT RECEIVE [illegible]

[illegible]

Distributor SUNOCO Products

SW/UST-3 NOTICE OF INTENT TO PERMANENTLY CLOSURE OR CHANGE-IN-SERVICE

FOR TANKS IN NC

Return Completed Form To:
The appropriate DEM Regional Office according to the county of the facility's location (SEE REVERSE SIDE OF OWNER'S COPY (PINK) FOR REGIONAL OFFICE ADDRESS).

State Use Only
I. D. Number _____
Date Received _____

INSTRUCTIONS

Complete and return thirty (30) days prior to closure or change-in-service.

I. OWNERSHIP OF TANK(S)	II. LOCATION OF TANK(S)
Tank Owner Name: MID-STATE OIL CO (Corporation, Individual, Public Agency or Other Entity)	Facility Name or Company: SUMMIT AVE SUNOCO
Street Address: 1820 S.MAIN STREET	Facility ID # (if available):
County: DAVIDSON	Street Address or State Road: 1105 SUMMIT AVE
City: LEXINGTON State: NC Zip Code: 27293	County: GUILFORD City: GREENSBORO Zip Code: 27405
Tele. No. (Area Code): 704 249-0363	Tele. No. (Area Code): 704 294-5858

III. CONTACT PERSON

Name: WILLIAM SHIPTON Job Title: REPAIR & MAINTENANCE SUPERVISOR Telephone Number: 704 249-0363

IV. TANK REMOVAL, CLOSURE IN PLACE, CHANGE-IN-SERVICE

1. Contact Local Fire Marshal.
2. Plan the entire closure event.
3. Conduct Site Soil Assessments.
4. If Removing Tanks or Closing in Place refer to API Publications, 2015 "Cleaning Petroleum Storage Tanks" & 1604 "Removal & Disposal of Used Underground Petroleum Storage Tanks".
5. Provide a sketch locating pump, tanks and soil sampling locations.
6. Fill out form SW/UST-8 "Site Investigation Report for Permanent Closure" and return within 30 days following the site investigation.
7. Keep copies for 3 years.

V. WORK TO BE PERFORMED BY

(Contractor) Name: JERRY KELLY INC
Address: 111 HUNTERS TRAIL WEST ELIZABETH CITY State: NC Zip Code: 27909
Contact: JERRY KELLY Phone: 919-338-1118

VI. TANK(S) SCHEDULED FOR CLOSURE OR CHANGE-IN-SERVICE

I.D. NO.	TANK CAPACITY	LAST CONTENTS	Closure Type: Permanent	Closure Type: Change-in-Service	Change-in-Service: New Contents Stored
	1000	NAPTHA GAS			

VII. OWNER OR OWNER'S AUTHORIZED REPRESENTATIVE

Print name and official title: WILLIAM SHIPTON - REPAIR & MAINTENANCE SUPERVISOR

Scheduled Removal Date: 4/16/93

Signature: William Shipton

Date Submitted: 3/16/93

If scheduled work date changes, notify your appropriate DEM Regional Office 48 hours prior to originally scheduled date.

SW/UST-3 Rev.7/23/91 White Copy - Regional Office Yellow Copy - Central Office Pink Copy - Owner

TOTAL P.02

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