

FOR TANKS IN NC

Return Completed Form To:

The appropriate DEM Regional Office according to the county of the facility's location. [SEE MAP ON REVERSE SIDE OF OWNER'S COPY (PINK) FOR REGIONAL OFFICE ADDRESS].

State Use Only

I.D. Number 271832

Date Received

INSTRUCTIONS

Complete and return within (30) days following completion of site investigation.

I. Ownership of Tank(s)

II. Location of Tank(s)

Owner Name: Paper Stock Dealers
Street Address: 3004 Hotts Chapel Rd
County: Guilford
City: Greensboro NC Zip Code: 27401
Area Code: 919 Telephone Number: 274-0186

Facility Name or Company: Paper Stock Dealers
Facility ID #:
Street Address or State Road: 503 E. Washington St.
County: Guilford City: Greensboro Zip Code:
Area Code: 919 Telephone Number: 274-0186

III. Contact Person

Name: DAVID PATRIN Job Title: MANAGER Telephone No. (Area Code): 919-274-0186
Closure Contractor: Bobby's Backhoe Ser. 1324 Wiley Lewis Rd City: Telephone No. (Area Code): 919-275-1286
Lab: Guilford Lab P.O. Box 9735 (Address): Greensboro NC Telephone No. (Area Code): 919-274-2907

IV. U.S.T. Information

V. Excavation Condition

VI. Additional Information Required

Table with columns: Tank No., Size in Gallons, Tank Dimensions, Last Contents, Water in Excavation (Yes/No), Free Product (Yes/No), Notable Color or Visible Soil Contamination (Yes/No). Row 1: 1, 1060, 6'x6', GAS, X, X, X.

See reverse side of pink copy (owner's copy) for additional information required by N.C. - DEM in the written report and sketch.

VII. Check List

Check the activities completed.

- Contact local fire marshal
Notify DEM Regional Office before abandonment
Drain & flush piping into tank
Remove all product and residuals from tank
Excavate down to tank
Clean and inspect tank
Remove drop tube, fill pipe, gauge pipe, vapor recovery tank connections, submersible pumps and other tank fixtures.
Cap or plug all lines except the vent and fill lines.
Purge tank of all product & flammable vapors.
Cut one or more large holes in the tanks.
Backfill the area.
Date Tank(s) Permanently closed: 6-8-92
Date of Change-In-Service:

- ABANDONMENT IN PLACE
Fill tank until material overflows tank opening.
Plug or cap all openings.
Disconnect and cap or remove vent line
Solid inert material used - specify:

- REMOVAL
Create vent hole
Label tank
Dispose of tank in approved manner
Final tank destination: Sateway TANK DISPOSAL

VIII. Certification (Read and Sign)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

Print name and official title of owner or owner's authorized representative

Signature

Date Signed

Teresa Dixon, OFFICE MANAGER

Teresa Dixon

7-22-92