

It is the intent of the tank(s) owner, to Permanently Close the tank(s) listed below in the manner indicated.  
 All tanks will be empty and clean, free of all liquids and sludges as required in 40 CFR, Part 280.71 [b].

## NOTIFICATION OF TANK CLOSURE

RECEIVED  
 N.C. Dept. NRCD  
 OCT 26 1989

OWNERSHIP OF TANK(S)	LOCATION OF TANK(S)
Name: Parrish Tire Co. of Mount Airy, Inc.	Site Name: <u>Parrish Tire Co.</u>
Address: 844 Worth Street Mount Airy, NC 27030	Address: 844 Worth Street Mount Airy, NC 27030
Phone Number: (919) 789-2158	County: Surry

Winston-Salem  
Regional Office

TANKS FOR CLOSURE			
TANK NUMBER	TANK CAPACITY	LAST CONTENTS	CLOSURE METHOD
Tank 1	10,000	Gasoline	To Be Removed <del>xxxTo Be Filled</del>
Tank 2	3,000	Gasoline	To Be Removed <del>xxxTo Be Filled</del>
Tank 3	3,000	Gasoline	To Be Removed <del>xxxTo Be Filled</del>
Tank 4			To Be Removed To Be Filled
Tank 5			To Be Removed To Be Filled

TANK(S) CLOSURE OPERATIONS TO BE PERFORMED BY:
(Contractor) Name: <u>Parrish Tire Co. of Mount Airy, Inc.</u>
Address: <u>844 Worth Street, Mount Airy</u> State <u>North Carolina</u> Zip <u>27030</u>
Contact: <u>Charles Goad</u> Phone: <u>(919) 789-2158</u>
<input type="checkbox"/> Is this operator knowledgeable of the requirements for the removal/filling of underground storage tanks ?
<input type="checkbox"/> Is this operator and employees medically monitored as required by OSHA 29 CFR, Part 1910.120 [f] ?
<input type="checkbox"/> Is this operator and employees specifically trained as required by OSHA 29 CFR, Part 1910.120 [e] ?

TANK(S) CLOSURE ASSESSMENT TO BE PERFORMED BY:
(Contractor) Name: <u>Research and Analytical Labs, Inc.</u>
Address: <u>202 Short Street, Kernersville</u> State <u>North Carolina</u> Zip <u>27284</u>
Contact: <u>Jim Cheshire</u> Phone: <u>(919) 996-2841</u>
<input type="checkbox"/> Is this operator knowledgeable of requirements for the closure assessment in 40 CFR, Part 280.72 ?
<input type="checkbox"/> Is this operator and employees medically monitored as required by OSHA 29 CFR, Part 1910.120 [f] ?
<input type="checkbox"/> Is this operator and employees specifically trained as required by OSHA 29 CFR, Part 1910.120 [e] ?

NOTIFICATION SUBMITTAL / NOTIFICATION DATE	
Name: <u>Charles Goad</u>	Scheduled Removal Date: _____
Signature: <u>Charles Goad</u>	Date Submitted: <u>10/21/89</u>

Tank owners are required to notify the implementing state agency at least 30 days before a Permanent Tank Closure as required in 40 CFR, Part 280.71 [a]. For further information contact the U. S. Environmental Protection Agency RCRA / Superfund Hotline at 800-424-9346