

**Salem Environmental, Inc./  
Certifoam Services, Inc.  
P.O. Box 5535  
Winston-Salem, NC 27113-5535  
800/862-9231 // 910/661-9231  
910/661-9241 (Fax)**

RECEIVED  
N.C. Dept. of EHNR  
NOV 07 1995  
Winston-Salem  
Regional Office

November 6th, 1995

NC-DEHNR/DEM  
Groundwater Section  
585 Waughtown St.  
Winston-Salem, NC 27107-2241

*Parrish Grocery & Service-B*

Re: In-place Abandonment, Parrish Grocery & Service, Walnut Cove, Forsyth County

Dear Staff:

Enclosed is our closure report for the above site. Should your office have any questions, please refer them to us immediately.

Sincerely,



Harvey C. Danner, Jr.  
President/Project Manager

# UNDERGROUND STORAGE TANK CLOSURE REPORT

*The closure report should contain, at a minimum, the following information. Any other information that is pertinent to the site should be included.*

## I. General Information

### A. Ownership of UST(s)

1. Name of UST owner: PARRISH GROCERY & SERVICE
2. Owner address and telephone number: 6090 PINE HALL RD.  
WALNUT COVE, NC 27052 (910)585-2915

### B. Facility Information

1. Facility name: SAME AS ABOVE
2. Facility ID #: 0-015402
3. Facility address, telephone number and county: SAME AS ABOVE (FORSYTH)

### C. Contacts

1. Name, address, telephone number and job title of primary contact person:  
VIRGINIA PARRISH, OWNER, 910/585-2915
2. Name, address and telephone number of closure contractor: SALEM  
ENVIRONMENTAL, INC. P.O. BOX 5535 WINSTON-SALEM, NC 27113 910/661-9231
3. Name, address and telephone number of primary consultant: ANDREW RARING, P.G.  
P.O. BOX 34 BETHANIA, NC 27010 910/661-9245
4. Name, address, telephone number, and State certification number of laboratory:  
BIOREMEDIATION RESEARCH, INC. RT 2 BOX 180-C PINNACLE, NC 27043 910/325-2318

### D. UST Information

Tank no.	Installation dates	Size in Gallons	Tank Dimensions	Last Contents	Previous Contents (if any)
4	unknown	550	42" X 92"	KEROSENE	

### E. Site Characteristics

1. Describe any past releases at this site: NONE DOCUMENTED OR KNOWN
2. Is the facility active or inactive at this time? If the facility is inactive note the last time the USTs were in operation: ACTIVE; THE UST CLOSED HAD BEEN TEMPORARILY CLOSED EARLIER THIS YEAR
3. Describe surrounding property use (for example, residential, commercial, farming, etc.)  
THE AREA IS RURAL WITH RESIDENTIAL/FARMING ACTIVITY. DEVELOPMENT IS SPARSE; NO MUNICIPAL SERVICES ARE AVAILABLE.

4. Describe site geology/hydrogeology THE SITE IS IN THE MILTON BELT OF THE PIEDMONT PHYSIOGRAPHIC PROVINCE. BEDROCK IS STATED TO BE A INTRUSIVE GRANITIC ROCK, MEGACRYSTIC TO EQUIGRANULAR (PER 1985 N.C. GEOLOGIC MAP).

## II. Closure Procedures

A. Describe preparations for closure including the steps taken to notify authorities, permits obtained and the steps taken to clean and purge the tanks A PERMIT FROM THE FORSYTH COUNTY FIRE MARSHAL IS ENCLOSED. THE REMAINING SLUDGES/LIQUIDS WERE PUMPED FROM THE UST BY A SUBMERSIBLE PUMP.

B. Note the amount of residual material pumped from the tank(s): APPROXIMATELY 5 GALS.

C. Describe the storage, sampling and disposal of the residual material: PUMPED INTO A DOT DRUM FOR REMOVAL AT OUR OFFICE; TO BE PICKED UP BY L & M ENVIRONMENTAL FOR DISPOSAL.

### D. Excavation

*Note: Refer to the "Groundwater Section Guidelines for the Investigation and Remediation of Soils and Groundwater" on limiting excavations. The Trust Fund will not pay for excessive excavation unless it is justified and verified by laboratory results.*

1. Describe excavation procedures noting the condition of the soils and the dimensions of the excavation in relation to the tanks, piping and/or pumps: AS THE UST WAS ABANDONED IN-PLACE, THERE WAS NO EXCAVATION.

2. Note the depth of tank burial(s) (from land surface to top of tank): 17"; THE UST WAS INSIDE A COVERED AREA -

3. Quantity of soil removed: NONE

4. Describe soil type(s): 0-6": BROWN SILT; 6"-3.5': ORANGE CLAY SILT  
3.5-8.5': TAN SANDY SILT

5. Type and source of backfill used: N/A

### E. Contaminated Soil

*Note: Suspected contaminated soil should be segregated from soil that appears to be uncontaminated and should be treated as contaminated until proven otherwise It should not be used as backfill.*

1. Describe how it was determined to what extent to excavate the soil: NO CONTAMINATED SOIL ENCOUNTERED IN EITHER BORING

2. Describe method of temporary storage, sampling and treatment/disposal of soil: N/A

## III. Site investigation

A. Provide information on field screening and observations, include methods used to calibrate field screening instrument(s): Soil was screened for volatiles with a Gastech Model 1238 Organic Vapor Analyzer (OVA). The process involves placing soil into a ziplock type bag (about 1/4 to 1/3rd its

volume), sealing the bag and allowing 10 to 15 minutes for the soil gasses to equilibrate. Then, the probe from the OVA is inserted into the bag. The subsequent reading, expressed in parts per million of total organics, can suggest if hydrocarbon contamination is present, especially when coupled with a petroleum odor of any kind.

THE OVA COUNTS WERE BOTH UNDER 5 PPM (PARTS PER MILLION) AT THE SAMPLE DEPTHS. NO SOIL EXHIBITED DISCOLORATION OR PETROLEUM ODOR.

B. Describe soil sampling points and sampling procedures used, including:

*Note: Refer to the "Groundwater Section Guidelines for the Investigation and Remediation of Soils and Groundwater" for information about sampling requirements.*

- Location of samples 2' IN FROM EACH END UNDER THE UST
- Type of samples (from excavation, stockpiled soil, etc.) FROM NATIVE, UNDISTURBED SOIL
- Sample collection procedures (grab, split spoon, hand auger, etc.) BY HAND AUGER

ANGLED UNDER THE UST

- Depth of soil samples (below land surface) 6.5'
- Whether samples were taken from side or floor of an excavation N/A
- Sample identification FIELD SAME AS LAB RESULTS
- Sample analyses COPIES ENCLOSED

C. Describe groundwater or surface water sampling procedures used, including: THE HAND AUGER WAS ADVANCED TO A DEPTH OF 8.5'; NO GROUND WATER WAS INTERCEPTED.

*Note: Refer to the "Groundwater Section Guidelines for the Investigation and Remediation of Soils and Groundwater" for information about sampling requirements.*

- Location of samples
- Sample collection procedures (grab, bailer, etc.)
- Sample identification
- Sample analyses

D. Quality control measures

- Describe sample handling procedures including sample preservation and transportation:

Disposable latex gloves were worn during sample collection to prevent cross-contamination. Soil was packed tightly into the glass jars supplied by the lab, which had teflon seal, screw caps. Temperature was maintained under 40 degrees by ice chest with a solid block coolant and refrigeration throughout our hold time.

- Describe decontamination procedures used: Decontamination of the hand auger was per tap water/phosphate-free soap wash followed by a methanol rinse and drying period.
- Describe time and date samples were collected and date submitted to lab: CHAIN OF CUSTODY IS ENCLOSED
- Describe samples collected for quality control purposes (e.g. duplicates, field blanks, trip blanks, etc.) Include methods used to obtain these samples and analytical parameters. N/A
- Discuss how results of quality control samples may have affected your interpretation of soil, groundwater or surface water sample results N/A

E. Investigation results

- Describe results of Site Sensitivity Evaluation (SSE), (if SSE was not conducted, explain why not) SSE IS ENCLOSED
- Describe methods of analyses used (include U.S. EPA method number) 5030/3550

- Describe analytical results for samples; discuss in relation to site specific cleanup level or action level, as appropriate
- BOTH 5030 ANALYSES WERE <10 PPM; BOTH 3550 WERE <20 PPM

**IV. Conclusions and Recommendations**

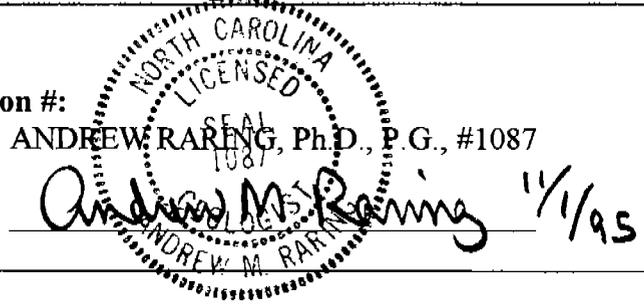
Include probable sources of contamination, further investigation or remediation tasks, or whether no further action is required.

NO FURTHER ACTION SHOULD BE REQUIRED. A CLEAN CLOSURE APPEARS TO HAVE BEEN ACHIEVED.

**V. Signature of Professional Engineer or Licensed Geologist**

Professional Engineer Registration #:

Licensed Geologist License #: ANDREW RARENG, Ph.D., P.G., #1087

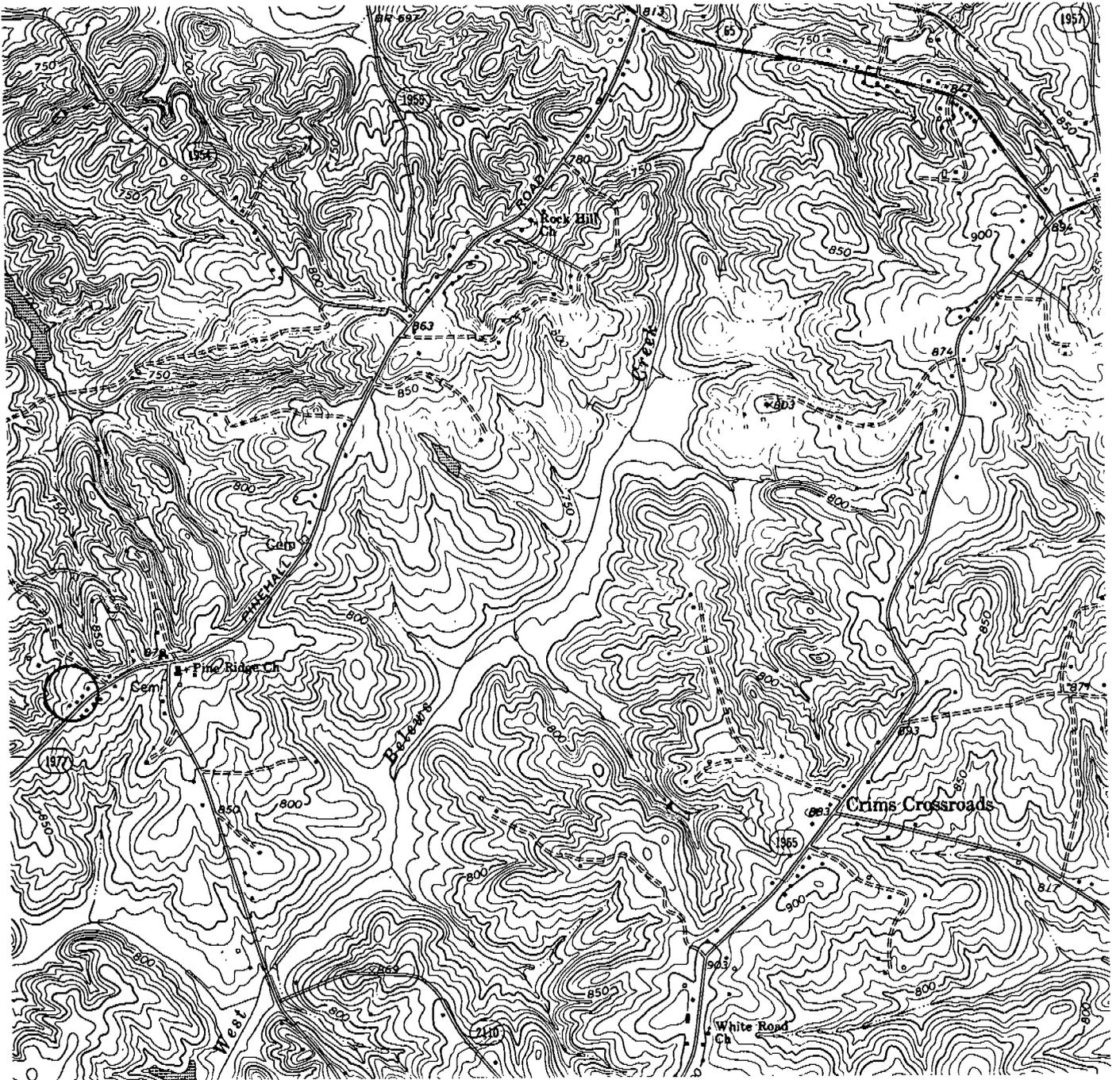


**VI. Enclosures**

- A. Figures
  1. Area Map(s) (can be USGS Topographic Quadrangle)
  2. Site map of UST excavation area drawn to scale
- B. Tables

Sample identifications with results and dates that samples were taken
- C. Appendices
  - Appendix A: Notification of intent to close (GW/UST-3)
  - Appendix B: Site Investigation Report for Permanent Closure or Change-in-Service of UST (GW/UST-2)
  - Appendix C: Certificate of tank disposal
  - Appendix E: Complete chain-of-custody records
  - Appendix F: Copy of all laboratory analytical records
  - Appendix G: Site Sensitivity Evaluation (SSE) (if applicable)

**FIGURE 1**



**PARRISH GROCERY & SERVICE BASE MAP**

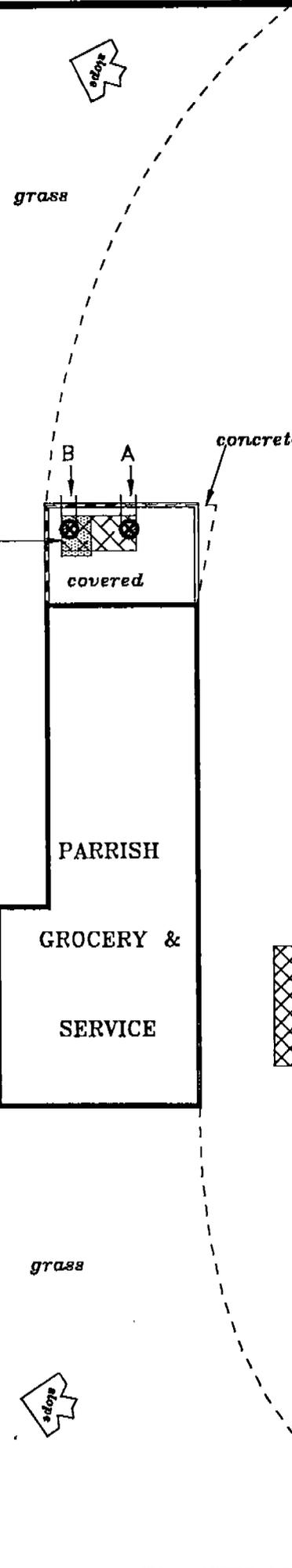
**6090 PINE HALL ROAD, WALNUT COVE, FORSYTH COUNTY, N.C. 27043**

**U.S.G.S. BELEWS CREEK QUADRANGLE MAP, 7.5 MINUTE SERIES**

**SCALE : 1 INCH = 2,000 FEET**



PINE HALL ROAD



minnow tank

grass

concrete

B

A

covered

asphalt

PARRISH

GROCERY &

SERVICE

asphalt

grass

FIGURE 2-SITE MAP  
PARRISH GROCERY & SERVICE  
Pine Hall Road, Forsyth County

-  UST closed in place
-  soil boring
-  UST in operation

SCALE: 1" = 15'

SALEM/CERTIFOAM, Inc.

SEPTEMBER, 1996

**Certifoam Services, Inc.**

**P.O. Box 5535**

**Winston-Salem, NC 27113-5535**

**800/862-9231 // 910/661-9231**

**910/661-9241 (FAX)**

**CERTIFICATION OF CLOSURE FOR AN UNDERGROUND STORAGE  
TANK:**

**Date: October 25th, 1995**

**Location: Parrish Grocery & Service, 6090 Pine Hall Road, Walnut Cove, Forsyth  
County, NC 27043**

**USTs Closed: 1 - 550 gallon kerosene UST, commercial use**

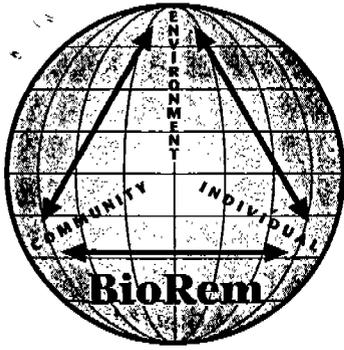
On the above date the tank listed was abandoned in-place by inert, solid nitrogen resin foam. Material used was manufactured by Tailored Chemical Company, Inc., of Hickory, NC. Should any data on the product be required, we will be glad to supply such. We are an approved applicator of the Tailored Foam System, having experience of over six years in a wide variety of situations. All applicators are OSHA Section 1910 trained and medically monitored.

Our process was initiated after all residues were removed from the tank by either vacuum truck or internal cleaning. Liquid foam was then pumped into the UST, where it cured into a solid, inert form. Complete fill was achieved in compliance with regulatory guidance, and all fumes were expelled when the work was completed. All openings were grouted with concrete mix after any associated piping, fill lines or vents were removed or sheared to below ground level.

These activities render the tank abandoned in-place. This process has been initiated at the request of the UST owner, who accepts our work without recourse.

Sincerely,

  
Harvey C. Dannef, Jr.  
President



**BIOREMEDIATION RESEARCH, LTD.**

ROUTE 2, BOX 180-C  
PINNACLE, NC 27043  
PHONE (910) 325-2318

**CERTIFICATE OF  
ANALYSIS**

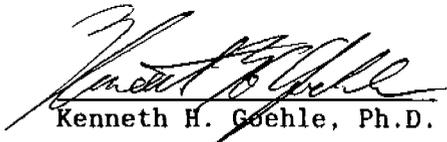
NC Cert. # 480

October 5, 1995

Client: Salem Environmental  
Project: Parrish Groc.

EPA 5030/M8015;3550/M8015: Volatiles/Semi-volatiles

Client Sample	Lab Sample	TPH(5030)	TPH(3550)
A-6.5	9501275	< 10 ppm	< 20 ppm
B-6.5	9501276	< 10	< 20

  
Kenneth H. Goehle, Ph.D.



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 \_\_\_\_\_  
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: Parrish Grocery & Service  
Corporation, Individual, Public Agency, or Other Entity  
Street Address: 6090 Pine Hall Rd.  
County: Forsyth  
City: Walnut Cove State: NC Zip Code: 27052  
Telephone Number: (910) 595-2815  
(Area Code)

Facility Name: \_\_\_\_\_  
(or Company)  
Facility ID # (if available): 0-015402  
Street Address \_\_\_\_\_  
(or State Road)  
County: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Telephone Number: (\_\_\_\_\_) \_\_\_\_\_  
(Area Code)

III. Contact Person

Name: \_\_\_\_\_ Job Title: \_\_\_\_\_ Tel. No.: \_\_\_\_\_  
Closure Contractor: Salem Environmental, Inc. / Certifoam Services Address: POB 5535, W-5, NC 27113 Tel. No.: 910-661-9231  
Primary Consultant: Andrew Raving, Ph.D. Address: POB 34, Bethania, NC 27010 Tel. No.: 910-661-9245  
Lab: Bio Rem (4480) Address: Pt. 2 Box 180-C Pinnacle, NC 27043 Tel. No.: 910-325-2318

IV. U.S.T. Information

V. Excavation Condition

VI. Additional Information Required

Tank No.	Size in Gallons	Tank Dimensions	Last Contents	Water in Excavation		Free Product		Notable Odor or Visible Soil Contamination	
				Yes	No	Yes	No	Yes	No
4	550	42x92	Kerosene		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.  
  
NOTE: The site assessment portion of the tank closure must be conducted under the supervision of a Professional Engineer or Licensed Geologist. After Jan. 1, 1994, all closure site assessment reports must be signed and sealed by a P.E. or L.G.

VII. Check List (Check the activities completed)

PERMANENT CLOSURE (For Removing or Abandoning-in-place)

- 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: 10/25/95  
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: Tailored Foam (Nitrogen Resin)

REMOVAL

- Create vent hole.
  - Label tank.
  - Dispose of tank in approved manner.
- Final tank destination: \_\_\_\_\_

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's authorized representative

Harvey Danwer, Pres.; SE/CS

Signature

Harvey Danwer

Date Signed

11/6/95

# Notice of Intent: UST Permanent Closure or Change-In-Service

**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 RECEIVED

**NC**

### INSTRUCTIONS

Complete and return five (5) working days prior to closure or change-in-service.

N.C. Dept. of EHN  
 SEP 27 1995

#### I. OWNERSHIP OF TANK(S)

Tank Owner Name: Parrish Grocery & Service  
(Corporation, Individual, Public Agency or Other Entity)  
 Street Address: 6090 Pine Hall Rd.  
 County: Forsyth  
 City: Walnut Cove State: NC Zip Code: 27052  
 Tele. No. (Area Code): 910-595-2815

#### II. LOCATION OF TANK(S)

Facility Name or Company: Winston-Salem Regional Office  
 Facility ID # (if available): 0-015402  
 Street Address or State Road: \_\_\_\_\_  
 County: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Tele. No. (Area Code): \_\_\_\_\_

#### III. CONTACT PERSON

Name: Virginia Parrish Job Title: Owner Telephone Number: (910) 595-2815

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

- |  |   |   |
|--|---|---|
| <ol style="list-style-type: none"> <li>1. Contact Local Fire Marshall.</li> <li>2. Plan the entire closure event.</li> <li>3. Conduct Site Soil Assessments.</li> <li>4. If Removing Tanks or Closing in Place refer to API Publications 2015 "Cleaning Petroleum Storage Tanks" &amp; 1604 "Removal &amp; Disposal of Used</li> </ol> | <ol style="list-style-type: none"> <li>Underground Petroleum Storage Tanks".</li> <li>5. Provide a sketch locating piping, tanks and soil sampling locations.</li> <li>6. Fill out form GW/UST-2 "Site Investigation Report for Permanent Closure" and return within 30 days following the site investigation.</li> </ol> | <ol style="list-style-type: none"> <li>7. The site assessment portion of the tank closure must be conducted under the supervision of a Professional Engineer or Licensed Geologist. After January 1, 1994, all closure site assessment reports must be signed and sealed by a P.E. or L.G.</li> <li>8. Keep closure records for 3 years.</li> </ol> |
|--|---|---|

#### V. WORK TO BE PERFORMED BY:

(Contractor) Name: Salem Environmental / Certifoam Services  
 Address: P.O. Box 5535 Winston-Salem, NC Zip Code: 27113  
 Contact: Harvey Danner Phone: 910-661-9231  
 Primary Consultant: Andrew Raring P.G. Phone: 910-661-9245

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

TANK ID#	TANK CAPACITY	LAST CONTENTS	PROPOSED ACTIVITY		
			CLOSURE		CHANGE-IN-SERVICE
			Removal	Abandonment In Place	New Contents Stored
4	550	Kerosene	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	

#### VII. OWNER OR OWNER'S AUTHORIZED REPRESENTATIVE

Print name and official title: Harvey Danner, Pres.; SE/CS \*Scheduled Removal Date: 10/6/95  
 Signature: Harvey Danner Date Submitted: 9/26/95

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