GW/UST-3

Notice of Intent: UST Permanent 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].

RECEIVED
State Use Only
I. D. Number
Date Received JUN 1994

INSTRUCTIONS

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

I. OWNERSHIP OF TANK(S)

Tank Owner Name: NCDOT
(Corporation, Individual, Public Agency, or Other Entity)
Street Address: P.O. Box 25201
County: Wake
City: Raleigh State: NC Zip Code: 27611
Tel. No. (Area Code): ~~915~~ 919-250-4088

II. LOCATION OF TANK(S)

Facility Name or Company: M.G. Smith + Allen P. Smith
Facility ID # (if available): NA (DOT Right of Way)
Street Address or State Road: 2702 - 2716 Friends Ave.
County: Guilford City: High Point Zip Code:
Tel. No. (Area Code):

III. CONTACT PERSON

Name: Gregory Smith, P.G. Job Title: Environmental Geologist Telephone Number: (919) 250-4088

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

1. Contact Local Fire Marshall.
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 piping, tanks and soil sampling locations.
6. Fill out form GW/UST-2 "Site Investigation Report for Permanent Closure" and return within 30 days following the site investigation.
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.**
8. Keep closure records for 3 years.

V. WORK TO BE PERFORMED BY:

(Contractor) Name: A+D Environmental and Industrial Services, Inc.
Address: PO Box 484
Contact: Jerry Smith State: High Point, NC Zip Code: 27261
Primary Consultant: Aquaterra, Inc. Phone: 910-434-7750
Phone: 910-852-5003

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

TANK ID#	TANK CAPACITY	LAST CONTENTS	PROPOSED ACTIVITY: CLOSURE: Removal	CLOSURE: Abandonment In Place	CHANGE-IN-SERVICE: New Contents Stored
1	250	gasoline	✓		

VII. OWNER OR OWNER'S AUTHORIZED REPRESENTATIVE

int name and official title
Susan Kite, P.G. Project Manager
nature: Susan Kite
*Scheduled Removal Date: 6-13-94
Date Submitted: 5-26-94

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

UST-3 (Rev.12/01/93) White Copy - Regional Office Yellow Copy - Central Office Pink Copy - O