

Complete One Form for Each System Service Event

TANK SYSTEM SERVICE AND CLOSURE ASSESSMENT REPORT

RETURN COMPLETED CHECKLIST TO:

The information you provide may be used for secondary purposes [Privacy Law, s.15.04 (1) (m), Wis. Stats.]

CHECK ONE:
 UNDERGROUND
 ABOVEGROUND

FOR PORTIONS OF THE FORM THAT DO NOT APPLY, CHECK THE 'N/A' BOX

Wisconsin Department of Safety and Professional Services
 Bureau of Petroleum Products and Tanks
 P.O. Box 7837
 Madison, WI 53707-7837

RECEIVED

Part A - To be completed by contractor performing repair or closure

JUL 10 2013

A. TYPE OF SERVICE CLOSURE REPAIR/UPGRADE CHANGE-IN-SERVICE
 Indicate portion of system being serviced if a repair, upgrade or change-in-service is being performed
 Remote fill Tank Piping Transition/containment sump Spill bucket Dispenser

B. IDENTIFICATION (Please Print)

1. Facility Name KIPP'S AUTO SERVICE		2. Owner Name MELVIN KIPP	
Facility Street Address (not P.O. Box) 5507 W HAMPTON AVE		3. Contact Name OWNER	
Municipality Mail		ng Address 8031 W VILLARD AVE	
<input checked="" type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town of: MILWAUKEE		Post Office MILWAUKEE, WI 53218	State Z ip Code
Zip Code 53218	County MILWAUKEE	County MILWAUKEE	Telephone No. (include area code) (414) 527-3417
4. Primary Service Contractor Section A above HELLER'S JUNK REMOVAL		Service Contractor Street Address 3217 THORP STREET	
Service Contractor Telephone No. (include area code) () 608-242-8210		Service Contractor City, State, Zip Code MADISON, WI 53714	

C. TANK SYSTEM DETAIL (Complete for all service activities)

a Tank ID #	b Type of Closure ¹	c Tank Material of Construction	d Piping Material of Construction	e Tank Capacity (gallons)	f Contents ²	g Release - System Integrity Compromised (e.g. holes, cracks, loose connection, etc)?		h If "Yes" to "g", Then Specify Source & Cause of Release ⁵	
						Y	N	Source of Release ³	Cause of Release ⁴
301756	P	COATED STEEL	Steel	3000	LG	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	P	UNK
301757	P	COATED STEEL	Steel	8000	UG	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	P	UNK
1335793	P	COATED STEEL	Steel	500	WO	<input type="checkbox"/> Y	<input checked="" type="checkbox"/> N		
						<input type="checkbox"/> Y	<input type="checkbox"/> N		
						<input type="checkbox"/> Y	<input type="checkbox"/> N		
						<input type="checkbox"/> Y	<input type="checkbox"/> N		

1. Indicate type of closure: P = Permanent, TOS = Temporarily Out-of-Service, CIP = Closure In-Place
 2. Indicate type of product: DL = Diesel, LG = Leaded Gasoline, UG = Unleaded Gasoline, FO = Fuel Oil, GH = Gasohol, AF = Aviation Fuel, K = Kerosene, PX = Premix, WO = Waste/Used Motor Oil, FCHZW = Flammable/Combustible Hazardous Waste, OC = Other Chemical (indicate the chemical name(s))

CAS number(s): _____
 3. Source of release: T = tank, P = piping, D = dispenser, STP = submersible turbine pump, DP = delivery problem, O = other, UNK = Unknown
 4. Cause of release: S = spill, O = overflow, POMD = physical or mechanical damage, C = corrosion, IP = installation problem, O = other, UNK = Unknown
 5. Has release been reported to the Department of Natural Resources? Yes No Release not evident at this time

D. CLOSURES (Check applicable box at right in response to all statements in section D)
 Written notification was provided to the local agent 5 days in advance of closure date. Y N
 All local permits were obtained before beginning closure. Y N NA
 UST Form ERS-7437 or AST Form ERS-8731 filed by owner with DSPS indicating closure. Y N NA
NOTE: TANK INVENTORY FORM ERS-7437 or ERS-8731 SIGNED BY THE OWNER MUST BE SUBMITTED WITH EACH CLOSURE or CHANGE-IN-SERVICE CHECKLIST

D.1 TEMPORARILY OUT-OF-SERVICE

	Remover Verified	Inspector Verified	NA
1. Product removed.			
a. Product lines drained into tank (or other container) and liquid removed, and	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>
b. All product removed to bottom of suction line, OR	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>
c. All product removed to within 1" of bottom.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>
2. Fill pipe, gauge pipe, tank truck vapor recovery fittings, and vapor return lines capped.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>
3. All product lines at the islands or pumps located elsewhere are removed and capped, OR	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>

4. Dispensers/pumps left in place but locked and power disconnected.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>
5. Vent lines left open.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>
6. Inventory form filed indicating temporarily out-of-service (TOS) closure.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>

D.2. CLOSURE BY REMOVAL OR IN-PLACE

1. General Requirements

a. Product from piping drained into tank (or other container).	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>
b. Piping disconnected from tank and removed.	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>
c. All liquid and residue removed from tank using explosion-proof pumps or hand pumps.	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>
d. All pump motors and suction hoses bonded to tank or otherwise grounded.	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>
e. Fill pipes, gauge pipes, vapor recovery connections, submersible pumps and other fixtures removed.	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>
f. Vent lines left connected until tanks purged.	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>
g. Tank openings temporarily plugged so vapors exit through vent.	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>
h. Tank atmosphere reduced to 10% of the lower flammable range (LEL) - see Section E.	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>

2. Specific Closure-by-Removal Requirements

a. Tank removed from excavation after PURGING/INERTING; placed on level ground and blocked to prevent movement.	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>
b. Tank cleaned before being removed from site.	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>
c. Tank labeled in 2" high letters after removal but before being moved from site.	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>
NOTE: COMPLETE TANK LABELING SHOULD INCLUDE WARNING AGAINST REUSE; FORMER CONTENTS; VAPOR STATE; VAPOR FREEING TREATMENT; DATE.			
d. Tank vent hole (1/8" in uppermost part of tank) installed prior to moving the tank from site.	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>
e. Site security is provided while the excavation is open.	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>

3. Specific Closure-in-Place Requirements

NOTE: CLOSURES IN-PLACE ARE ONLY ALLOWED WITH THE PRIOR WRITTEN APPROVAL OF THE DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES (DPS) OR LOCAL AGENT.

a. Tank properly cleaned to remove all sludge and residue.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>
b. Solid inert material (sand, cyclone boiler slag, or pea gravel recommended) introduced and tank filled.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>
c. Vent line disconnected or removed.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>
d. Inventory form filed by owner with the DPS indicating closure in-place.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>

E. REPAIR, UPGRADE OR CHANGE-IN-SERVICE

Written notification was provided to the local agent 5 days in advance of service date.

All local permits were obtained before beginning service.

Form ERS-7437 or ERS-8731 filed by owner with the DPS indicating change-in-service.

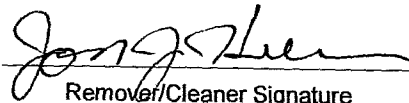
Y N NA
 Y N NA
 Y N NA

F. METHOD OF VAPOR FREEING OF TANK

- Displacement of vapors by eductor or diffused air blower.
Eductor driven by compressed air, bonded and drop tube left in place; vapors discharged minimum of 12 feet above ground. Diffused air blower bonded and drop tube removed. Air pressure not exceeding 5 psig.
- Inert gas using dry ice or liquid carbon dioxide.
- Inert gas using CO₂ or N₂ **NOTE: INERT GASSES PRODUCE AN OXYGEN DEFICIENT ATMOSPHERE. LEL METERS MAY NOT FUNCTION ACCURATELY. THE TANK MAY NOT BE ENTERED IN THIS STATE WITHOUT SPECIAL EQUIPMENT.**
Gas introduced through a single opening at a point near the bottom of the tank at the end of the tank opposite the vent.
Gas introduced under low pressure not to exceed 5 psig to reduce static electricity. Gas introducing device grounded.
- Readings of 10% or less of the lower flammable range (LEL) or 0% oxygen obtained before removing tank from ground.
- Tank atmosphere monitored for flammable or combustible vapor levels prior to and during cleaning and cutting.
- Calibrate combustible gas indicator and/or oxygen meter prior to use. Drop tube removed prior to checking atmosphere. Tank space monitored at bottom, middle and upper portion of tank.

G. REMOVER/CLEANER INFORMATION

JON J HELLER



42281

12-10-2012

Remover/Cleaner Name (print)

Remover/Cleaner Signature

Certification No.

Date Signed

I attest that the procedures and information which I have provided as the tank closure contractor are correct and comply with Comm 10.

Company expected to perform soil contamination assessment HELLER'S JUNK REMOVAL

H. INSPECTOR INFORMATION

LeRoy A. Nordmeyer
Inspector Name (print)


Inspector Signature

262487
Inspector Cert #

N/A
LPO Agency #:

4020 - MFD
FDID # For Location Where Inspection Performed

262-275-8759
Inspector Telephone Number

12/10/12
Date Signed

Part B – To be completed by environmental professional

Submit original Part B to the WDNR along with a copy of Part A

I. TANK-SYSTEM SITE ASSESSMENT (TSSA)

Site Name: KIPP'S AUTO SERVICE

Address: 5507 W HAMPTON AVE, MILWAUKEE WI 53218

Note: Site name and address must match with Part A Section 1.

To determine if a TSSA is required, see Comm 10 and section II part B of ASSESSMENT AND REPORTING OF SUSPECTED AND OBVIOUS RELEASES FROM UNDERGROUND AND ABOVEGROUND STORAGE TANK SYSTEMS.

If a TSSA is required, then follow the procedures detailed in ASSESSMENT AND REPORTING OF SUSPECTED AND OBVIOUS RELEASES FROM UNDERGROUND AND ABOVEGROUND STORAGE TANK SYSTEMS.

1. Site Information

a. Has there been a previously documented release at this site? Y N

If yes, provide the DSPS # _____, or DNR BRRT's # _____.

b. Number of active tanks¹ at facility prior to completion of current services USTs ³ _____ ASTs _____.

(NOTE 1: Do not include previously closed systems or system components.)

c. Excavation/trench dimensions (in feet). (Photos must be provided.)

EXCAVATION/TRENCH #	LENGTH	WIDTH	DEPTH
1	30 FEET	25 FEET	10 FEET
2	6 FEET	6 FEET	6 FEET

2. Visual Excavation/Trench Inspection (Photos must be provided for "Yes" responses, except item b.)

Do any of the following conditions exist in or about the excavation(s)?

a. Stained soils: Y N b. Petroleum odor: Y N c. Water In excavation/trench: Y N

d. Free product in the excavation/trench: Y N e. Sheen or free product on water: Y N

3. Geology/Hydrogeology

a. Depth to groundwater 5 feet b. Indicate type of geology² C

(Note 2: Use these symbols individually or in combination as appropriate: C = Clay, SLT = Silt, S = Sand, Gr = Gravel)

4. Receptors

a. Water supply well(s) within 250 feet of the facility? Y N If yes, specify _____

b. Surface water(s) within 1000 feet of the facility? Y N If yes, specify _____

5. Sampling

a. Follow the procedures detailed in ASSESSMENT AND REPORTING OF SUSPECTED AND OBVIOUS RELEASES FROM UNDERGROUND AND ABOVEGROUND STORAGE TANK SYSTEMS.

b. Complete Tables 1 and 2 as appropriate. (Attach chain-of-custody and laboratory analytical reports.)

c. Attach a detailed map of site features and sample locations.

J. NOTE RELEVANT OBSERVATIONS, SPECIFIC PROBLEMS OR CONCERNS BELOW

BOTH THE 3000 AND THE 8000 GALLON TANKS WERE MORE THAN 70 % SUBMERGED. THE 8000 GALLON TANK HAD LESS THAN 24 INCHES OF PRODUCT/WATER AND THE 3000 GALLON TANK HAD LESS THAN 20 INCHES OF PRODUCT/WATER. I WOULD CONCLUDE THAT THE TANKS WERE NOT LEAKING. THE THREE TANKS REMOVED FROM THE SITE ALL HAD GALVANIZED THREADED STEEL PIPING.

TABLE 1 SOIL FIELD SCREENING & GRO/DRO LABORATORY ANALYTICAL RESULTS-FOR PETROLEUM PRODUCTS

Sample ID #	Sample Location & Soil/Geologic Description	Sample Collection Method				Depth Below Tank/Piping (feet)	Field Screening Result (ppm)	GRO (mg/kg)	DRO (mg/kg)
		Grab	Shelby Tube	Direct Push	Split Spoon				
4071954001	tank excavation east side wall	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5 feet below grade	na	10.4	
4071954002	pump island east side wall	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5 feet below grade	na	108	
4071954003	pump island west side wall	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5 feet below grade	na	34.6	
4071954004	tank excavation west side wall	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5 feet below grade	na	152	
4071954005	tank excavation south side wall	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5 feet below grade	na	302	
4071954006	tank excavation at vent	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5 feet below grade	na	-3.3	
4071954007	waste oil south side wall	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5 feet below grade	na	-3.2	72.2
4071954008	waste oil north side wall	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5 feet below grade	na	847	4140
		<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"/>	<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"/>				

TABLE 2 SOIL LABORATORY ANALYTICAL RESULTS-FOR PETROLEUM PRODUCTS

Sample ID #	BENZENE	TOLUENE	ETHYLBENZENE	MTBE	TRIMETHYL - BENZENES (TOTAL)	XYLENES (TOTAL)	NAPHTHALENE
	ug/kg	ug/kg	ug/kg	ug/kg	ug/kg	ug/kg	ug/kg
4071954001	-25	-25	-25	-25	-25	-50	-25
4071954002	-25	-25	-25	-25	278	503	238
4071954003	-25	-25	118	-25	124.9	36.8	293
4071954004	-25	-25	555	65.2	692	478	983
4071954005	-100	-100	-100	-100	565	680	500
4071954006	-25	-25	-25	-25	58	-50	-25
4071954007	-25	-25	-25	-25	359	-50	59.7
4071954008	-250	-250	3120	-250	85890	7700	11400

K. TANK-SYSTEM SITE ASSESSMENT INFORMATION

As a tank-system site assessor certified under Wis. Admin. Code section Comm 5.83, it is my opinion that there is no indication of a release of a regulated substance to the environment.

Sampling at the site indicates there has been a release to the environment. Pursuant to Wis. Admin. Code section Comm 10.585 (2) (a) and Wis. Stats. section 292.11 (2) (a), the owner or operator or contractor performing work under chapter Comm 10 shall immediately report any release of a regulated substance to the Wisconsin Department of Natural Resources. Failure to do so may result in forfeitures of a minimum of \$10 and a maximum of \$5000 for each violation under Wis. Stats. section 101.09 (5). Each day of continued violation and each tank are treated as separate offenses.

Jon J. Heller
 Tank-System Site Assessor Name (print)
608-242-8210
 Tank-System Site Assessor Telephone Number

Jon J. Heller
 Tank-System Site Assessor Signature
1-22-2013
 Date Signed

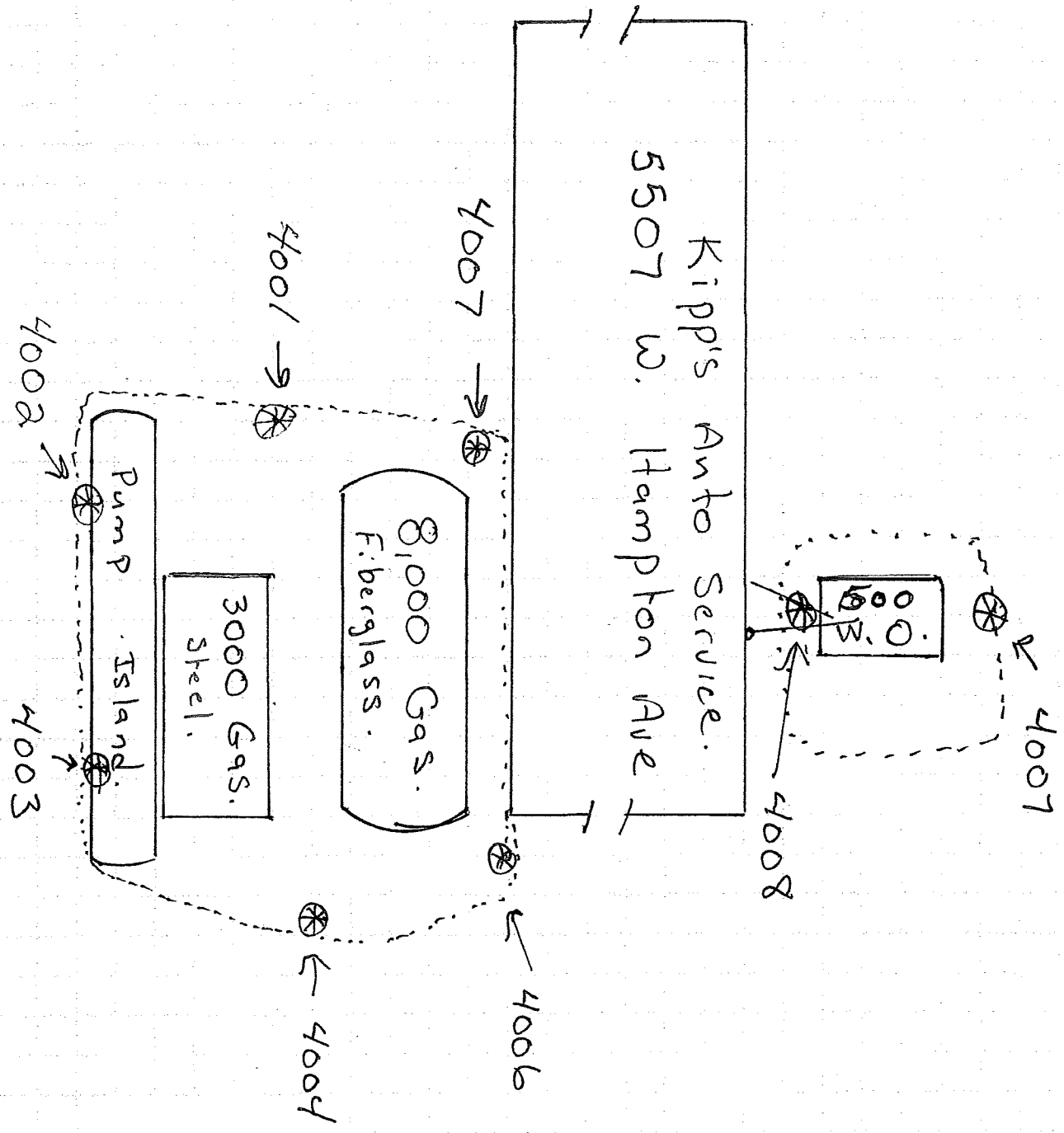
42281
 Certification Number #
Heller's Junk Removal
 Company Name



For Kipp's Auto Service
 Location W. Hampton Ave
 Subject Tank Removal.
Sample locations

Job No. 100230
 Page _____
 Date 12-15-12
 By Jon J. Hu

W. Hampton Ave.



**HELLER'S JUNK REMOVAL
3217 THORP STREET
MADISON, WI 53714
608-242-8210
FAX 608-242-8212**

Tank Destruction Guarantee:

The tank(s) were opened and cleaned in accordance with all state and local regulations.
The tank(s) were shipped to one of the following locations for recycling/disposal.

**Alter Metal Recycling
4400 Sycamore Avenue
Madison, WI 53714
608-241-7191**

CUSTOMER DSPS

SITE NAME Kipp's Auto Service

SITE LOCATION 5507 W. Hampton Ave.

Milwaukee, WI

TANK DESCRIPTION 500 + 3000 Gallon Steel

DRIVER SIGNATURE Jon J Heller **DATE** 12-10-12

**HELLER'S JUNK REMOVAL
3217 THORP STREET
MADISON, WI 53714
608-242-8210
FAX 608-242-8212**

Tank Destruction Guarantee:

The tank(s) were opened and cleaned in accordance with all state and local regulations.
The tank(s) were shipped to one of the following locations for recycling/disposal.

**Dane County Landfill
Highway 12
Madison, WI**

CUSTOMER DSPS

SITE NAME Kipp's Auto Service

SITE LOCATION 5507 W. Hampton Ave.

Milwaukee WI.

TANK DESCRIPTION 8000 Gallon Fiberglass.

DRIVER SIGNATURE Jon J Heller **DATE** 12-10-12

(Please Print Clearly)

Company Name: Seymour
 Branch/Location:
 Project Contact: Jon Heller
 Phone: 608-242-8210
 Project Number:
 Project Name: Kipp's Auto
 Project State: WI
 Sampled By (Print): Jon Heller
 Sampled By (Sign): [Signature]
 PO #:
 Regulatory Program:

UPPER MIDWEST REGION

MN: 612-607-1700 WI: 920-469-2436

4071954



CHAIN OF CUSTODY

***Preservation Codes**
 A=None B=HCL C=H2SO4 D=HNO3 E=DI Water F=Methanol G=NaOH
 H=Sodium Bisulfate Solution I=Sodium Thiosulfate J=Other

FILTERED?
(YES/NO)
 PRESERVATION
(CODE)*

Y/N	Pick Letter	Analysis Requested	Matrix
		DR0	X
		GR0	X
		PL0C + Napht	X
		C	

Quote #:
 Mail To Contact:
 Mail To Company:
 Mail To Address:
 Invoice To Contact:
 Invoice To Company:
 Invoice To Address:
 Invoice To Phone:

Data Package Options (billable)
 EPA Level III
 EPA Level IV

MS/MSD
 On your sample (billable)
 NOT needed on your sample

Matrix Codes
 A = Air W = Water
 B = Biota DW = Drinking Water
 C = Charcoal GW = Ground Water
 O = Oil SW = Surface Water
 S = Soil WW = Waste Water
 SI = Sludge WP = Wipe

PACE LAB #	CLIENT FIELD ID	COLLECTION		MATRIX
		DATE	TIME	
001	Tank Exc. East	12/11	10:00	S
002	Pump Island East	12/11	10:10	
003	Pump Island west	12/11	10:30	
004	Tank Exc. West	12/11	10:20	
005	Tank Exc. South	12/11	10:15	
006	Tank Exc. Vent.	12/11	10:35	
007	Waste Oil South	12/11	1:08 ^{PM}	
008	Waste Oil North	12/11	1:10 ^{PM}	

CLIENT COMMENTS
 1-4ozcg^A

LAB COMMENTS (Lab Use Only)
 1-4ozp^A, 1-40mlv^P

Profile #

Analysis added to COC by lab per PM contacting client. 12/14/12 SKL

Rush Turnaround Time Requested - Prelims (Rush TAT subject to approval/surcharge)
 Date Needed:
 Transmit Prelim Rush Results by (complete what you want):
 Email #1:
 Email #2:
 Telephone:
 Fax:
 Samples on HOLD are subject to special pricing and release of liability

Relinquished By: <u>[Signature]</u>	Date/Time: <u>12-13-12 10:43</u>	Received By:	Date/Time:
Relinquished By: <u>Durham</u>	Date/Time: <u>12/14/12 1010</u>	Received By: <u>Susank Wije</u>	Date/Time: <u>12/14/12 1010</u>
Relinquished By:	Date/Time:	Received By:	Date/Time:
Relinquished By:	Date/Time:	Received By:	Date/Time:

PACE Project No.
4071954
 Receipt Temp = ROT °C
 Sample Receipt pH
 OK / Adjusted
 Cooler Custody Seal
 Present / Not Present
 Intact / Not Intact

December 24, 2012

Robyn Seymour
Seymour Environmental Services, INC.
2531 Dyreson Road
Mc Farland, WI 53558

RE: Project: KIPP'S AUTO
Pace Project No.: 4071954

Dear Robyn Seymour:

Enclosed are the analytical results for sample(s) received by the laboratory on December 14, 2012. The results relate only to the samples included in this report. Results reported herein conform to the most current TNI standards and the laboratory's Quality Assurance Manual, where applicable, unless otherwise noted in the body of the report.

If you have any questions concerning this report, please feel free to contact me.

Sincerely,



Dan Milewsky

dan.milewsky@pacelabs.com
Project Manager

Enclosures



REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, Inc..

CERTIFICATIONS

Project: KIPP'S AUTO
Pace Project No.: 4071954

Green Bay Certification IDs

1241 Bellevue Street, Green Bay, WI 54302
Florida/NELAP Certification #: E87948
Illinois Certification #: 200050
Kentucky Certification #: 82
Louisiana Certification #: 04168
Minnesota Certification #: 055-999-334

New York Certification #: 11888
North Carolina Certification #: 503
North Dakota Certification #: R-150
South Carolina Certification #: 83006001
US Dept of Agriculture #: S-76505
Wisconsin Certification #: 405132750

SAMPLE SUMMARY

Project: KIPP'S AUTO
Pace Project No.: 4071954

Lab ID	Sample ID	Matrix	Date Collected	Date Received
4071954001	TANK EXC. EAST	Solid	12/11/12 10:00	12/14/12 10:10
4071954002	PUMP ISLAND EAST	Solid	12/11/12 10:10	12/14/12 10:10
4071954003	PUMP ISLAND WEST	Solid	12/11/12 10:30	12/14/12 10:10
4071954004	TANK EXC. WEST	Solid	12/11/12 10:20	12/14/12 10:10
4071954005	TANK EXC. SOUTH	Solid	12/11/12 10:15	12/14/12 10:10
4071954006	TANK EXC. I VENT	Solid	12/11/12 10:35	12/14/12 10:10
4071954007	WASTE OIL SOUTH	Solid	12/11/12 13:00	12/14/12 10:10
4071954008	WASTE OIL NORTH	Solid	12/11/12 13:00	12/14/12 10:10

SAMPLE ANALYTE COUNT

Project: KIPP'S AUTO
Pace Project No.: 4071954

Lab ID	Sample ID	Method	Analysts	Analytes Reported
4071954001	TANK EXC. EAST	WI MOD GRO	LCF	11
		ASTM D2974-87	MAV	1
4071954002	PUMP ISLAND EAST	WI MOD GRO	LCF	11
		ASTM D2974-87	MAV	1
4071954003	PUMP ISLAND WEST	WI MOD GRO	LCF	11
		ASTM D2974-87	MAV	1
4071954004	TANK EXC. WEST	WI MOD GRO	LCF	11
		ASTM D2974-87	MAV	1
4071954005	TANK EXC. SOUTH	WI MOD GRO	LCF	11
		ASTM D2974-87	MAV	1
4071954006	TANK EXC. I VENT	WI MOD GRO	LCF	11
		ASTM D2974-87	MAV	1
4071954007	WASTE OIL SOUTH	WI MOD DRO	DAL	1
		WI MOD GRO	LCF	11
		ASTM D2974-87	MAV	1
4071954008	WASTE OIL NORTH	WI MOD DRO	DAL	1
		WI MOD GRO	LCF	11
		ASTM D2974-87	MAV	1

REPORT OF LABORATORY ANALYSIS

ANALYTICAL RESULTS

Project: KIPP'S AUTO
Pace Project No.: 4071954

Sample: TANK EXC. EAST Lab ID: 4071954001 Collected: 12/11/12 10:00 Received: 12/14/12 10:10 Matrix: Solid

Results reported on a "dry-weight" basis

Parameters	Results	Units	LOQ	LOD	DF	Prepared	Analyzed	CAS No.	Qual
WIGRO GCV		Analytical Method: WI MOD GRO Preparation Method: TPH GRO/PVOC WI ext.							
Benzene	<25.0 ug/kg		60.0	25.0	1	12/19/12 09:21	12/19/12 15:08	71-43-2	W
Ethylbenzene	<25.0 ug/kg		60.0	25.0	1	12/19/12 09:21	12/19/12 15:08	100-41-4	W
Gasoline Range Organics	10.4 mg/kg		3.2	3.2	1	12/19/12 09:21	12/19/12 15:08		
Methyl-tert-butyl ether	<25.0 ug/kg		60.0	25.0	1	12/19/12 09:21	12/19/12 15:08	1634-04-4	W
Naphthalene	<25.0 ug/kg		60.0	25.0	1	12/19/12 09:21	12/19/12 15:08	91-20-3	W
Toluene	<25.0 ug/kg		60.0	25.0	1	12/19/12 09:21	12/19/12 15:08	108-88-3	W
1,2,4-Trimethylbenzene	<25.0 ug/kg		60.0	25.0	1	12/19/12 09:21	12/19/12 15:08	95-63-6	W
1,3,5-Trimethylbenzene	<25.0 ug/kg		60.0	25.0	1	12/19/12 09:21	12/19/12 15:08	108-67-8	W
m&p-Xylene	<50.0 ug/kg		120	50.0	1	12/19/12 09:21	12/19/12 15:08	179601-23-1	W
o-Xylene	<25.0 ug/kg		60.0	25.0	1	12/19/12 09:21	12/19/12 15:08	95-47-6	W
Surrogates									
a,a,a-Trifluorotoluene (S)	109 %		80-120		1	12/19/12 09:21	12/19/12 15:08	98-08-8	
Percent Moisture		Analytical Method: ASTM D2974-87							
Percent Moisture	23.1 %		0.10	0.10	1		12/21/12 13:39		

Sample: PUMP ISLAND EAST Lab ID: 4071954002 Collected: 12/11/12 10:10 Received: 12/14/12 10:10 Matrix: Solid

Results reported on a "dry-weight" basis

Parameters	Results	Units	LOQ	LOD	DF	Prepared	Analyzed	CAS No.	Qual
WIGRO GCV		Analytical Method: WI MOD GRO Preparation Method: TPH GRO/PVOC WI ext.							
Benzene	<25.0 ug/kg		60.0	25.0	1	12/19/12 09:21	12/19/12 22:00	71-43-2	W
Ethylbenzene	<25.0 ug/kg		60.0	25.0	1	12/19/12 09:21	12/19/12 22:00	100-41-4	W
Gasoline Range Organics	108 mg/kg		3.1	3.1	1	12/19/12 09:21	12/19/12 22:00		
Methyl-tert-butyl ether	<25.0 ug/kg		60.0	25.0	1	12/19/12 09:21	12/19/12 22:00	1634-04-4	W
Naphthalene	238 ug/kg		75.0	31.3	1	12/19/12 09:21	12/19/12 22:00	91-20-3	
Toluene	<25.0 ug/kg		60.0	25.0	1	12/19/12 09:21	12/19/12 22:00	108-88-3	W
1,2,4-Trimethylbenzene	278 ug/kg		75.0	31.3	1	12/19/12 09:21	12/19/12 22:00	95-63-6	
1,3,5-Trimethylbenzene	<25.0 ug/kg		60.0	25.0	1	12/19/12 09:21	12/19/12 22:00	108-67-8	W
m&p-Xylene	118J ug/kg		150	62.5	1	12/19/12 09:21	12/19/12 22:00	179601-23-1	
o-Xylene	385 ug/kg		75.0	31.3	1	12/19/12 09:21	12/19/12 22:00	95-47-6	
Surrogates									
a,a,a-Trifluorotoluene (S)	140 %		80-120		1	12/19/12 09:21	12/19/12 22:00	98-08-8	S7
Percent Moisture		Analytical Method: ASTM D2974-87							
Percent Moisture	20.0 %		0.10	0.10	1		12/21/12 13:39		

ANALYTICAL RESULTS

Project: KIPP'S AUTO
Pace Project No.: 4071954

Sample: PUMP ISLAND WEST **Lab ID: 4071954003** Collected: 12/11/12 10:30 Received: 12/14/12 10:10 Matrix: Solid
Results reported on a "dry-weight" basis

Parameters	Results	Units	LOQ	LOD	DF	Prepared	Analyzed	CAS No.	Qual
WIGRO GCV		Analytical Method: WI MOD GRO Preparation Method: TPH GRO/PVOC WI ext.							
Benzene	<25.0	ug/kg	60.0	25.0	1	12/19/12 09:21	12/19/12 15:34	71-43-2	W
Ethylbenzene	118	ug/kg	70.2	29.3	1	12/19/12 09:21	12/19/12 15:34	100-41-4	
Gasoline Range Organics	34.6	mg/kg	2.9	2.9	1	12/19/12 09:21	12/19/12 15:34		
Methyl-tert-butyl ether	<25.0	ug/kg	60.0	25.0	1	12/19/12 09:21	12/19/12 15:34	1634-04-4	W
Naphthalene	293	ug/kg	70.2	29.3	1	12/19/12 09:21	12/19/12 15:34	91-20-3	
Toluene	<25.0	ug/kg	60.0	25.0	1	12/19/12 09:21	12/19/12 15:34	108-88-3	W
1,2,4-Trimethylbenzene	53.6J	ug/kg	70.2	29.3	1	12/19/12 09:21	12/19/12 15:34	95-63-6	
1,3,5-Trimethylbenzene	71.3	ug/kg	70.2	29.3	1	12/19/12 09:21	12/19/12 15:34	108-67-8	
m&p-Xylene	<50.0	ug/kg	120	50.0	1	12/19/12 09:21	12/19/12 15:34	179601-23-1	W
o-Xylene	36.8J	ug/kg	70.2	29.3	1	12/19/12 09:21	12/19/12 15:34	95-47-6	
Surrogates									
a,a,a-Trifluorotoluene (S)	120	%	80-120		1	12/19/12 09:21	12/19/12 15:34	98-08-8	
Percent Moisture		Analytical Method: ASTM D2974-87							
Percent Moisture	14.5	%	0.10	0.10	1		12/21/12 13:39		

Sample: TANK EXC. WEST **Lab ID: 4071954004** Collected: 12/11/12 10:20 Received: 12/14/12 10:10 Matrix: Solid
Results reported on a "dry-weight" basis

Parameters	Results	Units	LOQ	LOD	DF	Prepared	Analyzed	CAS No.	Qual
WIGRO GCV		Analytical Method: WI MOD GRO Preparation Method: TPH GRO/PVOC WI ext.							
Benzene	<25.0	ug/kg	60.0	25.0	1	12/19/12 09:21	12/19/12 22:26	71-43-2	W
Ethylbenzene	555	ug/kg	71.9	30.0	1	12/19/12 09:21	12/19/12 22:26	100-41-4	
Gasoline Range Organics	152	mg/kg	3.0	3.0	1	12/19/12 09:21	12/19/12 22:26		
Methyl-tert-butyl ether	65.2J	ug/kg	71.9	30.0	1	12/19/12 09:21	12/19/12 22:26	1634-04-4	
Naphthalene	983	ug/kg	71.9	30.0	1	12/19/12 09:21	12/19/12 22:26	91-20-3	
Toluene	<25.0	ug/kg	60.0	25.0	1	12/19/12 09:21	12/19/12 22:26	108-88-3	W
1,2,4-Trimethylbenzene	214	ug/kg	71.9	30.0	1	12/19/12 09:21	12/19/12 22:26	95-63-6	
1,3,5-Trimethylbenzene	478	ug/kg	71.9	30.0	1	12/19/12 09:21	12/19/12 22:26	108-67-8	
m&p-Xylene	300	ug/kg	144	59.9	1	12/19/12 09:21	12/19/12 22:26	179601-23-1	
o-Xylene	178	ug/kg	71.9	30.0	1	12/19/12 09:21	12/19/12 22:26	95-47-6	
Surrogates									
a,a,a-Trifluorotoluene (S)	126	%	80-120		1	12/19/12 09:21	12/19/12 22:26	98-08-8	S7
Percent Moisture		Analytical Method: ASTM D2974-87							
Percent Moisture	16.6	%	0.10	0.10	1		12/21/12 13:39		

ANALYTICAL RESULTS

Project: KIPP'S AUTO
Pace Project No.: 4071954

Sample: TANK EXC. SOUTH Lab ID: 4071954005 Collected: 12/11/12 10:15 Received: 12/14/12 10:10 Matrix: Solid

Results reported on a "dry-weight" basis

Parameters	Results	Units	LOQ	LOD	DF	Prepared	Analyzed	CAS No.	Qual
WIGRO GCV Analytical Method: WI MOD GRO Preparation Method: TPH GRO/PVOC WI ext.									
Benzene	<100	ug/kg	240	100	4	12/19/12 09:21	12/20/12 21:32	71-43-2	W
Ethylbenzene	<100	ug/kg	240	100	4	12/19/12 09:21	12/20/12 21:32	100-41-4	W
Gasoline Range Organics	302	mg/kg	12.7	12.7	4	12/19/12 09:21	12/20/12 21:32		
Methyl-tert-butyl ether	<100	ug/kg	240	100	4	12/19/12 09:21	12/20/12 21:32	1634-04-4	W
Naphthalene	500	ug/kg	305	127	4	12/19/12 09:21	12/20/12 21:32	91-20-3	
Toluene	<100	ug/kg	240	100	4	12/19/12 09:21	12/20/12 21:32	108-88-3	W
1,2,4-Trimethylbenzene	565	ug/kg	305	127	4	12/19/12 09:21	12/20/12 21:32	95-63-6	
1,3,5-Trimethylbenzene	<100	ug/kg	240	100	4	12/19/12 09:21	12/20/12 21:32	108-67-8	W
m&p-Xylene	<200	ug/kg	480	200	4	12/19/12 09:21	12/20/12 21:32	179601-23-1	W
o-Xylene	680	ug/kg	305	127	4	12/19/12 09:21	12/20/12 21:32	95-47-6	
Surrogates									
a,a,a-Trifluorotoluene (S)	131	%	80-120		4	12/19/12 09:21	12/20/12 21:32	98-08-8	S7
Percent Moisture Analytical Method: ASTM D2974-87									
Percent Moisture	21.2	%	0.10	0.10	1		12/21/12 13:39		

Sample: TANK EXC. I VENT Lab ID: 4071954006 Collected: 12/11/12 10:35 Received: 12/14/12 10:10 Matrix: Solid

Results reported on a "dry-weight" basis

Parameters	Results	Units	LOQ	LOD	DF	Prepared	Analyzed	CAS No.	Qual
WIGRO GCV Analytical Method: WI MOD GRO Preparation Method: TPH GRO/PVOC WI ext.									
Benzene	<25.0	ug/kg	60.0	25.0	1	12/19/12 09:21	12/19/12 14:16	71-43-2	W
Ethylbenzene	<25.0	ug/kg	60.0	25.0	1	12/19/12 09:21	12/19/12 14:16	100-41-4	W
Gasoline Range Organics	<3.3	mg/kg	3.3	3.3	1	12/19/12 09:21	12/19/12 14:16		
Methyl-tert-butyl ether	<25.0	ug/kg	60.0	25.0	1	12/19/12 09:21	12/19/12 14:16	1634-04-4	W
Naphthalene	<25.0	ug/kg	60.0	25.0	1	12/19/12 09:21	12/19/12 14:16	91-20-3	W
Toluene	<25.0	ug/kg	60.0	25.0	1	12/19/12 09:21	12/19/12 14:16	108-88-3	W
1,2,4-Trimethylbenzene	58.0J	ug/kg	79.1	33.0	1	12/19/12 09:21	12/19/12 14:16	95-63-6	
1,3,5-Trimethylbenzene	<25.0	ug/kg	60.0	25.0	1	12/19/12 09:21	12/19/12 14:16	108-67-8	W
m&p-Xylene	<50.0	ug/kg	120	50.0	1	12/19/12 09:21	12/19/12 14:16	179601-23-1	W
o-Xylene	<25.0	ug/kg	60.0	25.0	1	12/19/12 09:21	12/19/12 14:16	95-47-6	W
Surrogates									
a,a,a-Trifluorotoluene (S)	103	%	80-120		1	12/19/12 09:21	12/19/12 14:16	98-08-8	
Percent Moisture Analytical Method: ASTM D2974-87									
Percent Moisture	24.2	%	0.10	0.10	1		12/21/12 13:39		

ANALYTICAL RESULTS

Project: KIPP'S AUTO
Pace Project No.: 4071954

Sample: **WASTE OIL SOUTH** Lab ID: **4071954007** Collected: 12/11/12 13:00 Received: 12/14/12 10:10 Matrix: Solid
Results reported on a "dry-weight" basis

Parameters	Results	Units	LOQ	LOD	DF	Prepared	Analyzed	CAS No.	Qual
WIDRO GCS		Analytical Method: WI MOD DRO Preparation Method: WI MOD DRO							
Diesel Range Organics	72.2	mg/kg	2.4	1.2	1	12/18/12 04:30	12/18/12 11:47		T4
WIGRO GCV		Analytical Method: WI MOD GRO Preparation Method: TPH GRO/PVOC WI ext.							
Benzene	<25.0	ug/kg	60.0	25.0	1	12/19/12 09:21	12/19/12 14:42	71-43-2	W
Ethylbenzene	<25.0	ug/kg	60.0	25.0	1	12/19/12 09:21	12/19/12 14:42	100-41-4	W
Gasoline Range Organics	<3.2	mg/kg	3.2	3.2	1	12/19/12 09:21	12/19/12 14:42		
Methyl-tert-butyl ether	<25.0	ug/kg	60.0	25.0	1	12/19/12 09:21	12/19/12 14:42	1634-04-4	W
Naphthalene	59.7J	ug/kg	77.2	32.1	1	12/19/12 09:21	12/19/12 14:42	91-20-3	
Toluene	<25.0	ug/kg	60.0	25.0	1	12/19/12 09:21	12/19/12 14:42	108-88-3	W
1,2,4-Trimethylbenzene	359	ug/kg	77.2	32.1	1	12/19/12 09:21	12/19/12 14:42	95-63-6	
1,3,5-Trimethylbenzene	<25.0	ug/kg	60.0	25.0	1	12/19/12 09:21	12/19/12 14:42	108-67-8	W
m&p-Xylene	<50.0	ug/kg	120	50.0	1	12/19/12 09:21	12/19/12 14:42	179601-23-1	W
o-Xylene	<25.0	ug/kg	60.0	25.0	1	12/19/12 09:21	12/19/12 14:42	95-47-6	W
Surrogates									
a,a,a-Trifluorotoluene (S)	105	%	80-120		1	12/19/12 09:21	12/19/12 14:42	98-08-8	
Percent Moisture		Analytical Method: ASTM D2974-87							
Percent Moisture	22.2	%	0.10	0.10	1		12/21/12 13:39		

Sample: **WASTE OIL NORTH** Lab ID: **4071954008** Collected: 12/11/12 13:00 Received: 12/14/12 10:10 Matrix: Solid
Results reported on a "dry-weight" basis

Parameters	Results	Units	LOQ	LOD	DF	Prepared	Analyzed	CAS No.	Qual
WIDRO GCS		Analytical Method: WI MOD DRO Preparation Method: WI MOD DRO							
Diesel Range Organics	4140	mg/kg	243	121	100	12/18/12 04:30	12/18/12 12:16		T4
WIGRO GCV		Analytical Method: WI MOD GRO Preparation Method: TPH GRO/PVOC WI ext.							
Benzene	<250	ug/kg	600	250	10	12/19/12 09:21	12/19/12 20:17	71-43-2	W
Ethylbenzene	3120	ug/kg	762	317	10	12/19/12 09:21	12/19/12 20:17	100-41-4	
Gasoline Range Organics	847	mg/kg	31.7	31.7	10	12/19/12 09:21	12/19/12 20:17		
Methyl-tert-butyl ether	<250	ug/kg	600	250	10	12/19/12 09:21	12/19/12 20:17	1634-04-4	W
Naphthalene	11400	ug/kg	762	317	10	12/19/12 09:21	12/19/12 20:17	91-20-3	
Toluene	<250	ug/kg	600	250	10	12/19/12 09:21	12/19/12 20:17	108-88-3	W
1,2,4-Trimethylbenzene	83300	ug/kg	762	317	10	12/19/12 09:21	12/19/12 20:17	95-63-6	
1,3,5-Trimethylbenzene	2590	ug/kg	762	317	10	12/19/12 09:21	12/19/12 20:17	108-67-8	
m&p-Xylene	6160	ug/kg	1520	635	10	12/19/12 09:21	12/19/12 20:17	179601-23-1	
o-Xylene	1540	ug/kg	762	317	10	12/19/12 09:21	12/19/12 20:17	95-47-6	
Surrogates									
a,a,a-Trifluorotoluene (S)	120	%	80-120		10	12/19/12 09:21	12/19/12 20:17	98-08-8	
Percent Moisture		Analytical Method: ASTM D2974-87							
Percent Moisture	21.2	%	0.10	0.10	1		12/21/12 13:39		

QUALITY CONTROL DATA

Project: KIPP'S AUTO
Pace Project No.: 4071954

QC Batch: GCV/9524 Analysis Method: WI MOD GRO
QC Batch Method: TPH GRO/PVOC WI ext. Analysis Description: WIGRO Solid GCV
Associated Lab Samples: 4071954001, 4071954002, 4071954003, 4071954004, 4071954005, 4071954006, 4071954007, 4071954008

METHOD BLANK: 729164 Matrix: Solid
Associated Lab Samples: 4071954001, 4071954002, 4071954003, 4071954004, 4071954005, 4071954006, 4071954007, 4071954008

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
1,2,4-Trimethylbenzene	ug/kg	<25.0	60.0	12/19/12 12:07	
1,3,5-Trimethylbenzene	ug/kg	<25.0	60.0	12/19/12 12:07	
Benzene	ug/kg	<25.0	60.0	12/19/12 12:07	
Ethylbenzene	ug/kg	<25.0	60.0	12/19/12 12:07	
Gasoline Range Organics	mg/kg	<2.5	2.5	12/19/12 12:07	
m&p-Xylene	ug/kg	<50.0	120	12/19/12 12:07	
Methyl-tert-butyl ether	ug/kg	<25.0	60.0	12/19/12 12:07	
Naphthalene	ug/kg	<25.0	60.0	12/19/12 12:07	
o-Xylene	ug/kg	<25.0	60.0	12/19/12 12:07	
Toluene	ug/kg	<25.0	60.0	12/19/12 12:07	
a,a,a-Trifluorotoluene (S)	%	103	80-120	12/19/12 12:07	

LABORATORY CONTROL SAMPLE & LCSD: 729165		729166								
Parameter	Units	Spike Conc.	LCS Result	LCSD Result	LCS % Rec	LCSD % Rec	% Rec Limits	RPD	Max RPD	Qualifiers
1,2,4-Trimethylbenzene	ug/kg	1000	940	976	94	98	80-120	4	20	
1,3,5-Trimethylbenzene	ug/kg	1000	978	1010	98	101	80-120	4	20	
Benzene	ug/kg	1000	1050	1090	105	109	80-120	4	20	
Ethylbenzene	ug/kg	1000	1040	1090	104	109	80-120	4	20	
Gasoline Range Organics	mg/kg	10	9.7	9.9	97	99	80-120	2	20	
m&p-Xylene	ug/kg	2000	2070	2170	104	108	80-120	4	20	
Methyl-tert-butyl ether	ug/kg	1000	920	932	92	93	80-120	1	20	
Naphthalene	ug/kg	1000	896	912	90	91	80-120	2	20	
o-Xylene	ug/kg	1000	1030	1080	103	108	80-120	4	20	
Toluene	ug/kg	1000	1040	1080	104	108	80-120	4	20	
a,a,a-Trifluorotoluene (S)	%				104	104	80-120			

QUALITY CONTROL DATA

Project: KIPP'S AUTO
Pace Project No.: 4071954

QC Batch: OEXT/17204 Analysis Method: WI MOD DRO
QC Batch Method: WI MOD DRO Analysis Description: WIDRO GCS
Associated Lab Samples: 4071954007, 4071954008

METHOD BLANK: 728406 Matrix: Solid
Associated Lab Samples: 4071954007, 4071954008

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Diesel Range Organics	mg/kg	<0.99	2.0	12/18/12 10:55	

LABORATORY CONTROL SAMPLE & LCSD: 728407		728408								
Parameter	Units	Spike Conc.	LCS Result	LCSD Result	LCS % Rec	LCSD % Rec	% Rec Limits	RPD	Max RPD	Qualifiers
Diesel Range Organics	mg/kg	40	38.1	33.8	95	85	70-120	12	20	

QUALIFIERS

Project: KIPP'S AUTO
Pace Project No.: 4071954

DEFINITIONS

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to changes in sample preparation, dilution of the sample aliquot, or moisture content.

ND - Not Detected at or above adjusted reporting limit.

J - Estimated concentration above the adjusted method detection limit and below the adjusted reporting limit.

MDL - Adjusted Method Detection Limit.

PRL - Pace Reporting Limit.

RL - Reporting Limit.

S - Surrogate

1,2-Diphenylhydrazine (8270 listed analyte) decomposes to Azobenzene.

Consistent with EPA guidelines, unrounded data are displayed and have been used to calculate % recovery and RPD values.

LCS(D) - Laboratory Control Sample (Duplicate)

MS(D) - Matrix Spike (Duplicate)

DUP - Sample Duplicate

RPD - Relative Percent Difference

NC - Not Calculable.

SG - Silica Gel - Clean-Up

U - Indicates the compound was analyzed for, but not detected.

N-Nitrosodiphenylamine decomposes and cannot be separated from Diphenylamine using Method 8270. The result reported for each analyte is a combined concentration.

Pace Analytical is TNI accredited. Contact your Pace PM for the current list of accredited analytes.

TNI - The NELAC Institute.

ANALYTE QUALIFIERS

S7 Surrogate recovery outside control limits (not confirmed by re-analysis).

T4 Result reported for hydrocarbons within the method-specific range that do not match pattern of laboratory standard.

W Non-detect results are reported on a wet weight basis.

QUALITY CONTROL DATA CROSS REFERENCE TABLE

Project: KIPP'S AUTO

Pace Project No.: 4071954

Lab ID	Sample ID	QC Batch Method	QC Batch	Analytical Method	Analytical Batch
4071954007	WASTE OIL SOUTH	WI MOD DRO	OEXT/17204	WI MOD DRO	GCSV/8908
4071954008	WASTE OIL NORTH	WI MOD DRO	OEXT/17204	WI MOD DRO	GCSV/8908
4071954001	TANK EXC. EAST	TPH GRO/PVOC WI ext.	GCV/9524	WI MOD GRO	GCV/9530
4071954002	PUMP ISLAND EAST	TPH GRO/PVOC WI ext.	GCV/9524	WI MOD GRO	GCV/9530
4071954003	PUMP ISLAND WEST	TPH GRO/PVOC WI ext.	GCV/9524	WI MOD GRO	GCV/9530
4071954004	TANK EXC. WEST	TPH GRO/PVOC WI ext.	GCV/9524	WI MOD GRO	GCV/9530
4071954005	TANK EXC. SOUTH	TPH GRO/PVOC WI ext.	GCV/9524	WI MOD GRO	GCV/9530
4071954006	TANK EXC. I VENT	TPH GRO/PVOC WI ext.	GCV/9524	WI MOD GRO	GCV/9530
4071954007	WASTE OIL SOUTH	TPH GRO/PVOC WI ext.	GCV/9524	WI MOD GRO	GCV/9530
4071954008	WASTE OIL NORTH	TPH GRO/PVOC WI ext.	GCV/9524	WI MOD GRO	GCV/9530
4071954001	TANK EXC. EAST	ASTM D2974-87	PMST/8075		
4071954002	PUMP ISLAND EAST	ASTM D2974-87	PMST/8075		
4071954003	PUMP ISLAND WEST	ASTM D2974-87	PMST/8075		
4071954004	TANK EXC. WEST	ASTM D2974-87	PMST/8075		
4071954005	TANK EXC. SOUTH	ASTM D2974-87	PMST/8075		
4071954006	TANK EXC. I VENT	ASTM D2974-87	PMST/8075		
4071954007	WASTE OIL SOUTH	ASTM D2974-87	PMST/8075		
4071954008	WASTE OIL NORTH	ASTM D2974-87	PMST/8075		

Petroleum Programs Home	Search Instructions	Search by Tank ID	Search by Site, Owner, or Tank Characteristics
---	-------------------------------------	-----------------------------------	--

Tank List

Searching for:

Facility ID equal to 100230

Number of matching records: 5

Type	ID	Facility ID	Address	Status	Contents	Size (gals)	Cust ID	Owner
County: MILWAUKEE, FDID: 4020 - Milwaukee Bldg Insp, Municipality: CITY OF MILWAUKEE								
1. UST	301756	100230	5507 W HAMPTON AVE	Abandoned without Product	Leaded Gasoline	3000	343280	MELVIN KIPP
2. UST	301757	100230	5507 W HAMPTON AVE	Abandoned without Product	Unleaded Gasoline	8000	343280	MELVIN KIPP
3. UST	1335793	100230	5507 W HAMPTON AVE	Abandoned without Product	Waste/Used Motor Oil	500	343280	MELVIN KIPP
4. UST	1389654	100230	5507 W HAMPTON AVE	Closed/Removed	Unleaded Gasoline	8000	343280	MELVIN KIPP
5. UST	1389655	100230	5507 W HAMPTON AVE	Closed/Removed	Leaded Gasoline	3000	343280	MELVIN KIPP

[Download](#)

[Close this response window](#)



This document was last revised: February 2010

Wisconsin Department of Safety and Professional Services

Search Instructions	Search by Site, Owner, or Tank Characteristics	Search by Tank ID
-------------------------------------	--	-----------------------------------

Tank Detail

Site and Owner

Site Info

Facility ID: [100230](#) KIPPS AUTO SERVICE 40 - MILWAUKEE
 5507 W HAMPTON AVE
 MILWAUKEE
 Landowner Type: Private

County & Municipality

City of MILWAUKEE
 Fire Dept ID: 4020 - Milwaukee Bldg Insp

Owner

ID: [343280](#)
 MELVIN KIPP
 8031 W VILLARD AVE
 MILWAUKEE WI 53218

Site Anniversary Date: Dispensers have Sumps: Unknown

Underground Storage Tank - ID: 301757, Wang ID: 402003133, Abandoned without Product as of 01/01/1989, PTO Expiration: 10/28/2002

Install Date:	Capacity in Gallons:	8000	Contents:	Unleaded Gasoline
Tank Occupancy:	Mercantile/Commercial Marketer:	N	CAS Number:	
Federally Regulated:	Y	Spill Protection:	Required - Not Installed	Required - Not Installed
Overfill Prot Type:	- None -	Containment Sump Installed:	Unknown	
Corrosion Protect Type:		Date of Lining:	Lining Inspected Date:	
Leak Detection:	null	Cath Test Date:	Cath Expire Date:	
Leak Test Meth:		Leak Expire Date:	Leak Test Date:	
Construction Material:	Coated Steel	Wall Size:	Single	Underground Piping: Y
Close Order Date:	<i>F.berglass</i>	Close Order By:		

Piping - Abandoned without Product

Flex Connectors:	UST mainfolded:	Related Tank ID:
Type:	Aboveground Piping:	Aboveground Pipe Construction:
Construction Material:	Corrosion Protect Type:	Leak Detection:
Cath Test Date:	Cath Expire Date:	Leak Test Meth:
Leak Test Date:	Leak Expire Date:	Pipe Wall Size:
Catastrophic Leak Detection:	Cat Leak Test Date:	Piping System Type:

Inspections [Click here for login page](#)

Trans ID	Type	Status	Date	Fiscal Yr
913971	AN	CLNI		2004
1044322	AN	CLNI		2005
1178938	AN	CLNI		2006



[Close this response window](#)

This document was last revised: February 2010

Wisconsin Department of Safety and Professional Services

Search Instructions	Search by Site, Owner, or Tank Characteristics	Search by Tank ID
-------------------------------------	--	-----------------------------------

Tank Detail

Site and Owner

Site Info

Facility ID: [100230](#) KIPPS AUTO SERVICE
 5507 W HAMPTON AVE
 MILWAUKEE
 Landowner Type: Private
 Site Anniversary Date: Dispensers have Sumps: Unknown

County & Municipality

40 - MILWAUKEE
 City of MILWAUKEE
 Fire Dept ID: 4020 - Milwaukee Bldg Insp

Owner

ID: [343280](#)
 MELVIN KIPP
 8031 W VILLARD AVE
 MILWAUKEE WI 53218

Underground Storage Tank - ID: 301756, Wang ID: 402003132, Abandoned without Product as of 01/01/1989, PTO Expiration: 10/28/2002

Install Date:	Capacity in Gallons:	3000	Contents:	Leaded Gasoline
Tank Occupancy:	Mercantile/Commercial Marketer:	N	CAS Number:	
Federally Regulated:	Y	Spill Protection:	Required - Not Installed	Overfill Protection: Required - Not Installed
Overfill Prot Type:	- None -	Containment Sump Installed:	Unknown	
Corrosion Protect Type:		Date of Lining:	Lining Inspected Date:	
Leak Detection:	null	Cath Test Date:	Cath Expire Date:	
Leak Test Meth:		Leak Expire Date:	Leak Test Date:	
Construction Material:	Coated Steel	Wall Size:	Single	Underground Piping: Y
Close Order Date:		Close Order By:		

Piping - Abandoned without Product

Flex Connectors:	UST mainfolded:	Related Tank ID:
Type:	Aboveground Piping:	Aboveground Pipe Construction:
Construction Material:	Corrosion Protect Type:	Leak Detection: null
Cath Test Date:	Cath Expire Date:	Leak Test Meth:
Leak Test Date:	Leak Expire Date:	Pipe Wall Size: Single
Catastrophic Leak Detection:	Cat Leak Test Date:	Piping System Type:

Inspections [Click here for login page](#)

Trans ID	Type	Status	Date	Fiscal Yr
913971	AN	CLNI		2004
1044322	AN	CLNI		2005
1178938	AN	CLNI		2006



[Close this response window](#)

This document was last revised: February 2010

Wisconsin Department of Safety and Professional Services

Search Instructions	Search by Site, Owner, or Tank Characteristics	Search by Tank ID
-------------------------------------	--	-----------------------------------

Tank Detail

Site Info		Site and Owner		Owner	
Facility ID: 100230 KIPPS AUTO SERVICE 5507 W HAMPTON AVE MILWAUKEE Landowner Type: Private Site Anniversary Date: Dispensers have Sumps: Unknown		County & Municipality 40 - MILWAUKEE City of MILWAUKEE Fire Dept ID: 4020 - Milwaukee Bldg Insp		ID: 343280 MELVIN KIPP 8031 W VILLARD AVE MILWAUKEE WI 53218	
Underground Storage Tank - ID: 1335793, Wang ID: null, Abandoned without Product as of 01/01/1989					
Install Date:	Capacity in Gallons:	500	Contents:	Waste/Used Motor Oil	
Tank Occupancy:	Mercantile/Commercial	Marketer:	N	CAS Number:	
Federally Regulated:	Y	Spill Protection:	Required - Not Installed	Overfill Protection:	Required - Not Installed
Overfill Prot Type:	- None -	Containment Sump Installed:	Unknown		
Corrosion Protect Type:		Date of Lining:		Lining Inspected Date:	
Leak Detection:	null	Cath Test Date:		Cath Expire Date:	
Leak Test Meth:		Leak Expire Date:		Leak Test Date:	
Construction Material:	Coated Steel	Wall Size:	Single	Underground Piping:	Y
Close Order Date:		Close Order By:			
Piping - Abandoned without Product					
Flex Connectors:		UST mainfolded:		Related Tank ID:	
Type:		Aboveground Piping:		Aboveground Pipe Construction:	
Construction Material:		Corrosion Protect Type:		Leak Detection:	null
Cath Test Date:		Cath Expire Date:		Leak Test Meth:	
Leak Test Date:		Leak Expire Date:		Pipe Wall Size:	Single
Catastrophic Leak Detection:		Cat Leak Test Date:		Piping System Type:	
Inspections	Click here for login page				
Trans ID	Type	Status	Date	Fiscal Yr	
** No inspections for this tank **					



[Close this response window](#)

This document was last revised: February 2010

Wisconsin Department of Safety and Professional Services

TDID#: _____
 Reg Obj #: 301756

UNDERGROUND FLAMMABLE/COMBUSTIBLE/HAZARDOUS LIQUID STORAGE TANK REGISTRATION

Send Completed Form To:
 Bureau of Petroleum Products and
 Tanks
 P.O. Box 7837
 Madison, WI 53707-7837

Information Required By Section 101.142, Wis. Stats.

Underground tanks in Wisconsin that have stored or currently store petroleum or regulated substances must be registered. A separate form is needed for each tank. Send each completed form to the agency designated in the top right corner. Have you previously registered this tank by submitting a form? Yes No If yes, are you correcting/updating information only? Yes No

Personal information you provide may be used for secondary purposes [Privacy Law, s. 15.04 (1)(m)].

This registration applies to a tank status that is (check one): <input type="checkbox"/> In Use <input type="checkbox"/> Newly Installed <input type="checkbox"/> Abandoned with Product <input type="checkbox"/> Abandoned without Product (empty)		<input checked="" type="checkbox"/> Closed - Tank Removed <input type="checkbox"/> Closed - Filled with Inert Materials <input type="checkbox"/> Abandon with Water <input type="checkbox"/> Temporarily Out of Service - Provide Date: _____		<input type="checkbox"/> Ownership Change (Indicate new owner name in block 2)		Fire Department providing fire coverage where tank is located: <input checked="" type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town of: MILWAUKEE
---	--	--	--	--	--	--

A. IDENTIFICATION (Please Print)		
1. Tank Site Name KIPP'S AUTO SERVICE	Site Street Address 5507 W HAMPTON AVE	Site Telephone Number (414) 527-3417
<input checked="" type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town of: MILWAUKEE	State WISCONSIN	Zip Code 53218
2. Tank Owner Name MELVIN KIPP	Mailing Address 8031 W VILLARD AVE	Telephone Number ()
<input checked="" type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town of: MILWAUKEE	State WISCONSIN	Zip Code 53218
3. Property Owner Name (if different than tank owner)	Property Owner Address if different than #1	

B. Site ID #:	Facility ID #:	Customer ID #:
----------------------	-----------------------	-----------------------

C. Tank Capacity (gallons): 3000	Tank Age (age or date installed):	Vehicle fueling: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
---	-----------------------------------	--

D. LAND OWNER TYPE (check one) Refer to back
 County State Federal Leased Federal Owned Tribal Nation Municipal Other Government Private

E. OCCUPANCY TYPE (check one) Refer to back
 Retail Fuel Sales Bulk Storage Terminal Storage Mercantile/Commercial Industrial Residential School
 Agricultural (crop or livestock production) Backup or Emergency Generator Gov't Fleet Utility Other (specify):

F. Tank Construction:		Overfill Protection? <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Bare Steel <input checked="" type="checkbox"/> Coated Steel <input type="checkbox"/> Stainless steel <input type="checkbox"/> Steel - Fiberglass Reinforced Plastic Composite <input type="checkbox"/> Fiberglass <input type="checkbox"/> Unknown <input type="checkbox"/> Other (specify): _____ <input type="checkbox"/> Lined (date): _____		Spill Containment? <input type="checkbox"/> Yes <input type="checkbox"/> No

G. Tank Cathodic Protection: <input type="checkbox"/> Sacrificial Anodes <input type="checkbox"/> Impressed Current <input type="checkbox"/> N/A	Tank Double Walled? <input type="checkbox"/> Yes <input type="checkbox"/> No
---	---

H. Primary Tank Leak Detection Method:
 Automatic tank gauging Interstitial monitoring Electronic: Yes No Inventory control and tightness testing
 Manual tank gauging (only for tanks of 1,000 gallons or less) Statistical Inventory Reconciliation (SIR) Unknown

I. Piping Construction:
 Bare Steel Coated Steel Stainless Steel Fiberglass Flexible Copper Unknown NA Other _____

J. Piping Cathodic Protection: <input type="checkbox"/> Sacrificial Anodes <input type="checkbox"/> Impressed Current <input type="checkbox"/> N/A	Pipe Double Walled? <input type="checkbox"/> Yes <input type="checkbox"/> No
---	---

K. Primary Piping System Type: Pressurized piping with A. Pump auto shutoff - ELLD; B. flow restrictor - MLLD Unknown
 Suction piping with check valve at tank Suction piping with check valve at pump and inspectable Not needed if waste oil

L. Piping Leak Detection Method: Interstitial monitoring Electronic: NO YES Sump or cable sensor Yes No
 Tightness testing Electronic line monitor - ELLD SIR Not required Unknown

M. Vapor Recovery/Stage II Fiberglass Flexible Other: _____ CARB #: _____
 Operational - Provide Date (mo./day/yr.): _____ Non-Operational - Provide Date (mo./day/yr.): _____

N. TANK CONTENTS (Current, or previous product (if tank now empty))
 Leaded Unleaded Gasohol E85 Diesel Bio-diesel Aviation Premix Fuel Oil Kerosene Unknown
 New Oil New oil - Low FP Waste/Used Motor Oil Hazardous Waste/Interface* Empty* Sand/Gravel/Slurry*
 Other (specify): _____ Chemical* Name _____ CAS #: _____

* NOT PECFA eligible.	Geo Latitude:	Geo Longitude:
O. If Tank Closed, Abandoned or Out of Service Give date (mo./day/yr): 12-10-2012	Has a site assessment been completed? (see reverse side for details) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

Tank Owner Name (please print): **Melvin Kipp**

Tank Owner Signature (Note: By signing, signer is accepting legal and financial responsibility for the storage tank system.) <i>Melvin Kipp</i>	Date 12-10-12
---	--------------------------------

TDID#:
 Reg Obj #: 301757

**UNDERGROUND
 FLAMMABLE/COMBUSTIBLE/HAZARDOUS
 LIQUID STORAGE TANK REGISTRATION**
 Information Required By Section 101.142, Wis. Stats.

Send Completed Form To:
 Bureau of Petroleum Products and
 Tanks
 P.O. Box 7837
 Madison, WI 53707-7837

Underground tanks in Wisconsin that have stored or currently store petroleum or regulated substances must be registered. A separate form is needed for each tank. Send each completed form to the agency designated in the top right corner. Have you previously registered this tank by submitting a form? Yes No If yes, are you correcting/updating information only? Yes No

Personal information you provide may be used for secondary purposes [Privacy Law, s. 15.04 (1)(m)].

This registration applies to a tank status that is (check one):
 In Use Closed - Tank Removed Ownership Change (Indicate new owner name in block 2)
 Newly Installed Closed - Filled with Inert Materials
 Abandoned with Product Abandon with Water
 Abandoned without Product (empty) Temporarily Out of Service - Provide Date: _____

Fire Department providing fire coverage where tank is located:
 City Village
 Town of:
MILWAUKEE

A. IDENTIFICATION (Please Print)

1. Tank Site Name: **KIPP'S AUTO SERVICE** Site Street Address: **5507 W HAMPTON AVE** Site Telephone Number: **(414) 527-3417**

City Village Town of: **MILWAUKEE** State: **WISCONSIN** Zip Code: **53218** County: **MILWAUKEE**

2. Tank Owner Name: **MELVIN KIPP** Mailing Address: **8031 W VILLARD AVE** Telephone Number: ()

City Village Town of: **MILWAUKEE** State: **WISCONSIN** Zip Code: **53218** County: **MILWAUKEE**

3. Property Owner Name (if different than tank owner) _____ Property Owner Address if different than #1 _____

B. Site ID #: _____ **Facility ID #:** _____ **Customer ID #:** _____

C. Tank Capacity (gallons): 8000 **Tank Age (age or date installed):** _____ **Vehicle fueling:** Yes No

D. LAND OWNER TYPE (check one) Refer to back
 County State Federal Leased Federal Owned Tribal Nation Municipal Other Government Private

E. OCCUPANCY TYPE (check one) Refer to back
 Retail Fuel Sales Bulk Storage Terminal Storage Mercantile/Commercial Industrial Residential School
 Agricultural (crop or livestock production) Backup or Emergency Generator Gov't Fleet Utility Other (specify): _____

F. Tank Construction:
 Bare Steel Coated Steel Stainless steel Steel - Fiberglass Reinforced Plastic Composite
 Fiberglass Unknown Other (specify): _____ Lined (date): _____

Overfill Protection? Yes No
Spill Containment? Yes No

G. Tank Cathodic Protection: Sacrificial Anodes Impressed Current N/A **Tank Double Walled?** Yes No

H. Primary Tank Leak Detection Method:
 Automatic tank gauging Interstitial monitoring Electronic: Yes No Inventory control and tightness testing
 Manual tank gauging (only for tanks of 1,000 gallons or less) Statistical Inventory Reconciliation (SIR) Unknown

I. Piping Construction:
 Bare Steel Coated Steel Stainless Steel Fiberglass Flexible Copper Unknown NA Other _____

J. Piping Cathodic Protection: Sacrificial Anodes Impressed Current N/A **Pipe Double Walled?** Yes No

K. Primary Piping System Type: Pressurized piping with A. Pump auto shutoff - ELLD; B. flow restrictor - MLLD Unknown
 Suction piping with check valve at tank Suction piping with check valve at pump and inspectable Not needed if waste oil

L. Piping Leak Detection Method: Interstitial monitoring Electronic: NO YES Sump or cable sensor Yes No
 Tightness testing Electronic line monitor - ELLD SIR Not required Unknown

M. Vapor Recovery/Stage II Fiberglass Flexible Other: _____ CARB #: _____
 Operational - Provide Date (mo./day/yr.): _____ Non-Operational - Provide Date (mo./day/yr.): _____

N. TANK CONTENTS (Current, or previous product (if tank now empty))
 Leaded Unleaded Gasohol E85 Diesel Bio-diesel Aviation Premix Fuel Oil Kerosene Unknown
 New Oil New oil - Low FP Waste/Used Motor Oil Hazardous Waste/Interface* Empty* Sand/Gravel/Slurry*
 Other (specify): _____ Chemical* Name _____ CAS #: _____

* NOT PECFA eligible. **Geo Latitude:** _____ **Geo Longitude:** _____

O. If Tank Closed, Abandoned or Out of Service
 Give date (mo/day/yr): **12-10-2012** **Has a site assessment been completed? (see reverse side for details)**
 Yes No

Tank Owner Name (please print): **Melvin Kipp** **Date:** **12-10-12**

Tank Owner Signature (Note: By signing, signer is accepting legal and financial responsibility for the storage tank system.):
 _____ **Date:** _____

TDID#:
Reg Obj #: 1335793

UNDERGROUND FLAMMABLE/COMBUSTIBLE/HAZARDOUS LIQUID STORAGE TANK REGISTRATION

Send Completed Form To:
Bureau of Petroleum Products and
Tanks
P.O. Box 7837
Madison, WI 53707-7837

Information Required By Section 101.142, Wis. Stats.

Underground tanks in Wisconsin that have stored or currently store petroleum or regulated substances must be registered. A separate form is needed for each tank. Send each completed form to the agency designated in the top right corner. Have you previously registered this tank by submitting a form? Yes No If yes, are you correcting/updating information only? Yes No

Personal information you provide may be used for secondary purposes [Privacy Law, s. 15.04 (1)(m)].

This registration applies to a tank status that is (check one):		Fire Department providing fire coverage where tank is located:
<input type="checkbox"/> In Use	<input checked="" type="checkbox"/> Closed - Tank Removed	<input checked="" type="checkbox"/> City <input type="checkbox"/> Village
<input type="checkbox"/> Newly Installed	<input type="checkbox"/> Closed - Filled with Inert Materials	<input type="checkbox"/> Town of:
<input type="checkbox"/> Abandoned with Product	<input type="checkbox"/> Abandon with Water	MILWAUKEE
<input type="checkbox"/> Abandoned without Product (empty)	<input type="checkbox"/> Temporarily Out of Service - Provide Date: _____	
		<input type="checkbox"/> Ownership Change (Indicate new owner name in block 2)

A. IDENTIFICATION (Please Print)		
1. Tank Site Name KIPP'S AUTO SERVICE	Site Street Address 5507 W HAMPTON AVE	Site Telephone Number (414) 527-3417
<input checked="" type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town of: MILWAUKEE	State WISCONSIN	Zip Code 53218
2. Tank Owner Name MELVIN KIPP	Mailing Address 8031 W VILLARD AVE	Telephone Number ()
<input checked="" type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town of: MILWAUKEE	State WISCONSIN	Zip Code 53218
3. Property Owner Name (if different than tank owner)	Property Owner Address if different than #1	

B. Site ID #:	Facility ID #: 100230	Customer ID #: 343280
----------------------	------------------------------	------------------------------

C. Tank Capacity (gallons): 500	Tank Age (age or date installed):	Vehicle fueling: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--	-----------------------------------	--

D. LAND OWNER TYPE (check one) Refer to back
<input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Federal Leased <input type="checkbox"/> Federal Owned <input type="checkbox"/> Tribal Nation <input type="checkbox"/> Municipal <input type="checkbox"/> Other Government <input checked="" type="checkbox"/> Private

E. OCCUPANCY TYPE (check one) Refer to back
<input type="checkbox"/> Retail Fuel Sales <input type="checkbox"/> Bulk Storage <input type="checkbox"/> Terminal Storage <input checked="" type="checkbox"/> Mercantile/Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Residential <input type="checkbox"/> School <input type="checkbox"/> Agricultural (crop or livestock production) <input type="checkbox"/> Backup or Emergency Generator <input type="checkbox"/> Gov't Fleet <input type="checkbox"/> Utility <input type="checkbox"/> Other (specify):

F. Tank Construction:	Overfill Protection? <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Bare Steel <input checked="" type="checkbox"/> Coated Steel <input type="checkbox"/> Stainless steel <input type="checkbox"/> Steel - Fiberglass Reinforced Plastic Composite	Spill Containment? <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Fiberglass <input type="checkbox"/> Unknown <input type="checkbox"/> Other (specify): _____ <input type="checkbox"/> Lined (date): _____	

G. Tank Cathodic Protection: <input type="checkbox"/> Sacrificial Anodes <input type="checkbox"/> Impressed Current <input type="checkbox"/> N/A	Tank Double Walled? <input type="checkbox"/> Yes <input type="checkbox"/> No
---	--

H. Primary Tank Leak Detection Method:
<input type="checkbox"/> Automatic tank gauging <input type="checkbox"/> Interstitial monitoring <input checked="" type="checkbox"/> Electronic: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Inventory control and tightness testing <input type="checkbox"/> Manual tank gauging (only for tanks of 1,000 gallons or less) <input type="checkbox"/> Statistical Inventory Reconciliation (SIR) <input type="checkbox"/> Unknown

I. Piping Construction:
<input type="checkbox"/> Bare Steel <input type="checkbox"/> Coated Steel <input type="checkbox"/> Stainless Steel <input type="checkbox"/> Fiberglass <input type="checkbox"/> Flexible <input type="checkbox"/> Copper <input type="checkbox"/> Unknown <input type="checkbox"/> NA <input type="checkbox"/> Other _____

J. Piping Cathodic Protection: <input type="checkbox"/> Sacrificial Anodes <input type="checkbox"/> Impressed Current <input type="checkbox"/> N/A	Pipe Double Walled? <input type="checkbox"/> Yes <input type="checkbox"/> No
---	--

K. Primary Piping System Type: <input type="checkbox"/> Pressurized piping with <input checked="" type="checkbox"/> A. <input type="checkbox"/> Pump auto shutoff - ELLD; B. <input type="checkbox"/> flow restrictor - MLLD <input type="checkbox"/> Unknown <input type="checkbox"/> Suction piping with check valve at tank <input type="checkbox"/> Suction piping with check valve at pump and inspectable <input type="checkbox"/> Not needed if waste oil

L. Piping Leak Detection Method: <input type="checkbox"/> Interstitial monitoring <input checked="" type="checkbox"/> Electronic: <input type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> Sump or cable sensor <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Tightness testing <input type="checkbox"/> Electronic line monitor - ELLD <input type="checkbox"/> SIR <input type="checkbox"/> Not required <input type="checkbox"/> Unknown
--

M. Vapor Recovery/Stage II <input type="checkbox"/> Fiberglass <input type="checkbox"/> Flexible <input type="checkbox"/> Other: _____ CARB #: _____
<input type="checkbox"/> Operational - Provide Date (mo./day/yr.): _____ <input type="checkbox"/> Non-Operational - Provide Date (mo./day/yr.): _____

N. TANK CONTENTS (Current, or previous product (if tank now empty))
<input type="checkbox"/> Leaded <input type="checkbox"/> Unleaded <input type="checkbox"/> Gasohol <input type="checkbox"/> E85 <input type="checkbox"/> Diesel <input type="checkbox"/> Bio-diesel <input type="checkbox"/> Aviation <input type="checkbox"/> Premix <input type="checkbox"/> Fuel Oil <input type="checkbox"/> Kerosene <input type="checkbox"/> Unknown <input type="checkbox"/> New Oil <input type="checkbox"/> New oil - Low FP <input checked="" type="checkbox"/> Waste/Used Motor Oil <input type="checkbox"/> Hazardous Waste/Interface* <input type="checkbox"/> Empty* <input type="checkbox"/> Sand/Gravel/Slurry* <input type="checkbox"/> Other (specify): _____ <input type="checkbox"/> Chemical* Name _____ CAS #: _____

* NOT PECFA eligible.

O. If Tank Closed, Abandoned or Out of Service Give date (mo/day/yr): 12-10-2012	Geo Latitude: _____	Geo Longitude: _____
Tank Owner Name (please print):	Has a site assessment been completed? (see reverse side for details) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

Tank Owner Signature (Note: By signing, signer is accepting legal and financial responsibility for the storage tank system.) <i>Melvin Kipp</i>	Date <i>12-10-12</i>
--	-------------------------



BADGER DISPOSAL

5611 West Hemlock
Milwaukee WI 53223



Customer Name: Hellers Junk Removal 12/21/2012

Contact Name John Heller

3948 Wisconsin 19 Deforest WI 53532 608-242-8210

Job Description: Water/Fuel disposal at KIPPS AUTO SERVICE

Location of Work: 5507 W. Hampton Milwaukee WI 53218

Job# SK 12-12

PO# Per Steve Biersack - Safety Kleen 262-613-0432

DESCRIPTION (21 spaces)	U/M	QUANTITY	UNIT PRICE	TOTAL
Mobilization	HR	6	\$ 125.00	\$ 750.00
Disposal	GAL	1,700	\$ 0.90	\$ 1,530.00
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -

Close job in 30 days

TOTAL THIS INVOICE \$ 2,280.00

Partial bill

Mike Fugate - 262-424-9506

Don't mail without attachments

Project Coordinator



INVOICE

Pace Analytical Services, Inc.
 1241 Bellevue Street, Suite 9
 Green Bay, WI 54302
 Phone: (920)469-2436

Invoice Number: 124067048
Date: 12/24/2012
Total Amount Due: \$307.00

Sold To:

Robyn Seymour
 Seymour Environmental Services, INC.
 2531 Dyreson Road
 Mc Farland, WI 53558
 (608) 838-9120

Please Remit To:

Pace Analytical Services, Inc.
 P.O. Box 684056
 Chicago, IL 60695-4056

Client Number/Client ID	Purchase Order No	Pace Project Mgr	Terms	Page
40-000700 / SEYMOUR ENVI		Dan Milewsky	Net 30 Days**	1

Client Project: KIPP'S AUTO
Pace Project No: 4071954
Report Sent To: Robyn Seymour, Seymour Environmental Services, INC.
Comments:

Client Name: SEYMOUR ENVIRONMENTAL SERVICES, INC.
Sample Received: 12/14/2012

ANALYTICAL CHARGES

Quantity	Unit	Description	Method	Matrix	Price	Total
8	Ea	Dry Weight	ASTM D2974-87	Solid	\$0.00	\$0.00
8	Ea	GRO/PVOC + Naphthalene	WI MOD GRO	Solid	\$32.00	\$256.00
2	Ea	WIDRO GCS	WI MOD DRO	Solid	\$25.50	\$51.00
Analytical Subtotal						\$307.00

Total Number of Charges 18

Total Invoice Amount \$307.00

*If you have any questions or to pay by credit card, please contact Dan Milewsky at Pace.
 Phone: (920)469-2436 Email: dan.milewsky@pacelabs.com*

****1.5% MONTHLY FINANCE CHARGE ASSESSED AFTER 30 DAYS OR TERMS OF CONTRACT.
 PLEASE REFERENCE THE INVOICE NUMBER ON ALL REMITTANCE ADVICE.**

AN EQUAL OPPORTUNITY EMPLOYER

Please complete and return copy of invoice with your payment.

INVOICE TOTAL \$307.00

Amount Paid: \$ _____

Check No: _____

Customer No: 40-000700 Invoice No: 124067048



INVOICE

Pace Analytical Services, Inc.
 1241 Bellevue Street, Suite 9
 Green Bay, WI 54302
 Phone: (920)469-2436

Invoice Number: 124064545
Date: 10/30/2012
Total Amount Due: \$102.30

Sold To:

Robyn Seymour
 Seymour Environmental Services, INC.
 2531 Dyreson Road
 Mc Farland, WI 53558
 (608) 838-9120

Please Remit To:

Pace Analytical Services, Inc.
 P.O. Box 684056
 Chicago, IL 60695-4056

Client Number/Client ID	Purchase Order No	Pace Project Mgr	Terms	Page
40-000700 / SEYMOUR ENVI		Dan Milewsky	Net 30 Days**	1

Client Project: 100230 KIPPS AUTO SERVICE
Pace Project No: 4069020
Report Sent To: Robyn Seymour, Seymour Environmental Services, INC.
Comments:

Client Name: SEYMOUR ENVIRONMENTAL SERVICES, INC.
Sample Received: 10/17/2012

ANALYTICAL CHARGES

Quantity	Unit	Description	Method	Matrix	Price	Total
1	Ea	Oil & Grease HEM		Water	\$80.00	\$80.00
1	Ea	PVOC	WI MOD GRO	Water	\$22.30	\$22.30
Analytical Subtotal						\$102.30

Total Number of Charges 2

Total Invoice Amount \$102.30

*If you have any questions or to pay by credit card, please contact Dan Milewsky at Pace.
 Phone: (920)469-2436 Email: dan.milewsky@pacelabs.com*

****1.5% MONTHLY FINANCE CHARGE ASSESSED AFTER 30 DAYS OR TERMS OF CONTRACT.
 PLEASE REFERENCE THE INVOICE NUMBER ON ALL REMITTANCE ADVICE.**

AN EQUAL OPPORTUNITY EMPLOYER

Please complete and return copy of invoice with your payment.

INVOICE TOTAL \$102.30

Amount Paid: \$ _____

Check No: _____

Customer No: 40-000700 Invoice No: 124064545



Sample Condition Upon Receipt

Client Name: Seymour Env Project # 40069020

Courier: Fed Ex UPS USPS Client Commercial Pace Other Dunham

Tracking #: 355424

Custody Seal on Cooler/Box Present: yes no Seals intact: yes no

Custody Seal on Samples Present: yes no Seals intact: yes no

Packing Material: Bubble Wrap Bubble Bags None Other

Thermometer Used SR45 Type of Ice: Wet Blue Dry None Samples on ice, cooling process has begun.

Cooler Temperature 60 Biological Tissue is Frozen: yes no

Temp Blank Present: yes no

Temp should be above freezing to 6°C for all sample except Biota.
Biota Samples should be received ≤ 0°C.

Optional:
Proj Due Date:
Proj Name:

Person examining contents:
Date: 10-17-12
Initials: SRW

Comments:

Chain of Custody Present:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	1.
Chain of Custody Filled Out:	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	2. <u>No Quote or invoice info. 10/17/12</u>
Chain of Custody Relinquished:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	3.
Sampler Name & Signature on COC:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	4.
Samples Arrived within Hold Time:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	5.
Short Hold Time Analysis (<72hr):	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	6.
Rush Turn Around Time Requested:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	7.
Sufficient Volume:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	8.
Correct Containers Used:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	9.
-Pace Containers Used:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Containers Intact:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	10.
Filtered volume received for Dissolved tests	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	11.
Sample Labels match COC:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	12.
-Includes date/time/ID/Analysis Matrix:	<u>W</u>	
All containers needing preservation have been checked.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	13.
All containers needing preservation are found to be in compliance with EPA recommendation.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
exceptions: <u>VOA, coliform, TOC, O&G/WI-DRO (water)</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Initial when completed
		Lot # of added preservative
Samples checked for dechlorination:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	14.
Headspace in VOA Vials (>6mm):	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	15.
Trip Blank Present:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	16.
Trip Blank Custody Seals Present	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Pace Trip Blank Lot # (if purchased):		

Client Notification/ Resolution: _____ Field Data Required? Y / N

Person Contacted: _____ Date/Time: _____

Comments/ Resolution: _____

Project Manager Review: Chc DC DM Date: 10/17/12

Note: Whenever there is a discrepancy affecting North Carolina compliance samples, a copy of this form will be sent to the North Carolina DEHNR Certification Office (i.e. out of hold, incorrect preservative, out of temp, incorrect containers)

(Please Print Clearly)

UPPER MIDWEST REGION

Page 1 of

MN: 612-607-1700 WI: 920-469-2436

4069020



CHAIN OF CUSTODY

Company Name: Seymour
 Branch/Location: 1
 Project Contact: Jon Heller
 Phone: 608-242-8210
 Project Number: 100230
 Project Name: Kipps Auto Service
 Project State: WI
 Sampled By (Print): Jon Heller
 Sampled By (Sign): *[Signature]*
 PO #: _____ Regulatory Program: _____

***Preservation Codes**
 A=None B=HCL C=H2SO4 D=HNO3 E=DI Water F=Methanol G=NaOH
 H=Sodium Bisulfate Solution I=Sodium Thiosulfate J=Other

FILTERED?
(YES/NO)
 PRESERVATION
(CODE)

Y/N	Pick Letter	Analyses Requested	COLLECTION		MATRIX
			DATE	TIME	
N	B	HEM	10/10	3:25	W
N	B	PVOC			

Quote #: _____
 Mail To Contact: _____
 Mail To Company: _____
 Mail To Address: _____
 Invoice To Contact: _____
 Invoice To Company: _____
 Invoice To Address: _____
 Invoice To Phone: _____

Data Package Options (billable)
 EPA Level III
 EPA Level IV

MS/MSD
 On your sample (billable)
 NOT needed on your sample

Matrix Codes
 A = Air B = Biota C = Charcoal O = Oil S = Soil SI = Sludge
 W = Water DW = Drinking Water GW = Ground Water SW = Surface Water WW = Waste Water WP = Wipe

PACE LAB #	CLIENT FIELD ID	COLLECTION		MATRIX
		DATE	TIME	
001	water from Tanks.	10/10	3:25	W

CLIENT COMMENTS: _____
 LAB COMMENTS (Lab Use Only): 1-LagA, 3-40mlv's
 Profile #: _____

Rush Turnaround Time Requested - Prelims (Rush TAT subject to approval/surcharge) Date Needed: _____	Relinquished By: <i>[Signature]</i> Date/Time: 10/16	Received By: _____ Date/Time: _____	PACE Project No. 4069020
Transmit Prelim Rush Results by (complete what you want): _____	Relinquished By: <i>[Signature]</i> Date/Time: 10/17/12 0920	Received By: <i>[Signature]</i> Date/Time: 10/17/12 0920	
Email #1: _____	Relinquished By: _____ Date/Time: _____	Received By: _____ Date/Time: _____	Receipt Temp = 6 °C
Email #2: _____	Relinquished By: _____ Date/Time: _____	Received By: _____ Date/Time: _____	Sample Receipt pH OK / Adjusted
Telephone: _____	Relinquished By: _____ Date/Time: _____	Received By: _____ Date/Time: _____	Cooler Custody Seal Present / Not Present Intact / Not Intact
Fax: _____	Relinquished By: _____ Date/Time: _____	Received By: _____ Date/Time: _____	

Samples on HOLD are subject to special pricing and release of liability

October 30, 2012

Robyn Seymour
Seymour Environmental Services, INC.
2531 Dyreson Road
Mc Farland, WI 53558

RE: Project: 100230 KIPPS AUTO SERVICE
Pace Project No.: 4069020

Dear Robyn Seymour:

Enclosed are the analytical results for sample(s) received by the laboratory on October 17, 2012. The results relate only to the samples included in this report. Results reported herein conform to the most current TNI standards and the laboratory's Quality Assurance Manual, where applicable, unless otherwise noted in the body of the report.

If you have any questions concerning this report, please feel free to contact me.

Sincerely,



Brian Basten for
Dan Milewsky
dan.milewsky@pacelabs.com
Project Manager

Enclosures



REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, Inc..

CERTIFICATIONS

Project: 100230 KIPPS AUTO SERVICE
Pace Project No.: 4069020

Minnesota Certification IDs

1700 Elm Street SE Suite 200, Minneapolis, MN 55414
A2LA Certification #: 2926.01
Alaska Certification #: UST-078
Alaska Certification #MN00064
Arizona Certification #: AZ-0014
Arkansas Certification #: 88-0680
California Certification #: 01155CA
Colorado Certification #Pace
Connecticut Certification #: PH-0256
EPA Region 8 Certification #: Pace
Florida/NELAP Certification #: E87605
Georgia Certification #: 959
Hawaii Certification #Pace
Idaho Certification #: MN00064
Illinois Certification #: 200011
Kansas Certification #: E-10167
Louisiana Certification #: 03086
Louisiana Certification #: LA080009
Maine Certification #: 2007029
Maryland Certification #: 322
Michigan DEQ Certification #: 9909
Minnesota Certification #: 027-053-137
Mississippi Certification #: Pace

Montana Certification #: MT CERT0092
Nevada Certification #: MN_00064
Nebraska Certification #: Pace
New Jersey Certification #: MN-002
New York Certification #: 11647
North Carolina Certification #: 530
North Dakota Certification #: R-036
North Dakota Certification #: R-036A
Ohio VAP Certification #: CL101
Oklahoma Certification #: 9507
Oregon Certification #: MN200001
Oregon Certification #: MN300001
Pennsylvania Certification #: 68-00563
Puerto Rico Certification
Tennessee Certification #: 02818
Texas Certification #: T104704192
Utah Certification #: MN00064
Virginia/DCLS Certification #: 002521
Virginia/VELAP Certification #: 460163
Washington Certification #: C754
West Virginia Certification #: 382
Wisconsin Certification #: 999407970

Green Bay Certification IDs

1241 Bellevue Street, Green Bay, WI 54302
Florida/NELAP Certification #: E87948
Illinois Certification #: 200050
Kentucky Certification #: 82
Louisiana Certification #: 04168
Minnesota Certification #: 055-999-334

New York Certification #: 11888
North Carolina Certification #: 503
North Dakota Certification #: R-150
South Carolina Certification #: 83006001
US Dept of Agriculture #: S-76505
Wisconsin Certification #: 405132750

SAMPLE SUMMARY

Project: 100230 KIPPS AUTO SERVICE
Pace Project No.: 4069020

Lab ID	Sample ID	Matrix	Date Collected	Date Received
4069020001	WATER FROM TANKS	Water	10/10/12 15:25	10/17/12 09:20

SAMPLE ANALYTE COUNT

Project: 100230 KIPPS AUTO SERVICE
Pace Project No.: 4069020

Lab ID	Sample ID	Method	Analysts	Analytes Reported	Laboratory
4069020001	WATER FROM TANKS	WI MOD GRO	LCM	9	PASI-G
		EPA 1664 OG	AS1	1	PASI-M

REPORT OF LABORATORY ANALYSIS

PROJECT NARRATIVE

Project: 100230 KIPPS AUTO SERVICE
Pace Project No.: 4069020

Method: WI MOD GRO
Description: WIGRO GCV
Client: SEYMOUR ENVIRONMENTAL SERVICES, INC.
Date: October 30, 2012

General Information:

1 sample was analyzed for WI MOD GRO. All samples were received in acceptable condition with any exceptions noted below.

Hold Time:

The samples were analyzed within the method required hold times with any exceptions noted below.

Initial Calibrations (including MS Tune as applicable):

All criteria were within method requirements with any exceptions noted below.

Continuing Calibration:

All criteria were within method requirements with any exceptions noted below.

Internal Standards:

All internal standards were within QC limits with any exceptions noted below.

Surrogates:

All surrogates were within QC limits with any exceptions noted below.

Method Blank:

All analytes were below the report limit in the method blank with any exceptions noted below.

Laboratory Control Spike:

All laboratory control spike compounds were within QC limits with any exceptions noted below.

Matrix Spikes:

All percent recoveries and relative percent differences (RPDs) were within acceptance criteria with any exceptions noted below.

Additional Comments:

PROJECT NARRATIVE

Project: 100230 KIPPS AUTO SERVICE
Pace Project No.: 4069020

Method: EPA 1664 OG
Description: 1664 HEM, Oil and Grease
Client: SEYMOUR ENVIRONMENTAL SERVICES, INC.
Date: October 30, 2012

General Information:

1 sample was analyzed for EPA 1664 OG. All samples were received in acceptable condition with any exceptions noted below.

Hold Time:

The samples were analyzed within the method required hold times with any exceptions noted below.

Method Blank:

All analytes were below the report limit in the method blank with any exceptions noted below.

Laboratory Control Spike:

All laboratory control spike compounds were within QC limits with any exceptions noted below.

Matrix Spikes:

All percent recoveries and relative percent differences (RPDs) were within acceptance criteria with any exceptions noted below.

Duplicate Sample:

All duplicate sample results were within method acceptance criteria with any exceptions noted below.

Additional Comments:

This data package has been reviewed for quality and completeness and is approved for release.

ANALYTICAL RESULTS

Project: 100230 KIPPS AUTO SERVICE
Pace Project No.: 4069020

Sample: WATER FROM TANKS **Lab ID: 4069020001** Collected: 10/10/12 15:25 Received: 10/17/12 09:20 Matrix: Water

Parameters	Results	Units	LOQ	LOD	DF	Prepared	Analyzed	CAS No.	Qual
WIGRO GCV		Analytical Method: WI MOD GRO							
Benzene	16300	ug/L	250	97.2	250		10/18/12 18:44	71-43-2	
Ethylbenzene	2330	ug/L	250	104	250		10/18/12 18:44	100-41-4	
Methyl-tert-butyl ether	113000	ug/L	250	95.2	250		10/18/12 18:44	1634-04-4	
Toluene	31100	ug/L	250	104	250		10/18/12 18:44	108-88-3	
1,2,4-Trimethylbenzene	3280	ug/L	250	108	250		10/18/12 18:44	95-63-6	
1,3,5-Trimethylbenzene	930	ug/L	250	98.8	250		10/18/12 18:44	108-67-8	
m&p-Xylene	11800	ug/L	500	218	250		10/18/12 18:44	179601-23-1	
o-Xylene	5790	ug/L	250	95.2	250		10/18/12 18:44	95-47-6	
Surrogates									
a,a,a-Trifluorotoluene (S)	104	%	80-120		250		10/18/12 18:44	98-08-8	
1664 HEM, Oil and Grease		Analytical Method: EPA 1664 OG							
Oil and Grease	5.1	mg/L	4.7	0.94	1		10/25/12 12:40		

QUALITY CONTROL DATA

Project: 100230 KIPPS AUTO SERVICE
Pace Project No.: 4069020

QC Batch: GCV/9179 Analysis Method: WI MOD GRO
QC Batch Method: WI MOD GRO Analysis Description: WIGRO GCV Water
Associated Lab Samples: 4069020001

METHOD BLANK: 695673 Matrix: Water
Associated Lab Samples: 4069020001

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
1,2,4-Trimethylbenzene	ug/L	<0.43	1.0	10/18/12 10:59	
1,3,5-Trimethylbenzene	ug/L	<0.40	1.0	10/18/12 10:59	
Benzene	ug/L	<0.39	1.0	10/18/12 10:59	
Ethylbenzene	ug/L	<0.41	1.0	10/18/12 10:59	
m&p-Xylene	ug/L	<0.87	2.0	10/18/12 10:59	
Methyl-tert-butyl ether	ug/L	<0.38	1.0	10/18/12 10:59	
o-Xylene	ug/L	<0.38	1.0	10/18/12 10:59	
Toluene	ug/L	<0.42	1.0	10/18/12 10:59	
a,a,a-Trifluorotoluene (S)	%	104	80-120	10/18/12 10:59	

LABORATORY CONTROL SAMPLE & LCSD: 695674		695675									
Parameter	Units	Spike Conc.	LCS Result	LCSD Result	LCS % Rec	LCSD % Rec	% Rec Limits	RPD	Max RPD	Qualifiers	
1,2,4-Trimethylbenzene	ug/L	20	18.7	18.9	93	94	80-120	1	20		
1,3,5-Trimethylbenzene	ug/L	20	19.6	19.7	98	99	80-120	1	20		
Benzene	ug/L	20	21.1	21.1	105	106	80-120	0	20		
Ethylbenzene	ug/L	20	20.3	20.3	102	102	80-120	0	20		
m&p-Xylene	ug/L	40	40.7	40.6	102	102	80-120	0	20		
Methyl-tert-butyl ether	ug/L	20	18.8	18.7	94	94	80-120	1	20		
o-Xylene	ug/L	20	20.3	20.4	101	102	80-120	0	20		
Toluene	ug/L	20	20.7	20.7	103	103	80-120	0	20		
a,a,a-Trifluorotoluene (S)	%				103	103	80-120				

MATRIX SPIKE & MATRIX SPIKE DUPLICATE: 696061		696062										
Parameter	Units	4068953009		MS	MSD	MS Result	MSD Result	MS % Rec	MSD % Rec	% Rec Limits	Max RPD	Qual
		Result	Conc.	Spike Conc.	Conc.							
1,2,4-Trimethylbenzene	ug/L	975	200	200	1370	1370	198	195	10-200	0	20	
1,3,5-Trimethylbenzene	ug/L	226	200	200	520	515	147	145	56-169	1	20	
Benzene	ug/L	412	200	200	647	654	118	121	33-173	1	20	
Ethylbenzene	ug/L	313	200	200	553	557	120	122	49-158	1	20	
m&p-Xylene	ug/L	832	400	400	1370	1370	134	135	44-163	0	20	
Methyl-tert-butyl ether	ug/L	<3.8	200	200	194	199	97	99	80-130	3	20	
o-Xylene	ug/L	119	200	200	352	354	116	117	64-140	0	20	
Toluene	ug/L	27.1	200	200	257	256	115	114	79-132	0	20	
a,a,a-Trifluorotoluene (S)	%						105	105	80-120			

QUALITY CONTROL DATA

Project: 100230 KIPPS AUTO SERVICE
Pace Project No.: 4069020

QC Batch: WET/28237 Analysis Method: EPA 1664 OG
QC Batch Method: EPA 1664 OG Analysis Description: 1664 HEM, Oil and Grease
Associated Lab Samples: 4069020001

METHOD BLANK: 1317950 Matrix: Water
Associated Lab Samples: 4069020001

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Oil and Grease	mg/L	1.3J	5.1	10/25/12 12:40	

LABORATORY CONTROL SAMPLE: 1317951

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Oil and Grease	mg/L	40.8	42.7	104	78-114	

MATRIX SPIKE SAMPLE: 1317952

Parameter	Units	10209655001 Result	Spike Conc.	MS Result	MS % Rec	% Rec Limits	Qualifiers
Oil and Grease	mg/L	ND	45.5	44.3	92	78-114	

SAMPLE DUPLICATE: 1317953

Parameter	Units	10209270001 Result	Dup Result	RPD	Max RPD	Qualifiers
Oil and Grease	mg/L	ND	2.0J		18	

QUALIFIERS

Project: 100230 KIPPS AUTO SERVICE
Pace Project No.: 4069020

DEFINITIONS

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to changes in sample preparation, dilution of the sample aliquot, or moisture content.

ND - Not Detected at or above adjusted reporting limit.

J - Estimated concentration above the adjusted method detection limit and below the adjusted reporting limit.

MDL - Adjusted Method Detection Limit.

PRL - Pace Reporting Limit.

RL - Reporting Limit.

S - Surrogate

1,2-Diphenylhydrazine (8270 listed analyte) decomposes to Azobenzene.

Consistent with EPA guidelines, unrounded data are displayed and have been used to calculate % recovery and RPD values.

LCS(D) - Laboratory Control Sample (Duplicate)

MS(D) - Matrix Spike (Duplicate)

DUP - Sample Duplicate

RPD - Relative Percent Difference

NC - Not Calculable.

SG - Silica Gel - Clean-Up

U - Indicates the compound was analyzed for, but not detected.

N-Nitrosodiphenylamine decomposes and cannot be separated from Diphenylamine using Method 8270. The result reported for each analyte is a combined concentration.

Pace Analytical is TNI accredited. Contact your Pace PM for the current list of accredited analytes.

TNI - The NELAC Institute.

LABORATORIES

PASI-G Pace Analytical Services - Green Bay

PASI-M Pace Analytical Services - Minneapolis

QUALITY CONTROL DATA CROSS REFERENCE TABLE

Project: 100230 KIPPS AUTO SERVICE

Pace Project No.: 4069020

Lab ID	Sample ID	QC Batch Method	QC Batch	Analytical Method	Analytical Batch
4069020001	WATER FROM TANKS	WI MOD GRO	GCV/9179		
4069020001	WATER FROM TANKS	EPA 1664 OG	WET/28237		



Sample Condition Upon Receipt

Client Name: Seymour Project # 4071954

Courier: Fed Ex UPS USPS Client Commercial Pace Other Durham

Tracking #: 407161

Custody Seal on Cooler/Box Present: yes no Seals intact: yes no

Custody Seal on Samples Present: yes no Seals intact: yes no

Packing Material: Bubble Wrap Bubble Bags None Other

Thermometer Used NA Type of Ice: Wet Blue Dry None Samples on ice, cooling process has begun.

Cooler Temperature ROI Biological Tissue is Frozen: yes no

Temp Blank Present: yes no

Optional:
Proj. Due Date:
Proj. Name:

Person examining contents:
Date: 12-14-12
Initials: SKW

Temp should be above freezing to 6°C for all sample except Biota.
Biota Samples should be received ≤ 0°C.

Comments:

Chain of Custody Present:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	1.
Chain of Custody Filled Out:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	2. <u>Incomplete</u>
Chain of Custody Relinquished:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	3.
Sampler Name & Signature on COC:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	4.
Samples Arrived within Hold Time:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	5.
Short Hold Time Analysis (<72hr):	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	6.
Rush Turn Around Time Requested:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	7.
Sufficient Volume:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	8.
Correct Containers Used:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	9.
-Pace Containers Used:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Containers Intact:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	10.
Filtered volume received for Dissolved tests	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	11.
Sample Labels match COC:	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	12. <u>CO3 matched by date + time, sample label ID does not match COC E.M.H. 12/14/12</u>
-Includes date/time/ID/Analysis Matrix:	<u>S</u>	
All containers needing preservation have been checked.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	13.
All containers needing preservation are found to be in compliance with EPA recommendation.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
exceptions: <u>VOA</u> coliform, TOC, O&G, WI-DRO (water)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Initial when completed
		Lot # of added preservative
Samples checked for dechlorination:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	14.
Headspace in VOA Vials (>6mm):	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	15.
Trip Blank Present:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	16.
Trip Blank Custody Seals Present	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Pace Trip Blank Lot # (if purchased):		

Client Notification/ Resolution: _____ Field Data Required? Y / N
 Person Contacted: _____ Date/Time: _____
 Comments/ Resolution: No analysis listed on COC. PM notified. Filled in per client. 12/14/12 SKW

Project Manager Review: MAT for DM Date: 12.14.12

Note: Whenever there is a discrepancy affecting North Carolina compliance samples, a copy of this form will be sent to the North Carolina DEHNR Certification Office (i.e. out of hold, incorrect preservative, out of temp, incorrect containers)