

February 6, 2014

Mr. Jesse Rose
Environmental Services Plus, Ltd.
4450 Fieldcrest Drive
Kaukauna, Wisconsin 54130

**RE: Gasoline UST and Fuel Oil UST Removal from N9505 County Highway U,
Oneida, Wisconsin**

Dear Mr. Rose:

GEI Consultants, Inc. (GEI) was retained by Environmental Services Plus, Ltd. (ESP), to document subsurface soil conditions below two underground storage tanks (USTs) removed from a private residence located at N9505 County Highway U, Town of Oneida, Wisconsin. A property location diagram, depicting general site conditions and surrounding land use is provided as Figure 1.

Two USTs, consisting of a 300 gallon gasoline UST and a 500 gallon Fuel Oil UST were removed on February 4, 2014 by ESP. The gasoline UST was found to be partly filled with water, and the fuel oil UST was also found to be partly filled with a mixture of fuel oil and water. The contents of the USTs were removed and containerized. The interior of the USTs were subsequently cleaned prior to removal.

Soil samples were collected approximately 1-foot below each UST after removal, which was approximately 5 feet below grade. A gasoline odor was noted in the soils below the tanks at the time of sample collection. A sample location diagram is attached as Figure 2. At each location, a set of three samples were collected. The first sample was for Diesel Range Organics (DRO), and was a 30 gram soil sample in a glass jar, with no added preservative. The second soil sample was a 4 oz plastic jar sample to determine the field moisture content. The final sample was a 20 gram soil sample in a glass vial, preserved with methanol. The third sample was for Gasoline Range Organics (GRO), and Petroleum Volatile Organic Compounds (PVOCs). The samples were placed in a cooler, on ice.

Collected soil samples were submitted to a state-certified analytical laboratory, under standard chain-of-custody control. At the laboratory, soil samples were tested for DRO, GRO, PVOCs in general accordance with Wisconsin Modified Methodology. Complete analytical test reports are appended to this report.

Results of chemical analysis completed on collected soil samples indicate elevated concentrations of GRO, DRO and several specific petroleum hydrocarbons. GRO and DRO analysis is a measure of a range of petroleum hydrocarbons characteristic of gasoline and diesel fuel respectively. GRO and DRO results are not compound specific and, while these results provide a general indication of volatile petroleum fraction, they are typically not used to quantify

environmental or human health risk. Results of PVOC analysis indicate elevated concentrations of several petroleum compounds including ethylbenzene, naphthalene, toluene and xylenes.

The US Environmental Protection Agency (EPA) has established a methodology for determining general soil screening levels using standard exposure and toxicity assumptions, to calculate chemical concentrations in soil that are both protective of groundwater quality and protective of human health from direct contact (inhalation or ingestion). This method generates the following screening levels for the petroleum compounds detected in the soil samples collected from the UST excavations:

Chemical	Screening Level (mg/kg)
Ethylbenzene	5.39E+00
Naphthalene	3.57E+00
Toluene	4.97E+03
Trimethylbenzene, 1,2,4-	6.22E+01
Trimethylbenzene, 1,3,5-	7.82E+02
Xylenes	6.27E+02

Concentrations of petroleum hydrocarbons detected in the PVOC analysis are less than the general soil screening levels established using US EPA calculations. These soil screening levels are based on general exposure and toxicity assumptions and may not accurately define the environmental risk specific to this property. Additional assessment would be necessary to further evaluate the significance of the apparent release of petroleum constituents.

We appreciate this opportunity to provide our services. If you have any questions or comments concerning the enclosed information or if we can be of any further assistance, please contact Paul Garvey at 920-455-8430.

Sincerely,



Karl Krueger
Assistant Project Engineer



Paul Garvey
Senior Project Scientist

Cc:

Ms. Victoria Flowers
Environmental Specialist
Oneida Environmental Health and Safety
3759 West Mason Street
P.O. Box 365
Oneida, Wisconsin 54155



NOTE:

1. Imagery from 2014 IBCAO, Landsat, Google.

NOT TO SCALE

N9505 County Highway U
Town of Oneida, Wisconsin



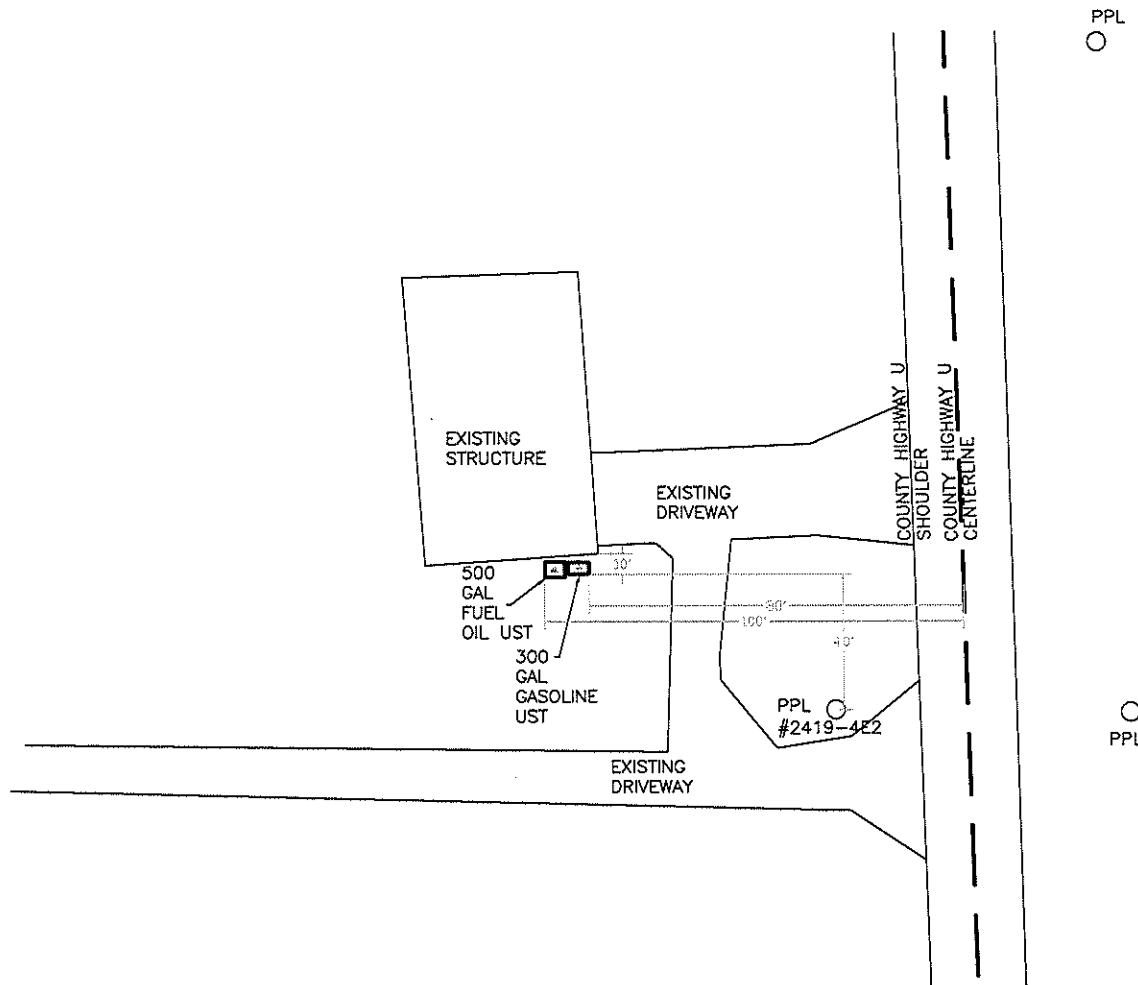
PROPERTY LOCATION
DIAGRAM

Environmental Services Plus

Project

February 2014

Fig. 1



PPL
○

- LEGEND**
- POWER POLE
 - ▲ SAMPLE LOCATION



PPL
○

- NOTE:**
1. Soil samples were collected from the excavation base, approximately 1 foot below the tank, or 5 feet below existing grade.
 2. Soil at the base of the excavation was reddish brown silty sand, with some pockets of reddish brown clayey silt.

N9505 County Highway U
Town of Oneida, Wisconsin

Environmental Services Plus


	SAMPLE LOCATION DIAGRAM	
	Project	February 2014

Fig. 2



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

February 05, 2014

Paul Garvey
GEI Consultants, Inc.
3159 Voyager Drive
Green Bay, WI 54311

RE: Project: N9505 COUNTY HWY U, J. WEBSTER
Pace Project No.: 4091757

Dear Paul Garvey:

Enclosed are the analytical results for sample(s) received by the laboratory on February 04, 2014. 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,

Kang Khang
kang.khang@pacelabs.com
Project Manager

Enclosures



REPORT OF LABORATORY ANALYSIS

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

CERTIFICATIONS

Project: N9505 COUNTY HWY U, J. WEBSTER
Pace Project No.: 4091757

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 Dakota Certification #: R-150
South Carolina Certification #: 83006001
US Dept of Agriculture #: S-76505
Wisconsin Certification #: 405132750

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SAMPLE SUMMARY

Project: N9505 COUNTY HWY U, J. WEBSTER
Pace Project No.: 4091757

Lab ID	Sample ID	Matrix	Date Collected	Date Received
4091757001	1' BELOW GASOLINE	Solid	02/04/14 13:50	02/04/14 16:20
4091757002	1' BELOW FUEL OIL UST	Solid	02/04/14 15:35	02/04/14 16:20

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SAMPLE ANALYTE COUNT

Project: N9505 COUNTY HWY U, J. WEBSTER
Pace Project No.: 4091757

Lab ID	Sample ID	Method	Analysts	Analytes Reported	Laboratory
4091757001	1' BELOW GASOLINE	WI MOD DRO	CAC	1	PASI-G
		WI MOD GRO	PMS	11	PASI-G
		ASTM D2974-87	AH	1	PASI-G
4091757002	1' BELOW FUEL OIL UST	WI MOD DRO	CAC	1	PASI-G
		WI MOD GRO	PMS	11	PASI-G
		ASTM D2974-87	AH	1	PASI-G

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ANALYTICAL RESULTS

Project: N9505 COUNTY HWY U, J. WEBSTER
 Pace Project No.: 4091757

Sample: 1' BELOW GASOLINE Lab ID: 4091757001 Collected: 02/04/14 13:50 Received: 02/04/14 16:20 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	1310	mg/kg	50.1	20.1	30	02/05/14 07:35	02/05/14 11:01		T4
WIGRO GCV		Analytical Method: WI MOD GRO Preparation Method: TPH GRO/PVOC WI ext.							
Benzene	<250	ug/kg	600	250	10	02/05/14 07:07	02/05/14 10:26	71-43-2	W
Ethylbenzene	4050	ug/kg	670	279	10	02/05/14 07:07	02/05/14 10:26	100-41-4	
Gasoline Range Organics	1030	mg/kg	27.9	27.9	10	02/05/14 07:07	02/05/14 10:26		
Methyl-tert-butyl ether	<250	ug/kg	600	250	10	02/05/14 07:07	02/05/14 10:26	1634-04-4	W
Naphthalene	838	ug/kg	670	279	10	02/05/14 07:07	02/05/14 10:26	91-20-3	
Toluene	<250	ug/kg	600	250	10	02/05/14 07:07	02/05/14 10:26	108-88-3	W
1,2,4-Trimethylbenzene	24100	ug/kg	670	279	10	02/05/14 07:07	02/05/14 10:26	95-63-6	
1,3,5-Trimethylbenzene	19900	ug/kg	670	279	10	02/05/14 07:07	02/05/14 10:26	108-67-8	
m&p-Xylene	7240	ug/kg	1340	558	10	02/05/14 07:07	02/05/14 10:26	179601-23-1	
o-Xylene	4510	ug/kg	670	279	10	02/05/14 07:07	02/05/14 10:26	95-47-6	
Surrogates									
a,a,a-Trifluorotoluene (S)	126	%	80-120		10	02/05/14 07:07	02/05/14 10:26	98-08-8	S7
Percent Moisture		Analytical Method: ASTM D2974-87							
Percent Moisture	10.5	%	0.10	0.10	1		02/05/14 09:19		

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ANALYTICAL RESULTS

Project: N9505 COUNTY HWY U, J. WEBSTER
 Pace Project No.: 4091757

Sample: 1' BELOW FUEL OIL UST Lab ID: 4091757002 Collected: 02/04/14 15:35 Received: 02/04/14 16:20 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	223	mg/kg	7.4	3.0	4	02/05/14 07:35	02/05/14 10:53		
WIGRO GCV	Analytical Method: WI MOD GRO Preparation Method: TPH GRO/PVOC WI ext.								
Benzene	<25.0	ug/kg	60.0	25.0	1	02/05/14 07:07	02/05/14 11:17	71-43-2	W
Ethylbenzene	57.0J	ug/kg	70.5	29.4	1	02/05/14 07:07	02/05/14 11:17	100-41-4	
Gasoline Range Organics	57.5	mg/kg	2.9	2.9	1	02/05/14 07:07	02/05/14 11:17		
Methyl-tert-butyl ether	<25.0	ug/kg	60.0	25.0	1	02/05/14 07:07	02/05/14 11:17	1634-04-4	W
Naphthalene	973	ug/kg	70.5	29.4	1	02/05/14 07:07	02/05/14 11:17	91-20-3	
Toluene	<25.0	ug/kg	60.0	25.0	1	02/05/14 07:07	02/05/14 11:17	108-88-3	W
1,2,4-Trimethylbenzene	819	ug/kg	70.5	29.4	1	02/05/14 07:07	02/05/14 11:17	95-63-6	
1,3,5-Trimethylbenzene	390	ug/kg	70.5	29.4	1	02/05/14 07:07	02/05/14 11:17	108-67-8	
m&p-Xylene	221	ug/kg	141	58.7	1	02/05/14 07:07	02/05/14 11:17	179601-23-1	
o-Xylene	117	ug/kg	70.5	29.4	1	02/05/14 07:07	02/05/14 11:17	95-47-6	
Surrogates									
a,a,a-Trifluorotoluene (S)	103	%	80-120		1	02/05/14 07:07	02/05/14 11:17	98-08-8	
Percent Moisture	Analytical Method: ASTM D2974-87								
Percent Moisture	14.9	%	0.10	0.10	1		02/05/14 09:19		

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QUALITY CONTROL DATA

Project: N9505 COUNTY HWY U, J. WEBSTER
 Pace Project No.: 4091757

QC Batch: GCV/11857 Analysis Method: WI MOD GRO
 QC Batch Method: TPH GRO/PVOC WI ext. Analysis Description: WIGRO Solid GCV
 Associated Lab Samples: 4091757001, 4091757002

METHOD BLANK: 928510 Matrix: Solid
 Associated Lab Samples: 4091757001, 4091757002

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
1,2,4-Trimethylbenzene	ug/kg	<25.0	50.0	02/05/14 08:45	
1,3,5-Trimethylbenzene	ug/kg	<25.0	50.0	02/05/14 08:45	
Benzene	ug/kg	<10.0	50.0	02/05/14 08:45	
Ethylbenzene	ug/kg	<25.0	50.0	02/05/14 08:45	
Gasoline Range Organics	mg/kg	<0.84	2.5	02/05/14 08:45	
m&p-Xylene	ug/kg	<50.0	100	02/05/14 08:45	
Methyl-tert-butyl ether	ug/kg	<25.0	50.0	02/05/14 08:45	
Naphthalene	ug/kg	<25.0	50.0	02/05/14 08:45	
o-Xylene	ug/kg	<25.0	50.0	02/05/14 08:45	
Toluene	ug/kg	<25.0	50.0	02/05/14 08:45	
a,a,a-Trifluorotoluene (S)	%	98	80-120	02/05/14 08:45	

Parameter	Units	928512								
		Spike Conc.	LCS Result	LCSD Result	LCS % Rec	LCSD % Rec	% Rec Limits	RPD	Max RPD	Qualifiers
1,2,4-Trimethylbenzene	ug/kg	1000	1100	1120	110	112	80-120	2	20	
1,3,5-Trimethylbenzene	ug/kg	1000	1090	1110	109	111	80-120	2	20	
Benzene	ug/kg	1000	1030	1070	103	107	80-120	4	20	
Ethylbenzene	ug/kg	1000	1090	1110	109	111	80-120	2	20	
Gasoline Range Organics	mg/kg	10	10	10.4	100	104	80-120	5	20	
m&p-Xylene	ug/kg	2000	2150	2200	107	110	80-120	3	20	
Methyl-tert-butyl ether	ug/kg	1000	998	1050	100	105	80-120	5	20	
Naphthalene	ug/kg	1000	1070	1110	107	111	80-120	4	20	
o-Xylene	ug/kg	1000	1060	1090	106	109	80-120	3	20	
Toluene	ug/kg	1000	1050	1080	105	108	80-120	3	20	
a,a,a-Trifluorotoluene (S)	%				100	100	80-120			

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QUALITY CONTROL DATA

Project: N9505 COUNTY HWY U, J. WEBSTER
Pace Project No.: 4091757

QC Batch: OEXT/21290 Analysis Method: WI MOD DRO
QC Batch Method: WI MOD DRO Analysis Description: WIDRO GCS
Associated Lab Samples: 4091757001, 4091757002

METHOD BLANK: 928486 Matrix: Solid
Associated Lab Samples: 4091757001, 4091757002

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Diesel Range Organics	mg/kg	<0.80	2.0	02/05/14 09:42	

Parameter	Units	LABORATORY CONTROL SAMPLE & LCSD: 928487 928488									
		Spike Conc.	LCS Result	LCSD Result	LCS % Rec	LCSD % Rec	% Rec Limits	RPD	Max RPD	Qualifiers	
Diesel Range Organics	mg/kg	40	29.6	30.3	74	76	70-120	2	20		

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QUALITY CONTROL DATA

Project: N9505 COUNTY HWY U, J. WEBSTER
Pace Project No.: 4091757

QC Batch: PMST/9411 Analysis Method: ASTM D2974-87
QC Batch Method: ASTM D2974-87 Analysis Description: Dry Weight/Percent Moisture
Associated Lab Samples: 4091757001, 4091757002

SAMPLE DUPLICATE: 928537

Parameter	Units	4091752001 Result	Dup Result	RPD	Max RPD	Qualifiers
Percent Moisture	%	30.2	27.0	11	10	

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QUALIFIERS

Project: N9505 COUNTY HWY U, J. WEBSTER
Pace Project No.: 4091757

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

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.

REPORT OF LABORATORY ANALYSIS

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QUALITY CONTROL DATA CROSS REFERENCE TABLE

Project: N9505 COUNTY HWY U, J. WEBSTER
Pace Project No.: 4091757

Lab ID	Sample ID	QC Batch Method	QC Batch	Analytical Method	Analytical Batch
4091757001	1' BELOW GASOLINE	WI MOD DRO	OEXT/21290	WI MOD DRO	GCSV/10850
4091757002	1' BELOW FUEL OIL UST	WI MOD DRO	OEXT/21290	WI MOD DRO	GCSV/10850
4091757001	1' BELOW GASOLINE	TPH GRO/PVOC WI ext.	GCV/11857	WI MOD GRO	GCV/11858
4091757002	1' BELOW FUEL OIL UST	TPH GRO/PVOC WI ext.	GCV/11857	WI MOD GRO	GCV/11858
4091757001	1' BELOW GASOLINE	ASTM D2974-87	PMST/9411		
4091757002	1' BELOW FUEL OIL UST	ASTM D2974-87	PMST/9411		

REPORT OF LABORATORY ANALYSIS

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(Please Print Clearly)

Company Name: G E I Consultants
 Branch/Location: Green Bay
 Project Contact: Paul Garvey
 Phone: 920-455-8430
 Project Number: John Webster - WisDOT
 Project Name: N9505 County Hwy U
 Project State: WI
 Sampled By (Print): Karl Krueger
 Sampled By (Sign): [Signature]
 PO #:



UPPER MIDWEST REGION
 MN: 612-607-1700 WI: 920-469-2436

MH
 4091757

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 Label	Analyses Requested									
		DRO									
		GRO									
		PVOCs									
		Naphthalene									
		% Moisture									

Quote #:
 Mail To Contact:
 Mail To Company:
 Mail To Address:
 Invoice To Contact:
 Invoice To Company:
 Invoice To Address:
 Invoice To Phone:
 CLIENT COMMENTS
 LAB COMMENTS (Lab Use Only)
 Profile #

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	
	Under Gas Tank	2/4	1:35	
001	1' Below Gasoline VST	2/4	1350	S
002	1' Below Fuel Oil VST	2/4	1535	S

Rush Turnaround Time Requested - Prelims (Rush TAT subject to approval/surcharge)
 Date Needed: 2/5/14

Transmit Prelim Rush Results by (complete what you want):

Relinquished By: <u>Karl Krueger</u>	Date/Time: <u>2/4/14 1620</u>	Received By: <u>[Signature]</u>	Date/Time: <u>2/4/14 1620</u>
Relinquished By:	Date/Time:	Received By:	Date/Time:
Relinquished By:	Date/Time:	Received By:	Date/Time:
Relinquished By:	Date/Time:	Received By:	Date/Time:

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

PACE Project No. 4091757
 Receipt Temp = 201 °C
 Sample Receipt pH OK / Adjusted
 Cooler Custody Seal Present (Not Present) Intact / Not Intact

Sample Condition Upon Receipt

Pace Analytical Services, Inc.
1241 Bellevue Street, Suite 9
Green Bay, WI 54302



Project #

WO#: 4091757

Client Name: G&E Consultants



Courier: Fed Ex UPS Client Pace Other: _____
Tracking #: _____

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 N/A Type of Ice: Wet Blue Dry None Samples on ice, cooling process has begun

Cooler Temperature Uncorr: 20 / Corr: _____ Biological Tissue is Frozen: yes no

Temp Blank Present: yes no

Person examining contents:
Date: 2/4/14
Initials: mh

Temp should be above freezing to 6°C for all sample except Biota.
Frozen 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	2.
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.
- VOA Samples frozen upon receipt	<input type="checkbox"/> Yes <input type="checkbox"/> No	Date/Time:
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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	7. <u>Rush mt 2/4/14</u>
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	
-Pace IR Containers Used:	<input type="checkbox"/> Yes <input checked="" 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 checked="" type="checkbox"/> No <input 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>S</u>		
All containers needing preservation have been checked. (Non-Compliance noted in 13.)	<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. (HNO3, H2SO4 ≤2; NaOH+ZnAct ≥9, NaOH ≥12)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
exceptions: VOA, coliform, TOC, TOX, TOH, O&G, WIDROW, Phenolics, OTHER:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Initial when completed
		Lab Std #/ID of preservative
		Date/Time:
Headspace in VOA Vials (>6mm):	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	14.
Trip Blank Present:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	15.
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:

If checked, see attached form for additional comments

Person Contacted: _____ Date/Time: _____

Comments/ Resolution: _____

Project Manager Review: _____

Date: 2/4/14



Feb 5th 2014

Mr. John Webster
Property Owner
N9505 Cty U
Green Bay, WI. 54313

Re: Tank cleaning, removal and closure documentation of (2) UST's and (1) basement FO AST located at N9505 Cty U Green Bay, WI. 54313

On Feb 4th 2014 ESP arrived onsite at the above address of Mr. John Webster for closure/removal of two underground storage tanks (UST) and one aboveground storage tank (AST) in the basement.

The UST's were (1) 1,000 gallon #2 fuel oil UST that was previously connected to the heating furnace system and (1) 300 gallon UL gasoline UST used by the previous owner for dispensing gasoline into private vehicles.

ESP unearthed the UST's and found that the 1,000 gallon FO tank was approximately ½ full of fuel oil and water mixture(10%/90%). The 300 gallon UL gasoline tank contained about 5" of gasoline and water mixture.

Due to the volume in the 1,000 gallon FO tank, ESP contacted Schroeder Environmental to assist with the removal and disposal of the fuel oil/water mixture at Safety Kleen in Kimberly, WI. (see attached disposal documentation)

ESP checked the LEL level in both tanks, then cut open to clean and vapor free in place prior to removal per ATCP code SPS 310.200

The tanks were excavated and removed and then inspected for integrity and found to have holes in the bottom of both tanks. (see project photo's of activities)

Prior to the start of the project, ESP contacted State of WI. LPO Inspector Mr. Darrell Christy whom was at the site to oversee the removal/closure.

ESP completed the required Checklist for Closure and update the Tank Registration Forms.

ESP provided and backfilled the excavation with ¾ road stone to match existing grade.

The owner or owners representative are required to contact the WDNR, ESP will contact you to discuss this requirement, due to the tank condition and likely results of the soil samples at the sample points.

ESP also performed pumping approximately 50 gallons of #2 fuel oil from the basement AST which was not being used anymore. The tank was checked for LEL, cut open, cleaned and removed from the basement along with the product lines

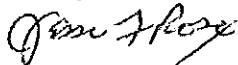
One labeled drum of gasoline/water sludge remained onsite pending approval for disposal by ESP and subcontractor Safety KLeen

ESP had all (3) tanks cut up and properly disposed of as recycled scrap metal (see enclosed documentation)

The disposal documentation shall be issued to you upon completion

Thank you for allowing ESP the opportunity to be of service to you. Please call me with any questions at 920-766-6756 or 920-740-3600

Sincerely;



Jesse F. Rose
President/Owner
Environmental Services Plus

JFR/ddb

Complete One Form for Each System Service Event

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

TANK SYSTEM SERVICE AND CLOSURE ASSESSMENT REPORT

CHECK ONE:

- UNDERGROUND
 ABOVEGROUND

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

RETURN COMPLETED CHECKLIST TO:

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

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

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 John Webster		2. Owner Name John Webster	
Facility Street Address (not P.O. Box) N 9505 Cty U		3. Contact Name John Webster	
Municipality N 9505 Cty U		Job Title Owner	
Municipality Mail N 9505 Cty U		ng Address N 9505 Cty U	
<input checked="" type="checkbox"/> City <input type="checkbox"/> Village <input checked="" type="checkbox"/> Town of: Green Bay ONEIDA		Post Office Green Bay	
Zip Code 54313		State Z WI	
County Outagamie		ip Code 54313	
4. Primary Service Contractor Section A above Environmental Services Plus		Service Contractor Street Address W1734 KenDale Dr. PO Box 187	
Service Contractor Telephone No. (include area code) () 920-766-6756		Service Contractor City, State, Zip Code Kaukauna, WI. 54130	

ORIGINAL COPY

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

a	b	c	d	e	f	g	h
Tank ID #	Type of Closure ¹	Tank Material of Construction	Piping Material of Construction	Tank Capacity (gallons)	Contents ²	Release - System Integrity Compromised (e.g. holes, cracks, loose connection, etc)?	If "Yes" to "g", Then Specify Source & Cause of Release ³
							Source of Release ³ Cause of Release ⁴
316974	P	steel	steel/op	1,000	F, D	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	T = TANK C = CORROSION
316975	P	steel	steel	300	UG	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	T = TANK C = CORROSION
						<input type="checkbox"/> Y <input 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	

- Indicate type of closure: P = Permanent, TOS = Temporarily Out-of-Service, CIP = Closure In-Place
- 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): _____

- Source of release: T = tank, P = piping, D = dispenser, STP = submersible turbine pump, DP = delivery problem, O = other, UNK = Unknown
- Cause of release: S = spill, O = overflow, POMD = physical or mechanical damage, C = corrosion, IP = installation problem, O = other, UNK = Unknown
- 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 checked="" type="checkbox"/> X
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 checked="" type="checkbox"/> X
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 checked="" type="checkbox"/> X
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 checked="" type="checkbox"/> X
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 checked="" type="checkbox"/> X

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 checked="" type="checkbox"/> X
5. Vent lines left open.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/> X
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 checked="" type="checkbox"/> X

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 checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" 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 checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" 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 (DSPS) 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 checked="" type="checkbox"/> X
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 checked="" type="checkbox"/> X
c. Vent line disconnected or removed.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/> X
d. Inventory form filed by owner with the DSPS indicating closure in-place.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/> X

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 DSPS indicating change-in-service.

COPIES
 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

Jesse F. Rose

Jesse F. Rose
 Remover/Cleaner Signature

#41240

Certification No.

FEB 4th 2014
 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 GET-ENVIRONMENTAL - GREEN BAY WI

H. INSPECTOR INFORMATION

Darrell Christy
 Inspector Name (print)

Darrell J. Christy
 Inspector Signature

35105
 Inspector Cert #

LPO Agency #:

Oneida Twp.
 FDID # For Location Where Inspection Performed

715-828-3903
 Inspector Telephone Number

2/4/14
 Date Signed

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

Tank Detail

Site and Owner

Site Info

Facility ID: 96864 JOHN WEBSTER
 N9505 COUNTY U
 GREEN BAY
 Landowner Type: Private
 Site Anniversary Date:

County & Municipality

44 - OUTAGAMIE
 Town of ONEIDA
 Fire Dept ID: 4413 - Oneida Twp

Owner

ID: 329302
 JOHN WEBSTER
 5311 COUNTY LINE RD
 GREEN BAY WI 54303

Dispensers have Sumps: Unknown

Underground Storage Tank - ID: 316975, Wang ID: 441300107, Abandoned without Product as of 01/01/1986

Install Date:	Capacity in Gallons:	300	Contents:	Unleaded Gasoline
Tank Occupancy:	Residential Marketer:	N	CAS Number:	Required
Federally Regulated:	N	Spill Protection:	- 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:	Unknown	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](#)

mailed 2/6/14

TDID#:

Reg Obj #: 316975

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

Send Completed Form To:
 Bureau of Weights & Measures
 Permit & Licensing Section
 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):

<input type="checkbox"/> In Use	<input checked="" type="checkbox"/> Closed - Tank Removed	<input type="checkbox"/> Ownership Change (Indicate new owner name in block 2)	Fire Department providing fire coverage where tank is located: <input type="checkbox"/> City <input type="checkbox"/> Village <input checked="" type="checkbox"/> Town of: Oneida # 4313
<input type="checkbox"/> Newly Installed	<input type="checkbox"/> Closed - Filled with Inert Materials		
<input type="checkbox"/> Abandoned with Product	<input type="checkbox"/> Abandon with Water		
<input type="checkbox"/> Abandoned without Product (empty)	<input type="checkbox"/> Temporarily Out of Service - Provide Date: _____		

A. IDENTIFICATION (Please Print)

1. Tank Site Name: **John Webster** Site Street Address: **9505 Cty U (Oneida)** Site Telephone Number: **(920) 865-7984**

City Village Town of: **ONEIDA** State: **WISCONSIN** Zip Code: **54313** County: **Outagamie**

2. Tank Owner Name: **John Webster** Mailing Address: **9505 Cty U (Oneida)** Telephone Number: **(920) 865-7984**

City Village Town of: **ONEIDA** State: **Wisconsin** Zip Code: **54313** County: **Outagamie**

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

B. Site ID #: _____ Facility ID #: **96864** Customer ID #: **329302**

C. Tank Capacity (gallons) **300** Tank Age (age or date installed): **unknown** 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.
O. If Tank Closed, Abandoned or Out of Service
 Give date (mo./day/yr.): **CLEANED REMOVED 2/4/14** Has a site assessment been completed? (see reverse side for details) Yes No

Tank Owner Name (please print): **John A. Webster**

Tank Owner Signature (Note: By signing, signer is accepting legal and financial responsibility for the storage tank system.): **John A. Webster** Date: **2-4-14**

Definitions and explanations for completing this form

Land Owner Type - classifies the organization that owns the property the tank is located on. A "Private" landowner is residential, commercial, mercantile, industrial, farm, non-government owned public utility, or other business organization.

Occupancy Type (categories below) – identifies the occupancy in relation to SPS 310 storage classifications.

- Retail Fuel Sales Tank is used to store any fuel product that is offered for sale in the retail market.
- Bulk Plant Storage Tank is used to store any fuel product that is offered for sale in the wholesale market.
- Industrial Tank is used to store any regulated product associated with an industrial: fleet, heating, industrial fabricating, manufacturing, processing or refining.
- Mercantile/Commercial Tank is used to store any regulated product associated with a commercial business fleet, heating, or processing, e.g., service company, medical facility, freight, airport, apartment, etc.
- Utility Tank is used to store any regulated product associated with a public or private water or power utility fleet, heating, or processing.
- Residential Tank is used to store any regulated product for residential heating or residential automobile fueling.
- School Tank is used to store any regulated product at public or private primary, secondary or higher educational institution.
- Agricultural Tank is used to store any regulated product directly associated with crop or livestock production, meaning a "farm." Refer to SPS 310.050(48)
- Back-up or Emergency Generator Tank is used to store any fuel used to power a backup or emergency generator; or as back-up to a primary fuel source such as fuel oil back-up to a natural gas fired boiler.
- Terminal Storage Tank is associated with a distribution facility such as an interstate pipeline. These tanks are typically field erected structures of 500,000 + gallon capacity. A million gallon tank at an ethanol production site would be "industrial," not "terminal storage."
- Government Fleet Tank is located at a facility owned and operated by a federal, state, county or local government entity. The tank may be used for vehicle fueling, waste oil or heating purposes.

A> Q@MUST/AST Permit and Registration Group Areas of Responsibility by County

Rebecca Shervey West 715-726-2545				Terri Quamme North East 608-267-1383		Israel Zurfluh Central 608-267-2051		Gwendolyn Person South East 608-267-1382	
02	Ashland	46	Pepin	05	Brown	01	Adams	30	Kenosha
03	Barron	47	Pierce	10	Clark	08	Calumet	40	Milwaukee
04	Bayfield	48	Polk	15	Door	11	Columbia	45	Ozaukee
06	Buffalo	50	Price	19	Florence	13	Dane	51	Racine
07	Burnett	52	Richland	21	Forest	14	Dodge	53	Rock
09	Chippewa	54	Rusk	31	Kewaunee	20	Fond Du Lac	64	Walworth
12	Crawford	55	St Croix	34	Langlade	24	Green Lake	66	Washington
16	Douglas	57	Sawyer	35	Lincoln	28	Jefferson	67	Waukesha
17	Dunn	60	Taylor	37	Marathon	36	Manitowoc		
18	Eau Claire	61	Trempealeau	38	Marinette	39	Marquette		
22	Grant	62	Vernon	42	Oconto	56	Sauk		
23	Green	65	Washburn	43	Oneida	59	Sheboygan		
25	Iowa			44	Outagamie	69	Waushara		
26	Iron			49	Portage	70	Winnebago		
27	Jackson			58	Shawano				
29	Juneau			63	Vilas				
32	La Crosse			68	Waupaca				
33	Lafayette			71	Wood				
41	Monroe			72	Menominee				

CLOSURE ASSESSMENT INFORMATION

Requirements for a site assessment at the closure or change in service for SPS 310 regulated underground storage tank are outlined in SPS 310.732 and the Federal Register, 40 CFR 280 and 281.

Guidelines on properly conducting of a tank closure assessment can be obtained at:
http://commerce.wi.gov/ERpdf/bst/ProgramLetters_PL/ER-BST-PL-TankClosureAssessGuide.pdf
 or Sheldon Schall by e-mail: Sheldon.Schall@wisconsin.gov or telephone: 608.266.0956

Closure site assessments (TSSA Form Part B) are to be submitted to the DNR as required in the TSSA Guide:
http://dsps.wi.gov/er/pdf/bst/ProgramLetters_PL/ER-BST-PL-TSSA_Guide.pdf

ma/100 2/6/14

Send Completed Form To:
Bureau of Weights & Measures
Permit & Licensing Section
P.O. Box 7837
Madison, WI 53707-7837

UNDERGROUND FLAMMABLE/COMBUSTIBLE/HAZARDOUS LIQUID STORAGE TANK REGISTRATION

Information Required By Section 101.142, Wis. Stats.

TDID#: _____
Reg Obj #: 316974

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: Oneida #4313

A. IDENTIFICATION (Please Print)
1. Tank Site Name: John Webster
Site Street Address: M 9505 Cty U (Oneida)
Site Telephone Number: (920) 865-7984
 City Village Town of: Green Bay ONEIDA
State: WISCONSIN Zip Code: 54313
County: Outagamie
2. Tank Owner Name: John Webster
Mailing Address: M 9505 Cty U (Oneida)
Telephone Number: (920) 865-7984
 City Village Town of: Green Bay ONEIDA
State: Wisconsin Zip Code: 54313
County: Outagamie
3. Property Owner Name (if different than tank owner): _____
Property Owner Address if different than #1: _____

B. Site ID #: _____ **Facility ID #:** 96864 **Customer ID #:** 329302

C. Tank Capacity (gallons): 1000 **Tank Age (age or date installed):** unknown **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 - MILD 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 PECEFA eligible.

Geo Latitude: N44°34.905' **Geo Longitude:** W088°11.422'
Has a site assessment been completed? (see reverse side for details)
 Yes No

O. If Tank Closed, Abandoned or Out of Service
Give date (mo./day/yr.): CLEANED - REMOVED 2-4-14

Tank Owner Name (please print): John A. Webster
Tank Owner Signature (Note: By signing, signer is accepting legal and financial responsibility for the storage tank system.): John A. Webster
Date: 2-4-14

Definitions and explanations for completing this form

Land Owner Type - classifies the organization that owns the property the tank is located on. A " " landowner is residential, commercial, mercantile, industrial, farm, non-government owned public utility, or other business organization.

Occupancy Type (categories below) – identifies the occupancy in relation to SPS 310 storage classifications.

- Retail Fuel Sales** Tank is used to store any fuel product that is offered for sale in the retail market.
- Bulk Plant Storage** Tank is used to store any fuel product that is offered for sale in the wholesale market.
- Industrial** Tank is used to store any regulated product associated with an industrial: fleet, heating, industrial fabricating, manufacturing, processing or refining.
- Mercantile/Commercial** Tank is used to store any regulated product associated with a commercial business fleet, heating, or processing, e.g., service company, medical facility, freight, airport, apartment, etc.
- Utility** Tank is used to store any regulated product associated with a public or private water or power utility fleet, heating, or processing.
- Residential** Tank is used to store any regulated product for residential heating or residential automobile fueling.
- School** Tank is used to store any regulated product at public or private primary, secondary or higher educational institution.
- Agricultural** Tank is used to store any regulated product directly associated with crop or livestock production, meaning a "farm." Refer to SPS 310.050(48)
- Back-up or Emergency Generator** Tank is used to store any fuel used to power a backup or emergency generator; or as back-up to a primary fuel source such as fuel oil back-up to a natural gas fired boiler.
- Terminal Storage** Tank is associated with a distribution facility such as an interstate pipeline. These tanks are typically field erected structures of 500,000 + gallon capacity. A million gallon tank at an ethanol production site would be "industrial," not "terminal storage."
- Government Fleet** Tank is located at a facility owned and operated by a federal, state, county or local government entity. The tank may be used for vehicle fueling, waste oil or heating purposes.

A> Q@ MUST/AST Permit and Registration Group Areas of Responsibility by County

Rebecca Shervey West 715-726-2545				Terri Quamme North East 608-267-1383		Israel Zurfluh Central 608-267-2051		Gwendolyn Person South East 608-267-1382	
02	Ashland	46	Pepin	05	Brown	01	Adams	30	Kenosha
03	Barron	47	Pierce	10	Clark	08	Calumet	40	Milwaukee
04	Bayfield	48	Polk	15	Door	11	Columbia	45	Ozaukee
06	Buffalo	50	Price	19	Florence	13	Dane	51	Racine
07	Burnett	52	Richland	21	Forest	14	Dodge	53	Rock
09	Chippewa	54	Rusk	31	Kewaunee	20	Fond Du Lac	64	Walworth
12	Crawford	55	St Croix	34	Langlade	24	Green Lake	66	Washington
16	Douglas	57	Sawyer	35	Lincoln	28	Jefferson	67	Waukesha
17	Dunn	60	Taylor	37	Marathon	36	Manitowoc		
18	Eau Claire	61	Trempealeau	38	Marquette	39	Marquette		
22	Grant	62	Vernon	42	Oconto	56	Sauk		
23	Green	65	Washburn	43	Oneida	59	Sheboygan		
25	Iowa			44	Outagamie	69	Waushara		
26	Iron			49	Portage	70	Winnebago		
27	Jackson			58	Shawano				
29	Juneau			63	Vilas				
32	La Crosse			68	Waupaca				
33	Lafayette			71	Wood				
41	Monroe			72	Menominee				

CLOSURE ASSESSMENT INFORMATION

Requirements for a site assessment at the closure or change in service for SPS 310 regulated underground storage tank are outlined in SPS 310.732 and the Federal Register, 40 CFR 280 and 281.

Guidelines on properly conducting of a tank closure assessment can be obtained at:
http://commerce.wi.gov/ERpdf/bst/ProgramLetters_PL/ER-BST-PL-TankClosureAssessGuide.pdf
 or Sheldon Schall by e-mail: Sheldon.Schall@wisconsin.gov or telephone: 608.266.0956

Closure site assessments (TSSA Form Part B) are to be submitted to the DNR as required in the TSSA Guide:
http://dsps.wi.gov/er/pdf/bst/ProgramLetters_PL/ER-BST-PL-TSSA_Guide.pdf

NOT / REGULATED - NO REGISTRATION REQUIRED
ABOVEGROUND

TDID#: _____
Reg Obj #: _____

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

Send Completed Form To:
Bureau of Weights & Measures
Permit & Licensing Section
P.O. Box 7837
Madison, WI 53707-7837

Aboveground 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 Ownership Change (Indicate new owner name in block 2)
 Newly Installed Temporarily Out of Service - Provide Date: _____
 Abandoned with Product Abandoned without Product (empty)
 Closed - Tank Removed Closed - Cleaned, Tank not removed
Fire Department providing fire coverage where tank is located:
 City Village
 Town of: **Oneida**

A. IDENTIFICATION (Please Print)
1. Tank Site Name: **John Webster**
 City Village Town of: **Oneida**
Site Street Address: **N9505 Cty U**
State: **WISCONSIN** Zip Code: **54313**
Site Telephone Number: **(920) 865-7984**
County: **Outagamie**
2. Tank Owner Name: **John Webster**
 City Village Town of: **Oneida**
Mailing Address: **N9505 Cty U**
State: **Wisconsin** Zip Code: **54313**
Telephone Number: **(920) 865-7984**
County: **Outagamie**
3. Property Owner Name (if different than tank owner): _____
Property Owner Address if different than #1: _____

B. Site ID #: _____ Facility ID #: **96864** Customer ID #: **329302**

C. Tank Capacity (gallons): **275 BASEMENT TANK** 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 or Polyethylene
 Concrete Other (specify): _____ If Upgraded by internal lining give date: _____
Tank Double Walled? Yes No Overfill Protection? Yes No Spill Containment? Yes No

G. Tank Corrosion Protection: Sacrificial Anodes Impressed Current External coating N/A None

H. Primary Tank Leak Detection Method:
 Visual monitoring Automatic tank gauging Interstitial monitoring Electronic: NO YES Manual tank gauging

I. Aboveground Piping Construction: Type: Pressurized (includes gravity/head pressure) Suction
 Bare Steel Coated Steel Stainless Steel Fiberglass Flexible Copper Unknown NA Other _____

J. Underground Piping Construction: Type: Pressurized (includes gravity/head pressure) Suction
 Bare Steel Coated Steel Stainless Steel Fiberglass Flexible Copper Unknown NA Other _____

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

L. Underground Piping Leak Detection Method: Interstitial monitoring Electronic: NO YES Sump or cable sensor Yes No
 Tightness testing Electronic line monitor - ELLD Other _____

M. Vapor Recovery/Stage II (Not Applicable for non petroleum storage) Fiberglass Flexible Other (specify): _____
 Operational - Provide Date (mo./day/yr.): _____ CARB #: _____

N. Containment: Side Material: Earth Concrete/block Steel Synthetic liner
Base Material: Earth Concrete/block Steel Synthetic liner

O. 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 - Flash point less than 200°F Waste/Used Motor Oil Hazardous Waste/Interface* Empty* Sand/Gravel/Slurry*
 Other (specify): _____ Chemical* Name _____ CAS #: _____

* If chosen, this tank is NOT PECFA eligible.

P. If Tank Closed, Abandoned or Out of Service
Give date (mo./day/yr.): **CLEANED - REMOVED 2/04/14**
Geo Latitude: **N44.34905** Geo Longitude: **W88.11422**
Has a site assessment been completed? (see reverse side for details) Yes No

Tank Owner Name (please print): **BASEMENT FUEL OIL TANK - NOT REQUIRED TO BE REGISTERED TO STATE OF WISCONSIN**
Tank Owner Signature (Note: By signing, signer is accepting legal and financial responsibility for the storage tank system.)
2/04/14 Date



Wisconsin Department of Agriculture,
Trade & Consumer Protection
Bureau of Weights and Measures
P.O. Box 7837
Madison, WI 53707-7837
FAX: 608-223-6563

SPS 310 Notification Record

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

TO: Mr. Darryll Christy - Fax 608-283-7417 OFFICE LOCATION: PO Box 8095 Eau Claire, WI.54702
(Refer to the web site: >http://dsps.wi.gov/php/er-lpolists/lpo_agency_list.php < for the agency responsible for the specific jurisdiction.)

LOCATION / IDENTIFICATION (Please print or type)

Site Name John Webster - RES		Owner Name John Webster	
Site Street Address N9505 Cty U (Oneida)		Owner Street or P.O. Address 9505 Cty U (Oneida)	
<input checked="" type="checkbox"/> City GREEN BAY	<input type="checkbox"/> Village	<input checked="" type="checkbox"/> Town of: ONEIDA	<input checked="" type="checkbox"/> City GREEN BAY
<input type="checkbox"/> Village	<input type="checkbox"/> Town of:	<input type="checkbox"/> City	<input type="checkbox"/> Village
County Outagamie	Zip Code 54313	State WI	Zip Code 54313
Facility Number: 96864		Telephone () 920-865-7984	
Fire Department providing fire protection coverage: Oneida # 4313 F.O.#			

ORIGINAL

Name of Contractor: Environmental Services Plus
Address of Contractor: W1734 KenDale Dr. PO Box 187
City/Town: Kaukauna, WI. 54130
Telephone Number: (920) 766-6756 Fax Number: (920) 766-6776
Date work is to begin: Possibly week of Jan 27th 2014 -- weather permitting - FEB 4th 2014
Comm. 10 certified project supervisor: Jesse F. Rose # 41240

E-MAILED
2/3/14

Project will involve:
(Check all that apply)

	Check		Number of tanks	Plan Number	Approval Date
	UST	AST			
Tank Installation	<input type="checkbox"/>	<input type="checkbox"/>	3	Send notice to DSPS	
Dispenser POS Conversion	<input type="checkbox"/>	<input type="checkbox"/>			
Piping Installation or Upgrade	<input type="checkbox"/>	<input type="checkbox"/>			
Leak Detection Upgrade	<input type="checkbox"/>	<input type="checkbox"/>			
Spill or Overfill Protection	<input type="checkbox"/>	<input type="checkbox"/>			
Cathodic Protection or Interior Lining	<input type="checkbox"/>	<input type="checkbox"/>			
CERCLA Chemical Tank(s) Only	<input type="checkbox"/>	<input type="checkbox"/>			
Tank Closure	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			

Site assessment conducted by: N/A

Comments: 2 UST's one is UL gasoline and one is FUEL (1 basement 275 AST fuel oil - Not-REG)
call left message

Definitions and explanations for completing this form

Land Owner Type - classifies the organization that owns the property the tank is located on. A "Private" landowner is residential, commercial, mercantile, industrial, farm, non-government owned public utility, or other business organization.

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- Utility** Tank is used to store any regulated product associated with a public or private water or power utility fleet, heating, or processing.
- Residential** Tank is used to store any regulated product for residential heating or residential automobile fueling.
- School** Tank is used to store any regulated product at public or private primary, secondary or higher educational institution.
- Agricultural** Tank is used to store any regulated product directly associated with crop or livestock production, meaning a "farm." Refer to SPS 310.050(48)
- Back-up or Emergency Generator** Tank is used to store any fuel used to power a backup or emergency generator; a fire pump, or as back-up to a primary fuel source such as fuel oil back-up to a natural gas fired boiler.
- Terminal Storage** Tank is associated with a distribution facility such as an interstate pipeline. These tanks are typically field erected structures of 500,000 + gallon capacity. A million gallon tank at an ethanol production site would be "industrial," not "terminal storage."
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DATCP UST/AST Permit and Registration Group Areas of Responsibility by County

Rebecca Shervey West 715-726-2545				Terri Quamme North East 608-267-1383		Israel Zurfluh Central 608-267-2051		Gwendolyn Person South East 608-267-1382	
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06	Buffalo	50	Price	19	Florence	13	Dane	51	Racine
07	Burnett	52	Richland	21	Forest	14	Dodge	53	Rock
09	Chippewa	54	Rusk	31	Kewaunee	20	Fond Du Lac	64	Walworth
12	Crawford	55	St Croix	34	Langlade	24	Green Lake	66	Washington
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23	Green	65	Washburn	43	Oneida	59	Sheboygan		
25	Iowa			44	Outagamie	69	Waushara		
26	Iron			49	Portage	70	Winnebago		
27	Jackson			58	Shawano				
29	Juneau			63	Vilas				
32	La Crosse			68	Waupaca				
33	Lafayette			71	Wood				
41	Monroe			72	Menominee				

CLOSURE ASSESSMENT INFORMATION

Requirements for a site assessment at the closure or change in service for SPS 310 regulated aboveground storage tank are outlined in SPS 310.460 and 310.465.

Guidelines on properly conducting of a tank closure assessment can be obtained at:
http://dsps.wi.gov/Documents/Industry%20Services/ERS/BST/TankSystemService_ClosureGuide_TSSA.pdf

Closure site assessments (TSSA Form Part B) are to be submitted to the Department as well as the DNR as required in the TSSA Guide:
http://dsps.wi.gov/er/pdf/bst/ProgramLetters_PL/ER-BST-PL-TSSA_Guide.pdf

Jesse Rose

From: <operations@diggershotline.com>
Date: Tuesday, January 21, 2014 10:00 AM
To: <jesse@environmentalservicesplus.com>
Subject: Diggers Hotline Ticket 20140400960

Diggers Hotline, Inc. (Wisconsin) Fax/Email Confirmation

Ticket #: 20140400960 Previous Ticket #:

Header: STANDARD Type: Operator: 835

Start Date : 01/24/2014 Time: 10:00:00 AM

Call Date : 01/21/2014 Time: 09:50:54 AM

Transmit Date: 01/21/2014 Time: 10:00:06 AM

Caller: DAN BRUEGGE Phone: (920)766-6756
ESP ENVIRONMENTAL SERVICES PLUS
1734 KEN-DALE DR PO BOX 187 Cell : (920)850-0568
KAUKAUNA
WI 54130
jesse@environmentalservicesplus.com

Field Rep.: SAME/CELL Phone: (920)850-0568

County : OUTAGAMIE
Place : ONEIDA TOWN
At : N9505
Street : N COUNTY LINE RD (CR-U)
Intersection 1: OLD HWY 29 RD
Intersection 2:
On the W side of street and approximately 250.00 FT S of Intersection 1
Latitude NW 44.58312200 Longitude NW -88.19141400
Latitude SE 44.57980400 Longitude SE -88.19014100

Type of Work: REMOVAL OF U/G TANK
Working For : JOHN WEBSTER
Explosives: N Overhead: Y Boring Equipment: N Premarked: N

Marking Instructions:

MARK A 50FT RADIUS OF THE SE CORNER OF THE RESIDENCE AT THE ABOVE ADDRESS. THERE MAY BE A VISIBLE FILL PIPE OFF SE CORNER OF THE HOUSE.

Remarks:

NO WORK WILL CROSS N COUNTY LINE RD (CR-U).

Members Notified:

WE ENERGIES - WE41WG (WE41W) WISCONSIN PUBLIC SERVICE CORP (WPS10)
QWEST COMMUNICATIONS CORP QTC (QTC01) ONEIDA TRIBE OF INDIANS OF WI (ONT01)
NSIGHT TELESERVICES NET01 (NET01)



Site Assessor Certification

Jesse F Rose

Certification # 41240

Expires 5/31/2016



Tank System Remover-Cleaner
Certification

Jesse F Rose

Certification # 41240

Expires 6/30/2016



Underground Tank System
Installer Certification

Jesse F Rose

Certification # 41240

Expires 4/30/2016



Aboveground Tank System
Installer Certification

Jesse F Rose

Certification # 41240

Expires 4/30/2016



"SOLUTIONS FOR YOUR ENVIRONMENT"
PO Box 187
Kaukauna, WI 54130
Ph 920-766-6756 Fax 920-766-6776
email jesse@environmentalservicesplus.com

Site Health and Safety Plan

Project Name: Mr. John Webster
Location: 9505 Cty U Green Bay, WI. 54313 (Oneida)
Duration: Week of January 27th 2014 (weather permitting)

Project Description: Cleaning, vapor freeing and removal of a (2) 500 gallon UST's at the above listed property. Also cleaning/closure of (1) 275 basement AST

Contractor:
Firm: Environmental Services Plus
Address: W1734 Ken-Dale Drive
Kaukauna, WI 54130
Office: (920) 766-6756
Mobile: (920) 740-3600
Fax: (920) 766-6776
Contact: Jesse F. Rose
E-mail: jesse@environmentalservicesplus.com

Emergency Response:

Nearest Hospital: Bellin Hospital (map attached)
Location: 744 S. Webster Ave
Telephone No.#: (920) 433-3500—Local

Paramedics: 911 for Emergency

Fire Department: 911 for Emergency
Oneida FD 920-869-1581 – Local

Police Department: 911 for Emergency
Oneida PD 920-869-2239 – Local

Site Organizational Structure:

Project Supervisor: Jesse Rose—cell-(920) 740-3600

Project Foreman: Dan Bruegge—cell-(920) 850-0568

Potential Risk:

- Traffic/Equipment Control
- Excessive Noise
- Contaminated Materials
- Confined Space

Risk Control:

- Fencing, caution tape, and signage for warning to construction personnel and other individuals
- Proper PPE and equipment
- Air Monitoring, Tri pod and Safety Harness
- Alert Fire and Rescue of Activities

The following Health and Safety rules apply to employees of Environmental Services Plus. It is the responsibility of each project supervisor to ensure that all employees are following the proper rules and procedures. Violations of any of these procedures will result in disciplinary action.

1. **First Aid and Accident Reporting:** Report all injuries to the project supervisor or lead person in charge who will assist you, and report that injury immediately. Appropriate emergency numbers are posted in job trailer or in project info file. An accident or injury report must be submitted to the Safety Coordinator within 24 hrs.
2. **Weekly Safety Meetings:** Projects that require weekly safety meetings must be implemented and documented. The purpose for weekly safety meetings are to discuss safety related issues that you

may have observed and to implement action if needed. A safety topic must be addressed during each safety meeting.

3. **Aerial Platforms:** Only authorized personnel can operate an aerial lift. A body harness and tie off must be worn when operating any lift. Controls and safety devices must not be tampered with and must be tested daily.
4. **Scaffolds:** Inspect all scaffolds before use for proper and secure bracing. Guardrails, midrails and toe boards must be attached. The working platform must be fully decked/planked unless there is an obstruction within the platform; but at no time should there be an opening more than 9.5 inches. Rolling/mobile scaffolds must have a horizontal brace that prevents the scaffold from racking.
5. **Cranes and Rigging:** Only qualified operators/riggers will perform rigging. All cranes must be inspected daily and monthly inspection reports must be filled out. Inspect all rigging prior to each use. Rigging is to be formally inspected each month. Nylon slings should be checked before each lift for fraying or torn areas from chaffing or rubbing against a load. If damage or color cords are showing, they must be taken out of service. Never work under a suspended load.
6. **Elevated Work and Fall Protection:** Use ladders or stairs for access. When working within 6 ft. of a roof edge or unprotected opening, you must be tied off unless guardrails/midrails and toe boards are present. A safety harness with tie off or other fall arrest device must be used when tying off is necessary. The associate needs to tie off to something that will sustain 5000 lbs. of force per person. Snap hooks on tie offs need to be of the locking type. If guardrails are not present, warning lines should be put up six ft. away from the edge. The warning lines need to be ten ft. from the edge if machinery is being used. Also an associate whose primary job is to monitor and be attentive must be present when working on open floor buildings. This person must keep vigil watch for any danger signs and respond appropriately to prevent any accidents.
7. **Power Tools:** If tools are damaged or defective they will be taken out of service immediately until repairs are made and that tool is inspected. Guarding must never be removed. Power tools should be inspected quarterly and color-coded per the Assured Grounding Program.
8. **Ground Fault Protection:** All extension cords, power tools, and outlets need to be GFCI protected and or part of an Assured Grounding Program. All electrical equipment needs to be checked quarterly as part of the Assured Grounding Program. The Assured Grounding color codes are as follows:
 - January-March 31 = White
 - April-June 30 = Green
 - July-September 30 = Red
 - October-December 31 = Orange
9. **Hot Work Operations:** During welding, burning, grinding, or cutting operations specific precautions must be taken. If performing an operation that may pose a hazard from falling objects, the hazardous area needs to be barricaded with red danger tape. A fire extinguisher must be within 35 ft. and be fully charged and operational. A fire watch may be required during burring and welding operations.
10. **Personal Protective Equipment:**
 - A. All associates must wear hard hats, which meet OSHA/ANSI specifications. Hard hats must be worn at all times on the job site, except when operating in a piece of equipment.
 - B. When operations present potential eye or face injury, safety glasses or face shield must be worn. Safety glasses must meet ANSI specifications. All safety glasses will have side shield protection.
 - C. All associates must wear work boots. Steel toe boots are required if the project request them. Canvas or tennis shoes are not permitted.

- D. All associates must wear orange or bright green safety vests on all job sites that have heavy equipment moving. Also vests must be worn if working any public traffic areas; i.e. roads, alleys, parking lots, etc.
 - E. Hearing protection is required when operating machinery. Noise levels that exceed 85 db. require hearing protection, which can be ear plugs, ear muffs.
 - F. All employees are required to wear full-length pants and shirts that cover the shoulders, (tank tops are not permitted). Holes in pants are not permitted. Torn or loose fitting clothing are not permitted.
11. **Barricades, Caution Signs, Danger Signs:** Barricades, signs, safety tape should be erected where needed around the job site. Yellow and black safety tape indicates caution must be used in that area. You may cross yellow caution tape but be aware of hazards in that area. Red and black safety tape indicates a danger area. You cannot cross red safety tape until you have notified the person who signed the tag on the tape. This area is a Danger Keep Out notification and contains hazards that can result in a fatality. When a hazard or danger is over, the tape must be removed and discarded in the appropriate receptacle.
 12. **Housekeeping:** All garbage and debris needs to be placed in the dumpster before moving to another area or another duty. At the end of the every workday, ensure that the area is clean and organized. Food should only be consumed in designated areas and any garbage should be immediately placed in the proper trash receptacle.
 13. **Powered Industrial Trucks and Forklifts:** All operators must be properly trained and authorized to drive a forklift. All forklifts should be inspected daily. A bobcat with forks is considered as a forklift. Any employee operating a forklift must have in possession a forklift certification card.
 14. **Confined Spaces:** Confined spaces are considered enclosures having limited means of access and egress, large enough to bodily enter to perform assigned work, not designed for occupancy, or any other space more than 4 ft. deep. Anyone performing work in a confined space must have the area checked by a competent person. If it is a permit required confined space (contains a hazardous atmosphere, potential of engulfment, internal configuration which could trap an entrant, or contains any other recognized serious safety or health hazard, then a permit must be issued. The Confined Space Entry Permit must be completed before anyone may enter. If a permit is required, Contact the Health and Safety Coordinator to implement and monitor the event.
 15. **Hazard Communication:** Each associate has the Right to Know of chemicals being used or chemicals they may be exposed to on the job site or in the work place. A copy of the Material Safety Data Sheet (MSDS) for every chemical that is brought on site must be kept on site and a copy forwarded to the general contractors job trailer. All chemical containers must be properly labeled.
 16. **Lockout/Tagout:** This procedure will be used to ensure that any machinery or equipment is isolated from all potentially hazardous energy. The equipment must be locked and tagged before an associate performs any servicing or maintenance activities where the unexpected energization could cause injury. A competent person prior to performing work on any mechanical or electrical system will train each associate involved in the lockout/Tag/out procedure.
 17. **Excavating/Trenching:** Digger's Hotline shall be contacted before beginning any excavation activities to locate all utilities that may be encountered. Associates in excavations must be protected from cave ins through benching or shoring. A stairway, ladder, or other means of access is required at intervals not to exceed 25 ft. laterally. Excavation and trenching should be properly barricaded when necessary and all spoils should remain at least two 2 ft. from excavation opening.
 18. **Smoking:** Smoking is not allowed near any flammable chemicals. As the project progresses, smoking will be prohibited in specific areas. Designated smoking areas are to be established prior to project start and will be announced upon arrival to the job site.

19. **Drug and Alcohol:** Employees found drinking or possessing alcohol on the job or reporting to work under the influence of (including, but not limited to any measurable alcohol concentration or any detected presence of alcohol), or impaired by intoxicants will be subject to immediate discharge. Employees who manufacture, use, distribute, dispense, or possess unlawful drugs, controlled substances, or drug paraphernalia while on or off premises, while on duty or during working hours will be subject to immediate discharge.
20. **Disciplinary Program:** The following disciplinary actions will be taken if any of the above policies are not followed.
- 1st Offense-written warning.
 - 2nd Offense- Associate is given two-day removal from job site.
 - 3rd Offense- Associate is permanently removed from site.

No situation prohibits the immediate dismissal or removal from the jobsite of any employee whose conduct constitutes a serious violation of the safety requirements set forth in this plan.

For Sub contractors:

By signing below proves that I have read this H&S Plan and agree with its contents

Name (print)	Company Name	Signature	Date
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

ddb

Test Number: 3 - 900 - 0006 - 2014

Labsite:

Materials Laboratory Testing System Tests On:
Reference Report

3- NE Region
WisDOT NE REGION Lab (LAN ONLY)
944 Vanderperren Way
Green Bay , WI 54324

Main Project ID: 4658-10-71
SCL - KAUKAUNA
STH 55 & CTH CE INTERSECTION
STH 55

Date Entered:
02/06/2014
By: RYAN KUBAT

Region: NE Material: GROOVED WET REFLECTIVE TAPE

Remarks: This Report Covers All The Grooved Wet Reflective Tape Pavement Marking For The Entire Project.

Doc ID

<u>Material Description</u>	<u>Doc Type</u>	<u>Quantity</u>	<u>Satisfactory</u>	<u>Comments</u>
900-6 Grooved Wet Reflective Tape	Approved List		Y	Stamark A380aw 3m lot #uoa3 approved List Dated 6/13/2012

Verified Date: 02/06/2014

Verified By: RYAN KUBAT



Oneida, Wisconsin

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From: To: **Belin Hospital**
744 S Webster Ave
Green Bay, WI 54301

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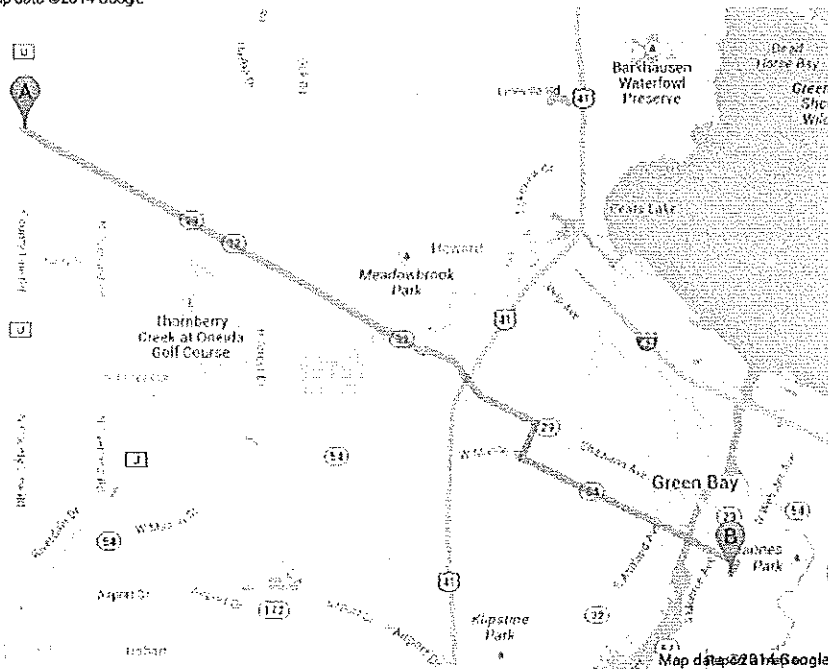
9505 County Line Road, Green Bay, WI 54313, USA

11.2 mi - about 18 mins

1. Head south on N County Line Rd/Old Wisconsin 29 W toward WI-29 E/WI-32 S 118 ft
2. Turn left onto WI-29 E/WI-29 Trunk E/WI-32 S 5.7 mi
3. Turn left onto N Packerland Dr 125 ft
4. Slight right onto Shawano Ave 0.6 mi
5. At the traffic circle, continue straight to stay on Shawano Ave 0.4 mi
6. At the traffic circle, continue straight to stay on Shawano Ave 0.7 mi
7. Turn right onto S Military Ave 0.5 mi
8. Turn left onto Green Bay Plaza/W Mason St
Continue to follow W Mason St 3.0 mi
9. Turn right onto S Webster Ave
Destination will be on the right 0.2 mi

744 South Webster Avenue, Green Bay, WI 54301, USA

Map data ©2014 Google







300 FARMLAND DRIVE
KAUKAUNA, WISCONSIN 54130
PHONE (920) 766-4201

11016

FEB 05 2014
DATE

GROSS WT:

TARE WT: _____

NET WT: 1100

SITE ADDRESS: N9505 CTY U
TOWN OF ONEIDA

NAME: MR. JOHN WEBSTER RES

DRIVER: ON OFF

MATERIAL: Scrap

(2) STEEL TANKS CLEAN VAPOR-FREE

John Webster

1,000 GALLON F.O. 64" x 72"

300 GALLON UNLEAD GASOLINE
36" x 72"

* Basement 275 Ast. No#2 F.O
TANK

DRIVER SIGNATURE: John Webster

7102600

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

Tank Detail

Site and Owner

Site Info

Facility ID: 96864 JOHN WEBSTER
 N9505 COUNTY U
 GREEN BAY
 Landowner Type: Private
 Site Anniversary Date: Dispensers have Sumps: Unknown

County & Municipality

44 - OUTAGAMIE
 Town of ONEIDA
 Fire Dept ID: 4413 - Oneida Twp

Owner

ID: 329302
 JOHN WEBSTER
 5311 COUNTY LINE RD
 GREEN BAY WI 54303

Underground Storage Tank - ID: 316974, Wang ID: 441300106, Abandoned without Product as of 01/01/1986

Install Date:	Capacity in Gallons:	1000	Contents:	Fuel Oil
Tank Occupancy:	Residential Marketer:	N	CAS Number:	
Federally Regulated:	N	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:	Unknown	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](#)

TANK DISPOSAL FORM

TANK TYPE RESIDENTIAL

TANK SIZE (1) 1,000 GALLON 64" x 72" (1) 300 GALLON

PRODUCT STORED 36" x 72" NO # 2 FUEL OIL / UNLEADED GASOLINE

SITE NAME & ADDRESS MR JOHN WEBSTER RES

N 9505 CTY U TOWN OF ONEIDA

GREEN BAY WI 54313

REMOVER:

I verify that the above mentioned storage tank was properly removed, purged, cut and cleaned following PBI recommended practices for removal.

CERTIFIED REMOVER/CLEANER JESSE F ROSE / ESP

CERTIFIED REMOVER/CLEANER # 41240

DATE FEB 5th 2014

HAULER:

I verify that the above tank was hauled to GOLDIN IRON & METAL

300 FARMLAND DRIVE - KAUKAUNA and properly disposed of.

HAULER ENVIRONMENTAL SERVICES PLUS, INC

DATE FEB 5th 2014

DISPOSAL SITE:

I verify that the above mentioned tank has been properly disposed of and can no longer be used for the purpose of storing any kind of petroleum product.

SITE NAME GOLDIN IRON & METAL

OPERATOR SEE ATTACHED SLIP

DATE FEB 05 2014





FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
920-731-3045	David Zirk		12-20	99	57885557
			CREDIT CODE	PREVIOUS BALANCE	BAL. OVER 60 DAYS
			3		
CUSTOMER SEGMENT	CHAIN	OUTER COUNTY	SVC. P/C	PROD. P/C	
A2					
LOCATION			TAX EXEMPTION NUMBER		
7320					

CUSTOMER INFORMATION

3 2 3 6 0 6 6
 SCHROEDER ENVIRONMENTAL
 719 Montreal Pl
 De Pere, WI 54115-3668 US

BILL TO

3236066
 SCHROEDER ENVIRONMENTAL SERV
 Po Box 45
 De Pere WI US 54115-0045

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	DATE EQPT/PROD ORDERED	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
2-4-2014	051400		920-339-9970					

DEPT	SERVICE/PRODUCT	SURVEY NUMBER	UNIT PRICE	QUANTITY	CHARGE	SALES TAX	TOTAL CHARGE	CHLORINE TEST RESULTS		SK DOT NUMBER	CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS) (INITIAL)	CHANGE SCH. DATE (YY WW)	PROMO NO.	RELEASE NO.
								HALOGEN TESTER PASS / FAIL	CHLOR-D-TEST RESULTS (PPM) / TESTERS INITIALS							
1	66663	150129	0.36	500	0.36		0.36	<input type="checkbox"/>	<input type="checkbox"/>							
2	100001		17.11	1	17.11		17.11	<input type="checkbox"/>	<input type="checkbox"/>							
3								<input type="checkbox"/>	<input type="checkbox"/>							
4								<input type="checkbox"/>	<input type="checkbox"/>							
5								<input type="checkbox"/>	<input type="checkbox"/>							
6								<input type="checkbox"/>	<input type="checkbox"/>							
7								<input type="checkbox"/>	<input type="checkbox"/>							
8								<input type="checkbox"/>	<input type="checkbox"/>							
9								<input type="checkbox"/>	<input type="checkbox"/>							

TOTAL-SERVICE/PRODUCTS	TANK CAPACITY	TRANSPORTER	DATE
		Bence Haer	10/2/2014

GENERATOR STATUS: CHECK ONLY ONE BOX BELOW				MANIFEST NO.	USEPA TRANSPORTER ID NO.	PRINT NAME	SIGNATURE
GENERATOR: HAZARDOUS WASTE CLASSIFICATION *	VEHICLE FLUIDS ONLY	OTHER NON-VEHICLE FLUIDS	1 NO PREQUAL REQUIRED, NO HALOGEN TEST	17.47	WTD 988579439	Bence Haer	Bence Haer
CESQG	<input type="checkbox"/> 1	<input type="checkbox"/> 3	2 NO PREQUAL REQUIRED, HALOGEN TEST AT PICK-UP	GENERATOR/USEPA ID NO.	GENERATOR STATE ID NO.	John Gonia	John Gonia
SQG/LQG	<input type="checkbox"/> 2	<input type="checkbox"/> 4	3 PREQUAL REQUIRED, NO HALOGEN TEST				
			4 PREQUAL REQUIRED, HALOGEN TEST AT PICK-UP				
* REFER TO REVERSE SIDE FOR DEFINITIONS							

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)	12. CONTAINERS NO.	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER
Used Oil and Water (NOT US DOT Regulated Material)	1 TG	500	G	

INTERMEDIATE FACILITY NAME AND ADDRESS	USA EPA ID NO.
Safety-Kleen Systems, Inc 552 Carter Ct. Kimberly, WI	WTD 988579439
	STATE ID NO.

PAYMENT METHOD	CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:	CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION.	TOTAL DUE
CHECK NUMBER			<input type="checkbox"/> TODAY'S SERVICE/SALE	Customer certifies that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. Environmental Protection Agency and the U.S. Department of Transportation.	
INVOICE #	AMOUNT \$	INVOICE #	<input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS	ADDITIONAL TERMS AND CONDITIONS ON THE REVERSE SIDE OF THIS DOCUMENT ARE INCORPORATED HEREWITH MADE A PART HEREOF.	DO NOT WRITE IN THE AREA BELOW
PREVIOUS CREDIT CARD NO.				Print Name: Bence Haer	

CREDIT CARD NO.	AMEX VISA MC	EXP. DATE	MANIFEST CODE	SEQ #	GENERATOR/SHIPPER DESIGNATED REPRESENTATIVE SIGNATURE
					Bence Haer
CUSTOMER REFERENCE INFORMATION	IN THE EVENT OF AN EMERGENCY CALL 1-800-465-1760 (24 hours)		SEE REVERSE SIDE FOR IMPORTANT INFORMATION		



OIL RECOVERY SERVICE/SAFETY ACKNOWLEDGMENT

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

2. Page 1 of

3. Emergency Response Phone

4. Waste Tracking Number

920-766-6756

5. Generator's Name and Mailing Address

Generator's Site Address (if different than mailing address)

M/R JOHN WEBSTER RES
N 9305 CTY 984 TOWN OF ONEIDA

Generator's Phone:

920 865-7984

6. Transporter 1 Company Name

U.S. EPA ID Number

SCHROEDER ENVIRONMENTAL

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address

U.S. EPA ID Number

SAFETY KLEEN
CARTER CT, LIMBERN MI

Facility's Phone:

9. Waste Shipping Name and Description

10. Containers

11. Total Quantity

12. Unit Wt/Vol.

No.

Type

1.

NO # 2 FUEL OIL/WATER 1

500 GALLON

2.

3.

4.

13. Special Handling Instructions and Additional Information

CONTENTS FROM AN UNDEGROUND
FUEL OIL STORAGE TANK # 275 GALLON
AST - BASEMENT FUEL OIL TANK

14. GENERATOR'S CERTIFICATION: I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste.

Generator's/Officer's Printed/Typed Name

Signature

Month Day Year

GENERATOR

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Date leaving U.S.:

Transporter Signature (for exports only):

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Signature

Month Day Year

SCHROEDER ENVIRON / ESP

John J. Rose

02 04 14

Transporter 2 Printed/Typed Name

Signature

Month Day Year

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

Full Rejection

Manifest Reference Number:

U.S. EPA ID Number

DESIGNATED FACILITY

17b. Alternate Facility (or Generator)

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

JOHN WEBSTER RES

02 04 14

18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year

John CONPA

John Conpa

02 04 14

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

2. Page 1 of

3. Emergency Response Phone

4. Waste Tracking Number

5. Generator's Name and Mailing Address

Generator's Site Address (if different than mailing address)

MR JOHN WEBSTER
 N 9505 CTY - U TOWN OF ONEIDA
 GREEN BROOK NY 920-865-7984

Generator's Phone:

6. Transporter 1 Company Name

U.S. EPA ID Number

SCHROEDER ENVIRONMENTAL

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address

U.S. EPA ID Number

SAFETY KLEEN KIMBERLY LLC
 CARTER COURT

Facility's Phone:

9. Waste Shipping Name and Description

10. Containers

No.

Type

11. Total Quantity

12. Unit Wt./Vol.

1. (1) DRUM UNDERGROUND GASOLINE
 # WATER MIXTURES 50/50

1

DR

30

gallons

2.
 3. " PENDING APPROVAL FOR "
 4. PICK UP & DISPOSAL FROM @ SITE JWC

13. Special Handling Instructions and Additional Information

CONTENTS FROM AN UNDERGROUND
 UNDERGROUND GASOLINE TANK CLEANING
 300 GALLON UST

14. GENERATOR'S CERTIFICATION: I certify the materials described above are not subject to federal regulations for reporting proper disposal of Hazardous Waste.

Generator's/Officer's Printed/Typed Name

Signature

Month Day Year

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Date leaving U.S.:

Transporter Signature (for exports only):

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Signature

Month Day Year

SAFETY KLEEN

Transporter 2 Printed/Typed Name

Signature

Month Day Year

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

Full Rejection

Manifest Reference Number:

U.S. EPA ID Number

17b. Alternate Facility (or Generator)

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

JOHN WEBSTER

18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

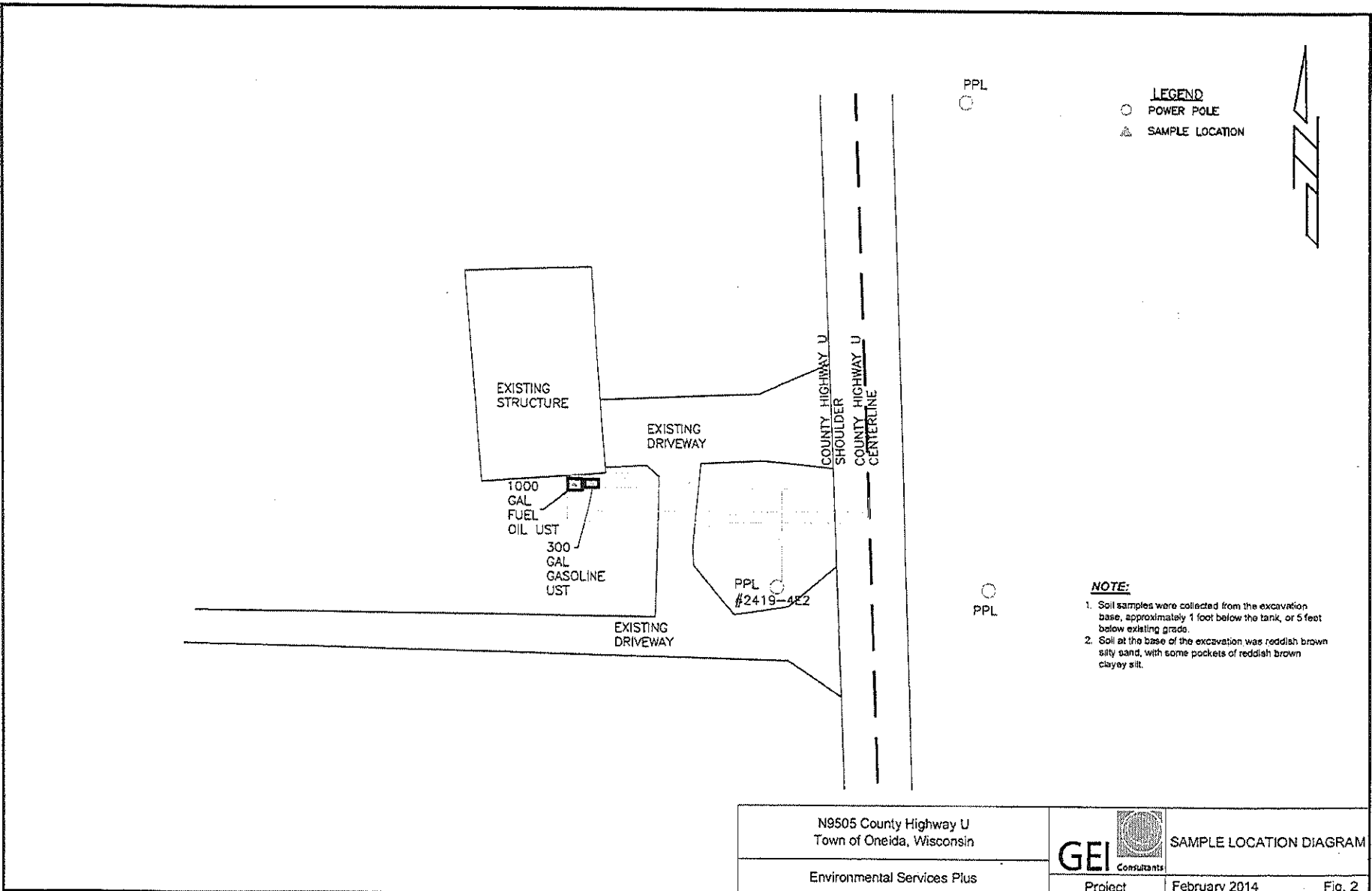
Signature


Month Day Year

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY



N9505 County Highway U Town of Oneida, Wisconsin		SAMPLE LOCATION DIAGRAM
Environmental Services Plus	Project	February 2014 Fig. 2

