

General Engineering
Company
P.O. Box 340
916 Silver Lake Drive
Portage, WI 53901



Engineers • Consultants • Inspectors

608-742-2169 (Office)
608-742-2592 (Fax)
gec@generalengineering.net
www.generalengineering.net

October 15, 2018

Mr. Ed Sindelar (e-mail)
Wisconsin Department of Agriculture, Trade, and Consumer Protection

RE: Underground Storage Tank Site Assessment
Homestead Station and Store
3610 County Road N, Town of Barnes, Wisconsin

Dear Mr. Sindelar,

Attached with this letter are the Tank System Service Closure Assessment Forms Part B, and corresponding documents, for the removal of four (4) underground storage tanks (USTs) including one 6,000-gallon diesel UST, one 3,000-gallon diesel UST, one 6,000-gallon unleaded gasoline UST, and one 10,000-gallon unleaded gasoline UST, four associated dispensers, and piping from the property located at 3610 County Road N, Town of Barnes, Bayfield County, Wisconsin. A Site Location Map and Site Plan Map are included in Appendix B.

The property is located north of County Road N, approximately 500 feet east of Barnes Road. The property is occupied by a vacant gasoline station and store. The canopy is located to the south of the structure, which covered four dispensers and piping. The former tanks were located in a common excavation just south of the canopy.

On September 24 and 25, 2018, Schaper Excavating and Petroleum of Pardeeville, Wisconsin cleaned and removed the USTs, piping, and dispensers. The USTs and piping appeared to be in good condition with no obvious indications of holes or leaks. The piping consisted of double walled flex piping, with no obvious indication of a release from the piping. Therefore, no soil samples were required beneath the piping.

As part of the UST site assessment, 17 soil samples were collected from the bottom and sidewalls of the tank excavation at depths ranging from 8 feet to 13 feet below ground surface. Four soil samples were collected beneath each dispenser at depths ranging from 3 feet to 4 feet. Groundwater was not encountered during the tank removal. The tank and dispenser soil samples were collected from natural soils consisting of brown and dark brown silty sand (dispensers) and light brown sand, trace gravel (tank excavation). There was no indication of stained soils or obvious petroleum odors from soil samples collected during the site assessment. Site Photographs are located in Appendix C. Sample locations are shown in Appendix B on the Site Plan Map.

A total of 21 soil samples were collected during the tank site assessment and analyzed by Synergy Laboratories, a State Certified Laboratory, for the presence of petroleum volatile

Underground Storage Tank Site Assessment Results
3610 County Road N
Town of Barnes, Bayfield County, Wisconsin

organic compounds (PVOCs) and naphthalene. Soil sample S-7 (the northern sample between the central gasoline and diesel tanks) reported concentrations of ethylbenzene, naphthalene, trimethylbenzenes, and xylenes below their respective NR 720 residual contaminant levels (RCLs). None of the other samples collected reported PVOC or naphthalene concentrations exceeding the laboratory limit of detection. Analytical results along with chain of custody documentation and is included in Appendix D and are summarized on Table 1 in Appendix E.

The concentrations of PVOCs and naphthalene detected at S-7 did not exceed each compound's respective NR 720 RCL in soil. No other PVOC compounds were detected in that sample or other samples collected during the tank site assessment. Therefore, it is recommended that no further assessment or investigation is required for this property, and the activity be placed on the database under NR 708.09 for No Action Required.

Please feel free to contact me if you have any further questions, or if additional information is needed.

Respectfully Submitted,

GENERAL ENGINEERING COMPANY



Brian Youngwirth
Environmental Project Manager



Lynn M. Bradley
Environmental Project Manager

Attachments:

- A – Tank Registration and System Service & Closure Assessment Forms Part A and B
- B – Figures
- C – Photographs
- D – Analytical Results and Chain of Custody Documentation
- E – Table

c: Schaper Excavating and Petroleum
WDNR – Remediation and Redevelopment, Northern Region
(carrie.stoltz@wisconsin.gov)

APPENDIX A
TANK SYSTEM CLOSURE ASSESSMENT –
PART B

Part B – To be completed by environmental professional

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

I. TANK-SYSTEM SITE ASSESSMENT (TSSA)

Site Name: Hemlock Station & Storage
 Address: 3610 County Road N, Beaver WI
 Note: Site name and address must match with Part A Section 1.

To determine if a TSSA is required, see ATCP 93 and section II part B of ASSESSMENT AND REPORTING OF SUSPECTED AND OBVIOUS RELEASES FROM UNDERGROUND AND ABOVEGROUND STORAGE TANK SYSTEMS.
 If a TSSA is required, then follow the procedures detailed in ASSESSMENT AND REPORTING OF SUSPECTED AND OBVIOUS RELEASES FROM UNDERGROUND AND ABOVEGROUND STORAGE TANK SYSTEMS.

1. Site Information

- a. Has there been a previously documented release at this site? Y N
 If yes, provide the DATCP # _____ or DNR BRRT's # _____
- b. Number of active tanks¹ at facility prior to completion of current services USTs 4 ASTs _____
 (NOTE 1: Do not include previously closed systems or system components.)
- c. Excavation/trench dimensions (in feet). (Photos must be provided.)

| EXCAVATION/TRENCH # | LENGTH | WIDTH | DEPTH |
|---------------------|------------|------------|---------------|
| <u>Tanks</u> | <u>40'</u> | <u>20'</u> | <u>11-13'</u> |
| | | | |
| | | | |
| | | | |
| | | | |

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

- Do any of the following conditions exist in or about the excavation(s)?
- a. Stained soils: Y N
 - b. Petroleum odor: Y N
 - c. Water in excavation/trench: Y N
 - d. Free product in the excavation/trench: Y N
 - e. Sheen or free product on water: Y N

3. Geology/Hydrogeology

- a. Depth to groundwater 50 feet
- b. Indicate type of geology: Sand + gravel
 (Note 2: Use these symbols individually or in combination as appropriate: C = Clay, SLT = Silt, S = Sand, Gr = Gravel)

4. Receptors

- a. Water supply well(s) within 250 feet of the facility? Y N If yes, specify behind NW corner of building
- b. Surface water(s) within 1000 feet of the facility? Y N If yes, specify _____

5. Sampling

- a. Follow the procedures detailed in ASSESSMENT AND REPORTING OF SUSPECTED AND OBVIOUS RELEASES FROM UNDERGROUND AND ABOVEGROUND STORAGE TANK SYSTEMS.
- b. Complete Tables 1 and 2 as appropriate. (Attach chain-of-custody and laboratory analytical reports.)
- c. Attach a detailed map of site features and sample locations.

J. NOTE RELEVANT OBSERVATIONS, SPECIFIC PROBLEMS OR CONCERNS BELOW

Small amount of water leaked from Sump around dispenser exit to the bottom of the excavation between central gasoline and diesel tanks

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

| Sample ID # | Sample Location & Soil/Geologic Description | Sample Collection Method | | | | Depth Below Tank/Piping (feet) Ground | Field Screening Result (ppm) | GRO (mg/kg) | DRO (mg/kg) |
|-------------|---|-------------------------------------|--------------------------|--------------------------|--------------------------|--|------------------------------|-------------|-------------|
| | | Grab | Shelby Tube | Direct Push | Split Spoon | | | | |
| D-1 | Dark Brown Silty Sand | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3 | 0 | N/A | N/A |
| D-2 | | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3 | 0 | | |
| D-3 | | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4 | 0 | | |
| D-4 | | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4 | 0 | | |
| S-1 | Light Brown Silty Sand to gravel | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 13 | 0 | | |
| S-2 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 13 | 0 | | |
| S-3 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 13 | 0 | | |
| S-4 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 13 | 0 | | |
| S-5 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 13 | 0 | | |
| S-6 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 13 | 0 | | |
| S-7 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 13 | 0 | | |
| S-8 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 13 | 0 | | |
| S-9 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 13 | 0 | | |
| S-10 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 11 | 0 | | |

TABLE 2 SOIL LABORATORY ANALYTICAL RESULTS-FOR PETROLEUM PRODUCTS

| Sample ID # | BENZENE | TOLUENE | ETHYLBENZENE | MTBE | TRIMETHYL - BENZENES (TOTAL) | XYLENES (TOTAL) | NAPHTHALENE |
|-------------|---------|---------|--------------|-------|------------------------------|-----------------|-------------|
| | ug/kg | ug/kg | ug/kg | ug/kg | ug/kg | ug/kg | ug/kg |
| D-1 | < 25 | 525 | < 25 | < 25 | < 25 | < 75 | < 25 |
| D-2 | | | | | | | |
| D-3 | | | | | | | |
| D-4 | | | | | | | |
| S-1 | | | | | | | |
| S-2 | | | | | | | |
| S-3 | | | | | | | |
| S-4 | | | | | | | |
| S-5 | | | | | | | |
| S-6 | | | | | | | |
| S-7 | | | 331 | | 139 | 222 | 188 |
| S-8 | | | < 25 | | < 25 | < 75 | < 25 |
| S-9 | | | | | | | |
| S-10 | | | | | | | |

K. TANK-SYSTEM SITE ASSESSMENT INFORMATION

- As a tank-system site assessor certified under Wis. Admin. Code section SPS 305.83, it is my opinion that there is no indication of a release of a regulated substance to the environment.
- Sampling at the site indicates there has been a release to the environment. Pursuant to Wis. Admin. Code section ATCP 93.585 (2) (a) and Wis. Stats. section 292.11 (2) (a), the owner or operator or contractor performing work under chapter ATCP 93 shall immediately report any release of a regulated substance to the Wisconsin Department of Natural Resources. Failure to do so may result in forfeitures of a minimum of \$10 and a maximum of \$5000 for each violation under Wis. Stats. section 168.26 (5). Each day of continued violation and each tank are treated as separate offenses.

Brian Youngworth
Tank-System Site Assessor Name (print)
608 697 8010
Tank-System Site Assessor Telephone Number

[Signature]
Tank-System Site Assessor Signature
10/10/18
Date Signed

401259
Certification Number #
General Engineering Company
Company Name

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

| Sample ID # | Sample Location & Soil/Geologic Description | Sample Collection Method | | | | Depth Below Tank/Piping (feet) | Field Screening Result (ppm) | GRO (mg/kg) | DRO (mg/kg) |
|-------------|---|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------------|------------------------------|-------------|-------------|
| | | Grab | Shelby Tube | Direct Push | Split Spoon | | | | |
| S-11 | Light Brown Silty Sand | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 11 | 0 | N/A | N/A |
| S-12 | ↓ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 8 | 0 | ↓ | ↓ |
| S-13 | ↓ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 8 | 0 | ↓ | ↓ |
| S-14 | ↓ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 8 | 0 | ↓ | ↓ |
| S-15 | ↓ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 8 | 0 | ↓ | ↓ |
| S-16 | ↓ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 8 | 0 | ↓ | ↓ |
| S-17 | ↓ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 8 | 0 | ↓ | ↓ |
| | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | |
| | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | |
| | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | |
| | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | |
| | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | |
| | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | |

TABLE 2 SOIL LABORATORY ANALYTICAL RESULTS-FOR PETROLEUM PRODUCTS

| Sample ID # | BENZENE | TOLUENE | ETHYLBENZENE | MTBE | TRIMETHYL - BENZENES (TOTAL) | XYLENES (TOTAL) | NAPHTHALENE |
|-------------|---------|---------|--------------|-------|------------------------------|-----------------|-------------|
| | ug/kg | ug/kg | ug/kg | ug/kg | ug/kg | ug/kg | ug/kg |
| S-11 | < 25 | < 25 | < 25 | < 25 | < 25 | < 75 | < 25 |
| S-12 | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ |
| S-13 | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ |
| S-14 | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ |
| S-15 | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ |
| S-16 | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ |
| S-17 | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ |
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K. TANK-SYSTEM SITE ASSESSMENT INFORMATION

- As a tank-system site assessor certified under Wis. Admin. Code section SPS 305.83, it is my opinion that there is no indication of a release of a regulated substance to the environment.
- Sampling at the site indicates there has been a release to the environment. Pursuant to Wis. Admin. Code section ATCP 93.585 (2) (a) and Wis. Stats. section 292.11 (2) (a), the owner or operator or contractor performing work under chapter ATCP 93 shall immediately report any release of a regulated substance to the Wisconsin Department of Natural Resources. Failure to do so may result in forfeitures of a minimum of \$10 and a maximum of \$5000 for each violation under Wis. Stats. section 168.26 (5). Each day of continued violation and each tank are treated as separate offenses.

Brian Kungurth
Tank-System Site Assessor Name (print)
608 697 7010
Tank-System Site Assessor Telephone Number

Brian Kungurth
Tank-System Site Assessor Signature
10/10/18
Date Signed

401059
Certification Number #
General Engineering Company
Company Name

APPENDIX B
SITE FIGURES/MAPS



SITE LOCATION MAP



Legend

- Open Site
- Closed Site
- Continuing Obligations Apply

0.3 0 Distance / 2 0.3 Miles

NAD_1983_HARN_Wisconsin_TM

DISCLAIMER: The information shown on these maps has been obtained from various sources, and are of varying age, reliability and resolution. These maps are not intended to be used for navigation, nor are these maps an authoritative source of information about legal land ownership or public access. No warranty, expressed or implied, is made regarding accuracy, applicability for a particular use, completeness, or legality of the information depicted on this map. For more information, see the DNR Legal Notices web page: <http://dnr.wi.gov/org/legal/>

Note: Not all sites are mapped.

1:7,920

Notes

SITE PLAN

Write a description for your map.

Legend

 3610 County Hwy N

Gasoline
Dispensers
Diesel
Dispensers

3610 County Hwy N

3,000
Diesel
WST

6,000
Diesel
WST

4,000
Gas
WST

10,000
Gas
WST



Co Hwy N

80 ft

APPENDIX C
SITE PHOTOGRAPHS



PHOTOGRAPH OF THE REMOVED DISPENSERS AND THE STRUCTURE



PHOTOGRAPH OF DISPENSER AREA



PHOTOGRAPH OF THE REMOVED DOUBLE WALL PIPING



PHOTOGRAPH OF WESTERN 10,000-GALLON GASOLINE UST



PHOTOGRAPH OF MIDDLE 4,000-GALLON GASOLINE UST



PHOTOGRAPH OF MIDDLE 6,000-GALLON DIESEL UST



PHOTOGRAPH OF EASTERN 3,000-GALLON UST



PHOTOGRAPH OF THE SOIL BENEATH DISPENSER 3-GASOLINE



PHOTOGRAPH OF SOIL BENEATH DISPENSER 1-DIESEL



PHOTOGRAPH OF EXCAVATION VIEWING SOUTH TO NORTH

APPENDIX D
ANALYTICAL RESULTS AND
CHAIN OF CUSTODY

Synergy Environmental Lab, INC

1990 Prospect Ct., Appleton, WI 54914 *P 920-830-2455 * F 920-733-0631

BRIAN YOUNGWIRTH
GENERAL ENGINEERING
916 SILVER LAKE DRIVE
PORTAGE, WI 53901

Report Date 09-Oct-18

Project Name HOMESTEAD/BARNES
Project #

Invoice # E35263

Lab Code 5035263A
Sample ID S-1 13'
Sample Matrix Soil
Sample Date 9/25/2018

| | Result | Unit | LOD | LOQ | Dil | Method | Ext Date | Run Date | Analyst | Code |
|--------------------------------|---------|-------|--------|-------|-----|------------|----------|-----------|---------|------|
| General | | | | | | | | | | |
| General | | | | | | | | | | |
| Solids Percent | 94.0 | % | | | 1 | 5021 | | 9/26/2018 | NJC | 1 |
| Organic | | | | | | | | | | |
| PVOC + Naphthalene | | | | | | | | | | |
| Benzene | < 0.025 | mg/kg | 0.0095 | 0.03 | 1 | GRO95/8021 | | 10/5/2018 | CJR | 1 |
| Ethylbenzene | < 0.025 | mg/kg | 0.016 | 0.05 | 1 | GRO95/8021 | | 10/5/2018 | CJR | 1 |
| Methyl tert-butyl ether (MTBE) | < 0.025 | mg/kg | 0.011 | 0.034 | 1 | GRO95/8021 | | 10/5/2018 | CJR | 1 |
| Naphthalene | < 0.025 | mg/kg | 0.022 | 0.07 | 1 | GRO95/8021 | | 10/5/2018 | CJR | 1 |
| Toluene | < 0.025 | mg/kg | 0.013 | 0.041 | 1 | GRO95/8021 | | 10/5/2018 | CJR | 1 |
| 1,2,4-Trimethylbenzene | < 0.025 | mg/kg | 0.019 | 0.06 | 1 | GRO95/8021 | | 10/5/2018 | CJR | 1 |
| 1,3,5-Trimethylbenzene | < 0.025 | mg/kg | 0.0096 | 0.031 | 1 | GRO95/8021 | | 10/5/2018 | CJR | 1 |
| m&p-Xylene | < 0.05 | mg/kg | 0.013 | 0.042 | 1 | GRO95/8021 | | 10/5/2018 | CJR | 1 |
| o-Xylene | < 0.025 | mg/kg | 0.0062 | 0.02 | 1 | GRO95/8021 | | 10/5/2018 | CJR | 1 |

Project Name HOMESTEAD/BARNES
Project #

Invoice # E35263

Lab Code 5035263B
Sample ID S-2 13'
Sample Matrix Soil
Sample Date 9/25/2018

| | Result | Unit | LOD | LOQ | Dil | Method | Ext Date | Run Date | Analyst | Code |
|--------------------------------|---------|-------|--------|-------|-----|------------|----------|-----------|---------|------|
| General | | | | | | | | | | |
| General | | | | | | | | | | |
| Solids Percent | 93.0 | % | | | 1 | 5021 | | 9/26/2018 | NJC | 1 |
| Organic | | | | | | | | | | |
| PVOC + Naphthalene | | | | | | | | | | |
| Benzene | < 0.025 | mg/kg | 0.0095 | 0.03 | 1 | GRO95/8021 | | 10/5/2018 | CJR | 1 |
| Ethylbenzene | < 0.025 | mg/kg | 0.016 | 0.05 | 1 | GRO95/8021 | | 10/5/2018 | CJR | 1 |
| Methyl tert-butyl ether (MTBE) | < 0.025 | mg/kg | 0.011 | 0.034 | 1 | GRO95/8021 | | 10/5/2018 | CJR | 1 |
| Naphthalene | < 0.025 | mg/kg | 0.022 | 0.07 | 1 | GRO95/8021 | | 10/5/2018 | CJR | 1 |
| Toluene | < 0.025 | mg/kg | 0.013 | 0.041 | 1 | GRO95/8021 | | 10/5/2018 | CJR | 1 |
| 1,2,4-Trimethylbenzene | < 0.025 | mg/kg | 0.019 | 0.06 | 1 | GRO95/8021 | | 10/5/2018 | CJR | 1 |
| 1,3,5-Trimethylbenzene | < 0.025 | mg/kg | 0.0096 | 0.031 | 1 | GRO95/8021 | | 10/5/2018 | CJR | 1 |
| m&p-Xylene | < 0.05 | mg/kg | 0.013 | 0.042 | 1 | GRO95/8021 | | 10/5/2018 | CJR | 1 |
| o-Xylene | < 0.025 | mg/kg | 0.0062 | 0.02 | 1 | GRO95/8021 | | 10/5/2018 | CJR | 1 |

Lab Code 5035263C
Sample ID S-3 13'
Sample Matrix Soil
Sample Date 9/25/2018

| | Result | Unit | LOD | LOQ | Dil | Method | Ext Date | Run Date | Analyst | Code |
|--------------------------------|---------|-------|--------|-------|-----|------------|----------|-----------|---------|------|
| General | | | | | | | | | | |
| General | | | | | | | | | | |
| Solids Percent | 94.3 | % | | | 1 | 5021 | | 9/26/2018 | NJC | 1 |
| Organic | | | | | | | | | | |
| PVOC + Naphthalene | | | | | | | | | | |
| Benzene | < 0.025 | mg/kg | 0.0095 | 0.03 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| Ethylbenzene | < 0.025 | mg/kg | 0.016 | 0.05 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| Methyl tert-butyl ether (MTBE) | < 0.025 | mg/kg | 0.011 | 0.034 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| Naphthalene | < 0.025 | mg/kg | 0.022 | 0.07 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| Toluene | < 0.025 | mg/kg | 0.013 | 0.041 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| 1,2,4-Trimethylbenzene | < 0.025 | mg/kg | 0.019 | 0.06 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| 1,3,5-Trimethylbenzene | < 0.025 | mg/kg | 0.0096 | 0.031 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| m&p-Xylene | < 0.05 | mg/kg | 0.013 | 0.042 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| o-Xylene | < 0.025 | mg/kg | 0.0062 | 0.02 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |

Project Name HOMESTEAD/BARNES
Project #

Invoice # E35263

Lab Code 5035263D
Sample ID S-4 13'
Sample Matrix Soil
Sample Date 9/25/2018

| | Result | Unit | LOD | LOQ | Dil | Method | Ext Date | Run Date | Analyst | Code |
|--------------------------------|---------|-------|--------|-------|-----|------------|----------|-----------|---------|------|
| General | | | | | | | | | | |
| General | | | | | | | | | | |
| Solids Percent | 93.9 | % | | | 1 | 5021 | | 9/26/2018 | NJC | 1 |
| Organic | | | | | | | | | | |
| PVOC + Naphthalene | | | | | | | | | | |
| Benzene | < 0.025 | mg/kg | 0.0095 | 0.03 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| Ethylbenzene | < 0.025 | mg/kg | 0.016 | 0.05 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| Methyl tert-butyl ether (MTBE) | < 0.025 | mg/kg | 0.011 | 0.034 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| Naphthalene | < 0.025 | mg/kg | 0.022 | 0.07 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| Toluene | < 0.025 | mg/kg | 0.013 | 0.041 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| 1,2,4-Trimethylbenzene | < 0.025 | mg/kg | 0.019 | 0.06 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| 1,3,5-Trimethylbenzene | < 0.025 | mg/kg | 0.0096 | 0.031 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| m&p-Xylene | < 0.05 | mg/kg | 0.013 | 0.042 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| o-Xylene | < 0.025 | mg/kg | 0.0062 | 0.02 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |

Lab Code 5035263E
Sample ID S-5 13'
Sample Matrix Soil
Sample Date 9/25/2018

| | Result | Unit | LOD | LOQ | Dil | Method | Ext Date | Run Date | Analyst | Code |
|--------------------------------|---------|-------|--------|-------|-----|------------|----------|-----------|---------|------|
| General | | | | | | | | | | |
| General | | | | | | | | | | |
| Solids Percent | 95.0 | % | | | 1 | 5021 | | 9/26/2018 | NJC | 1 |
| Organic | | | | | | | | | | |
| PVOC + Naphthalene | | | | | | | | | | |
| Benzene | < 0.025 | mg/kg | 0.0095 | 0.03 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| Ethylbenzene | < 0.025 | mg/kg | 0.016 | 0.05 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| Methyl tert-butyl ether (MTBE) | < 0.025 | mg/kg | 0.011 | 0.034 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| Naphthalene | < 0.025 | mg/kg | 0.022 | 0.07 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| Toluene | < 0.025 | mg/kg | 0.013 | 0.041 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| 1,2,4-Trimethylbenzene | < 0.025 | mg/kg | 0.019 | 0.06 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| 1,3,5-Trimethylbenzene | < 0.025 | mg/kg | 0.0096 | 0.031 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| m&p-Xylene | < 0.05 | mg/kg | 0.013 | 0.042 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| o-Xylene | < 0.025 | mg/kg | 0.0062 | 0.02 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |

Project Name HOMESTEAD/BARNES
Project #

Invoice # E35263

Lab Code 5035263F
Sample ID S-6 13'
Sample Matrix Soil
Sample Date 9/25/2018

| | Result | Unit | LOD | LOQ | Dil | Method | Ext Date | Run Date | Analyst | Code |
|--------------------------------|---------|-------|--------|-------|-----|------------|----------|-----------|---------|------|
| General | | | | | | | | | | |
| General | | | | | | | | | | |
| Solids Percent | 93.3 | % | | | 1 | 5021 | | 9/26/2018 | NJC | 1 |
| Organic | | | | | | | | | | |
| PVOC + Naphthalene | | | | | | | | | | |
| Benzene | < 0.025 | mg/kg | 0.0095 | 0.03 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| Ethylbenzene | < 0.025 | mg/kg | 0.016 | 0.05 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| Methyl tert-butyl ether (MTBE) | < 0.025 | mg/kg | 0.011 | 0.034 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| Naphthalene | < 0.025 | mg/kg | 0.022 | 0.07 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| Toluene | < 0.025 | mg/kg | 0.013 | 0.041 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| 1,2,4-Trimethylbenzene | < 0.025 | mg/kg | 0.019 | 0.06 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| 1,3,5-Trimethylbenzene | < 0.025 | mg/kg | 0.0096 | 0.031 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| m&p-Xylene | < 0.05 | mg/kg | 0.013 | 0.042 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| o-Xylene | < 0.025 | mg/kg | 0.0062 | 0.02 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |

Lab Code 5035263G
Sample ID S-7 13'
Sample Matrix Soil
Sample Date 9/25/2018

| | Result | Unit | LOD | LOQ | Dil | Method | Ext Date | Run Date | Analyst | Code |
|--------------------------------|-----------|-------|--------|-------|-----|------------|----------|-----------|---------|------|
| General | | | | | | | | | | |
| General | | | | | | | | | | |
| Solids Percent | 92.5 | % | | | 1 | 5021 | | 9/26/2018 | NJC | 1 |
| Organic | | | | | | | | | | |
| PVOC + Naphthalene | | | | | | | | | | |
| Benzene | < 0.025 | mg/kg | 0.0095 | 0.03 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| Ethylbenzene | 0.033 "J" | mg/kg | 0.016 | 0.05 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| Methyl tert-butyl ether (MTBE) | < 0.025 | mg/kg | 0.011 | 0.034 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| Naphthalene | 0.188 | mg/kg | 0.022 | 0.07 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| Toluene | < 0.025 | mg/kg | 0.013 | 0.041 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| 1,2,4-Trimethylbenzene | 0.103 | mg/kg | 0.019 | 0.06 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| 1,3,5-Trimethylbenzene | 0.036 | mg/kg | 0.0096 | 0.031 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| m&p-Xylene | 0.143 | mg/kg | 0.013 | 0.042 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |
| o-Xylene | 0.079 | mg/kg | 0.0062 | 0.02 | 1 | GRO95/8021 | | 10/6/2018 | CJR | 1 |

Project Name HOMESTEAD/BARNES
Project #

Invoice # E35263

Lab Code 5035263H
Sample ID S-8 13'
Sample Matrix Soil
Sample Date 9/25/2018

| | Result | Unit | LOD | LOQ | Dil | Method | Ext Date | Run Date | Analyst | Code |
|--------------------------------|---------|-------|--------|-------|-----|------------|----------|-----------|---------|------|
| General | | | | | | | | | | |
| General | | | | | | | | | | |
| Solids Percent | 90.4 | % | | | 1 | 5021 | | 9/26/2018 | NJC | 1 |
| Organic | | | | | | | | | | |
| PVOC + Naphthalene | | | | | | | | | | |
| Benzene | < 0.025 | mg/kg | 0.0095 | 0.03 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Ethylbenzene | < 0.025 | mg/kg | 0.016 | 0.05 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Methyl tert-butyl ether (MTBE) | < 0.025 | mg/kg | 0.011 | 0.034 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Naphthalene | < 0.025 | mg/kg | 0.022 | 0.07 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Toluene | < 0.025 | mg/kg | 0.013 | 0.041 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| 1,2,4-Trimethylbenzene | < 0.025 | mg/kg | 0.019 | 0.06 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| 1,3,5-Trimethylbenzene | < 0.025 | mg/kg | 0.0096 | 0.031 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| m&p-Xylene | < 0.05 | mg/kg | 0.013 | 0.042 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| o-Xylene | < 0.025 | mg/kg | 0.0062 | 0.02 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |

Lab Code 50352631
Sample ID S-9 13'
Sample Matrix Soil
Sample Date 9/25/2018

| | Result | Unit | LOD | LOQ | Dil | Method | Ext Date | Run Date | Analyst | Code |
|--------------------------------|---------|-------|--------|-------|-----|------------|----------|-----------|---------|------|
| General | | | | | | | | | | |
| General | | | | | | | | | | |
| Solids Percent | 95.5 | % | | | 1 | 5021 | | 9/26/2018 | NJC | 1 |
| Organic | | | | | | | | | | |
| PVOC + Naphthalene | | | | | | | | | | |
| Benzene | < 0.025 | mg/kg | 0.0095 | 0.03 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Ethylbenzene | < 0.025 | mg/kg | 0.016 | 0.05 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Methyl tert-butyl ether (MTBE) | < 0.025 | mg/kg | 0.011 | 0.034 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Naphthalene | < 0.025 | mg/kg | 0.022 | 0.07 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Toluene | < 0.025 | mg/kg | 0.013 | 0.041 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| 1,2,4-Trimethylbenzene | < 0.025 | mg/kg | 0.019 | 0.06 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| 1,3,5-Trimethylbenzene | < 0.025 | mg/kg | 0.0096 | 0.031 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| m&p-Xylene | < 0.05 | mg/kg | 0.013 | 0.042 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| o-Xylene | < 0.025 | mg/kg | 0.0062 | 0.02 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |

Project Name HOMESTEAD/BARNES
Project #

Invoice # E35263

Lab Code 5035263J
Sample ID S-10 11'
Sample Matrix Soil
Sample Date 9/25/2018

| | Result | Unit | LOD | LOQ | Dil | Method | Ext Date | Run Date | Analyst | Code |
|--------------------------------|---------|-------|--------|-------|-----|------------|----------|-----------|---------|------|
| General | | | | | | | | | | |
| General | | | | | | | | | | |
| Solids Percent | 94.6 | % | | | 1 | 5021 | | 9/26/2018 | NJC | 1 |
| Organic | | | | | | | | | | |
| PVOC + Naphthalene | | | | | | | | | | |
| Benzene | < 0.025 | mg/kg | 0.0095 | 0.03 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Ethylbenzene | < 0.025 | mg/kg | 0.016 | 0.05 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Methyl tert-butyl ether (MTBE) | < 0.025 | mg/kg | 0.011 | 0.034 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Naphthalene | < 0.025 | mg/kg | 0.022 | 0.07 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Toluene | < 0.025 | mg/kg | 0.013 | 0.041 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| 1,2,4-Trimethylbenzene | < 0.025 | mg/kg | 0.019 | 0.06 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| 1,3,5-Trimethylbenzene | < 0.025 | mg/kg | 0.0096 | 0.031 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| m&p-Xylene | < 0.05 | mg/kg | 0.013 | 0.042 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| o-Xylene | < 0.025 | mg/kg | 0.0062 | 0.02 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |

Lab Code 5035263K
Sample ID S-11 11'
Sample Matrix Soil
Sample Date 9/25/2018

| | Result | Unit | LOD | LOQ | Dil | Method | Ext Date | Run Date | Analyst | Code |
|--------------------------------|---------|-------|--------|-------|-----|------------|----------|-----------|---------|------|
| General | | | | | | | | | | |
| General | | | | | | | | | | |
| Solids Percent | 92.0 | % | | | 1 | 5021 | | 9/26/2018 | NJC | 1 |
| Organic | | | | | | | | | | |
| PVOC + Naphthalene | | | | | | | | | | |
| Benzene | < 0.025 | mg/kg | 0.0095 | 0.03 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Ethylbenzene | < 0.025 | mg/kg | 0.016 | 0.05 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Methyl tert-butyl ether (MTBE) | < 0.025 | mg/kg | 0.011 | 0.034 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Naphthalene | < 0.025 | mg/kg | 0.022 | 0.07 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Toluene | < 0.025 | mg/kg | 0.013 | 0.041 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| 1,2,4-Trimethylbenzene | < 0.025 | mg/kg | 0.019 | 0.06 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| 1,3,5-Trimethylbenzene | < 0.025 | mg/kg | 0.0096 | 0.031 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| m&p-Xylene | < 0.05 | mg/kg | 0.013 | 0.042 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| o-Xylene | < 0.025 | mg/kg | 0.0062 | 0.02 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |

Project Name HOMESTEAD/BARNES
Project #

Invoice # E35263

Lab Code 5035263L
Sample ID S-12 8'
Sample Matrix Soil
Sample Date 9/25/2018

| | Result | Unit | LOD | LOQ | Dil | Method | Ext Date | Run Date | Analyst | Code |
|--------------------------------|---------|-------|--------|-------|-----|------------|----------|-----------|---------|------|
| General | | | | | | | | | | |
| General | | | | | | | | | | |
| Solids Percent | 91.8 | % | | | 1 | 5021 | | 9/26/2018 | NJC | 1 |
| Organic | | | | | | | | | | |
| PVOC + Naphthalene | | | | | | | | | | |
| Benzene | < 0.025 | mg/kg | 0.0095 | 0.03 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Ethylbenzene | < 0.025 | mg/kg | 0.016 | 0.05 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Methyl tert-butyl ether (MTBE) | < 0.025 | mg/kg | 0.011 | 0.034 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Naphthalene | < 0.025 | mg/kg | 0.022 | 0.07 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Toluene | < 0.025 | mg/kg | 0.013 | 0.041 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| 1,2,4-Trimethylbenzene | < 0.025 | mg/kg | 0.019 | 0.06 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| 1,3,5-Trimethylbenzene | < 0.025 | mg/kg | 0.0096 | 0.031 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| m&p-Xylene | < 0.05 | mg/kg | 0.013 | 0.042 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| o-Xylene | < 0.025 | mg/kg | 0.0062 | 0.02 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |

Lab Code 5035263M
Sample ID S-13 8'
Sample Matrix Soil
Sample Date 9/25/2018

| | Result | Unit | LOD | LOQ | Dil | Method | Ext Date | Run Date | Analyst | Code |
|--------------------------------|---------|-------|--------|-------|-----|------------|----------|-----------|---------|------|
| General | | | | | | | | | | |
| General | | | | | | | | | | |
| Solids Percent | 95.6 | % | | | 1 | 5021 | | 9/26/2018 | NJC | 1 |
| Organic | | | | | | | | | | |
| PVOC + Naphthalene | | | | | | | | | | |
| Benzene | < 0.025 | mg/kg | 0.0095 | 0.03 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Ethylbenzene | < 0.025 | mg/kg | 0.016 | 0.05 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Methyl tert-butyl ether (MTBE) | < 0.025 | mg/kg | 0.011 | 0.034 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Naphthalene | < 0.025 | mg/kg | 0.022 | 0.07 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Toluene | < 0.025 | mg/kg | 0.013 | 0.041 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| 1,2,4-Trimethylbenzene | < 0.025 | mg/kg | 0.019 | 0.06 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| 1,3,5-Trimethylbenzene | < 0.025 | mg/kg | 0.0096 | 0.031 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| m&p-Xylene | < 0.05 | mg/kg | 0.013 | 0.042 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| o-Xylene | < 0.025 | mg/kg | 0.0062 | 0.02 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |

Project Name HOMESTEAD/BARNES
Project #

Invoice # E35263

Lab Code 5035263N
Sample ID S-14 8'
Sample Matrix Soil
Sample Date 9/25/2018

| | Result | Unit | LOD | LOQ | Dil | Method | Ext Date | Run Date | Analyst | Code |
|--------------------------------|---------|-------|--------|-------|-----|------------|----------|-----------|---------|------|
| General | | | | | | | | | | |
| General | | | | | | | | | | |
| Solids Percent | 88.8 | % | | | 1 | 5021 | | 9/26/2018 | NJC | 1 |
| Organic | | | | | | | | | | |
| PVOC + Naphthalene | | | | | | | | | | |
| Benzene | < 0.025 | mg/kg | 0.0095 | 0.03 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Ethylbenzene | < 0.025 | mg/kg | 0.016 | 0.05 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Methyl tert-butyl ether (MTBE) | < 0.025 | mg/kg | 0.011 | 0.034 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Naphthalene | < 0.025 | mg/kg | 0.022 | 0.07 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Toluene | < 0.025 | mg/kg | 0.013 | 0.041 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| 1,2,4-Trimethylbenzene | < 0.025 | mg/kg | 0.019 | 0.06 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| 1,3,5-Trimethylbenzene | < 0.025 | mg/kg | 0.0096 | 0.031 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| m&p-Xylene | < 0.05 | mg/kg | 0.013 | 0.042 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| o-Xylene | < 0.025 | mg/kg | 0.0062 | 0.02 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |

Lab Code 5035263O
Sample ID S-15 8'
Sample Matrix Soil
Sample Date 9/25/2018

| | Result | Unit | LOD | LOQ | Dil | Method | Ext Date | Run Date | Analyst | Code |
|--------------------------------|---------|-------|--------|-------|-----|------------|----------|-----------|---------|------|
| General | | | | | | | | | | |
| General | | | | | | | | | | |
| Solids Percent | 93.3 | % | | | 1 | 5021 | | 9/26/2018 | NJC | 1 |
| Organic | | | | | | | | | | |
| PVOC + Naphthalene | | | | | | | | | | |
| Benzene | < 0.025 | mg/kg | 0.0095 | 0.03 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Ethylbenzene | < 0.025 | mg/kg | 0.016 | 0.05 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Methyl tert-butyl ether (MTBE) | < 0.025 | mg/kg | 0.011 | 0.034 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Naphthalene | < 0.025 | mg/kg | 0.022 | 0.07 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Toluene | < 0.025 | mg/kg | 0.013 | 0.041 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| 1,2,4-Trimethylbenzene | < 0.025 | mg/kg | 0.019 | 0.06 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| 1,3,5-Trimethylbenzene | < 0.025 | mg/kg | 0.0096 | 0.031 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| m&p-Xylene | < 0.05 | mg/kg | 0.013 | 0.042 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| o-Xylene | < 0.025 | mg/kg | 0.0062 | 0.02 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |

Project Name HOMESTEAD/BARNES
Project #

Invoice # E35263

Lab Code 5035263P
Sample ID S-16 8'
Sample Matrix Soil
Sample Date 9/25/2018

| | Result | Unit | LOD | LOQ | Dil | Method | Ext Date | Run Date | Analyst | Code |
|--------------------------------|---------|-------|--------|-------|-----|------------|----------|-----------|---------|------|
| General | | | | | | | | | | |
| General | | | | | | | | | | |
| Solids Percent | 95.3 | % | | | 1 | 5021 | | 9/26/2018 | NJC | 1 |
| Organic | | | | | | | | | | |
| PVOC + Naphthalene | | | | | | | | | | |
| Benzene | < 0.025 | mg/kg | 0.0095 | 0.03 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Ethylbenzene | < 0.025 | mg/kg | 0.016 | 0.05 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Methyl tert-butyl ether (MTBE) | < 0.025 | mg/kg | 0.011 | 0.034 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Naphthalene | < 0.025 | mg/kg | 0.022 | 0.07 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Toluene | < 0.025 | mg/kg | 0.013 | 0.041 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| 1,2,4-Trimethylbenzene | < 0.025 | mg/kg | 0.019 | 0.06 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| 1,3,5-Trimethylbenzene | < 0.025 | mg/kg | 0.0096 | 0.031 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| m&p-Xylene | < 0.05 | mg/kg | 0.013 | 0.042 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| o-Xylene | < 0.025 | mg/kg | 0.0062 | 0.02 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |

Lab Code 5035263Q
Sample ID S-17 8'
Sample Matrix Soil
Sample Date 9/25/2018

| | Result | Unit | LOD | LOQ | Dil | Method | Ext Date | Run Date | Analyst | Code |
|--------------------------------|---------|-------|--------|-------|-----|------------|----------|-----------|---------|------|
| General | | | | | | | | | | |
| General | | | | | | | | | | |
| Solids Percent | 93.9 | % | | | 1 | 5021 | | 9/26/2018 | NJC | 1 |
| Organic | | | | | | | | | | |
| PVOC + Naphthalene | | | | | | | | | | |
| Benzene | < 0.025 | mg/kg | 0.0095 | 0.03 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Ethylbenzene | < 0.025 | mg/kg | 0.016 | 0.05 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Methyl tert-butyl ether (MTBE) | < 0.025 | mg/kg | 0.011 | 0.034 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Naphthalene | < 0.025 | mg/kg | 0.022 | 0.07 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Toluene | < 0.025 | mg/kg | 0.013 | 0.041 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| 1,2,4-Trimethylbenzene | < 0.025 | mg/kg | 0.019 | 0.06 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| 1,3,5-Trimethylbenzene | < 0.025 | mg/kg | 0.0096 | 0.031 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| m&p-Xylene | < 0.05 | mg/kg | 0.013 | 0.042 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| o-Xylene | < 0.025 | mg/kg | 0.0062 | 0.02 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |

Project Name HOMESTEAD/BARNES
Project #

Invoice # E35263

Lab Code 5035263R
Sample ID D-1 3'
Sample Matrix Soil
Sample Date 9/25/2018

| | Result | Unit | LOD | LOQ | Dil | Method | Ext Date | Run Date | Analyst | Code |
|--------------------------------|---------|-------|--------|-------|-----|------------|----------|-----------|---------|------|
| General | | | | | | | | | | |
| General | | | | | | | | | | |
| Solids Percent | 90.9 | % | | | 1 | 5021 | | 9/26/2018 | NJC | 1 |
| Organic | | | | | | | | | | |
| PVOC + Naphthalene | | | | | | | | | | |
| Benzene | < 0.025 | mg/kg | 0.0095 | 0.03 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Ethylbenzene | < 0.025 | mg/kg | 0.016 | 0.05 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Methyl tert-butyl ether (MTBE) | < 0.025 | mg/kg | 0.011 | 0.034 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Naphthalene | < 0.025 | mg/kg | 0.022 | 0.07 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| Toluene | < 0.025 | mg/kg | 0.013 | 0.041 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| 1,2,4-Trimethylbenzene | < 0.025 | mg/kg | 0.019 | 0.06 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| 1,3,5-Trimethylbenzene | < 0.025 | mg/kg | 0.0096 | 0.031 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| m&p-Xylene | < 0.05 | mg/kg | 0.013 | 0.042 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |
| o-Xylene | < 0.025 | mg/kg | 0.0062 | 0.02 | 1 | GRO95/8021 | | 10/8/2018 | CJR | 1 |

Lab Code 5035263S
Sample ID D-2 3'
Sample Matrix Soil
Sample Date 9/25/2018

| | Result | Unit | LOD | LOQ | Dil | Method | Ext Date | Run Date | Analyst | Code |
|--------------------------------|---------|-------|--------|-------|-----|------------|----------|-----------|---------|------|
| General | | | | | | | | | | |
| General | | | | | | | | | | |
| Solids Percent | 93.8 | % | | | 1 | 5021 | | 9/26/2018 | NJC | 1 |
| Organic | | | | | | | | | | |
| PVOC + Naphthalene | | | | | | | | | | |
| Benzene | < 0.025 | mg/kg | 0.0095 | 0.03 | 1 | GRO95/8021 | | 10/9/2018 | CJR | 1 |
| Ethylbenzene | < 0.025 | mg/kg | 0.016 | 0.05 | 1 | GRO95/8021 | | 10/9/2018 | CJR | 1 |
| Methyl tert-butyl ether (MTBE) | < 0.025 | mg/kg | 0.011 | 0.034 | 1 | GRO95/8021 | | 10/9/2018 | CJR | 1 |
| Naphthalene | < 0.025 | mg/kg | 0.022 | 0.07 | 1 | GRO95/8021 | | 10/9/2018 | CJR | 1 |
| Toluene | < 0.025 | mg/kg | 0.013 | 0.041 | 1 | GRO95/8021 | | 10/9/2018 | CJR | 1 |
| 1,2,4-Trimethylbenzene | < 0.025 | mg/kg | 0.019 | 0.06 | 1 | GRO95/8021 | | 10/9/2018 | CJR | 1 |
| 1,3,5-Trimethylbenzene | < 0.025 | mg/kg | 0.0096 | 0.031 | 1 | GRO95/8021 | | 10/9/2018 | CJR | 1 |
| m&p-Xylene | < 0.05 | mg/kg | 0.013 | 0.042 | 1 | GRO95/8021 | | 10/9/2018 | CJR | 1 |
| o-Xylene | < 0.025 | mg/kg | 0.0062 | 0.02 | 1 | GRO95/8021 | | 10/9/2018 | CJR | 1 |

Project Name HOMESTEAD/BARNES
Project #

Invoice # E35263

Lab Code 5035263T
Sample ID D-3 4'
Sample Matrix Soil
Sample Date 9/25/2018

| | Result | Unit | LOD | LOQ | Dil | Method | Ext Date | Run Date | Analyst | Code |
|--------------------------------|---------|-------|--------|-------|-----|------------|----------|-----------|---------|------|
| General | | | | | | | | | | |
| General | | | | | | | | | | |
| Solids Percent | 94.2 | % | | | 1 | 5021 | | 9/26/2018 | NJC | 1 |
| Organic | | | | | | | | | | |
| PVOC + Naphthalene | | | | | | | | | | |
| Benzene | < 0.025 | mg/kg | 0.0095 | 0.03 | 1 | GRO95/8021 | | 10/9/2018 | CJR | 1 |
| Ethylbenzene | < 0.025 | mg/kg | 0.016 | 0.05 | 1 | GRO95/8021 | | 10/9/2018 | CJR | 1 |
| Methyl tert-butyl ether (MTBE) | < 0.025 | mg/kg | 0.011 | 0.034 | 1 | GRO95/8021 | | 10/9/2018 | CJR | 1 |
| Naphthalene | < 0.025 | mg/kg | 0.022 | 0.07 | 1 | GRO95/8021 | | 10/9/2018 | CJR | 1 |
| Toluene | < 0.025 | mg/kg | 0.013 | 0.041 | 1 | GRO95/8021 | | 10/9/2018 | CJR | 1 |
| 1,2,4-Trimethylbenzene | < 0.025 | mg/kg | 0.019 | 0.06 | 1 | GRO95/8021 | | 10/9/2018 | CJR | 1 |
| 1,3,5-Trimethylbenzene | < 0.025 | mg/kg | 0.0096 | 0.031 | 1 | GRO95/8021 | | 10/9/2018 | CJR | 1 |
| m&p-Xylene | < 0.05 | mg/kg | 0.013 | 0.042 | 1 | GRO95/8021 | | 10/9/2018 | CJR | 1 |
| o-Xylene | < 0.025 | mg/kg | 0.0062 | 0.02 | 1 | GRO95/8021 | | 10/9/2018 | CJR | 1 |

Lab Code 5035263U
Sample ID D-4 4'
Sample Matrix Soil
Sample Date 9/25/2018

| | Result | Unit | LOD | LOQ | Dil | Method | Ext Date | Run Date | Analyst | Code |
|--------------------------------|---------|-------|--------|-------|-----|------------|----------|-----------|---------|------|
| General | | | | | | | | | | |
| General | | | | | | | | | | |
| Solids Percent | 91.7 | % | | | 1 | 5021 | | 9/26/2018 | NJC | 1 |
| Organic | | | | | | | | | | |
| PVOC + Naphthalene | | | | | | | | | | |
| Benzene | < 0.025 | mg/kg | 0.0095 | 0.03 | 1 | GRO95/8021 | | 10/9/2018 | CJR | 1 |
| Ethylbenzene | < 0.025 | mg/kg | 0.016 | 0.05 | 1 | GRO95/8021 | | 10/9/2018 | CJR | 1 |
| Methyl tert-butyl ether (MTBE) | < 0.025 | mg/kg | 0.011 | 0.034 | 1 | GRO95/8021 | | 10/9/2018 | CJR | 1 |
| Naphthalene | < 0.025 | mg/kg | 0.022 | 0.07 | 1 | GRO95/8021 | | 10/9/2018 | CJR | 1 |
| Toluene | < 0.025 | mg/kg | 0.013 | 0.041 | 1 | GRO95/8021 | | 10/9/2018 | CJR | 1 |
| 1,2,4-Trimethylbenzene | < 0.025 | mg/kg | 0.019 | 0.06 | 1 | GRO95/8021 | | 10/9/2018 | CJR | 1 |
| 1,3,5-Trimethylbenzene | < 0.025 | mg/kg | 0.0096 | 0.031 | 1 | GRO95/8021 | | 10/9/2018 | CJR | 1 |
| m&p-Xylene | < 0.05 | mg/kg | 0.013 | 0.042 | 1 | GRO95/8021 | | 10/9/2018 | CJR | 1 |
| o-Xylene | < 0.025 | mg/kg | 0.0062 | 0.02 | 1 | GRO95/8021 | | 10/9/2018 | CJR | 1 |

"J" Flag: Analyte detected between LOD and LOQ LOD Limit of Detection LOQ Limit of Quantitation

| <i>Code</i> | <i>Comment</i> |
|-------------|------------------------------|
| 1 | Laboratory QC within limits. |

All solid sample results reported on a dry weight basis unless otherwise indicated. All LOD's and LOQ's are adjusted for dilutions but not dry weight. Subcontracted results are denoted by SUB in the analyst field.

Authorized Signature



A handwritten signature in blue ink, appearing to read "Michael P. ...", is written over a horizontal line.

Synergy

Environmental Lab, Inc.

1990 Prospect Ct. • Appleton, WI 54914
920-830-2455 • FAX 920-733-0631

Chain # **No 3520**

Page 1 of 4

Sample Handling Request

Rush Analysis Date Required _____
(Rushes accepted only with prior authorization)

Normal Turn Around _____

Lab I.D. # _____
Account No.: _____ Quote No.: _____
Project #: _____
Sampler: (signature) B. Jones

Project (Name / Location): Homestead / Burnes
Reports To: Brian Youngblood Invoice To: _____
Company: CEC Company: _____
Address: 916 Silver Lake Dr Address: CEC
City State Zip: Portage WI 53901 City State Zip: _____
Phone: 608 697 8010 Phone: _____
FAX: _____ FAX: _____

| Analysis Requested | | | | | | | | | | | | Other Analysis | | | |
|----------------------|----------------------|------|-----------------|--------------|----------------|-----|-----------------|--------------------|---------|------------------------|--------------------|----------------|---------------|-------------|--|
| DRO (Mod DRO Sep 95) | GRO (Mod GRO Sep 95) | LEAD | NITRATE/NITRITE | OIL & GREASE | PAH (EPA 8270) | PCB | PVOC (EPA 8021) | PVOC + NAPHTHALENE | SULFATE | TOTAL SUSPENDED SOLIDS | VOC DW (EPA 524.2) | VOC (EPA 8260) | 8-RCRA METALS | PID/ FID | |
| | | | | | | | | X | | | | | | | |
| | | | | | | | | | | | | | | | |
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| | | | | | | | | | | | | | | | |

| Lab I.D. | Sample I.D. | Collection Date | Time | Comp | Grab | Filtered Y/N | No. of Containers | Sample Type (Matrix)* | Preservation |
|-----------|-------------|-----------------|---------|------|------|--------------|-------------------|-----------------------|--------------|
| S025263 A | S-1 | 13' | 9/25/18 | am | | Y | 2 | S | min 1 liter |
| B | S-2 | 13' | | | | | | | |
| C | S-3 | 13' | | | | | | | |
| D | S-4 | 13' | | | | | | | |
| E | S-5 | 13' | | | | | | | |
| F | S-6 | 13' | | | | | | | |
| G | S-7 | 13' | | | | | | | |
| H | S-8 | 13' | | | | | | | |
| I | S-9 | 13' | | | | | | | |
| J | S-10 | 11' | | | | | | | |

Comments/Special Instructions (*Specify groundwater "GW", Drinking Water "DW", Waste Water "WW", Soil "S", Air "A", Oil, Sludge etc.)

Sample Integrity - To be completed by receiving lab.
Method of Shipment: chill
Temp. of Temp. Blank _____ °C On Ice:
Cooler seal intact upon receipt: Yes No

Relinquished By: (signature) [Signature] Time _____ Date 9/25/18
Received By: (signature) [Signature] Time Billis Date 9/26/18

Received in Laboratory By: [Signature] Time _____ Date _____

CHAIN OF STUDY RECORD

Synergy

Chain # No 357 1

Page 2 of 2

Environmental Lab, Inc.

1990 Prospect Ct. • Appleton, WI 54914
920-830-2455 • FAX 920-733-0631

Sample Handling Request

____ Rush Analysis Date Required
(Rushes accepted only with prior authorization)

____ Normal Turn Around

Lab I.D. # _____
Account No. : _____ Quote No.: _____
Project #: _____
Sampler: (signature) *[Signature]*

Project (Name / Location): *Homesfield / Barnes*
Reports To: _____ Invoice To: _____
Company: _____ Company: *CLGEC*
Address: *SPP 1* Address: _____
City State Zip: _____ City State Zip: _____
Phone: _____ Phone: _____
FAX: _____ FAX: _____

| Analysis Requested | | | | | | | | | | Other Analysis | | | | | | | | | | |
|----------------------|----------------------|------|-----------------|--------------|----------------|-----|-----------------|--------------------|---------|------------------------|--------------------|----------------|---------------|----------|--|--|--|--|--|--|
| DRO (Mod DRO Sep 95) | GRO (Mod GRO Sep 95) | LEAD | NITRATE/NITRITE | OIL & GREASE | PAH (EPA 8270) | PCB | PVOC (EPA 8021) | PVOC + NAPHTHALENE | SULFATE | TOTAL SUSPENDED SOLIDS | VOC DW (EPA 524.2) | VOC (EPA 8260) | 8-RCRA METALS | PID/ FID | | | | | | |
| | | | | | | | | X | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | |
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| Lab I.D. | Sample I.D. | Collection Date | Time | Comp | Grab | Filtered Y/N | No. of Containers | Sample Type (Matrix)* | Preservation |
|----------|-------------|-----------------|------|------|------|--------------|-------------------|-----------------------|--------------|
| S055263k | S-11 11' | 9/25/18 | Am | | X | | 2 | S | make 1 more |
| L | S-12 8' | | | | | | | | |
| M | S-13 8' | | | | | | | | |
| N | S-14 8' | | | | | | | | |
| O | S-15 8' | | | | | | | | |
| P | S-16 8' | | | | | | | | |
| Q | S-17 8' | | | | | | | | |
| R | D-1 3' | | | | | | | | |
| S | D-2 3' | | | | | | | | |
| T | D-3 4' | | | | | | | | |
| U | D-4 4' | | | | | | | | |

Comments/Special Instructions (*Specify groundwater "GW", Drinking Water "DW", Waste Water "WW", Soil "S", Air "A", Oil, Sludge etc.)

Sample Integrity - To be completed by receiving lab.
Method of Shipment: *CLT*
Temp. of Temp. Blank ____ °C On Ice:
Cooler seal intact upon receipt: Yes ____ No

Relinquished By: (sign) *[Signature]* Time _____ Date *9/26/18*
Received By: (sign) _____ Time _____ Date _____
Received in Laboratory By: *Nick Chubb* Time: *8:45* Date: *9/26/18*

APPENDIX E
TABLE

**TABLE 1
SOIL ANALYTICAL RESULTS TABLE
HOMESTEAD STATION AND STORE
GEC PROJECT # 2-0118-47K**

| Sample No. | NR 720 Cancer RCL Non- Industrial | NR 720 Non- Industrial Direct Contact RCL | WDNR Soil to Groundwater RCL | S-1 | S-2 | S-3 | S-4 | S-5 | S-6 | S-7 | S-8 | S-9 | SS-10 | S-11 |
|---|--|--|------------------------------------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| | | | | 9/25/2018 | 9/25/2018 | 9/25/2018 | 9/25/2018 | 9/25/2018 | 9/25/2018 | 9/25/2018 | 9/25/2018 | 9/25/2018 | 9/25/2018 | 9/25/2018 |
| Sample Depth (feet) | | | | 13 | 13 | 13 | 13 | 13 | 13 | 13 | 13 | 13 | 11 | 11 |
| Saturated/Unsaturated | | | | U | U | U | U | U | U | U | U | U | U | U |
| PETROLEUM VOLATILE ORGANIC COMPOUNDS (PVOCs) (µg/kg) | | | | | | | | | | | | | | |
| Benzene | 1600 | 1600 | 5.1 | <25 | <25 | <25 | <25 | <25 | <25 | <25 | <25 | <25 | <25 | <25 |
| Ethylbenzene | 8020 | 8020 | 1570 | <25 | <25 | <25 | <25 | <25 | <25 | 33J | <25 | <25 | <25 | <25 |
| Methyl tert-butyl ether | 63800 | 63800 | 27 | <25 | <25 | <25 | <25 | <25 | <25 | <25 | <25 | <25 | <25 | <25 |
| Naphthalene | 5520 | 5520 | 658 | <25 | <25 | <25 | <25 | <25 | <25 | 188 | <25 | <25 | <25 | <25 |
| Toluene | NE | 818000 | 1107 | <25 | <25 | <25 | <25 | <25 | <25 | <25 | <25 | <25 | <25 | <25 |
| 1,2,4-Trimethylbenzene | NE | 219000 | 1382 | <25 | <25 | <25 | <25 | <25 | <25 | 103 | <25 | <25 | <25 | <25 |
| 1,3,5-Trimethylbenzene | NE | 182000 | | <25 | <25 | <25 | <25 | <25 | <25 | 36 | <25 | <25 | <25 | <25 |
| Xylenes, -m, -p | NE | 260000 | 3960 | <75 | <75 | <75 | <75 | <75 | <75 | 222 | <75 | <75 | <75 | <75 |
| Xylenes, -o | | | | <75 | <75 | <75 | <75 | <75 | <75 | <75 | <75 | <75 | <75 | <75 |

J = Analyte detected above laboratory limit of detection but below limit of quantitation.
 Bold indicates analytical results exceed NR 720 RCL.
 RCL = Residual Contaminant Level
 DCL = Direct-Contact Levels
 NA = Parameter not analyzed
 NE = NR 720 RCL not established

**TABLE 1
SOIL ANALYTICAL RESULTS TABLE
HOMESTEAD STATION AND STORE
GEC PROJECT # 2-0117-48K**

| Sample No. | NR 720 Cancer RCL Non- Industrial | NR 720 Non- Industrial Direct Contact RCL | WDNR Soil to Groundwater RCL | S-12 | S-13 | S-14 | S-15 | S-16 | S-17 | D-1 | D-2 | D-3 | D-4 |
|---|--|--|------------------------------------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| | | | | 9/25/2018 | 9/25/2018 | 9/25/2018 | 9/25/2018 | 9/25/2018 | 9/25/2018 | 9/25/2018 | 9/25/2018 | 9/25/2018 | 9/25/2018 |
| Sample Depth (feet) | | | | 8 | 8 | 8 | 8 | 8 | 8 | 3 | 3 | 4 | 4 |
| Saturated/Unsaturated | | | | U | U | U | U | U | U | U | U | U | U |
| PETROLEUM VOLATILE ORGANIC COMPOUNDS (PVOCs) (µg/kg) | | | | | | | | | | | | | |
| Benzene | 1600 | 1600 | 5.1 | <25 | <25 | <25 | <25 | <25 | <25 | <25 | <25 | <25 | <25 |
| Ethylbenzene | 8020 | 8020 | 1570 | <25 | <25 | <25 | <25 | <25 | <25 | <25 | <25 | <25 | <25 |
| Methyl tert-butyl ether | 63800 | 63800 | 27 | <25 | <25 | <25 | <25 | <25 | <25 | <25 | <25 | <25 | <25 |
| Naphthalene | 5520 | 5520 | 658 | <25 | <25 | <25 | <25 | <25 | <25 | <25 | <25 | <25 | <25 |
| Toluene | NE | 818000 | 1107 | <25 | <25 | <25 | <25 | <25 | <25 | <25 | <25 | <25 | <25 |
| 1,2,4-Trimethylbenzene | NE | 219000 | 1382 | <25 | <25 | <25 | <25 | <25 | <25 | <25 | <25 | <25 | <25 |
| 1,3,5-Trimethylbenzene | NE | 182000 | | <25 | <25 | <25 | <25 | <25 | <25 | <25 | <25 | <25 | <25 |
| Xylenes, -m, -p | NE | 260000 | 3960 | <75 | <75 | <75 | <75 | <75 | <75 | <75 | <75 | <75 | <75 |
| Xylenes, -o | | | | | | | | | | | | | |

J = Analyte detected above laboratory limit of detection but below limit of quantitation.

Bold indicates analytical results exceed NR 720 RCL.

RCL = Residual Contaminant Level

DCL = Direct-Contact Levels

NA = Parameter not analyzed

NE = NR 720 RCL not established

Stoltz, Carrie R - DNR

From: Brian Youngwirth <byoungwirth@generalengineering.net>
Sent: Friday, October 19, 2018 8:57 AM
To: Stoltz, Carrie R - DNR
Cc: Lynn Bradley
Subject: Homestead Station and Store TSSA
Attachments: Scan0006.pdf

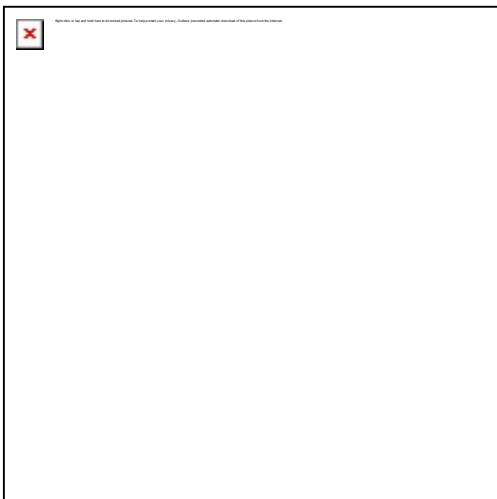
Carrie, soil sample S-7 was collected from natural soils beneath where water leaked from the sump above the tank. I tried to avoid the specific area where the water had collected or get below it but it is likely that the sample was at least somewhat affected by the water that had collected beneath the tank in that area. There were no indications of a release beneath the tank itself near that location at the time of removal.

The canopy had not been removed at the time of the soil testing beneath the dispensers. The dispensers were removed and soil samples were collected at depths of 3 to 4 feet below the surface beneath each dispenser.

A darker copy of the Part B is attached.

Please let me know if you have any questions or need any additional information.

Brian Youngwirth
Environmental Project Manager | General Engineering Company
916 Silver Lake Drive | PO Box 340 | Portage, WI 53901
P 608-742-2169 | Fax 608-742-2592 | C 608-697-8010
byoungwirth@generalengineering.net
www.generalengineering.net



General Engineering Company |
Headquartered in Portage, WI

www.generalengineering.net

General Engineering Company is a multidisciplinary consulting firm headquartered in Portage, Wisconsin. Since 1912, GEC has been synonymous with quality, reliability and innovation. We have built our reputation on serving the best interests of our clients while completing all projects in a timely and professional manner.

Part B – To be completed by environmental professional

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

I. TANK-SYSTEM SITE ASSESSMENT (TSSA)

Site Name: Homestead Station E Store
Address: 3610 County Road N Barnes WI

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

To determine if a TSSA is required, see ATCP 93 and section II part B of ASSESSMENT AND REPORTING OF SUSPECTED AND OBVIOUS RELEASES FROM UNDERGROUND AND ABOVEGROUND STORAGE TANK SYSTEMS.

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

1. Site Information

- a. Has there been a previously documented release at this site? Y N
If yes, provide the DATCP # _____, or DNR BRRT's # _____.
- b. Number of active tanks¹ at facility prior to completion of current services USTs 4 ASTs _____
(NOTE 1: Do not include previously closed systems or system components.)
- c. Excavation/trench dimensions (in feet). (Photos must be provided.)

| EXCAVATION/TRENCH # | LENGTH | WIDTH | DEPTH |
|---------------------|------------|------------|---------------|
| <u>Tanks</u> | <u>40'</u> | <u>30'</u> | <u>11-13'</u> |
| | | | |
| | | | |
| | | | |
| | | | |

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

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

- a. Stained soils: Y N
- b. Petroleum odor: Y N
- c. Water in excavation/trench: Y N
- d. Free product in the excavation/trench: Y N
- e. Sheen or free product on water: Y N

3. Geology/Hydrogeology

- a. Depth to groundwater 50 feet
- b. Indicate type of geology² Sand to gravel
(Note 2: Use these symbols individually or in combination as appropriate: C = Clay, SLT = Silt, S = Sand, Gr = Gravel)

4. Receptors

- a. Water supply well(s) within 250 feet of the facility? Y N If yes, specify Behind NW corner of Building
- b. Surface water(s) within 1000 feet of the facility? Y N If yes, specify _____

5. Sampling

- a. Follow the procedures detailed in ASSESSMENT AND REPORTING OF SUSPECTED AND OBVIOUS RELEASES FROM UNDERGROUND AND ABOVEGROUND STORAGE TANK SYSTEMS.
- b. Complete Tables 1 and 2 as appropriate. (Attach chain-of-custody and laboratory analytical reports.)
- c. Attach a detailed map of site features and sample locations.

J. NOTE RELEVANT OBSERVATIONS, SPECIFIC PROBLEMS OR CONCERNS BELOW

Small amount of water leaked from sump around dispenser exit to the bottom of the excavation between central gasoline and diesel tanks

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

| Sample ID # | Sample Location & Soil/Geologic Description | Sample Collection Method | | | | Depth Below Tank Bottom (feet) | Field Screening Result (ppm) | GRO (mg/kg) | DRO (mg/kg) |
|-------------|---|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------------|------------------------------|-------------|-------------|
| | | Grab | Shelby Tube | Direct Push | Split Spoon | | | | |
| D-1 | Dark Brown Silty Sand | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3 | 0 | N/A | N/A |
| D-2 | | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3 | 0 | | |
| D-3 | | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4 | 0 | | |
| D-4 | | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4 | 0 | | |
| S-1 | Light Brown Silty Sand to gravel | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 13 | 0 | | |
| S-2 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 13 | 0 | | |
| S-3 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 13 | 0 | | |
| S-4 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 13 | 0 | | |
| S-5 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 13 | 0 | | |
| S-6 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 13 | 0 | | |
| S-7 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 13 | 0 | | |
| S-8 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 13 | 0 | | |
| S-9 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 13 | 0 | | |
| S-10 | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 13 | 0 | | |

TABLE 2 SOIL LABORATORY ANALYTICAL RESULTS-FOR PETROLEUM PRODUCTS

| Sample ID # | BENZENE | TOLUENE | ETHYLBENZENE | MTBE | TRIMETHYL - BENZENES (TOTAL) | XYLENES (TOTAL) | NAPHTHALENE |
|-------------|---------|---------|--------------|-------|------------------------------|-----------------|-------------|
| | ug/kg | ug/kg | ug/kg | ug/kg | ug/kg | ug/kg | ug/kg |
| D-1 | <25 | <25 | <25 | <25 | <25 | <75 | <25 |
| D-2 | | | | | | | |
| D-3 | | | | | | | |
| D-4 | | | | | | | |
| S-1 | | | | | | | |
| S-2 | | | | | | | |
| S-3 | | | | | | | |
| S-4 | | | | | | | |
| S-5 | | | | | | | |
| S-6 | | | | | | | |
| S-7 | | | 331 | | 139 | 222 | 188 |
| S-8 | | | <25 | | <25 | <75 | <25 |
| S-9 | | | | | | | |
| S-10 | | | | | | | |

K. TANK-SYSTEM SITE ASSESSMENT INFORMATION

- As a tank-system site assessor certified under Wis. Admin. Code section SPS 305.83, it is my opinion that there is no indication of a release of a regulated substance to the environment.
- Sampling at the site indicates there has been a release to the environment. Pursuant to Wis. Admin. Code section ATCP 93.585 (2) (a) and Wis. Stats. section 292.11 (2) (a), the owner or operator or contractor performing work under chapter ATCP 93 shall immediately report any release of a regulated substance to the Wisconsin Department of Natural Resources. Failure to do so may result in forfeitures of a minimum of \$10 and a maximum of \$5000 for each violation under Wis. Stats. section 168.26 (5). Each day of continued violation and each tank are treated as separate offenses.

Brian Youngworth
Tank-System Site Assessor Name (Print)
608 697 8010
Tank-System Site Assessor Telephone Number

Brian Youngworth
Tank-System Site Assessor Signature
10/10/18
Date Signed

401259
Certification Number #
General Engineering Company
Company Name

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

| Sample ID # | Sample Location & Soil/Geologic Description | Sample Collection Method | | | | Depth Below Tank/Piping (feet) | Field Screening Result (ppm) | GRO (mg/kg) | DRO (mg/kg) |
|-------------|---|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------------|------------------------------|-------------|-------------|
| | | Grab | Shelby Tube | Direct Push | Split Spoon | | | | |
| S-11 | Light Brown Silty Sand Gravel ↓ | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Ground | 0 | N/A | N/A |
| S-12 | | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 0.5 | 0 | ↓ | ↓ |
| S-13 | | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1.0 | 0 | | |
| S-14 | | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1.5 | 0 | | |
| S-15 | | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2.0 | 0 | | |
| S-16 | | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2.5 | 0 | | |
| S-17 | | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3.0 | 0 | | |
| | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | |

TABLE 2 SOIL LABORATORY ANALYTICAL RESULTS-FOR PETROLEUM PRODUCTS

| Sample ID # | BENZENE | TOLUENE | ETHYLBENZENE | MTBE | TRIMETHYL - BENZENES (TOTAL) | XYLENES (TOTAL) | NAPHTHALENE |
|-------------|---------|---------|--------------|-------|------------------------------|-----------------|-------------|
| | ug/kg | ug/kg | ug/kg | ug/kg | ug/kg | ug/kg | ug/kg |
| S-11 | < 25 | < 25 | < 25 | < 25 | < 25 | < 75 | < 25 |
| S-12 | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ |
| S-13 | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ |
| S-14 | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ |
| S-15 | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ |
| S-16 | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ |
| S-17 | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ |

K. TANK-SYSTEM SITE ASSESSMENT INFORMATION

- As a tank-system site assessor certified under Wis. Admin. Code section SPS 305.83, it is my opinion that there is no indication of a release of a regulated substance to the environment.
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Brian Vanswirth
Tank-System Site Assessor Name (print)
608 697 8010
Tank-System Site Assessor Telephone Number

Brian Vanswirth
Tank-System Site Assessor Signature
10/10/18
Date Signed

401259
Certification Number #
General Engineering Company
Company Name

Stoltz, Carrie R - DNR

From: Aslakson, Karine X - DATCP
Sent: Wednesday, October 24, 2018 12:56 PM
To: Stoltz, Carrie R - DNR
Subject: RE: TSSA report for Bayfield County
Attachments: 34804 - CLR Docs.pdf; 34633 - CLR Docs.pdf; 34661 - CLR Docs.pdf; 34551 - CLR Docs.pdf

Good afternoon Carrie,

These are the records that I have related to the closure/removal of the (4) USTs at 3610 County Road N in Barnes. I hope this is what you are looking. We did not receive TSSA Part B.

Thank you for your patience and have a wonderful afternoon.

Respectfully,

Karine M. Aslakson, DATCP
Environmental Program Associate
Division of Trade and Consumer Protection
Wisconsin Department of Agriculture, Trade and Consumer Protection
608.224.5155
Fax: 608.223.6563
Karine.aslakson@wisconsin.gov

Please complete this [brief survey](#) to help us improve our customer service. Thank you for your feedback!

From: Stoltz, Carrie R - DNR
Sent: Wednesday, October 24, 2018 11:16 AM
To: Aslakson, Karine X - DATCP <Karine.Aslakson@wisconsin.gov>
Subject: TSSA report for Bayfield County

Hi Karine, would you be able to look up an old TSSA report for the Spur Station, 3610 County Rd N, Barnes, WI in Bayfield County? Thanks, Carrie

We are committed to service excellence.

Visit our survey at <http://dnr.wi.gov/customersurvey> to evaluate how I did.

Carrie Stoltz

Hydrogeologist-Remediation and Redevelopment, AWARE Division
Wisconsin Department of Natural Resources
107 Sutliff Avenue, Rhinelander, WI 54501
Phone: (715)365-8942
Fax: (715)365-8932
Carrie.Stoltz@Wisconsin.gov





Wisconsin Department of Agriculture, Trade and Consumer Protection
 Bureau of Weights and Measures
 PO Box 7837 Madison, WI 53707-7837
 (608) 224-4942

FOR OFFICE USE ONLY
 TDID#: Lic # 437112 (0401)
 Reg Obj #: EQ # 34551
 Wis. Admin. Code §ATCP 93.140

UNDERGROUND FLAMMABLE/COMBUSTIBLE/HAZARDOUS LIQUID STORAGE TANK REGISTRATION

Personal information you provide may be used for purposes other than that for which it was originally collected (s. 15.04(1)(m) Wis. Stats.).

Underground tanks in Wisconsin that have stored or currently store petroleum or regulated substances must be registered. A separate form is needed for each tank. Send each completed form to the agency designated above. Have you previously registered this tank by submitting a form? Yes No

If yes, are you correcting/updating information only? Yes No

This registration applies to a tank status that is (check one):

- In Use
- Newly Installed
- Abandoned with Product
- Abandoned with Product (empty)
- Abandon with Water
- Closed - Tank Removed
- Closed - Filled with Inert Materials
- Ownership Change (Indicate new owner name in block 2 - attach deed)
- Temporarily Out of Service - Provide Date:

Fire Dept. providing fire coverage where tank is located: CITY TOWN VILLAGE Barnes 0401

| | | | |
|---|--|---|---|
| IDENTIFICATION (Please Print) | | COUNTY | PHONE |
| 1. TANK SITE NAME Homestead Station & Store | | Bavfield | () - |
| SITE STREET ADDRESS 3610 Cty N | | <input type="checkbox"/> CITY <input type="checkbox"/> VILLAGE <input checked="" type="checkbox"/> TOWN OF: | STATE ZIP Wi 54873 |
| 2. TANK OWNER LEGAL NAME Gmb Enterprises LLC | | COUNTY | PHONE: Check <input type="checkbox"/> CELL or <input type="checkbox"/> LAND |
| MAILING ADDRESS 6025 Kelly Lake Rd | | Bavfield | () - |
| 3. PROPERTY OWNER NAME (if different from Tank Owner Legal Name #2) | | <input type="checkbox"/> CITY <input type="checkbox"/> VILLAGE <input checked="" type="checkbox"/> TOWN OF: | STATE ZIP Wi 54873 |
| PROPERTY OWNER ADDRESS (if different from Site Street Address #1) | | COUNTY (if different from County #2) | |
| 4. CLASS A NAME | | DOB | CERTIFICATION: (Attach certificate) |
| 5. CLASS B NAME | | DOB | CERTIFICATION: (Attach certificate) |

SITE ID: 34551 185155 FACILITY ID # 437112 437112 CUSTOMER ID # 961976
 Tank Capacity (gallons): 3000 Tank Age (age or date installed): 9/1/1997 Vehicle fueling: Yes No

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

OCCUPANCY TYPE (check one) Refer to back
 Retail Fuel Sales Mercantile/Commercial Industrial Residential School Utility Government Fleet
 Agricultural (crop or livestock production) Backup or Emergency Generator Other (specify):

TANK CONSTRUCTION:
 Bare Steel Coated Steel Steel - Fiberglass Reinforced Plastic Composite
 Fiberglass Unknown Other (specify): Lined (date):
 Overfill Protection? Yes No
 Spill Containment? Yes No
 Tank Double Walled? Yes No

TANK CATHODIC PROTECTION: Sacrificial Anodes Impressed Current N/A

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

PIPING CONSTRUCTION: Single Wall Double Wall:
 Bare Steel Coated Steel Fiberglass Flexible Copper Unknown N/A Other: 120914 - Piping

PIPING CATHODIC PROTECTION: Sacrificial Anodes Impressed Current N/A

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

PIPING LEAK DETECTION METHOD: Interstitial monitoring ⇒ Electronic Yes No ⇒ Sump or cable sensor Yes No
 Tightness testing Electronic line monitor - ELLD SIR Not required Unknown

TANK CONTENTS (Current, or previous product (if tank now empty)) Leaded Unleaded Gas-ethanol blend: ___ % Diesel
 Bio-Diesel: ___ % Aviation Premix Fuel Oil Kerosene New Oil New oil - Flash point less than 200°F
 Waste/Used Motor Oil ⇒ Used for Heating Hazardous Waste/Interface* Empty* Sand/Gravel/Slurry* Unknown
 Other (specify): Chemical* Name CAS#

* NOT PECFA eligible. Geo Latitude: Geo Longitude:

If Tank Closed, Abandoned or Out of Service: 9/25/2018 Has a site assessment been completed? (see reverse side for details) Yes No

TANK OWNER LEGAL NAME (please print) TANK OWNER E-MAIL

TANK OWNER SIGNATURE (Note: By signing, signer is accepting legal and financial responsibility for the storage tank system.) DATE: 9/25/2018

Lic 437112 (0401)

WM-140 (7/18) Formerly ERS-8951

Wisconsin Department of Agriculture, Trade and Consumer Protection

Bureau of Weights and Measures

P.O. Box 7837, Madison, WI 53707-7837

(608) 224-4942

Wis. Admin. Code §ATCP 93.560

TANK SYSTEM SERVICE AND CLOSURE ASSESSMENT REPORT

Personal information you provide may be used for purposes other than that for which it was originally collected (s. 15.04(1)(m) Wis. Stats.)

Complete One Form for Each System Service Event

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

CHECK ONE: UNDERGROUND ABOVEGROUND

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

OWNER INFORMATION

| | | |
|--|---|---------------------------|
| OWNER NAME Gmb Enterprises LLC | CONTACT NAME | TITLE |
| MAILING ADDRESS 6025 Kelly Lake Rd. | <input type="checkbox"/> CITY <input checked="" type="checkbox"/> TOWN <input type="checkbox"/> VILLAGE Barnes | STATE ZIP Wi 54873 |
| TELEPHONE: () - | E-MAIL | |

SITE INFORMATION

| | | |
|--|---|---------------------------|
| FACILITY NAME Homestead Station & Store | <input type="checkbox"/> CITY <input checked="" type="checkbox"/> TOWN <input type="checkbox"/> VILLAGE Barnes | STATE ZIP Wi 54873 |
| SITE ADDRESS (Not PO Box) 3610 Cty N | | |

SERVICE CONTRACTOR INFORMATION

| | | |
|--|--|---------------------------|
| PRIMARY SERVICE CONTRACTOR Section A Above Schaper Excavating & Petroleum LLC | TELEPHONE: (608) 429 - 2300 | CELL: (608) 617 - 4612 |
| STREET ADDRESS W4396 Cty E | <input type="checkbox"/> CITY <input checked="" type="checkbox"/> TOWN <input type="checkbox"/> VILLAGE Scott | STATE ZIP Wi 53954 |

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

| a Tank ID # | b Type of Closure ¹ | c Tank Material of Construction | d Piping Material of Construction | e Tank Capacity (gallons) | f Contents ² | g Release - System Integrity Compromised (e.g. holes, cracks, loose connection, etc)? | h If "Yes" to "g", Then Specify Source and Cause of Release ⁵ | |
|----------------|-----------------------------------|------------------------------------|--------------------------------------|------------------------------|----------------------------|--|---|-------------------------------|
| | | | | | | | Source of Release ³ | Cause of Release ⁴ |
| 34551 | P | Steel | Flex | 3,000 | Diesel | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| 54633 | P 34633 | Steel | Flex | 4,000 | Unleaded | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| 54661 | P 34661 | Steel | Flex | 6,000 | Diesel | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| 34804 | P | Steel | Flex | 10,000 | Unleaded | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| | | | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| | | | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |

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

2. Indicate type of product: DL = Diesel, LG = Leaded Gasoline, UG = Unleaded Gasoline, FO = Fuel Oil, GH = Gasohol, AF = Aviation Fuel, K = Kerosene, PX = Premix, WO = Waste/Used Motor Oil, FCHZW = Flammable/Combustible Hazardous Waste, OC = Other Chemical (indicate the chemical name(s):

3. CAS number(s):

4. Source of release: T = tank, P = piping, D = dispenser, STP = submersible turbine pump, DP = delivery problem, O = other, UNK = Unknown

5. Cause of release:

S = spill, O = overflow, POMD = physical or mechanical damage, C = corrosion, IP = installation problem, O = other, UNK = Unknown

6. Has release been reported to the Department of Natural Resources? Yes No Release not evident at this time

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. Yes No

All local permits were obtained before beginning closure. Yes No NA

AST Form TR-WM-137 or AST Form TR-WM-118 filed by owner with the DATCP indicating closure. Yes No NA
NOTE: TANK INVENTORY FORM TR-WM-137 or TR-WM-118 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 | Inspector Not Present | NA |
|--|---|---|--------------------------|--------------------------|
| 1. Product removed. | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Product lines drained into tank (or other container) and liquid removed, and | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| b. All product removed to bottom of suction line, OR | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| c. All product removed to within 1" of bottom. | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Fill pipe, gauge pipe, tank truck vapor recovery fittings, and vapor return lines capped. | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. All product lines at the islands or pumps located elsewhere are removed and capped, OR | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Dispensers/pumps left in place but locked and power disconnected. | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Vent lines left open. | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Inventory form filed indicating temporarily out-of-service (TOS) closure. | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |

D.2 CLOSURE BY REMOVAL OR IN-PLACE

| | | | | |
|---|--|--|--------------------------|--------------------------|
| 1. General Requirements | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| 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"/> | <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"/> | <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"/> | <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"/> | <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"/> | <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"/> | <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"/> | <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"/> | <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"/> | <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"/> | <input type="checkbox"/> |
| c. Tank labeled in full compliance with API 1604 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"/> | <input type="checkbox"/> |

NOTE: COMPLETE TANK LABELING SHOULD INCLUDE WARNING AGAINST REUSE; FORMER CONTENTS; VAPOR STATE; VAPOR FREEING TREATMENT; MONTH/DAY/YEAR OF REMOVAL

| | | | | |
|--|--|--|--------------------------|--------------------------|
| 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"/> | <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"/> | <input type="checkbox"/> |

3. Specific Closure-In-Place Requirements

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

NOTE: CLOSURES IN-PLACE ARE ONLY ALLOWED WITH THE PRIOR WRITTEN APPROVAL OF THE DEPARTMENT OF AGRICULTURE, TRADE AND CONSUMER PROTECTION (DATCP) OR LOCAL AGENT.

E. REPAIR, UPGRADE OR CHANGE-IN-SERVICE

| | | |
|---|---|-----------------------------|
| Written notification was provided to the local agent 5 days in advance of service date. | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> NA |
| All local permits were obtained before beginning service. | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> NA |
| Form TR-WM-137 or 0 TR-WM-118 filed by owner with the DATCP indicating change-in-service. | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> 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.
- 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 <5% 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

Richard Schaper

Richard Schaper

401583

9/19/2018

REMOVER/CLEANER NAME (PRINT):

REMOVER/CLEANER SIGNATURE

CERTIFICATION NO

DATE SIGNED

I attest that the procedures and information which I have provided as the tank closure contractor are correct and comply with ATCP 93.

Company expected to perform soil contamination assessment General Engineering / Portage Wi

H. INSPECTOR INFORMATION

EDWARD J. SINDELAR

Edward J. Sindelar

403044

LPO AGENCY #

INSPECTOR NAME (PRINT):

INSPECTOR SIGNATURE

INSPECTOR CERTIFICATION NO

0401

(715) 413 - 1833

9/25/2018

FDID # FOR LOCATION WHERE INSPECTION PERFORMED

INSPECTOR TELEPHONE:NUMBER

DATE SIGNED

INSPECTOR NOTES:



Wisconsin Department of Agriculture, Trade and Consumer Protection
 Bureau of Weights and Measures
 Storage Tank Regulation, PO Box 7837, Madison, WI 53707-7837
 Phone: (608) 224-4942

FOR OFFICE USE ONLY
 Lic # 437112 (0401)
 Wis. Admin. Code §ATCP 93.115
 §ATCP 93.350

ATCP 93 NOTIFICATION RECORD

Personal information you provide may be used for purposes other than that for which it was originally collected (s. 15.04(1)(m), Wis. Stats.).

TO: Edward Sindelar

OFFICE LOCATION:

(Refer to https://datcp.wi.gov/Pages/Programs_Services/StorageTankContacts.aspx for a jurisdiction's authorized agent/department.)

Note: Only the notification form is required for non-flammable, non-combustible, hazardous liquid, or CERCLA tanks greater than or equal to 5,000 gallon capacity that are under the direct supervision of a qualified engineer. A plan review is not required. (ATCP 93.350(2)(b)).

LOCATION / IDENTIFICATION

| | | | | | | |
|---|--|---|--|-------------------------------------|-------------|--------------|
| SITE NAME Homestead Station & Store | | FACILITY NUMBER 437112 | FIRE DEPT. PROVIDING FIRE PROTECTION COVERAGE 0401 Barnes | | | |
| SITE STREET ADDRESS 3610 Cty N | | <input type="checkbox"/> CITY | <input checked="" type="checkbox"/> TOWN | <input type="checkbox"/> VILLAGE | STATE Wi | ZIP 54873 |
| OWNER NAME Gmb Enterprises LLC. | | PHONE NUMBER () - | TANK OWNER EMAIL | | | |
| OWNER STREET ADDRESS 6025 Kelly Lake Rd | | <input type="checkbox"/> CITY | <input checked="" type="checkbox"/> TOWN | <input type="checkbox"/> VILLAGE | STATE Wi | ZIP 54873 |
| CONTRACTOR NAME Schaper Excavating & Petroleum LLC | | PHONE NUMBER (608) 429 - 2300 | CELL NUMBER (608) 617 - 4612 | EMAIL murf@schaperexcavating.com | | |
| STREET ADDRESS W4396 Cty E | | <input type="checkbox"/> CITY | <input checked="" type="checkbox"/> TOWN | <input type="checkbox"/> VILLAGE | STATE Wi | ZIP 53954 |
| DATE WORK IS TO BEGIN 9/24/2018 | DATE/TIME REQUESTED FOR TANK INSPECTION 9/25/2018 @ 12:00 | ATCP 93 CERTIFIED INSTALLER SUPERVISOR OR QUALIFIED ENGINEER Murf 401583 | | | | |

PROJECT WILL INVOLVE: (Check all that apply) Plan Approval No.: Approval Date:

| | UST | AST | No. of Tanks | Comments: |
|---|-------------------------------------|--------------------------|--------------|-----------|
| Tank Installation | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 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 ¹ | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Tank Closure | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 4 | |
| Alternative Fuel Storage Tank Installation ^{2,3,5} (see footnotes below) | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Alternative Fuel Storage Tank Conversion ^{4,5} (see footnotes below) | <input type="checkbox"/> | <input type="checkbox"/> | | |

¹Send Notice to DATCP (see address above). Installation inspection is not required if construction/installation is supervised by a qualified engineer.
²For LPO installations send notice to both the assigned LPO and DATCP General Inspection Inspector. DACTP General Inspection Inspector will be at the final inspection only. Alternative fuel storage tank systems shall not begin operation until the DATCP General Inspection Inspector has granted approval.
³For DATCP installation inspections send notice to only the assigned DACTP Installation Inspector. Alternative fuel storage tank systems shall not begin operation until the DATCP general inspector has granted approval.
⁴Send notice to only the DATCP General Inspection Inspector.
⁵See Conditional Approval letter and Notification email for installation and general inspector information.

For USTs: If an Owner/Operator intends to begin operation immediately after the final inspection, they shall prepare and submit the documentation listed below at least 15 days prior to the final inspection:

- A TR-WM-137 Underground Flammable/Combustible Liquid Storage Tank Registration.
- A Wisconsin Operator Training Designation form.
- Affidavit of Financial Responsibility, certificate of insurance, and site schedule of covered locations and storage tanks.

Site assessment conducted by: General Engineering Portage WI



Wisconsin Department of Agriculture, Trade and Consumer Protection
Bureau of Weights and Measures
 PO Box 7837 Madison, WI 53707-7837
 (608) 224-4942

FOR OFFICE USE ONLY
 TDID#: **Lic # 437112 (0401)**
 Reg Obj #: **EQ # 34633**
 Wis. Admin. Code **§ATCP 93.140**

UNDERGROUND FLAMMABLE/COMBUSTIBLE/HAZARDOUS LIQUID STORAGE TANK REGISTRATION

Personal information you provide may be used for purposes other than that for which it was originally collected (s. 15.04(1)(m) Wis. Stats.).

Underground tanks in Wisconsin that have stored or currently store petroleum or regulated substances must be registered. A separate form is needed for each tank. Send each completed form to the agency designated above. Have you previously registered this tank by submitting a form? Yes No

If yes, are you correcting/updating information only? Yes No

This registration applies to a tank status that is (check one):

- In Use
- Newly Installed
- Abandoned with Product
- Abandoned with Product
- Fire Dept. providing fire coverage where tank is located: CITY TOWN VILLAGE Barnes 0401
- Abandoned with Product (empty)
- Abandon with Water
- Closed - Tank Removed
- Closed - Filled with Inert Materials
- Ownership Change (Indicate new owner name in block 2 - attach deed)
- Temporarily Out of Service - Provide Date:

IDENTIFICATION (Please Print)

| | | | |
|--|-----|---|--|
| 1. TANK SITE NAME Homestead Station & Store | | COUNTY Bayfield | PHONE () - |
| SITE STREET ADDRESS 3610 Cty N | | <input type="checkbox"/> CITY <input type="checkbox"/> VILLAGE <input checked="" type="checkbox"/> TOWN OF: Barnes | STATE ZIP Wi 54873 |
| 2. TANK OWNER LEGAL NAME Gmb Enterprises LLC | | COUNTY Bayfield | PHONE: Check <input type="checkbox"/> CELL or <input type="checkbox"/> LAND () - |
| MAILING ADDRESS 6025 Kelly Lake Rd | | <input type="checkbox"/> CITY <input type="checkbox"/> VILLAGE <input checked="" type="checkbox"/> TOWN OF: Barnes | STATE ZIP Wi 54873 |
| 3. PROPERTY OWNER NAME (if different from Tank Owner Legal Name #2) | | COUNTY (if different from County #2) | |
| PROPERTY OWNER ADDRESS (if different from Site Street Address #1) | | <input type="checkbox"/> CITY <input type="checkbox"/> VILLAGE <input type="checkbox"/> TOWN OF: | STATE ZIP |
| 4. CLASS A NAME | DOB | CERTIFICATION: (Attach certificate) | |
| 5. CLASS B NAME | DOB | CERTIFICATION: (Attach certificate) | |

SITE ID: 34633 **185155** FACILITY ID # 437112 **437112** CUSTOMER ID # **961976**

Tank Capacity (gallons): 4000 Tank Age (age or date installed): 9/1/1997 Vehicle fueling: Yes No

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

OCCUPANCY TYPE (check one) Refer to back
 Retail Fuel Sales Mercantile/Commercial Industrial Residential School Utility Government Fleet
 Agricultural (crop or livestock production) Backup or Emergency Generator Other (specify):

TANK CONSTRUCTION:
 Bare Steel Coated Steel Steel - Fiberglass Reinforced Plastic Composite
 Fiberglass Unknown Other (specify): Lined (date):
 Overfill Protection? Yes No
 Spill Containment? Yes No
 Tank Double Walled? Yes No

TANK CATHODIC PROTECTION: Sacrificial Anodes Impressed Current N/A

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

PIPING CONSTRUCTION: Single Wall Double Wall:
 Bare Steel Coated Steel Fiberglass Flexible Copper Unknown N/A Other: **120994 - Piping**

PIPING CATHODIC PROTECTION: Sacrificial Anodes Impressed Current N/A

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

PIPING LEAK DETECTION METHOD: Interstitial monitoring ⇒ Electronic Yes No ⇒ Sump or cable sensor Yes No
 Tightness testing Electronic line monitor - ELLD SIR Not required Unknown

TANK CONTENTS (Current, or previous product (if tank now empty))
 Bio-Diesel: ___ % Aviation Premix Fuel Oil Kerosene New Oil New oil - Flash point less than 200°F
 Waste/Used Motor Oil ⇒ Used for Heating Hazardous Waste/Interface* Empty* Sand/Grave/Slurry* Unknown
 Other (specify): Chemical* Name CAS#

* NOT PECFA eligible. Geo Latitude: Geo Longitude:

If Tank Closed, Abandoned or Out of Service: 9/25/2018 Has a site assessment been completed? (see reverse side for details) Yes No

TANK OWNER LEGAL NAME (please print) TANK OWNER E-MAIL

TANK OWNER SIGNATURE (Note: By signing, signer is accepting legal and financial responsibility for the storage tank system.) DATE: 9/25/2018

Lic 437112 (0401)

WM-140 (7/18) Formerly ERS-8951

Wisconsin Department of Agriculture, Trade and Consumer Protection

Bureau of Weights and Measures

P.O. Box 7837, Madison, WI 53707-7837

(608) 224-4942

Wis. Admin. Code §ATCP 93.560

TANK SYSTEM SERVICE AND CLOSURE ASSESSMENT REPORT

Personal information you provide may be used for purposes other than that for which it was originally collected (s. 15.04(1)(m) Wis. Stats.)

Complete One Form for Each System Service Event

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

CHECK ONE: UNDERGROUND ABOVEGROUND

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

OWNER INFORMATION

| | | |
|--|---|---------------------------|
| OWNER NAME Gmb Enterprises LLC | CONTACT NAME | TITLE |
| MAILING ADDRESS 6025 Kelly Lake Rd. | <input type="checkbox"/> CITY <input checked="" type="checkbox"/> TOWN <input type="checkbox"/> VILLAGE Barnes | STATE ZIP Wi 54873 |
| TELEPHONE: () - | E-MAIL | |

SITE INFORMATION

| | | |
|--|---|---------------------------|
| FACILITY NAME Homestead Station & Store | <input type="checkbox"/> CITY <input checked="" type="checkbox"/> TOWN <input type="checkbox"/> VILLAGE Barnes | STATE ZIP Wi 54873 |
| SITE ADDRESS (Not PO Box) 3610 Cty N | | |

SERVICE CONTRACTOR INFORMATION

| | | |
|--|--|---------------------------|
| PRIMARY SERVICE CONTRACTOR Section A Above Schaper Excavating & Petroleum LLC | TELEPHONE: (608) 429 - 2300 | CELL: (608) 617 - 4612 |
| STREET ADDRESS W4396 Cty E | <input type="checkbox"/> CITY <input checked="" type="checkbox"/> TOWN <input type="checkbox"/> VILLAGE Scott | STATE ZIP Wi 53954 |

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

| a Tank ID # | b Type of Closure ¹ | c Tank Material of Construction | d Piping Material of Construction | e Tank Capacity (gallons) | f Contents ² | g Release - System Integrity Compromised (e.g. holes, cracks, loose connection, etc)? | h If "Yes" to "g", Then Specify Source and Cause of Release ⁵ | |
|----------------|-----------------------------------|------------------------------------|--------------------------------------|------------------------------|----------------------------|--|---|-------------------------------|
| | | | | | | | Source of Release ³ | Cause of Release ⁴ |
| 34551 | P | Steel | Flex | 3,000 | Diesel | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| 54633 | P 34633 | Steel | Flex | 4,000 | Unleaded | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| 54661 | P 34661 | Steel | Flex | 6,000 | Diesel | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| 34804 | P | Steel | Flex | 10,000 | Unleaded | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| | | | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| | | | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |

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

2. Indicate type of product: DL = Diesel, LG = Leaded Gasoline, UG = Unleaded Gasoline, FO = Fuel Oil, GH = Gasohol, AF = Aviation Fuel, K = Kerosene, PX = Premix, WO = Waste/Used Motor Oil, FCHZW = Flammable/Combustible Hazardous Waste, OC = Other Chemical (indicate the chemical name(s):

3. CAS number(s):

4. Source of release: T = tank, P = piping, D = dispenser, STP = submersible turbine pump, DP = delivery problem, O = other, UNK = Unknown

5. Cause of release:

S = spill, O = overflow, POMD = physical or mechanical damage, C = corrosion, IP = installation problem, O = other, UNK = Unknown

6. Has release been reported to the Department of Natural Resources? Yes No Release not evident at this time

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. Yes No

All local permits were obtained before beginning closure. Yes No NA

AST Form TR-WM-137 or AST Form TR-WM-118 filed by owner with the DATCP indicating closure. Yes No NA

NOTE: TANK INVENTORY FORM TR-WM-137 or TR-WM-118 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 | Inspector Not Present | NA |
|--|---|---|--------------------------|--------------------------|
| 1. Product removed. | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Product lines drained into tank (or other container) and liquid removed, and | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| b. All product removed to bottom of suction line, OR | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| c. All product removed to within 1" of bottom. | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Fill pipe, gauge pipe, tank truck vapor recovery fittings, and vapor return lines capped. | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. All product lines at the islands or pumps located elsewhere are removed and capped, OR | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Dispensers/pumps left in place but locked and power disconnected. | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Vent lines left open. | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Inventory form filed indicating temporarily out-of-service (TOS) closure. | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |

D.2 CLOSURE BY REMOVAL OR IN-PLACE

| | Remover Verified | Inspector Verified | Inspector Not Present | NA |
|---|--|--|--------------------------|--------------------------|
| 1. General Requirements | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| 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"/> | <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"/> | <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"/> | <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"/> | <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"/> | <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"/> | <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"/> | <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"/> | <input type="checkbox"/> |

| | | | | |
|---|--|--|--------------------------|--------------------------|
| 2. Specific Closure-by-Removal Requirements | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| 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"/> | <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"/> | <input type="checkbox"/> |
| c. Tank labeled in full compliance with API 1604 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"/> | <input type="checkbox"/> |

NOTE: COMPLETE TANK LABELING SHOULD INCLUDE WARNING AGAINST REUSE; FORMER CONTENTS; VAPOR STATE; VAPOR FREEING TREATMENT; MONTH/DAY/YEAR OF REMOVAL

| | | | | |
|--|--|--|--------------------------|--------------------------|
| 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"/> | <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"/> | <input type="checkbox"/> |
| 3. Specific Closure-In-Place Requirements | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |

NOTE: CLOSURES IN-PLACE ARE ONLY ALLOWED WITH THE PRIOR WRITTEN APPROVAL OF THE DEPARTMENT OF AGRICULTURE, TRADE AND CONSUMER PROTECTION (DATCP) OR LOCAL AGENT.

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

E. REPAIR, UPGRADE OR CHANGE-IN-SERVICE

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

All local permits were obtained before beginning service. Y N NA

Form TR-WM-137 or 0 TR-WM-118 filed by owner with the DATCP indicating change-in-service. 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.

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 <5% 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

Richard Schaper

Richard Schaper

401583

9/19/2018

REMOVER/CLEANER NAME (PRINT):

REMOVER/CLEANER SIGNATURE

CERTIFICATION NO

DATE SIGNED

I attest that the procedures and information which I have provided as the tank closure contractor are correct and comply with ATCP 93.

Company expected to perform soil contamination assessment General Engineering / Portage Wi

H. INSPECTOR INFORMATION

EDWARD J. SINDELAR

Edward J. Sindelar

403049

LPO AGENCY #

INSPECTOR NAME (PRINT):

INSPECTOR SIGNATURE

INSPECTOR CERTIFICATION NO

0401

(715) 413 - 1833

9/25/2018

FDID # FOR LOCATION WHERE INSPECTION PERFORMED

INSPECTOR TELEPHONE:NUMBER

DATE SIGNED

INSPECTOR NOTES:



Wisconsin Department of Agriculture, Trade and Consumer Protection
 Bureau of Weights and Measures
 Storage Tank Regulation, PO Box 7837, Madison, WI 53707-7837
 Phone: (608) 224-4942

FOR OFFICE USE ONLY
 Lic # 437112 (0401)
 Wis. Admin. Code §ATCP 93.115
 §ATCP 93.350

ATCP 93 NOTIFICATION RECORD

Personal information you provide may be used for purposes other than that for which it was originally collected (s. 15.04(1)(m), Wis. Stats.).

TO: Edward Sindelar

OFFICE LOCATION:

(Refer to https://datcp.wi.gov/Pages/Programs_Services/StorageTankContacts.aspx for a jurisdiction's authorized agent/department.)

Note: Only the notification form is required for non-flammable, non-combustible, hazardous liquid, or CERCLA tanks greater than or equal to 5,000 gallon capacity that are under the direct supervision of a qualified engineer. A plan review is not required. (ATCP 93.350(2)(b)).

LOCATION / IDENTIFICATION

| | | | | | | |
|---|--|---|--|-------------------------------------|-------------|--------------|
| SITE NAME Homestead Station & Store | | FACILITY NUMBER 437112 | FIRE DEPT. PROVIDING FIRE PROTECTION COVERAGE 0401 Barnes | | | |
| SITE STREET ADDRESS 3610 Cty N | | <input type="checkbox"/> CITY | <input checked="" type="checkbox"/> TOWN | <input type="checkbox"/> VILLAGE | STATE Wi | ZIP 54873 |
| OWNER NAME Gmb Enterprises LLC. | | PHONE NUMBER () - | TANK OWNER EMAIL | | | |
| OWNER STREET ADDRESS 6025 Kelly Lake Rd | | <input type="checkbox"/> CITY | <input checked="" type="checkbox"/> TOWN | <input type="checkbox"/> VILLAGE | STATE Wi | ZIP 54873 |
| CONTRACTOR NAME Schaper Excavating & Petroleum LLC | | PHONE NUMBER (608) 429 - 2300 | CELL NUMBER (608) 617 - 4612 | EMAIL murf@schaperexcavating.com | | |
| STREET ADDRESS W4396 Cty E | | <input type="checkbox"/> CITY | <input checked="" type="checkbox"/> TOWN | <input type="checkbox"/> VILLAGE | STATE Wi | ZIP 53954 |
| DATE WORK IS TO BEGIN 9/24/2018 | DATE/TIME REQUESTED FOR TANK INSPECTION 9/25/2018 @ 12:00 | ATCP 93 CERTIFIED INSTALLER SUPERVISOR OR QUALIFIED ENGINEER Murf 401583 | | | | |

PROJECT WILL INVOLVE: (Check all that apply) Plan Approval No.: Approval Date:

| | UST | AST | No. of Tanks | Comments: |
|---|-------------------------------------|--------------------------|--------------|-----------|
| Tank Installation | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 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 ¹ | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Tank Closure | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 4 | |
| Alternative Fuel Storage Tank Installation ^{2,3,5} (see footnotes below) | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Alternative Fuel Storage Tank Conversion ^{4,5} (see footnotes below) | <input type="checkbox"/> | <input type="checkbox"/> | | |

¹Send Notice to DATCP (see address above). Installation inspection is not required if construction/installation is supervised by a qualified engineer.
²For LPO installations send notice to both the assigned LPO and DATCP General Inspection Inspector. DACTP General Inspection Inspector will be at the final inspection only. Alternative fuel storage tank systems shall not begin operation until the DATCP General Inspection Inspector has granted approval.
³For DATCP installation inspections send notice to only the assigned DACTP Installation Inspector. Alternative fuel storage tank systems shall not begin operation until the DATCP general inspector has granted approval.
⁴Send notice to only the DATCP General Inspection Inspector.
⁵See Conditional Approval letter and Notification email for installation and general inspector information.

For USTs: If an Owner/Operator intends to begin operation immediately after the final inspection, they shall prepare and submit the documentation listed below at least 15 days prior to the final inspection:

- A TR-WM-137 Underground Flammable/Combustible Liquid Storage Tank Registration.
- A Wisconsin Operator Training Designation form.
- Affidavit of Financial Responsibility, certificate of insurance, and site schedule of covered locations and storage tanks.

Site assessment conducted by: General Engineering Portage WI



Wisconsin Department of Agriculture, Trade and Consumer Protection
 Bureau of Weights and Measures
 PO Box 7837 Madison, WI 53707-7837
 (608) 224-4942

| | |
|-------------------------------|---------------------|
| FOR OFFICE USE ONLY | |
| TDID#: | Lic # 437112 (0401) |
| Reg Obj #: | EQ 34661 |
| Wis. Admin. Code §ATCP 93.140 | |

UNDERGROUND FLAMMABLE/COMBUSTIBLE/HAZARDOUS LIQUID STORAGE TANK REGISTRATION

Personal information you provide may be used for purposes other than that for which it was originally collected (s. 15.04(1)(m) Wis. Stats.).

Underground tanks in Wisconsin that have stored or currently store petroleum or regulated substances must be registered. A separate form is needed for each tank. Send each completed form to the agency designated above. Have you previously registered this tank by submitting a form? Yes No

If yes, are you correcting/updating information only? Yes No

This registration applies to a tank status that is (check one):

- | | | |
|---|---|--|
| <input type="checkbox"/> In Use | <input type="checkbox"/> Abandoned with Product (empty) | <input type="checkbox"/> Closed - Filled with Inert Materials |
| <input type="checkbox"/> Newly Installed | <input type="checkbox"/> Abandon with Water | <input type="checkbox"/> Ownership Change (Indicate new owner name in block 2 - attach deed) |
| <input type="checkbox"/> Abandoned with Product | <input checked="" type="checkbox"/> Closed - Tank Removed | <input type="checkbox"/> Temporarily Out of Service - Provide Date: |

Fire Dept. providing fire coverage where tank is located: CITY TOWN VILLAGE Barnes 0401

| | | |
|--|---|--|
| IDENTIFICATION (Please Print) | | |
| 1. TANK SITE NAME Homestead Station & Store | | COUNTY Bayfield |
| SITE STREET ADDRESS 3610 Cty N | | PHONE () - |
| | | <input type="checkbox"/> CITY <input type="checkbox"/> VILLAGE <input checked="" type="checkbox"/> TOWN OF: Barnes |
| | | STATE ZIP Wi 54873 |
| 2. TANK OWNER LEGAL NAME Gmb Enterprises LLC | | COUNTY Bayfield |
| MAILING ADDRESS 6025 Kelly Lake Rd | | PHONE: Check <input type="checkbox"/> CELL or <input type="checkbox"/> LAND () - |
| | | <input type="checkbox"/> CITY <input type="checkbox"/> VILLAGE <input checked="" type="checkbox"/> TOWN OF: Barnes |
| | | STATE ZIP Wi 54873 |
| 3. PROPERTY OWNER NAME (if different from Tank Owner Legal Name #2) | | COUNTY (if different from County #2) |
| PROPERTY OWNER ADDRESS (if different from Site Street Address #1) | | <input type="checkbox"/> CITY <input type="checkbox"/> VILLAGE <input type="checkbox"/> TOWN OF: STATE ZIP |
| 4. CLASS A NAME | DOB | CERTIFICATION: (Attach certificate) |
| 5. CLASS B NAME | DOB | CERTIFICATION: (Attach certificate) |
| SITE ID: 34661 185155 | FACILITY ID # 437112 437112 | CUSTOMER ID # 961976 |
| Tank Capacity (gallons): 6000 | Tank Age (age or date installed): 9/1/1997 | Vehicle fueling: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| LAND OWNER TYPE (check one) Refer to back | | |
| <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Federal Leased <input type="checkbox"/> Federal Owned <input type="checkbox"/> Tribal Nation <input type="checkbox"/> Municipal <input type="checkbox"/> Other Government <input checked="" type="checkbox"/> Private | | |
| OCCUPANCY TYPE (check one) Refer to back | | |
| <input checked="" type="checkbox"/> Retail Fuel Sales <input type="checkbox"/> Mercantile/Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Residential <input type="checkbox"/> School <input type="checkbox"/> Utility <input type="checkbox"/> Government Fleet | | |
| <input type="checkbox"/> Agricultural (crop or livestock production) <input type="checkbox"/> Backup or Emergency Generator <input type="checkbox"/> Other (specify): | | |
| TANK CONSTRUCTION: | | Overfill Protection? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| <input checked="" type="checkbox"/> Bare Steel <input type="checkbox"/> Coated Steel <input type="checkbox"/> Steel - Fiberglass Reinforced Plastic Composite | | Spill Containment? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| <input type="checkbox"/> Fiberglass <input type="checkbox"/> Unknown <input type="checkbox"/> Other (specify): <input type="checkbox"/> Lined (date): | | Tank Double Walled? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| TANK CATHODIC PROTECTION: <input checked="" type="checkbox"/> Sacrificial Anodes <input type="checkbox"/> Impressed Current <input type="checkbox"/> N/A | | |
| PRIMARY TANK LEAK DETECTION METHOD: <input type="checkbox"/> Automatic tank gauging <input type="checkbox"/> Interstitial monitoring ⇒ Electronic <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Inventory control and tightness testing | | |
| <input type="checkbox"/> Manual tank gauging (only for tanks of 1,000 gallons or less) <input checked="" type="checkbox"/> Statistical Inventory Reconciliation (SIR) <input type="checkbox"/> Unknown | | |
| PIPING CONSTRUCTION: <input type="checkbox"/> Single Wall <input checked="" type="checkbox"/> Double Wall: | | |
| <input type="checkbox"/> Bare Steel <input type="checkbox"/> Coated Steel <input type="checkbox"/> Fiberglass <input checked="" type="checkbox"/> Flexible <input type="checkbox"/> Copper <input type="checkbox"/> Unknown <input type="checkbox"/> N/A <input type="checkbox"/> Other: 121022 - Piping | | |
| PIPING CATHODIC PROTECTION: <input type="checkbox"/> Sacrificial Anodes <input type="checkbox"/> Impressed Current <input checked="" type="checkbox"/> N/A | | |
| PRIMARY PIPING SYSTEM TYPE: <input type="checkbox"/> Pressurized piping with ⇒ <input type="checkbox"/> A. Pump auto shutoff - ELLD <input type="checkbox"/> B. Flow restrictor - MLLD <input type="checkbox"/> Unknown | | |
| <input type="checkbox"/> Suction piping with check valve at tank <input checked="" type="checkbox"/> Suction piping with check valve at pump and inspectable <input type="checkbox"/> Not needed if waste oil | | |
| PIPING LEAK DETECTION METHOD: <input type="checkbox"/> Interstitial monitoring ⇒ Electronic <input type="checkbox"/> Yes <input type="checkbox"/> No ⇒ Sump or cable sensor <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| <input type="checkbox"/> Tightness testing <input type="checkbox"/> Electronic line monitor - ELLD <input type="checkbox"/> SIR <input checked="" type="checkbox"/> Not required <input type="checkbox"/> Unknown | | |
| TANK CONTENTS (Current, or previous product (if tank now empty)) | | |
| <input type="checkbox"/> Bio-Diesel: ___ % <input type="checkbox"/> Aviation <input type="checkbox"/> Premix <input type="checkbox"/> Fuel Oil <input type="checkbox"/> Kerosene <input type="checkbox"/> New Oil <input type="checkbox"/> Gas-ethanol blend: ___ % <input checked="" type="checkbox"/> Diesel | | |
| <input type="checkbox"/> Waste/Used Motor Oil ⇒ <input type="checkbox"/> Used for Heating <input type="checkbox"/> Hazardous Waste/Interface* <input type="checkbox"/> Empty* <input type="checkbox"/> Sand/Grave/Slurry* <input type="checkbox"/> Unknown | | |
| <input type="checkbox"/> Other (specify): <input type="checkbox"/> Chemical* Name CAS# | | |
| * NOT PECFA eligible. | Geo Latitude: | Geo Longitude: |
| If Tank Closed, Abandoned or Out of Service: 9/25/2018 | Has a site assessment been completed? (see reverse side for details) <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| TANK OWNER LEGAL NAME (please print) | TANK OWNER E-MAIL | |
| TANK OWNER SIGNATURE (Note: By signing, signer is accepting legal and financial responsibility for the storage tank system.) | DATE: 9/25/2018 | |

Note: Refer to comments on reverse side of form.

Lic 437112 (0401)

WM-140 (7/18) Formerly ERS-8951

Wisconsin Department of Agriculture, Trade and Consumer Protection

Bureau of Weights and Measures

P.O. Box 7837, Madison, WI 53707-7837

(608) 224-4942

Wis. Admin. Code §ATCP 93.560

TANK SYSTEM SERVICE AND CLOSURE ASSESSMENT REPORT

Personal information you provide may be used for purposes other than that for which it was originally collected (s. 15.04(1)(m) Wis. Stats.)

Complete One Form for Each System Service Event

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

CHECK ONE: UNDERGROUND ABOVEGROUND

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

OWNER INFORMATION

| | | |
|--|---|---------------------------|
| OWNER NAME Gmb Enterprises LLC | CONTACT NAME | TITLE |
| MAILING ADDRESS 6025 Kelly Lake Rd. | <input type="checkbox"/> CITY <input checked="" type="checkbox"/> TOWN <input type="checkbox"/> VILLAGE Barnes | STATE ZIP Wi 54873 |
| TELEPHONE: () - | E-MAIL | |

SITE INFORMATION

| | | |
|--|---|---------------------------|
| FACILITY NAME Homestead Station & Store | <input type="checkbox"/> CITY <input checked="" type="checkbox"/> TOWN <input type="checkbox"/> VILLAGE Barnes | STATE ZIP Wi 54873 |
| SITE ADDRESS (Not PO Box) 3610 Cty N | | |

SERVICE CONTRACTOR INFORMATION

| | | |
|--|--|---------------------------|
| PRIMARY SERVICE CONTRACTOR Section A Above Schaper Excavating & Petroleum LLC | TELEPHONE: (608) 429 - 2300 | CELL: (608) 617 - 4612 |
| STREET ADDRESS W4396 Cty E | <input type="checkbox"/> CITY <input checked="" type="checkbox"/> TOWN <input type="checkbox"/> VILLAGE Scott | STATE ZIP Wi 53954 |

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

| a Tank ID # | b Type of Closure ¹ | c Tank Material of Construction | d Piping Material of Construction | e Tank Capacity (gallons) | f Contents ² | g Release - System Integrity Compromised (e.g. holes, cracks, loose connection, etc)? | h If "Yes" to "g", Then Specify Source and Cause of Release ⁵ | |
|----------------|-----------------------------------|------------------------------------|--------------------------------------|------------------------------|----------------------------|--|---|-------------------------------|
| | | | | | | | Source of Release ³ | Cause of Release ⁴ |
| 34551 | P | Steel | Flex | 3,000 | Diesel | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| 54633 | P 34633 | Steel | Flex | 4,000 | Unleaded | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| 54661 | P 34661 | Steel | Flex | 6,000 | Diesel | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| 34804 | P | Steel | Flex | 10,000 | Unleaded | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| | | | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| | | | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |

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

2. Indicate type of product: DL = Diesel, LG = Leaded Gasoline, UG = Unleaded Gasoline, FO = Fuel Oil, GH = Gasohol, AF = Aviation Fuel, K = Kerosene, PX = Premix, WO = Waste/Used Motor Oil, FCHZW = Flammable/Combustible Hazardous Waste, OC = Other Chemical (indicate the chemical name(s):

3. CAS number(s):

4. Source of release: T = tank, P = piping, D = dispenser, STP = submersible turbine pump, DP = delivery problem, O = other, UNK = Unknown

5. Cause of release:

S = spill, O = overflow, POMD = physical or mechanical damage, C = corrosion, IP = installation problem, O = other, UNK = Unknown

6. Has release been reported to the Department of Natural Resources? Yes No Release not evident at this time

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. Yes No

All local permits were obtained before beginning closure. Yes No NA

AST Form TR-WM-137 or AST Form TR-WM-118 filed by owner with the DATCP indicating closure. Yes No NA

NOTE: TANK INVENTORY FORM TR-WM-137 or TR-WM-118 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 | Inspector Not Present | NA |
|--|---|---|--------------------------|--------------------------|
| 1. Product removed. | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Product lines drained into tank (or other container) and liquid removed, and | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| b. All product removed to bottom of suction line, OR | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| c. All product removed to within 1" of bottom. | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Fill pipe, gauge pipe, tank truck vapor recovery fittings, and vapor return lines capped. | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. All product lines at the islands or pumps located elsewhere are removed and capped, OR | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Dispensers/pumps left in place but locked and power disconnected. | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Vent lines left open. | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Inventory form filed indicating temporarily out-of-service (TOS) closure. | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |

D.2 CLOSURE BY REMOVAL OR IN-PLACE

| | | | | |
|---|--|--|--------------------------|--------------------------|
| 1. General Requirements | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| 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"/> | <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"/> | <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"/> | <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"/> | <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"/> | <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"/> | <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"/> | <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"/> | <input type="checkbox"/> |

| | | | | |
|---|--|--|--------------------------|--------------------------|
| 2. Specific Closure-by-Removal Requirements | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| 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"/> | <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"/> | <input type="checkbox"/> |
| c. Tank labeled in full compliance with API 1604 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"/> | <input type="checkbox"/> |

NOTE: COMPLETE TANK LABELING SHOULD INCLUDE WARNING AGAINST REUSE; FORMER CONTENTS; VAPOR STATE; VAPOR FREEING TREATMENT; MONTH/DAY/YEAR OF REMOVAL

| | | | | |
|--|--|--|--------------------------|--------------------------|
| 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"/> | <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"/> | <input type="checkbox"/> |

| | | | | |
|--|---|---|--------------------------|--------------------------|
| 3. Specific Closure-In-Place Requirements | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Tank properly cleaned to remove all sludge and residue. | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Solid inert material (sand, cyclone boiler slag, or pea gravel recommended) introduced and tank filled. | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Vent line disconnected or removed. | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Inventory form filed by owner with the DATCP indicating closure in-place. | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |

NOTE: CLOSURES IN-PLACE ARE ONLY ALLOWED WITH THE PRIOR WRITTEN APPROVAL OF THE DEPARTMENT OF AGRICULTURE, TRADE AND CONSUMER PROTECTION (DATCP) OR LOCAL AGENT.

E. REPAIR, UPGRADE OR CHANGE-IN-SERVICE

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

All local permits were obtained before beginning service. Y N NA

Form TR-WM-137 or 0 TR-WM-118 filed by owner with the DATCP indicating change-in-service. 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.

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 <5% 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

Richard Schaper

Richard Schaper

401583

9/19/2018

REMOVER/CLEANER NAME (PRINT):

REMOVER/CLEANER SIGNATURE

CERTIFICATION NO

DATE SIGNED

I attest that the procedures and information which I have provided as the tank closure contractor are correct and comply with ATCP 93.

Company expected to perform soil contamination assessment General Engineering / Portage Wi

H. INSPECTOR INFORMATION

EDWARD J. SINDELAR

Edward J. Sindelar

403044

LPO AGENCY #

INSPECTOR NAME (PRINT):

INSPECTOR SIGNATURE

INSPECTOR CERTIFICATION NO

0401

(715) 413 - 1833

9/25/2018

FDID # FOR LOCATION WHERE INSPECTION PERFORMED

INSPECTOR TELEPHONE:NUMBER

DATE SIGNED

INSPECTOR NOTES:



Wisconsin Department of Agriculture, Trade and Consumer Protection
 Bureau of Weights and Measures
 Storage Tank Regulation, PO Box 7837, Madison, WI 53707-7837
 Phone: (608) 224-4942

FOR OFFICE USE ONLY

Lic # 437112 (0401)

Wis. Admin. Code §ATCP 93.115
§ATCP 93.350

ATCP 93 NOTIFICATION RECORD

Personal information you provide may be used for purposes other than that for which it was originally collected (s. 15.04(1)(m), Wis. Stats.).

TO: Edward Sindelar

OFFICE LOCATION:

(Refer to https://datcp.wi.gov/Pages/Programs_Services/StorageTankContacts.aspx for a jurisdiction's authorized agent/department.)

Note: Only the notification form is required for non-flammable, non-combustible, hazardous liquid, or CERCLA tanks greater than or equal to 5,000 gallon capacity that are under the direct supervision of a qualified engineer. A plan review is not required. (ATCP 93.350(2)(b)).

LOCATION / IDENTIFICATION

| | | | | | | |
|---|--|---|--|-------------------------------------|-------------|--------------|
| SITE NAME Homestead Station & Store | | FACILITY NUMBER 437112 | FIRE DEPT. PROVIDING FIRE PROTECTION COVERAGE 0401 Barnes | | | |
| SITE STREET ADDRESS 3610 Cty N | | <input type="checkbox"/> CITY | <input checked="" type="checkbox"/> TOWN | <input type="checkbox"/> VILLAGE | STATE Wi | ZIP 54873 |
| OWNER NAME Gmb Enterprises LLC. | | PHONE NUMBER () - | TANK OWNER EMAIL | | | |
| OWNER STREET ADDRESS 6025 Kelly Lake Rd | | <input type="checkbox"/> CITY | <input checked="" type="checkbox"/> TOWN | <input type="checkbox"/> VILLAGE | STATE Wi | ZIP 54873 |
| CONTRACTOR NAME Schaper Excavating & Petroleum LLC | | PHONE NUMBER (608) 429 - 2300 | CELL NUMBER (608) 617 - 4612 | EMAIL murf@schaperexcavating.com | | |
| STREET ADDRESS W4396 Cty E | | <input type="checkbox"/> CITY | <input checked="" type="checkbox"/> TOWN | <input type="checkbox"/> VILLAGE | STATE Wi | ZIP 53954 |
| DATE WORK IS TO BEGIN 9/24/2018 | DATE/TIME REQUESTED FOR TANK INSPECTION 9/25/2018 @ 12:00 | ATCP 93 CERTIFIED INSTALLER SUPERVISOR OR QUALIFIED ENGINEER Murf 401583 | | | | |

PROJECT WILL INVOLVE: (Check all that apply) Plan Approval No.: Approval Date:

| | UST | AST | No. of Tanks | Comments: |
|---|-------------------------------------|--------------------------|--------------|-----------|
| Tank Installation | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 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 ¹ | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Tank Closure | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 4 | |
| Alternative Fuel Storage Tank Installation ^{2,3,5} (see footnotes below) | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Alternative Fuel Storage Tank Conversion ^{4,5} (see footnotes below) | <input type="checkbox"/> | <input type="checkbox"/> | | |

¹Send Notice to DATCP (see address above). Installation inspection is not required if construction/installation is supervised by a qualified engineer.
²For LPO installations send notice to both the assigned LPO and DATCP General Inspection Inspector. DACTP General Inspection Inspector will be at the final inspection only. Alternative fuel storage tank systems shall not begin operation until the DATCP General Inspection Inspector has granted approval.
³For DATCP installation inspections send notice to only the assigned DACTP Installation Inspector. Alternative fuel storage tank systems shall not begin operation until the DATCP general inspector has granted approval.
⁴Send notice to only the DATCP General Inspection Inspector.
⁵See Conditional Approval letter and Notification email for installation and general inspector information.

For USTs: If an Owner/Operator intends to begin operation immediately after the final inspection, they shall prepare and submit the documentation listed below at least 15 days prior to the final inspection:

- A TR-WM-137 Underground Flammable/Combustible Liquid Storage Tank Registration.
- A Wisconsin Operator Training Designation form.
- Affidavit of Financial Responsibility, certificate of insurance, and site schedule of covered locations and storage tanks.

Site assessment conducted by: General Engineering Portage WI



Wisconsin Department of Agriculture, Trade and Consumer Protection
 Bureau of Weights and Measures
 PO Box 7837 Madison, WI 53707-7837
 (608) 224-4942

FOR OFFICE USE ONLY
 TDID#: Lic 437112 (0401)
 Reg Obj #: EQ # 34804
 Wis. Admin. Code §ATCP 93.140

UNDERGROUND FLAMMABLE/COMBUSTIBLE/HAZARDOUS LIQUID STORAGE TANK REGISTRATION

Personal information you provide may be used for purposes other than that for which it was originally collected (s. 15.04(1)(m) Wis. Stats.).

Underground tanks in Wisconsin that have stored or currently store petroleum or regulated substances must be registered. A separate form is needed for each tank. Send each completed form to the agency designated above. Have you previously registered this tank by submitting a form? Yes No

If yes, are you correcting/updating information only? Yes No

This registration applies to a tank status that is (check one):

- In Use
- Abandoned with Product (empty)
- Closed - Filled with Inert Materials
- Newly Installed
- Abandon with Water
- Ownership Change (Indicate new owner name in block 2 - attach deed)
- Abandoned with Product
- Closed - Tank Removed
- Temporarily Out of Service - Provide Date:

Fire Dept. providing fire coverage where tank is located: CITY TOWN VILLAGE Barnes 0401

| IDENTIFICATION (Please Print) | | | |
|---|-----|---|--|
| 1. TANK SITE NAME Homestead Station & Store | | COUNTY Bayfield | PHONE () - |
| SITE STREET ADDRESS 3610 Cty N | | <input type="checkbox"/> CITY <input type="checkbox"/> VILLAGE <input checked="" type="checkbox"/> TOWN OF: Barnes | STATE ZIP Wi 54873 |
| 2. TANK OWNER LEGAL NAME Gmb Enterprises LLC | | COUNTY Bayfield | PHONE: Check <input type="checkbox"/> CELL or <input type="checkbox"/> LAND () - |
| MAILING ADDRESS 6025 Kelly Lake Rd | | <input type="checkbox"/> CITY <input type="checkbox"/> VILLAGE <input checked="" type="checkbox"/> TOWN OF: Barnes | STATE ZIP Wi 54873 |
| 3. PROPERTY OWNER NAME (if different from Tank Owner Legal Name #2) | | COUNTY (if different from County #2) | |
| PROPERTY OWNER ADDRESS (if different from Site Street Address #1) | | <input type="checkbox"/> CITY <input type="checkbox"/> VILLAGE <input type="checkbox"/> TOWN OF: | STATE ZIP |
| 4. CLASS A NAME | DOB | CERTIFICATION: (Attach certificate) | |
| 5. CLASS B NAME | DOB | CERTIFICATION: (Attach certificate) | |
| SITE ID: 34804 185155 | | FACILITY ID # 437112 437112 | CUSTOMER ID # 961976 |
| Tank Capacity (gallons): 10000 | | Tank Age (age or date installed): 9/1/1997 | Vehicle fueling: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| LAND OWNER TYPE (check one) Refer to back | | | |
| <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Federal Leased <input type="checkbox"/> Federal Owned <input type="checkbox"/> Tribal Nation <input type="checkbox"/> Municipal <input type="checkbox"/> Other Government <input checked="" type="checkbox"/> Private | | | |
| OCCUPANCY TYPE (check one) Refer to back | | | |
| <input checked="" type="checkbox"/> Retail Fuel Sales <input type="checkbox"/> Mercantile/Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Residential <input type="checkbox"/> School <input type="checkbox"/> Utility <input type="checkbox"/> Government Fleet <input type="checkbox"/> Agricultural (crop or livestock production) <input type="checkbox"/> Backup or Emergency Generator <input type="checkbox"/> Other (specify): | | | |
| TANK CONSTRUCTION: | | | Overfill Protection? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| <input checked="" type="checkbox"/> Bare Steel <input type="checkbox"/> Coated Steel <input type="checkbox"/> Steel - Fiberglass Reinforced Plastic Composite <input type="checkbox"/> Fiberglass <input type="checkbox"/> Unknown <input type="checkbox"/> Other (specify): <input type="checkbox"/> Lined (date): | | | Spill Containment? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| TANK CATHODIC PROTECTION: <input checked="" type="checkbox"/> Sacrificial Anodes <input type="checkbox"/> Impressed Current <input type="checkbox"/> N/A | | | Tank Double Walled? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| PRIMARY TANK LEAK DETECTION METHOD: <input type="checkbox"/> Automatic tank gauging <input type="checkbox"/> Interstitial monitoring ⇒ Electronic <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Inventory control and tightness testing | | | |
| <input type="checkbox"/> Manual tank gauging (only for tanks of 1,000 gallons or less) <input checked="" type="checkbox"/> Statistical Inventory Reconciliation (SIR) <input type="checkbox"/> Unknown | | | |
| PIPING CONSTRUCTION: <input type="checkbox"/> Single Wall <input checked="" type="checkbox"/> Double Wall: | | | |
| <input type="checkbox"/> Bare Steel <input type="checkbox"/> Coated Steel <input type="checkbox"/> Fiberglass <input checked="" type="checkbox"/> Flexible <input type="checkbox"/> Copper <input type="checkbox"/> Unknown <input type="checkbox"/> N/A <input type="checkbox"/> Other: 121160 - Piping | | | |
| PIPING CATHODIC PROTECTION: <input type="checkbox"/> Sacrificial Anodes <input type="checkbox"/> Impressed Current <input checked="" type="checkbox"/> N/A | | | |
| PRIMARY PIPING SYSTEM TYPE: <input type="checkbox"/> Pressurized piping with ⇒ <input type="checkbox"/> A. Pump auto shutoff - ELLD <input type="checkbox"/> B. Flow restrictor - MLLD <input type="checkbox"/> Unknown | | | |
| <input type="checkbox"/> Suction piping with check valve at tank <input checked="" type="checkbox"/> Suction piping with check valve at pump and inspectable <input type="checkbox"/> Not needed if waste oil | | | |
| PIPING LEAK DETECTION METHOD: <input type="checkbox"/> Interstitial monitoring ⇒ Electronic <input type="checkbox"/> Yes <input type="checkbox"/> No ⇒ Sump or cable sensor <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| <input type="checkbox"/> Tightness testing <input type="checkbox"/> Electronic line monitor - ELLD <input type="checkbox"/> SIR <input checked="" type="checkbox"/> Not required <input type="checkbox"/> Unknown | | | |
| TANK CONTENTS (Current, or previous product (if tank now empty)) <input type="checkbox"/> Leaded <input checked="" type="checkbox"/> Unleaded <input type="checkbox"/> Gas-ethanol blend: ___ % <input type="checkbox"/> Diesel | | | |
| <input type="checkbox"/> Bio-Diesel: ___ % <input type="checkbox"/> Aviation <input type="checkbox"/> Premix <input type="checkbox"/> Fuel Oil <input type="checkbox"/> Kerosene <input type="checkbox"/> New Oil <input type="checkbox"/> New oil - Flash point less than 200°F | | | |
| <input type="checkbox"/> Waste/Used Motor Oil ⇒ <input type="checkbox"/> Used for Heating <input type="checkbox"/> Hazardous Waste/Interface* <input type="checkbox"/> Empty* <input type="checkbox"/> Sand/Grave/Slurry* <input type="checkbox"/> Unknown | | | |
| <input type="checkbox"/> Other (specify): <input type="checkbox"/> Chemical* Name CAS# | | | |
| * NOT PECFA eligible. | | Geo Latitude: | Geo Longitude: |
| If Tank Closed, Abandoned or Out of Service: 9/25/2018 | | Has a site assessment been completed? (see reverse side for details) <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| TANK OWNER LEGAL NAME (please print) | | TANK OWNER E-MAIL | |
| TANK OWNER SIGNATURE (Note: By signing, signer is accepting legal and financial responsibility for the storage tank system.) | | | DATE: 9/25/2018 |

Note: Refer to comments on reverse side of form.

Lic 437112 (0401)

WM-140 (7/18) Formerly ERS-8951

Wisconsin Department of Agriculture, Trade and Consumer Protection

Bureau of Weights and Measures

P.O. Box 7837, Madison, WI 53707-7837

(608) 224-4942

Wis. Admin. Code §ATCP 93.560

TANK SYSTEM SERVICE AND CLOSURE ASSESSMENT REPORT

Personal information you provide may be used for purposes other than that for which it was originally collected (s. 15.04(1)(m) Wis. Stats.)

Complete One Form for Each System Service Event

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

CHECK ONE: UNDERGROUND ABOVEGROUND

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

OWNER INFORMATION

| | | |
|--|---|---------------------------|
| OWNER NAME Gmb Enterprises LLC | CONTACT NAME | TITLE |
| MAILING ADDRESS 6025 Kelly Lake Rd. | <input type="checkbox"/> CITY <input checked="" type="checkbox"/> TOWN <input type="checkbox"/> VILLAGE Barnes | STATE ZIP Wi 54873 |
| TELEPHONE: () - | E-MAIL | |

SITE INFORMATION

| | | |
|--|---|---------------------------|
| FACILITY NAME Homestead Station & Store | <input type="checkbox"/> CITY <input checked="" type="checkbox"/> TOWN <input type="checkbox"/> VILLAGE Barnes | STATE ZIP Wi 54873 |
| SITE ADDRESS (Not PO Box) 3610 Cty N | | |

SERVICE CONTRACTOR INFORMATION

| | | |
|--|--|---------------------------|
| PRIMARY SERVICE CONTRACTOR Section A Above Schaper Excavating & Petroleum LLC | TELEPHONE: (608) 429 - 2300 | CELL: (608) 617 - 4612 |
| STREET ADDRESS W4396 Cty E | <input type="checkbox"/> CITY <input checked="" type="checkbox"/> TOWN <input type="checkbox"/> VILLAGE Scott | STATE ZIP Wi 53954 |

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

| a Tank ID # | b Type of Closure ¹ | c Tank Material of Construction | d Piping Material of Construction | e Tank Capacity (gallons) | f Contents ² | g Release - System Integrity Compromised (e.g. holes, cracks, loose connection, etc)? | h If "Yes" to "g", Then Specify Source and Cause of Release ⁵ | |
|----------------|-----------------------------------|------------------------------------|--------------------------------------|------------------------------|----------------------------|--|---|-------------------------------|
| | | | | | | | Source of Release ³ | Cause of Release ⁴ |
| 34551 | P | Steel | Flex | 3,000 | Diesel | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| 54633 | P 34633 | Steel | Flex | 4,000 | Unleaded | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| 54661 | P 34661 | Steel | Flex | 6,000 | Diesel | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| 34804 | P | Steel | Flex | 10,000 | Unleaded | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| | | | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| | | | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |

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

2. Indicate type of product: DL = Diesel, LG = Leaded Gasoline, UG = Unleaded Gasoline, FO = Fuel Oil, GH = Gasohol, AF = Aviation Fuel, K = Kerosene, PX = Premix, WO = Waste/Used Motor Oil, FCHZW = Flammable/Combustible Hazardous Waste, OC = Other Chemical (indicate the chemical name(s):

3. CAS number(s):

4. Source of release: T = tank, P = piping, D = dispenser, STP = submersible turbine pump, DP = delivery problem, O = other, UNK = Unknown

5. Cause of release:

S = spill, O = overflow, POMD = physical or mechanical damage, C = corrosion, IP = installation problem, O = other, UNK = Unknown

6. Has release been reported to the Department of Natural Resources? Yes No Release not evident at this time

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. Yes No

All local permits were obtained before beginning closure. Yes No NA

AST Form TR-WM-137 or AST Form TR-WM-118 filed by owner with the DATCP indicating closure. Yes No NA

NOTE: TANK INVENTORY FORM TR-WM-137 or TR-WM-118 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 | Inspector Not Present | NA |
|--|---|---|--------------------------|--------------------------|
| 1. Product removed. | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Product lines drained into tank (or other container) and liquid removed, and | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| b. All product removed to bottom of suction line, OR | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| c. All product removed to within 1" of bottom. | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Fill pipe, gauge pipe, tank truck vapor recovery fittings, and vapor return lines capped. | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. All product lines at the islands or pumps located elsewhere are removed and capped, OR | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Dispensers/pumps left in place but locked and power disconnected. | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Vent lines left open. | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Inventory form filed indicating temporarily out-of-service (TOS) closure. | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |

D.2 CLOSURE BY REMOVAL OR IN-PLACE

| | | | | |
|---|--|--|--------------------------|--------------------------|
| 1. General Requirements | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> | <input type="checkbox"/> |
| 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"/> | <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"/> | <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"/> | <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"/> | <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"/> | <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"/> | <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"/> | <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"/> | <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"/> | <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"/> | <input type="checkbox"/> |
| c. Tank labeled in full compliance with API 1604 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"/> | <input type="checkbox"/> |

NOTE: COMPLETE TANK LABELING SHOULD INCLUDE WARNING AGAINST REUSE; FORMER CONTENTS; VAPOR STATE; VAPOR FREEING TREATMENT; MONTH/DAY/YEAR OF REMOVAL

| | | | | |
|--|--|--|--------------------------|--------------------------|
| 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"/> | <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"/> | <input type="checkbox"/> |

3. Specific Closure-In-Place Requirements

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

NOTE: CLOSURES IN-PLACE ARE ONLY ALLOWED WITH THE PRIOR WRITTEN APPROVAL OF THE DEPARTMENT OF AGRICULTURE, TRADE AND CONSUMER PROTECTION (DATCP) OR LOCAL AGENT.

E. REPAIR, UPGRADE OR CHANGE-IN-SERVICE

| | | |
|---|---|-----------------------------|
| Written notification was provided to the local agent 5 days in advance of service date. | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> NA |
| All local permits were obtained before beginning service. | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> NA |
| Form TR-WM-137 or 0 TR-WM-118 filed by owner with the DATCP indicating change-in-service. | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> 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.
- 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 <5% 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

Richard Schaper

Richard Schaper

401583

9/19/2018

REMOVER/CLEANER NAME (PRINT):

REMOVER/CLEANER SIGNATURE

CERTIFICATION NO

DATE SIGNED

I attest that the procedures and information which I have provided as the tank closure contractor are correct and comply with ATCP 93.

Company expected to perform soil contamination assessment General Engineering / Portage Wi

H. INSPECTOR INFORMATION

EDWARD J. SINDELAR

Edward J. Sindelar

403044

LPO AGENCY #

INSPECTOR NAME (PRINT):

INSPECTOR SIGNATURE

INSPECTOR CERTIFICATION NO

0401

(715) 413 - 1833

9/25/2018

FDID # FOR LOCATION WHERE INSPECTION PERFORMED

INSPECTOR TELEPHONE:NUMBER

DATE SIGNED

INSPECTOR NOTES:



Wisconsin Department of Agriculture, Trade and Consumer Protection
 Bureau of Weights and Measures
 Storage Tank Regulation, PO Box 7837, Madison, WI 53707-7837
 Phone: (608) 224-4942

FOR OFFICE USE ONLY
 Lic # 437112 (0401)
 Wis. Admin. Code §ATCP 93.115
 §ATCP 93.350

ATCP 93 NOTIFICATION RECORD

Personal information you provide may be used for purposes other than that for which it was originally collected (s. 15.04(1)(m), Wis. Stats.).

TO: Edward Sindelar

OFFICE LOCATION:

(Refer to https://datcp.wi.gov/Pages/Programs_Services/StorageTankContacts.aspx for a jurisdiction's authorized agent/department.)

Note: Only the notification form is required for non-flammable, non-combustible, hazardous liquid, or CERCLA tanks greater than or equal to 5,000 gallon capacity that are under the direct supervision of a qualified engineer. A plan review is not required. (ATCP 93.350(2)(b)).

LOCATION / IDENTIFICATION

| | | | | | | |
|---|--|---|--|-------------------------------------|-------------|--------------|
| SITE NAME Homestead Station & Store | | FACILITY NUMBER 437112 | FIRE DEPT. PROVIDING FIRE PROTECTION COVERAGE 0401 Barnes | | | |
| SITE STREET ADDRESS 3610 Cty N | | <input type="checkbox"/> CITY | <input checked="" type="checkbox"/> TOWN | <input type="checkbox"/> VILLAGE | STATE Wi | ZIP 54873 |
| OWNER NAME Gmb Enterprises LLC. | | PHONE NUMBER () - | TANK OWNER EMAIL | | | |
| OWNER STREET ADDRESS 6025 Kelly Lake Rd | | <input type="checkbox"/> CITY | <input checked="" type="checkbox"/> TOWN | <input type="checkbox"/> VILLAGE | STATE Wi | ZIP 54873 |
| CONTRACTOR NAME Schaper Excavating & Petroleum LLC | | PHONE NUMBER (608) 429 - 2300 | CELL NUMBER (608) 617 - 4612 | EMAIL murf@schaperexcavating.com | | |
| STREET ADDRESS W4396 Cty E | | <input type="checkbox"/> CITY | <input checked="" type="checkbox"/> TOWN | <input type="checkbox"/> VILLAGE | STATE Wi | ZIP 53954 |
| DATE WORK IS TO BEGIN 9/24/2018 | DATE/TIME REQUESTED FOR TANK INSPECTION 9/25/2018 @ 12:00 | ATCP 93 CERTIFIED INSTALLER SUPERVISOR OR QUALIFIED ENGINEER Murf 401583 | | | | |

PROJECT WILL INVOLVE: (Check all that apply) Plan Approval No.: Approval Date:

| | UST | AST | No. of Tanks | Comments: |
|---|-------------------------------------|--------------------------|--------------|-----------|
| Tank Installation | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 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 ¹ | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Tank Closure | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 4 | |
| Alternative Fuel Storage Tank Installation ^{2,3,5} (see footnotes below) | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Alternative Fuel Storage Tank Conversion ^{4,5} (see footnotes below) | <input type="checkbox"/> | <input type="checkbox"/> | | |

¹Send Notice to DATCP (see address above). Installation inspection is not required if construction/installation is supervised by a qualified engineer.

²For LPO installations send notice to both the assigned LPO and DATCP General Inspection Inspector. DACTP General Inspection Inspector will be at the final inspection only. Alternative fuel storage tank systems shall not begin operation until the DATCP General Inspection Inspector has granted approval.

³For DATCP installation inspections send notice to only the assigned DACTP Installation Inspector. Alternative fuel storage tank systems shall not begin operation until the DATCP general inspector has granted approval.

⁴Send notice to only the DATCP General Inspection Inspector.

⁵See Conditional Approval letter and Notification email for installation and general inspector information.

For USTs: If an Owner/Operator intends to begin operation immediately after the final inspection, they shall prepare and submit the documentation listed below at least 15 days prior to the final inspection:

- A TR-WM-137 Underground Flammable/Combustible Liquid Storage Tank Registration.
- A Wisconsin Operator Training Designation form.
- Affidavit of Financial Responsibility, certificate of insurance, and site schedule of covered locations and storage tanks.

Site assessment conducted by: General Engineering Portage WI