

UST-61		24-Hour Release and UST Leak Reporting Form.	
For Releases in NC		This form should be completed and submitted to the UST Section's regional office following a known or suspected release from an underground storage tank (UST) system. This form is required to be submitted within 24 hours of discovery of a known or suspected release	
(DWM USE ONLY) Incident # _____ Risk (M,I,L,U) _____ Received On _____ Received By _____ Reported by (circle one): Phone, Fax or Report: _____ Region _____		Suspected Contamination? (Y/N) <u>Y</u> Confirmed GW Contamination? (Y/N) <u>Y</u> Confirmed Soil Contamination? (Y/N) <u>N</u> Samples Taken? (Y/N) <u>Y</u> Free Product? (Y/N) <u>N</u> If Yes, State Greatest Thickness _____	
		Facility ID Number <u>0-031447</u> Date Leak Discovered <u>1-13-09</u> Comm/Non-Commercial? <u>Comm</u> Reg/Non-regulated? <u>Reg</u>	
INCIDENT DESCRIPTION			
Incident Name: <u>The Pantry #832</u>			
Address: <u>501 South Memorial Drive</u>		County: <u>Pitt</u>	
City/Town: <u>Greenville</u>		Zip Code: <u>27858</u>	
Latitude (decimal degrees): <u>35.612523</u>		Longitude (decimal degrees): <u>77.392701</u>	
Briefly describe suspected or confirmed release: (including but not limited to: nature of release, date of release, amount of release, amount of free product present and recovery efforts, initial responses conducted, impacts to receptors)			Obtained by:
<u>Groundwater samples collected from a monitoring well sampled as part of a UST Closure indicated concentrations of Benzene, Naphthalene, and C9-C10 Aromatics greater than 15A NCAC 2L Standards.</u>			<input type="checkbox"/> GPS
<u>Benzene=137 ug/l, Naphthalene=43.4 ug/l</u>			<input type="checkbox"/> Topographic map
<u>C9-C10 Aromatics=2,100 ug/l</u>			<input type="checkbox"/> GIS Address matching
			<input checked="" type="checkbox"/> Other
			<input type="checkbox"/> Unknown
			Describe location: <u>Google Earth</u>
HOW RELEASE WAS DISCOVERED (Release Code)			
(Check one)			
<input type="checkbox"/> Release Detection Equipment or Methods		<input type="checkbox"/> Visual/Odor	
<input checked="" type="checkbox"/> During UST Closure/Removal		<input type="checkbox"/> Water in Tank	
<input type="checkbox"/> Property Transfer		<input type="checkbox"/> Water Supply Well Contamination	
		<input type="checkbox"/> Groundwater Contamination	
		<input type="checkbox"/> Surface Water Contamination	
		<input type="checkbox"/> Other (specify) _____	
SOURCE OF CONTAMINATION			
Source of Release (Check one to indicate primary source)	Cause of Release (Check one to indicate primary cause)	Type of Release (Check one)	Product Type Released (Check one to indicate primary product type released)
<input checked="" type="checkbox"/> Tank <input type="checkbox"/> Piping <input type="checkbox"/> Dispenser <input type="checkbox"/> Submersible Turbine Pump <input type="checkbox"/> Delivery Problem <input type="checkbox"/> Other <input type="checkbox"/> Unknown	<input type="checkbox"/> Spill <input type="checkbox"/> Overfill <input type="checkbox"/> Corrosion <input type="checkbox"/> Physical or Mechanical Damage <input type="checkbox"/> Install Problem <input type="checkbox"/> Other <input checked="" type="checkbox"/> Unknown	<input checked="" type="checkbox"/> Petroleum <input type="checkbox"/> Non-Petroleum <input type="checkbox"/> Both Location (Check one) <input checked="" type="checkbox"/> Facility <input type="checkbox"/> Residence <input type="checkbox"/> Other	<input checked="" type="checkbox"/> Gasoline/ Diesel/ Kerosene <input type="checkbox"/> Heating Oil <input type="checkbox"/> Other Petroleum Products <input type="checkbox"/> Metals <input type="checkbox"/> Other Inorganics <input type="checkbox"/> Other Organics <input type="checkbox"/> Diesel/Veg. Oil Blend <input type="checkbox"/> Vegetable Oil 100% <input type="checkbox"/> E10 - E20 <input type="checkbox"/> E21 - E84 <input type="checkbox"/> E85 - E99 <input type="checkbox"/> Ethanol 100% <input type="checkbox"/> E01 - E09
Definitions presented on reverse		Definitions presented on reverse	
Ownership 1. Municipal 2. Military 3. Unknown 4. <u>Private</u> 5. Federal 6. County 7. State			
Operation Type 1. Public Service 2. Agricultural 3. Residential 4. Education/Relig. 5. Industrial 6. <u>Commercial</u> 7. Mining			

IMPACT ON DRINKING WATER SUPPLIES			
Water Supply Wells Affected? 1. Yes 2. <u>No</u> 3. Unknown			
Number of Water Supply Wells Affected _____			
Water Supply Wells Contaminated: (Include Users Names, Addresses and Phone Numbers. Attach additional sheet if necessary)			
1. 2. 3.			
UST SYSTEM OWNER			
UST Owner/Company <u>The Pantry, Inc.</u>			
Point of Contact <u>Brent Puzak</u>		Address <u>P.O. BOX 1410</u>	
City <u>Sanford</u>	State <u>NC</u>	Zip Code <u>27330</u>	Telephone Number <u>919-774-6700</u>
UST SYSTEM OPERATOR			
UST Operator/Company <u>The Pantry, Inc.</u>		Address <u>P.O. Box 1410</u>	
City <u>Sanford</u>	State <u>NC</u>	Zip Code <u>27330</u>	Telephone Number <u>919-774-6700</u>
LANDOWNER AT LOCATION OF UST INCIDENT			
Landowner <u>Peter J. Scales</u>		Address <u>13829 Bear Valley Trail</u>	
City <u>Redding</u>	State <u>CA</u>	Zip Code <u>96003</u>	Telephone Number
Draw Sketch of Area (showing two major road intersections) or Attach Map			
<u>Air Photo from GIS Attached</u>			
Person Reporting Incident <u>Michael Shaw</u>	Company <u>M D Shaw & Associates, P.C.</u>	Telephone Number <u>704-578-5974</u>	
Title <u>President</u>	Address <u>8501 Foxtail Ln, Huntersville, NC</u>	Date <u>1-13-2009</u>	

UST Form 61 (02/08)

Definitions of Sources

- Tank:** means the tank that stores the product and is part of the underground storage tank system
- Piping:** means the piping and connectors running from the tank or submersible turbine pump to the dispenser or other end-use equipment (Vent, vapor recovery, or fill lines are excluded.)
- Dispenser:** includes the dispenser and the equipment used to connect the dispenser to the piping (e.g., a release from a suction pump or from components located above the shear valve)
- Submersible Turbine Pump (STP) Area:** includes the submersible turbine pump head (typically located in the tank sump), the line leak detector, and the piping that connects the submersible turbine pump to the tank.
- Delivery Problem:** identifies releases that occurred during product delivery to the tank. (Typical causes associated with this source are spills and overfills.)
- Other:** serves as the option to use when the release source is known but does not fit into one of the preceding categories (e.g., for releases from vent lines, vapor recovery lines, and fill lines)
- Unknown:** identifies releases for which the source has not been determined

Definitions of Causes

- Spill:** use this cause when a spill occurs (e.g., when the delivery hose is disconnected from the tank fill pipe or when the nozzle is removed from the dispenser)
- Overfill:** use when an overfill occurs (e.g., overfills may occur from the fill pipe at the tank or when the nozzle fails to shut off at the dispenser)
- Physical or Mechanical Damage:** use for all types of physical or mechanical damage, except corrosion (e.g., puncture of tank or piping, loose fittings, broken components, and components that have changed dimension)
- Corrosion:** use when a metal tank, piping, or other component has a release due to corrosion (e.g., for steel corrosion takes the form of rust)
- Installation Problem:** use when the problem is determined to have occurred specifically because the UST system was not installed properly
- Other:** use this option when the cause is known but does not fit into one of the preceding categories (e.g., putting regulated substances into monitoring wells)
- Unknown:** use when the cause has not been determined

Subject: Pantry #832 UST Closure Report

From: "Michael D. Shaw" <mshaw@mdshaw-Associates.com>

Date: Thu, 22 Jan 2009 11:24:41 -0500

To: "Brent Puzak" <BrentP@thepantry.com>, "Stormey Crisco" <stormey.crisco@thepantry.com>

CC: <pjscales@shasta.com>, <sylvia.hunneke@ncmail.net>

Brent,

Attached is a copy of the UST Closure Report for The Pantry #832 in Greenville, NC.

I am sending a hard copy to:

Sylvia Hunneke – NCDENR UST Section

And

Peter Scales – Land Owner

MDSA is in the process of completing the Phase I Limited Site Assessment for the site and should have the LSA Report out Mid-February.

Let me know if you have any questions.

Michael D. Shaw, P.G.

President

M D Shaw & Associates, PC

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Huntersville, NC 28078

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2009-01-21_832_REPORT-UST Closure.pdf	Content-Type: application/pdf
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