|  |  |
| --- | --- |
| Minnesota Pollution Control Agency (MPCA), 520 Lafayette Road North, St. Paul, MN 55155-4194 | General excavation report worksheetPetroleum Remediation ProgramGuidance document 3-02Doc Type: General Excavation Report Worksheet |

## Instructions:Do not revise or delete text or questions contained in this report.

## Complete this report to document underground and aboveground petroleum tank removals, closures, and/or upgrades at sites where a petroleum release has been identified and the MPCA has issued a leak site ID, regardless of whether petroleum contaminated soil (PCS) is excavated, and to document excavation and treatment or disposal of PCS performed during tank system removal, closure, and/or upgrade activities.

## Conduct soil excavation activities in accordance with [Excavation of petroleum-contaminated soil and tank removal sampling](https://www.pca.state.mn.us/sites/default/files/c-prp3-01.pdf). If no additional investigation is necessary, email this report and required attachments to the MPCA project manager. If additional investigation is necessary, include this [General excavation report worksheet](https://www.pca.state.mn.us/sites/default/files/c-prp3-02.docx) as Appendix C in the [Investigation report](https://www.pca.state.mn.us/sites/default/files/c-prp4-06.docx).

## Do not complete this report to document excavation of PCS in response to a [recent release](https://www.pca.state.mn.us/sites/default/files/c-prp2-04.pdf), after surface soil excavation, or as an MPCA-approved corrective action after a site investigation has been conducted where a tank system hasn’t been removed or upgraded as a part of the excavation. Instead, complete the [Corrective action excavation report worksheet](https://www.pca.state.mn.us/sites/default/files/c-prp3-02a.docx).

**Note:** All documents with hyperlinks in this form are available on the MPCA’s Cleanup guidance website at <https://www.pca.state.mn.us/waste/cleanup-guidance>.

|  |  |  |  |
| --- | --- | --- | --- |
| **MPCA Site ID:**  | LS00     | **Date (mm/dd/yyyy):** |       |

Responsible party information

|  |  |
| --- | --- |
| Individual or corporate name: |       |
| Mailing address: |       |
| City: |       | State: |       | Zip code: |       |
| Email: |       | Phone: |       |
| Alternative contact name (if any): |       | Phone: |       |

Leak site information

|  |  |  |  |
| --- | --- | --- | --- |
| Name: |       | Phone: |       |
| Leak site address: |       |
| City: |       | State: |       | Zip code: |       |
| County: |       |  |

Tank contractor

|  |  |
| --- | --- |
| Company name: |       |
| Contact name: |       |
| Mailing address: |       |
| City: |       | State: |       | Zip code: |       |
| Email: |       | Phone: |       |
| Underground storage tank (UST) certified contractor number:  |       |
| UST certified supervisor number: |       |

Environmental professional information

*By signing this document, I/we acknowledge that we are submitting this document on behalf of and as agents of the responsible person or volunteer for this leak site. I/we acknowledge that if information in this document is inaccurate or incomplete, it will delay the completion of remediation and may harm the environment and may result in a reduction in Petrofund reimbursement. In addition, I/we acknowledge on behalf of the responsible person or volunteer for this leak site that if this document is determined to contain a false material statement, representation, or certification, or if it omits material information, the responsible person or volunteer may be found to be in violation of Minn. Stat. § 115.075 or Minn. R. 7000.0300 (Duty of Candor), and that the responsible person or volunteer may be liable for civil penalties.*

***By typing/signing my name below,*** *I certify the above statements to be true and correct, to the best of my knowledge, and that this information can be used for the purpose of processing this form.*

**Signatures**

|  |  |  |
| --- | --- | --- |
| **Report author(s)** |  | **Report reviewer(s)** |
| Signature: |       |  | Signature: |       |
|  | *(This document has been electronically signed.)* |  |  | *(This document has been electronically signed.)* |
| Title: |       |  | Title: |       |
| Date (mm/dd/yyyy): |       |  | Date (mm/dd/yyyy): |       |
| Signature: |       |  | Signature: |       |
|  | *(This document has been electronically signed.)* |  |  | *(This document has been electronically signed.)* |
| Title: |       |  | Title: |       |
| Date (mm/dd/yyyy): |       |  | Date (mm/dd/yyyy): |       |
| Name(s) of field technician(s): |       |

**Company information**

|  |  |  |  |
| --- | --- | --- | --- |
| Name: |       | Phone: |       |
| Mailing address: |       |
| City: |       | State: |       | Zip code: |       |

**Project manager information**

|  |  |
| --- | --- |
| Name: |       |
| Phone: |       | Email: |       |

Section 1: Site and release information

|  |  |
| --- | --- |
| **Double click checkboxes to select *Checked* and select *OK*.** |  |
|  | Date of release discovery (mm/dd/yyyy): |       |  |
|  | Date release reported to the Minnesota duty officer (mm/dd/yyyy): |       |  |
|  | 1. Was release reported upon discovery in the field? Examples: organic vapor readings above background, visual staining, petroleum odors, free product, or petroleum sheen?
 | [ ]  Yes [ ]  No |  |
|  | 1. Was release reported based on lab results?
 | [ ]  Yes [ ]  No |  |
|  | 1. If yes, date lab results received (mm/dd/yyyy):
 |       |  |
|  | Type(s) of petroleum product released: |  |
|  | [ ]  Gasoline, unleaded | [ ]  Diesel | [ ]  Motor oil | [ ]  E85 | [ ]  Aviation gas |
|  | [ ]  Gasoline, leaded | [ ]  Fuel oil #1 & #2 | [ ]  Used oil | [ ]  Kerosene | [ ]  Jet fuel |
|  | [ ]  Gasoline, type unknown | [ ]  Fuel oil #4 & #6 | [ ]  Waste oil | [ ]  Hydraulic fluid | [ ]  Unknown |

|  |  |  |  |
| --- | --- | --- | --- |
|  | Volume of the release, if known: |       |  gallons |

|  |  |
| --- | --- |
| D. | **Dates site work performed.** Identify when the tank(s), piping and/or dispensers were removed, closed in place, or replaced, contaminated soil was excavated and stockpiled onsite, soil borings performed, and when contaminated soil was transported to soil disposal facility. To add additional rows, press *tab*. |
|  | **Work performed** | **Date** (mm/dd/yyyy) |
|  |       |       |
|  |       |       |
|  |       |       |
|  |       |       |
|  |       |       |

|  |  |
| --- | --- |
| E. | List the names and title of others on-site during site work, such as the fire marshal, local officials, MPCA staff. |
|  |       |
| F. | Describe the site, such as current land use, occupancy of buildings, and onsite features. |
|  |       |
| G. | Describe the general land use and pertinent geographic features within 1,000 feet of the site, such as residential/industrial/ commercial property, surface water, etc. |
|  |       |
| H. | What is the source of the onsite drinking water supply? |
|  | [ ]  Municipal [ ]  Private Well [ ]  None [ ]  Other |
|  | If other, describe: |       |
| I. | Is there evidence of surficial soil contamination? |
|  | [ ]  Yes [ ]  No |
|  | If yes, describe: |       |
| J. | Is contamination present from previous petroleum releases on-site? |
|  | [ ]  Yes [ ]  No |
|  | If yes, list previous MPCA Site IDs: |       |

Section 2: Excavation information

|  |  |
| --- | --- |
| A. | Dimensions of excavation basin(s). Include excavation boundaries in Figure 3. To add additional rows, press *tab*. |
|  | **Basin** (#1, #2, etc.) | **Length** (ft) | **Width** (ft) | **Depth** (ft) |  |
|  |       |       |       |       |   |
|  |       |       |       |       |  |
| B. | Tank backfill material (sand, gravel, etc.): |       |
| C. | Native soil type (clay, sand, etc.): |       |
| D. | Was petroleum-contaminated soil (PCS) encountered during excavation? | [ ]  Yes [ ]  No |
|  | 1. If yes, was all contamination removed by excavating the allowed volume of soil according to [Excavation of petroleum-contaminated soil and tank removal sampling](https://www.pca.state.mn.us/sites/default/files/c-prp3-01.pdf), Section A? [ ]  Yes [ ]  No
 |
|  |  | * If no, and the site falls into a situation(s) outlined in [Excavation of petroleum-contaminated soil and tank removal sampling](https://www.pca.state.mn.us/sites/default/files/c-prp3-01.pdf) Section I.B., a Limited Site Investigation (LSI) or Remedial Investigation (RI) is necessary. Refer to [Soil and groundwater assessments performed during site investigations](https://www.pca.state.mn.us/sites/default/files/c-prp4-01.pdf) for requirements of further investigation, or justify the rationale for not completing further investigation.
 |
|  |  |       |
| E. | Was petroleum saturated or grossly contaminated soil encountered during the excavation? | [ ]  Yes [ ]  No |
|  | 1. If yes, was the petroleum saturated or grossly contaminated soil removed?
 | [ ]  Yes [ ]  No |
|  | 1. If petroleum saturated or grossly contaminated soil was not removed, why?
 |
|  |       |
| F. | Total volume of PCS removed for treatment or disposal:  |       |  cubic yards |
|  | 1. Volume of the removed soil that was petroleum saturated or grossly contaminated:
 |       |  cubic yards |
|  |  | **Note:** [Excavation of petroleum-contaminated soil and tank removal sampling](https://www.pca.state.mn.us/sites/default/files/c-prp3-01.pdf)details the criteria for and volume of petroleum-contaminated, petroleum saturated and grossly contaminated soil that can be excavated without prior MPCA approval. If the volume to be removed is greater than allowed, contact the MPCA for approval. If granted approval, provide the name of the MPCA staff who granted approval, the approval date, and how the approval was received. |
|  |  |       |
|  | 2. Were new tanks, piping, and/or dispensers installed? | [ ]  Yes [ ]  No |
|  |  a. If yes, what portion of the total volume of PCS was excavated to accommodate the installation of the new tanks and/or piping? |
|  |  |  i. Volume of PCS excavated to accommodate the installation of new tanks and/or piping that was for removed for treatment or disposal: |       |  cubic yards |
|  |  | * Volume of PCS excavated to accommodate the installation of new tanks and/or piping that was petroleum saturated or grossly contaminated:
 |       |  cubic yards |
|  | 3. If contaminated soil was excavated to accommodate new tanks and/or piping, show your calculations supporting the volume of soil removal allowed using Table 2A or 2B in [Excavation of petroleum-contaminated soil and tank removal sampling](https://www.pca.state.mn.us/sites/default/files/c-prp3-01.pdf). |
|  |       |
| G. | Was groundwater or perched water encountered, or was there evidence of a seasonally high groundwater table, such as mottling, during excavation? |
|  | [ ]  Yes | At what depth? |       |  feet |
|  | **Note:** [Excavation of petroleum-contaminated soil and tank removal sampling](https://www.pca.state.mn.us/sites/default/files/c-prp3-01.pdf) requires one groundwater sample per basin be collected. Include analytical results in *Section 6: Table 4 Water Sample Analytical Results.* |
|  | [ ]  No |  What is the depth of the groundwater? |       |  feet |
| H. | Was bedrock encountered in the excavation basin? | [ ]  Yes [ ]  No |
|  |  | At what depth? |       |  feet |
| I. | Were other unique site conditions associated with this site? Example: karst or high water table.  | [ ]  Yes [ ]  No |
|  | If yes, explain: |       |

Section 3: Sampling information

|  |  |
| --- | --- |
| 1.
 | Describe the soil analytical sampling and handling procedures used. |
|  |       |
|  | Describe the field screening methods used to distinguish contaminated from uncontaminated soil. |
|  |       |
|  | A post-excavation boring is required to determine the need for additional investigation at certain sites with sandy or silty sand soil and where the water table is within 25 feet of the ground surface. For more information, refer to MPCA document [Excavation of petroleum-contaminated soil and tank removal sampling](https://www.pca.state.mn.us/sites/default/files/c-prp3-01.pdf). |
|  | Was a post-excavation boring required? | [ ]  Yes [ ]  No |
|  | 1. If yes, was a post-excavation boring completed?
 |  |
|  |  | [ ]  Yes | Update the soil screening and analytical results in *Section 6: Tables*. |
|  |  | [ ]  No  | Explain why no post-excavation soil boring was completed. |
|  |  |  |       |
|  | 1. If groundwater was encountered or if a soil boring was conducted, was there field evidence of groundwater contamination?
 |
|  | [ ]  Yes [ ]  No |
|  | a. If yes, describe evidence of contamination, such as non-aqueous phase liquid (NAPL) - specify thickness (feet), product sheen, or groundwater in contact with petroleum-contaminated soil. |
|  |  |       |
|  | **Note:** If you observe NAPL, contact the Minnesota duty officer immediately as outlined in MPCA guidance document [Light non-aqueous phase liquid management strategy](https://www.pca.state.mn.us/sites/default/files/c-prp2-02.pdf). |
|  |  |
|  |  |

Section 4: Soil treatment or disposal information

|  |  |  |
| --- | --- | --- |
|  | Has the removed PCS been treated or disposed of?  | [ ]  Yes [ ]  No [ ]  N/A |
|  | 1. If yes, specify method(s) of soil treatment or disposal used and treatment site/facility information:
 |
|  | [ ]  Landfilling | [ ]  Land treatment | [ ]  Composting | [ ]  Thin spreading, if less than 10 cubic yards |
|  | [ ]  Out-of-state, please describe: |       |
|  | 1. **Treatment site/facility information:**
 |
|  | MPCA treatment or disposal Site ID for in-state facilities (e.g., SW-##, CS00#####, PRE000###): |       |
|  | Treatment site/Facility name: |       |
|  | Physical address: |       |
|  | City: |       | State: |       | Zip: |       |  |
|  |  | **Note:** If petroleum-contaminated soil was landfilled, include disposal receipts and required information in Section 8: Appendix C. |
|  | b. If soils were land treated or composted, date MPCA approved soil treatment (mm/dd/yyyy): |       |
|  | 1. If no, provide location of the stockpile:
 |
|  | [ ]  On leak site property |
|  | [ ]  Off-site, provide location: |
|  | Physical address: |       |
|  | City: |       | State: |       | Zip: |       |

Section 5: Conclusions and recommendation

|  |  |
| --- | --- |
| Recommendation for site: | [ ]  Site closure |
|  |  | [ ]  Additional investigation |
| **Note:** Only excavation reports recommending closure will be reviewed as stand-alone reports. Those recommending additional work will be reviewed as part of the LSI or RI. |
| Justify the recommendations for the site. |
|       |

Section 6: Tables

Table 1. Tank information1

| **Tank #** | **Tank material2** | **UST or AST** | **Capacity (gallons)** | **Contents (product type)** | **Year installed (yyyy)** | **Tank status3** | **Tank status date (mm/dd/yyyy)** | **Tank condition** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|     |       |       |       |       |      |       |       |       |
|     |       |       |       |       |      |       |       |       |
|     |       |       |       |       |      |       |       |       |
|     |       |       |       |       |      |       |       |       |
|     |       |       |       |       |      |       |       |       |
|     |       |       |       |       |      |       |       |       |
|     |       |       |       |       |      |       |       |       |

*1 Include current and former tanks.*

*2 Use F for fiberglass or S for Steel.*

*3 Indicate: active, removed, closed-in-place, temporary closure, abandoned, or new tank installation.*

Table 2. Results of soil headspace screening

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Sample ID1** | **Sample date (mm/dd/yyyy)** | **Sample depth** **(ft)** | **Soil type** | **PID2 reading (ppm)** |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |

*1 Code the samples sequentially with the following prefixes: sidewall samples with an S, bottom samples with a B, removed soil with an R, stockpile samples with SP, line samples with an L, substance transfer locations with a T, and dispensers with a D. Sample codes should correspond to the site map.*

*2 PID = photoionization detector.*

**Table 3. Analytical results of soil samples**1

| **Sample ID2** | **Sample depth (ft)** | **Sample date(mm/dd/yyyy)** | **Benzene** | **Toluene** | **Ethyl-benzene** | **Xylenes** | **MTBE** | **1,2,4-Trimethyl-benzene** | **1,3,5-Trimethyl-benzene** | **Naph-thalene** | **GRO** | **DRO** | **Lab type2** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|     |       |       |       |       |       |       |       |       |       |       |       |       |       |
|     |       |       |       |       |       |       |       |       |       |       |       |       |       |
|     |       |       |       |       |       |       |       |       |       |       |       |       |       |
|     |       |       |       |       |       |       |       |       |       |       |       |       |       |
|     |       |       |       |       |       |       |       |       |       |       |       |       |       |
|     |       |       |       |       |       |       |       |       |       |       |       |       |       |
|     |       |       |       |       |       |       |       |       |       |       |       |       |       |

*1 Report results in mg/kg. If results are below reporting limits, use < with the report level.*

*2 Code the samples sequentially with the following prefixes: sidewall samples with an S, bottom samples with a B, removed soil with an R, stockpile samples with SP, line samples with an L, substance transfer locations with a T, and dispensers with a D. Sample codes should correspond to the site map.*

*3 Indicate “mobile” or “fixed” in the lab type column.*

**Table 4. Other contaminants detected in soil samples (petroleum or non-petroleum derived)1**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Sample ID** | **Sample depth (ft)** | **Sample date(mm/dd/yyyy)** |       |       |       |       |       |       |       |       |       |       | **Lab type2** |
|       |       |       |       |       |       |       |       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |       |       |       |       |       |       |       |

*1 Report results in mg/kg. Use less than symbols to show the report level.*

*2 Indicate “mobile” or “fixed” in the lab type column.*

Table 5. Water sample analytical results1

| **Sample ID** | **Sample depth (ft)** | **Sample date(mm/dd/yyyy)** | **Benzene** | **Toluene** | **Ethyl-benzene** | **Xylenes** | **MTBE** | **1,2,4-Trimethyl-benzene** | **1,3,5-Trimethyl-benzene** | **Naph-thalene** | **GRO** | **DRO** | **Lab type2** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|     |       |       |       |       |       |       |       |       |       |       |       |       |       |
|     |       |       |       |       |       |       |       |       |       |       |       |       |       |
|     |       |       |       |       |       |       |       |       |       |       |       |       |       |
| Trip blank |       |       |       |       |       |       |       |       |       |       |       |       |       |
| Equip. blank |       |       |       |       |       |       |       |       |       |       |       |       |       |
| Lab blank |       |       |       |       |       |       |       |       |       |       |       |       |       |
| HRL3 |       |       |       |       |       |       |       |       |       |       |       |       |       |

*1 Report results in µg/L. Use less than symbols to show the report level.*

*2 Indicate “mobile” or “fixed” in the lab type column.*

*3 See the* [*MDH Human Health-Based Water Guidance Table*](http://www.health.state.mn.us/divs/eh/risk/guidance/gw/table.html) *for a list of current Health Risk Limits (HRLs).*

**Table 6. Other contaminants detected in water samples (petroleum or non-petroleum derived)1**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Sample ID**  | **Sample depth (ft)** | **Sample date(mm/dd/yyyy)** | **1,2-Dichloro-ethane** | **1,2-Dibromo-ethane** |       |       |       |       |       |       |       |       | **Lab type2** |
|       |       |       |       |       |       |       |       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |       |       |       |       |       |       |       |
| Trip blank |       |       |       |       |       |       |       |       |       |       |       |       |       |
| Equip. blank |       |       |       |       |       |       |       |       |       |       |       |       |       |
| Lab blank |       |       |       |       |       |       |       |       |       |       |       |       |       |
| HRL3 |       |       |       |       |       |       |       |       |       |       |       |       |       |

*1 Report results in µg/L. Use less than symbols to show the report level.*

*2 Indicate “mobile” or “fixed” in the lab type column.*

*3 See the* [*MDH Human Health-Based Water Guidance Table*](http://www.health.state.mn.us/divs/eh/risk/guidance/gw/table.html) *for a list of current HRLs.*

Section 7: Figures

|  |
| --- |
| All figures must include a north arrow, scale, and legend. Approximate scales are not acceptable. Utilize aerial photographs as the basis of site figures with caution since the height of buildings and structures may skew and misrepresent the apparent location due to camera angle. Attach all required figures in the following order. Indicate figures included in this report by marking the check box. **Double click checkboxes to select *Checked* and select *OK*.** |
| [ ]  | Figure 1: Site location map using a U.S. Geological Survey 7.5 minute quadrangle map. |
|  | 1. Include adjacent city, township, county, or state roadways.
 |
| [ ]  | Figure 2: Detailed site map, utilizing aerial imagery, showing: |
|  | a. On-site and nearby structures, location of utilities. |
|  | b. All past and present petroleum storage tanks, piping, dispensers and transfer areas. |
|  | c. Any on-site water supply wells. If on-site water wells exist, provide well logs and/or construction diagrams. |
| [ ]  | Figure 3: Detailed excavation map showing: |
|  | a. Dimensions of excavation(s), including contour lines (maximum 2-foot contour intervals) to represent the depths of the final excavation(s). |
|  | 1. Location of remaining surface soil contamination.
 |
|  | c. Location of soil screening samples (e.g., R-1), soil analytical samples (e.g., S-1 or B-1), and any soil borings(e.g., SB-1). |
|  | d. Location of soil stockpile, if remaining onsite. |

Section 8: Appendices

|  |
| --- |
| Attach all required or applicable appendices in the following order. Indicate appendices included in this report by marking the check box. All reproduced data must be legible. **Appendix A and B are required.** |
| [x]  *Appendix A* | [Release information worksheet](https://www.pca.state.mn.us/sites/default/files/c-prp2-05.docx) |
| [x]  *Appendix B* | Laboratory reports |
| [ ]  *Appendix C* | Landfill information, if applicable |
|  | For soils disposed at a landfill, provide the following information on landfill letterhead, weight tickets, or on an invoice: |
|  | 1. Date soil was accepted at landfill.
 |
|  | 1. Name of petroleum-contaminated soil generator.
 |
|  | 1. Total weight (tons) or volume (cubic yards) of petroleum-contaminated soil accepted .
 |
|  | 1. What the landfill did with the petroleum-contaminated soil (e.g., daily cover).
 |
| [ ]  *Appendix D* | Soil boring logs, if applicable, and other site documentation (e.g., field data sheets, photos) |

**Appendix A**

|  |  |
| --- | --- |
| FORMS - New mn Logo for Forms with address | Release information worksheetPetroleum Remediation ProgramGuidance document 2-05Doc Type: Environmental Development/Guidance |

Instructions:Complete this worksheet to document tank and release information as required by the public record provision of the Energy Policy Act of 2005. Submit the completed worksheet as an appendix to either the [General excavation report worksheet](https://www.pca.state.mn.us/sites/default/files/c-prp3-02.doc), [Investigation report](https://www.pca.state.mn.us/sites/default/files/c-prp4-06.doc), or [Monitoring report](https://www.pca.state.mn.us/sites/default/files/c-prp4-08.doc). These report forms are found on the Minnesota Pollution Control Agency (MPCA) Cleanup guidance webpage at <https://www.pca.state.mn.us/waste/cleanup-guidance>.

**A. General information**

|  |  |  |  |
| --- | --- | --- | --- |
| Site name: |       | MPCA Site ID: | LS00      |

**B. Tank material**

Check all that apply:

[ ]  Steel [ ]  Fiberglass

**C. Piping material**

Check all that apply:

|  |  |
| --- | --- |
| [ ]  Steel [ ]  Fiberglass [ ]  Flexible plastic [ ]  Copper [ ]  Other (specify): |       |

**D. Identify the known source(s) of the release or contamination encountered**

Check options that were verified. If source is unknown, check other and describe.

[ ]  Piping [ ]  Tank [ ]  Dispenser [ ]  Submersible turbine pump [ ]  Delivery problem

|  |  |
| --- | --- |
| [ ]  Other (specify): |       |

**E. Identify the cause of the release (tank and/or piping)**

Check all that apply.

[ ]  Overfill [ ]  Mechanical or physical damage [ ]  Install problem [ ]  Corrosion [ ]  Spill [ ]  Unknown

|  |  |
| --- | --- |
| [ ]  Other (specify): |       |

**F. Identify how the release was detected**

Check all that apply.

[ ]  Removal [ ]  Line leak detection [ ]  Tank leak detection [ ]  Visual/Olfactory [ ]  Site assessment

|  |  |
| --- | --- |
| [ ]  Other (specify): |       |

**G. Has the site ever stored E85 in any former or current tank?** [ ]  Yes [ ]  No [ ]  Unknown

**H. Has the site ever stored leaded gasoline in any former or current tank?** [ ]  Yes [ ]  No [ ]  Unknown