### NOTIFICATION OF RELEASE (Owners and Operators) FA

FACILITY I.D. NUMBER

Initial
Follow-Up

# NOTIFICATION OF CONTAMINATION (Certified Installers and Inspectors)

# INFORMATION FOR OWNERS AND OPERATORS (O/O)

The Storage Tank Program's Corrective Action Process (CAP) regulations establish requirements for owners and operators of storage tank systems and storage tank facilities to report confirmed releases and, in certain cases, suspected releases.

**Suspected Release Reporting:** Upon the completion of a suspected release investigation from which it could not be determined whether a release has occurred, the owner or operator must, within 15 days of the indication of the suspected release, complete and submit this form to the appropriate regional office of the Department (Subsection 245.304(c)(2)).

**Confirmed Release Reporting:** The owner or operator must notify the appropriate regional office of the Department by telephone as soon as practicable, but no later than 24 hours, after the confirmation of a release (Subsections 245.305(a) and (b)). Within 15 days of that telephone notification, the owner or operator must complete and submit this form to the appropriate regional office of the Department, to each municipality in which the release occurred, and to each municipality where that release has impacted environmental media or water supplies, buildings, or sewer or other utility lines (Subsections 245.305(c) and (e)). And if <u>new</u> impacts to environmental media or water supplies, buildings, or sewer or other utility lines are discovered after that initial written notification, the owner or operator must, within 15 days of the discovery of the <u>new</u> impact, complete and submit this form to the Department and to each impacted municipality (Subsections 245.305(d) and (e)).

## INFORMATION FOR CERTIFIED INSTALLERS AND INSPECTORS (I/I)

In accordance with the Storage Tank Program's certification regulations, certified installers and inspectors must complete and submit this form to the Department within 48 hours of observing any of the following while performing services as a certified installer or inspector: a release of a regulated substance; suspected or confirmed contamination of soil, surface or groundwater from regulated substances; or a regulated substance in a containment structure or facility (Subsections 245.132(a)(4) and 245.132(a)(6)).

#### INSTRUCTIONS

Record the storage tank facility I.D. number at the top right-hand corner of each page of this form.

**Owners and Operators (O/O):** Indicate if this is an initial or follow-up notification by marking the appropriate box found in the top right-hand corner of this page.

- To report a Suspected Release, complete <u>all</u> information in Sections I, II, IIIA, IIIC, VI, VIII and IX.
- To report a Confirmed Release, complete <u>all</u> information in Sections I, II, IIIA, IIIB, IIIC, IV, V, VIII and IX.

**Certified Installers and Inspectors (I/I):** Complete <u>all</u> information in Sections I, II, IIIA, IIIC, VI or VII, VIII, and IX. Attach a copy of the failed, valid tightness test results, if applicable.

### PLEASE SEND COMPLETED ORIGINAL FORM TO:

PA Department of Environmental Protection

Environmental Cleanup and Brownfields Program

Storage Tank Section

(and the appropriate address below, depending on where the FACILITY is located)

Northwest Region 230 Chestnut Street Meadville, PA 16335-3481 PHONE: 814-332-6945 / 800-373-3398 FAX: 814-332-6121	North-central Region 208 W. Third Street, Suite 101 Williamsport, PA 17701 PHONE: 570-327-3636 FAX: 570-327-3420	Northeast Region 2 Public Square Wilkes-Barre, PA 18701-1915 PHONE: 570-826-2511 FAX: 570-820-4907
<b>Counties:</b> Armstrong, Butler, Clarion, Crawford, Elk, Erie, Forest, Indiana, Jefferson, Lawrence, McKean, Mercer, Venango, Warren	<b>Counties:</b> Bradford, Cameron, Centre, Clearfield, Clinton, Columbia, Lycoming, Montour, Northumberland, Potter, Snyder, Sullivan, Tioga, Union	<b>Counties:</b> Carbon, Lackawanna, Lehigh Luzerne, Monroe, Northampton, Pike Schuylkill, Susquehanna, Wayne, Wyoming
Southwest Region	South-central Region	Southeast Region
400 Waterfront Drive Pittsburgh, PA 15222 PHONE: 412-442-4000 FAX: 412-442-4194	909 Elmerton Avenue Harrisburg, PA 17110 PHONE: 717-705-4705 / 866-825-0208 FAX: 717-705-4830	2 East Main Street Norristown, PA 19401 PHONE: 484-250-5900 FAX: 484-250-5961
<b>Counties:</b> Allegheny, Beaver, Cambria, Fayette, Greene, Somerset, Washington, Westmoreland	<b>Counties:</b> Adams, Bedford, Berks, Blair, Cumberland, Dauphin, Franklin, Fulton, Huntingdon, Juniata, Lancaster, Lebanon, Mifflin, Perry, York	<b>Counties:</b> Bucks, Chester, Delaware, Montgomery, Philadelphia

#### 2620-FM-BECB0082 12/2018

#### FACILITY I.D. NUMBER

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I. FACILITY INFORMATION (Both O/O and I/I)		II. OWNER/OPERATOR INFORMATION (Both O/O and I/I)			
Facility Name Facility I.D. Number		Owner Name			
- Street Address (P.O. Box not acceptable)		Address			
City State PA	Zip Code	City	State Zip Code		
County Munic	ipality	Telephone Number			
Contact Person Telepl	hone Number	Operator Name	Telephone Number		
III. REGULATED SUBSTANCE INFORMATION					
A. Type of Product(s) Involved (Mark All That Apply 区 ): <u>Both O/O and I/I</u>	B. Quantity (Gallons) o <u>O/O Only</u>	f Product(s) Released:	C. Contamination Suspected [S] or Confirmed [C] (Mark All That Apply ⊠): <u>Both O/O and I/I</u>		
Leaded Gasoline	,,	,			
Unleaded Gasoline	, <u> </u>	,	[S] [C]		
Aviation Gasoline	·······,,	,			
Kerosene	, <u></u> , <u></u> ,	,			
Diesel Fuel	······,,,	,			
New Motor Oil		,			
Used Motor Oil	;	;			
Fuel Oil No. 1	,				
Fuel Oil No. 2	,	,			
Fuel Oil No. 4	,	,			
Fuel Oil No. 5	······,	,,			
Fuel Oil No. 6	······,,	,	[S] [C]		
Other (Specify)	······,,	,	[S] [C]		
Unknown	,,	,	[S] [C]		
IV. C	ONFIRMED RELEAS	SE INFORMATION (O/O	Only)		
Date Release was Confirmed:	/ /	Date Owner/Operator S Municipality(ies) and Na	ent Copy of this Written Notification to Local ame of Municipality(ies) Notified:		
Date Owner/Operator Verbally Notified Appropriate Regional Office of Confirmed Release and Office Notified:		Date: / /_	Manual alternative		
Date: / / Office		Date: / /	Municipality		
Source (Mark All That Apply 区):	How Discovered	(Mark All That Apply 区):	Environmental Media Affected and Impacts (Mark All That Apply 区):		
Tank (DEP Assigned Nos)[			Soil		
Piping System (Aboveground Regulated)			Sediment		
Piping System (Underground Regulated)			_		
Piping System (Non-Regulated)		on	Surface Water		
Dispenser/Dispensing Equipment	-	۱	Ground Water		
Spill Prevention Equipment		tivities	Bedrock		
Submersible Turbine Pump Head/Fittings		or Reports	Water Supplies		
Containment/Sump Failure			Vapors/Product in Buildings		
Other (Specify)[ Unknown	Construction		Vapors/Product in Sewer/Utility Lines		
			Ecological Receptors		
Cause (Mark All That Apply ⊠):		Results			
Faulty Installation					
Physical/Mechanical Failure		Monitoring Well Sample Results			
Spill During Delivery					
Overfill at Delivery	Other (Specify)	0			
Vehicle Gas Tank Overfill	-				
Product Delivery Hose Rupture					
Accident/Natural Disaster					
Other (Specify)					
Unknown					

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V. INTERIM REMEDIAL ACTIONS (O/O Only)				
Indicate the Interim Remedial Actions Planned, Initiated or Co	Planned Initiated Completed Not Applicable			
Regulated Substance Removed from Storage Tanks				
Fire, Explosion and Safety Hazards Mitigated	🖸			
Contaminated Soil Excavated	🖸			
Free Product Recovered				
Water Supplies Identified and Sampled	🖸			
Temporary Water Supplies Provided				
Other (Specify)				
VI. SUSPECTED RELEASE / CONTA	MINATION INFORMATION (Both O/O and I/I)			
Date the Indication of a Suspected Release / Contamination was Observed: / / / /				
Indication of Suspected Release	/ Contamination (Mark All That Apply 区):			
Unusual Level of Vapors	Containment Sump Test Failure			
Erratic Behavior of Product Dispensing Equipment	Spill Prevention Equipment Test Failure			
Release Detection Results Indicate a Release	Other (Specify)			
Discovery of Holes in the Storage Tank				
VII. CONFIRMED CONTAMINATION INFORMATION (I/I Only)				
Date the Confirmed Contamination was Observed:	/ /			
Extent of Confirmed Conta	mination (Mark All That Apply 区):			
Product Stained or Product Saturated Soil or Backfill	Free Product or Sheen on the Ground Water Surface			
Ponded Product	Free Product or Sheen on Surface Water			
Free Product or Sheen on Ponded Water	Other (Specify)			
VIII. ADDITIONAL INF	ORMATION (Both O/O and I/I)			
Provide any additional, relevant, available information concerning the release or contamination. If reporting a confirmed release, include specific details about the source and cause of the release, the affected environmental media, and any impacts to water supplies, buildings, or sewer or other utility lines. Owners or Operators reporting a suspected release should describe what procedures were followed to investigate the indication(s) of the suspected release noted in Section VI. Provide both DEP-assigned and owner/operator-assigned tank number(s), where applicable. Use additional 8½" x 11" sheets of paper, if necessary.				

IX. CERTIFICATION (Both O/O and I/I)		
OWNER OR OPERATOR CERTIFICATION		
I,	, hereby certify, under penalty of law as provided in 18 Pa. ner or operator of the above referenced storage tank facility complete to the best of my knowledge and belief.	
Signature of Owner or Operator	/ / / Date	
CERTIFIED INSTALLER CERTIFICATION		
I,(Print Name) C.S.A. §4904 (relating to unsworn falsification to authorities) that I am the cer above referenced storage tank facility and that the information provided by me		
of my knowledge and belief.	/ / / Date	
Installer Certification Number	Company Certification Number	
CERTIFIED INSPECTOR CERTIFICATION		
I,	ertified inspector who performed inspection activities at the	
Signature of Certified Inspector	/ / / Date	
Inspector Certification Number	Company Certification Number	