



**ELTF ELIGIBILITY APPLICATION FOR  
UST DECOMMISSIONING/REPLACEMENT**

State Form 57299 (R/8-24)  
INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

Facility ID
25188

**INSTRUCTIONS:** Submit this form when applying for an eligibility determination.

**SUBMITTAL INSTRUCTIONS:** The completed form, current site map, future site map (if applicable), and supporting documentation if "Other" is selected in Section 3 should be saved as a PDF and emailed to the following:  
ELTFeligibility@idem.IN.gov

**SECTION 1 - APPLICANT INFORMATION (OWNER)**

Name of Applicant <b>P &amp; R Investments, Inc.</b>	Owner # of Tanks (as billed) <input type="checkbox"/> 1 to 12 <input checked="" type="checkbox"/> 13-100 <input type="checkbox"/> Over 100
Mailing Address (Number and Street) <b>2323 Southyard Ct</b>	City, State, Zip Code <b>Fort Wayne, IN 46818</b>
Mailing Address (Line 2)	Applicant Contact <b>Phil Carper</b>
Contact E-mail Address <b>gabby@philsonestop.com @ prcarper@msn.com</b>	Contact Telephone Number (with Area Code) <b>260-760-9130</b>
Contact Title <b>Owner</b>	

**SECTION 2 - SITE INFORMATION**

Name of Facility <b>Phil's one stop #12</b>	# of USTs currently on site <b>3</b>
Facility Address (Number and Street) <b>1445 S. US 33</b>	City, State, ZIP Code <b>Wolf Lake, IN 46796</b>

**SECTION 3 - PROPOSED USTs FOR DECOMMISSIONING**

UST#	Install Date	Capacity	Substance	Lined Steel	First Generation Fiberglass	> 30 years	Other
#1	01-01-1996	12,000	unleaded	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
#2	01-01-1996	10,000	premium	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
#3	01-01-1996	2,000	diesel	<input type="checkbox"/>	<input checked="" 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"/>

**SECTION 4 - PROPOSED REINSTALLATION OF REGULATED TANKS**

TANK #	Compartment 1 Capacity	Compartment 2 Capacity	Compartment 3 Capacity	Compartment 4 Capacity
1	12,000	10,000		
2				
3	2,000			
4				
5				

**SECTION 5 - SIGNATURE OF OWNER OF THE TANK(S) OR ATTORNEY-IN-FACT**

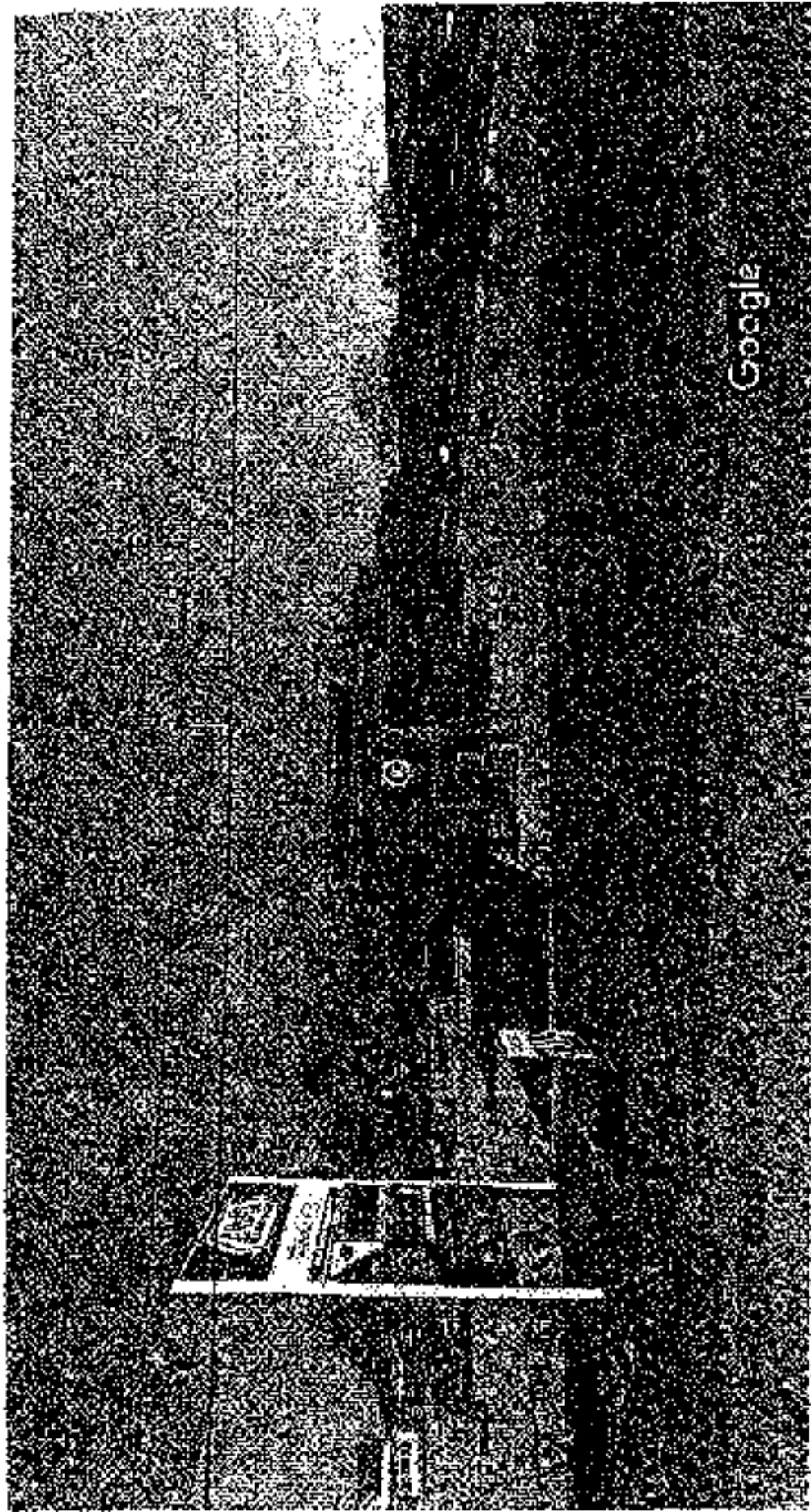
I understand that pursuant to Indiana Code 13-23-9-6, I may be subject to criminal prosecution for submitting false and/or inaccurate information on this application. Please check the box below and submit proper documentation if signing under a Power of Attorney for the owner.

Signature of Owner of the Tanks or <input type="checkbox"/> Attorney-in-Fact <b>Phil A. Carper</b>		Date Signed (mm/dd/yyyy) <b>10/24/2025</b>	
Mr./Ms. <b>Mr.</b>	Print Name <b>Phil A. Carper</b>	Title <b>Owner</b>	Company <b>P &amp; R Investments, Inc.</b>

N

FACILITY SITE MAP

In the space below, sketch the facility (tanks, piping, tank manway locations, vents, pump islands, buildings, etc.). Include tank sizes and type of product stored. Label streets or other landmarks. Show North if direction known.



## **Surd, Nicole M**

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**From:** Gabby <gclontz@philsonestop.com>  
**Sent:** Wednesday, October 29, 2025 2:23 PM  
**To:** IDEM ELTF Eligibility  
**Cc:** prcarper@msn.com  
**Subject:** ELT Eligibility Application - FID #25188  
**Attachments:** Scans\_20251029\_141339.pdf

EXTERNAL EMAIL: This email was sent from outside your organization. Exercise caution when clicking links, opening attachments or taking further action, before validating its authenticity.

Hello!

Phil's One Stop would like to apply for the UST Replacement for our location located at 1445 S US 33 Wolf Lake, IN 46796 FID#25188.

Thank you for your consideration!

Gabby Clontz  
Corporate Office Manager  
P & R Investments, Inc.  
2323 Southyard Ct.  
Fort Wayne, IN, 46818

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Email: gabby@philsonestop.com  
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Fax: (260) 338-5001