



**UNDERGROUND STORAGE
TANK INSPECTION REPORT**

INDIANA DEPARTMENT OF
ENVIRONMENTAL MANAGEMENT

UST FAC ID: **40003**

Inspector's Name:	Tristan Voge
Date:	June 24, 2024
Time In:	11:15
Time Out:	11:50
Inspection Type:	Initial

FACILITY NAME / LOCATION

FACILITY NAME Washington BP 2		FACILITY ADDRESS (number and street) 2427 W Washington St		
ADDRESS (line 2)	CITY Indianapolis	STATE IN	ZIP CODE 46222	COUNTY Marion

UST OWNER

UST Owner Name (If in Individual Capacity) Indy Holdings LLC				BUSINESS ID (From the Secretary of State) 201608301156204
PREFIX	FIRST NAME Lakhwant	MI	LAST NAME Singh	SUFFIX
TELEPHONE NUMBER	EMAIL ADDRESS bpfivestar@yahoo.com			

UST OPERATOR

UST Operator Name (If in Individual Capacity) Washington Five Star Petroleum Inc				BUSINESS ID (From the Secretary of State) 2016012600993
PREFIX	FIRST NAME Rupinder	MI	LAST NAME Multani	SUFFIX
TELEPHONE NUMBER	EMAIL ADDRESS bpfivestar@yahoo.com			

PROPERTY OWNER

UST Property Owner Name (If in Individual Capacity) Indy Holdings LLC				BUSINESS ID (From the Secretary of State) 201608301156204
PREFIX	FIRST NAME Lakhwant	MI	LAST NAME Singh	SUFFIX
TELEPHONE NUMBER	EMAIL ADDRESS bpfivestar@yahoo.com			

COMPLIANCE ELEMENTS

All USTs properly registered and up-to-date notification form on file	<input checked="" type="checkbox"/>	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	UNK
O/O is in compliance with reporting & record keeping requirements	<input checked="" type="checkbox"/>	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	UNK
O/O is in compliance with release reporting or investigation	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	UNK
PREM and DSL piping INT has had Fuel status from 07/2023-06/2024. "Bad sensor" indicated.						
O/O is in compliance with all UST closure requirements	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	UNK
O/O has met all financial responsibility requirements	<input checked="" type="checkbox"/>	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	UNK
40 CFR 280, Subpart A installation requirements (partially excluded) met	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	UNK
40 CFR 280, Subpart B installation and upgrade requirements met	<input checked="" type="checkbox"/>	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	UNK
40 CFR 280, Subpart C spill/overfill control requirements met	<input checked="" type="checkbox"/>	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	UNK
40 CFR 280, Subpart C compatibility requirements met	<input checked="" type="checkbox"/>	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	UNK
40 CFR 280, Subpart C O&M and testing requirements met	<input type="checkbox"/>	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	UNK
An annual walkthrough inspection was not provided.						
40 CFR 280, Subpart D release detection requirements met	<input type="checkbox"/>	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	UNK
Piping INT RD, ATG/probe/sensor/LLD test reports not provided. INT for piping not to standard.						
40 CFR 280, Subpart J operator training requirements met	<input checked="" type="checkbox"/>	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	UNK