



**UNDERGROUND STORAGE  
TANK INSPECTION REPORT**

INDIANA DEPARTMENT OF  
ENVIRONMENTAL MANAGEMENT

UST FAC ID: **25040**

Inspector's Name:	Brandon Blystone
Date:	June 25, 2024
Time In:	11:15
Time Out:	11:45
Inspection Type:	Initial

**FACILITY NAME / LOCATION**

FACILITY NAME <b>Mex 228</b>		FACILITY ADDRESS (number and street) <b>4233 N Clinton</b>		
ADDRESS (line 2)	CITY <b>Fort Wayne</b>	STATE <b>IN</b>	ZIP CODE <b>46805</b>	COUNTY <b>Allen</b>

**UST OWNER**

UST Owner Name (Business Name as registered with the Secretary of State) <b>Mountain Express Oil Company</b>				BUSINESS ID (From the Secretary of State) <b>202107191507833</b>	
PREFIX	FIRST NAME <b>Brian</b>	MI	LAST NAME <b>Patterson</b>		SUFFIX
TELEPHONE NUMBER <b>(678) 878-9198</b>		EMAIL ADDRESS <b>bp@spartan-tank.com</b>			

**UST OPERATOR**

UST Operator Name (Business Name as registered with the Secretary of State) <b>Mountain Express Oil Company</b>				BUSINESS ID (From the Secretary of State) <b>202107191507833</b>	
PREFIX	FIRST NAME	MI	LAST NAME		SUFFIX
TELEPHONE NUMBER <b>(770) 693-2623</b>		EMAIL ADDRESS			

**PROPERTY OWNER**

UST Property Owner Name (Business Name as registered with the Secretary of State) <b>Fowler Property Investments LP</b>				BUSINESS ID (From the Secretary of State) <b>202210121630755</b>	
PREFIX	FIRST NAME	MI	LAST NAME		SUFFIX
TELEPHONE NUMBER		EMAIL ADDRESS			

**COMPLIANCE ELEMENTS**

All USTs properly registered and up-to-date notification form on file	<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"/>
Tank fees in arrears for 2022 & 2023									
O/O is in compliance with reporting & record keeping requirements	<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"/>
<b>Compliance documentation</b>									
O/O is in compliance with release reporting or investigation	<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"/>
O/O is in compliance with all UST closure requirements	<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"/>
O/O has met all financial responsibility requirements	<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"/>
40 CFR 280, Subpart A installation requirements (partially excluded) met	<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"/>
40 CFR 280, Subpart B installation and upgrade requirements met	<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"/>
40 CFR 280, Subpart C spill/overfill control requirements met	<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"/>
40 CFR 280, Subpart C compatibility requirements met	<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"/>
40 CFR 280, Subpart C O&M and testing requirements met	<input type="checkbox"/>	<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"/>
<b>Spill Bucket Test, Overfill Test, Monthly and Annual Walkthrough Inspections</b>									
40 CFR 280, Subpart D release detection requirements met	<input type="checkbox"/>	<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"/>
<b>ATG/Probes, Leak Detector Test, Release Detection for Tanks, Line Tightness Test</b>									
40 CFR 280, Subpart J operator training requirements met	<input type="checkbox"/>	<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"/>
<b>Class A, B and C Operator Certificates</b>									