



**UNDERGROUND STORAGE
TANK INSPECTION REPORT**

INDIANA DEPARTMENT OF
ENVIRONMENTAL MANAGEMENT

UST FAC ID: **282**

Inspector's Name:	Todd Settles
Date:	June 24, 2024
Time In:	09:30
Time Out:	10:30
Inspection Type:	Initial

FACILITY NAME / LOCATION

FACILITY NAME Ridge Save Speed Mart - Citgo		FACILITY ADDRESS (number and street) 3341 Ridge Road		
ADDRESS (line 2)	CITY Highland	STATE IN	ZIP CODE 46322	COUNTY Lake

UST OWNER

UST Owner Name (Business Name as registered with the Secretary of State) Safoora Inc.				BUSINESS ID (From the Secretary of State) 2002121600371
PREFIX	FIRST NAME Mohammand	MI	LAST NAME Shad	SUFFIX
TELEPHONE NUMBER (219) 838-9849	EMAIL ADDRESS mshad35617@aol.com			

UST OPERATOR

UST Operator Name (Business Name as registered with the Secretary of State) Ridge Petroleum Inc.				BUSINESS ID (From the Secretary of State) 201812031291892
PREFIX	FIRST NAME Kanaiyalal	MI	LAST NAME Patel	SUFFIX
TELEPHONE NUMBER (219) 671-9682	EMAIL ADDRESS northwestcompliance@gmail.com			

PROPERTY OWNER

UST Property Owner Name (Business Name as registered with the Secretary of State) Safoora Inc.				BUSINESS ID (From the Secretary of State) 2002121600371
PREFIX	FIRST NAME Mohammand	MI	LAST NAME Shad	SUFFIX
TELEPHONE NUMBER (219) 838-9849	EMAIL ADDRESS mshad35617@aol.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"/>	N/A	UNK
O/O is in compliance with all UST closure requirements	<input checked="" type="checkbox"/>	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	N/A	UNK
O/O has met all financial responsibility requirements	<input checked="" type="checkbox"/>	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	N/A	UNK
40 CFR 280, Subpart A installation requirements (partially excluded) met	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	N/A	UNK
40 CFR 280, Subpart B installation and upgrade requirements met	<input type="checkbox"/>	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	UNK	
Piping metal connectors and flex connectors in contact with soil with no CP in place							
40 CFR 280, Subpart C spill/overfill control requirements met	<input checked="" type="checkbox"/>	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	N/A	UNK
40 CFR 280, Subpart C compatibility requirements met	<input checked="" type="checkbox"/>	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	N/A	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	
Spill bucket, overfill (PREM only) testing, monthly/annual walkthroughs were not provided							
40 CFR 280, Subpart D release detection requirements met	<input type="checkbox"/>	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	UNK	
ATG/probes, line tightness, leak detector testing were not provided							
40 CFR 280, Subpart J operator training requirements met	<input checked="" type="checkbox"/>	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	UNK	