

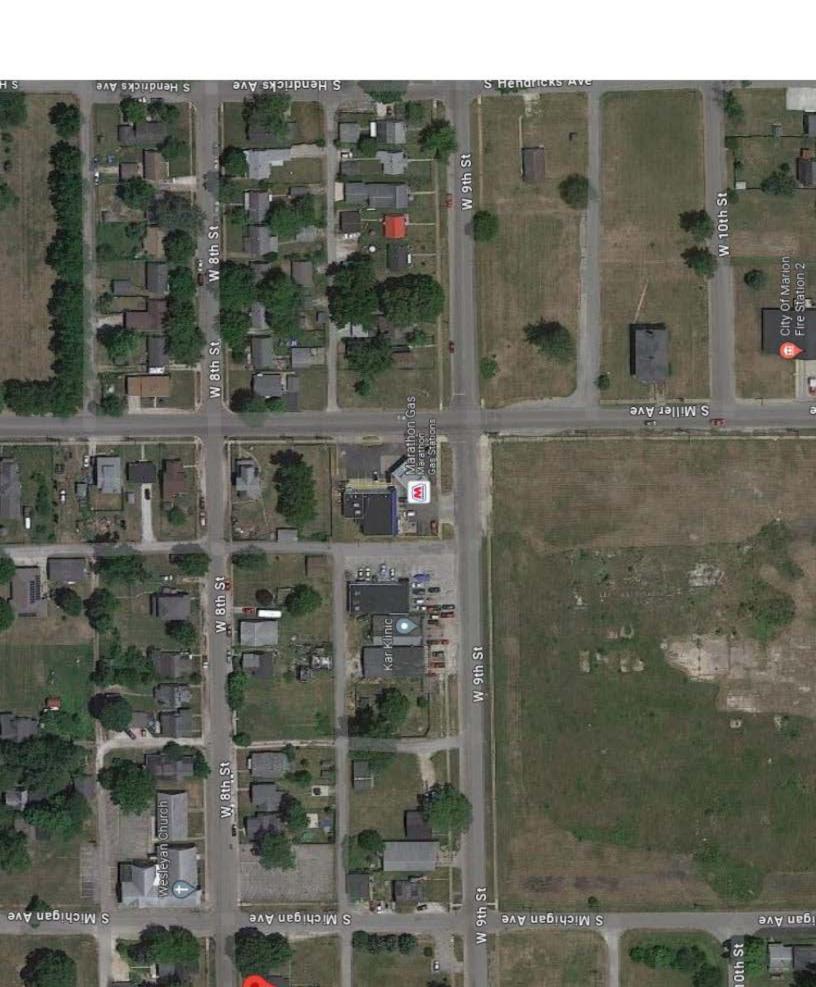
UNDERGROUND STORAGE TANK INSPECTION REPORT

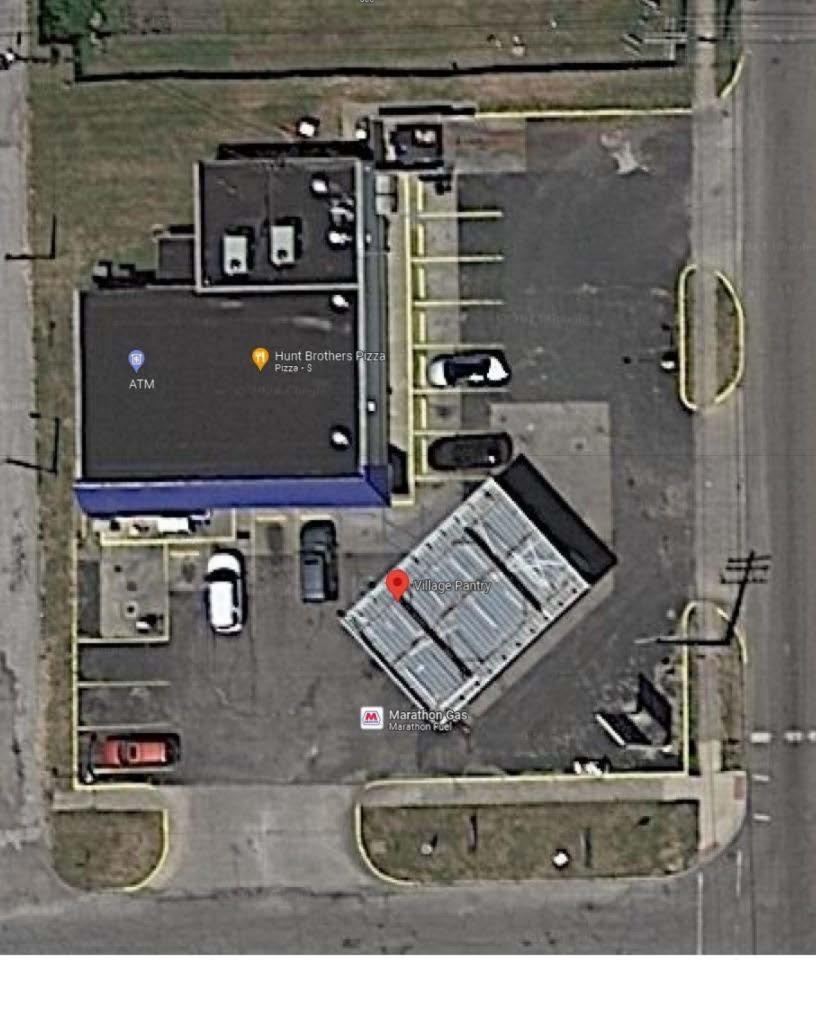
INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

UST FAC ID: 7015

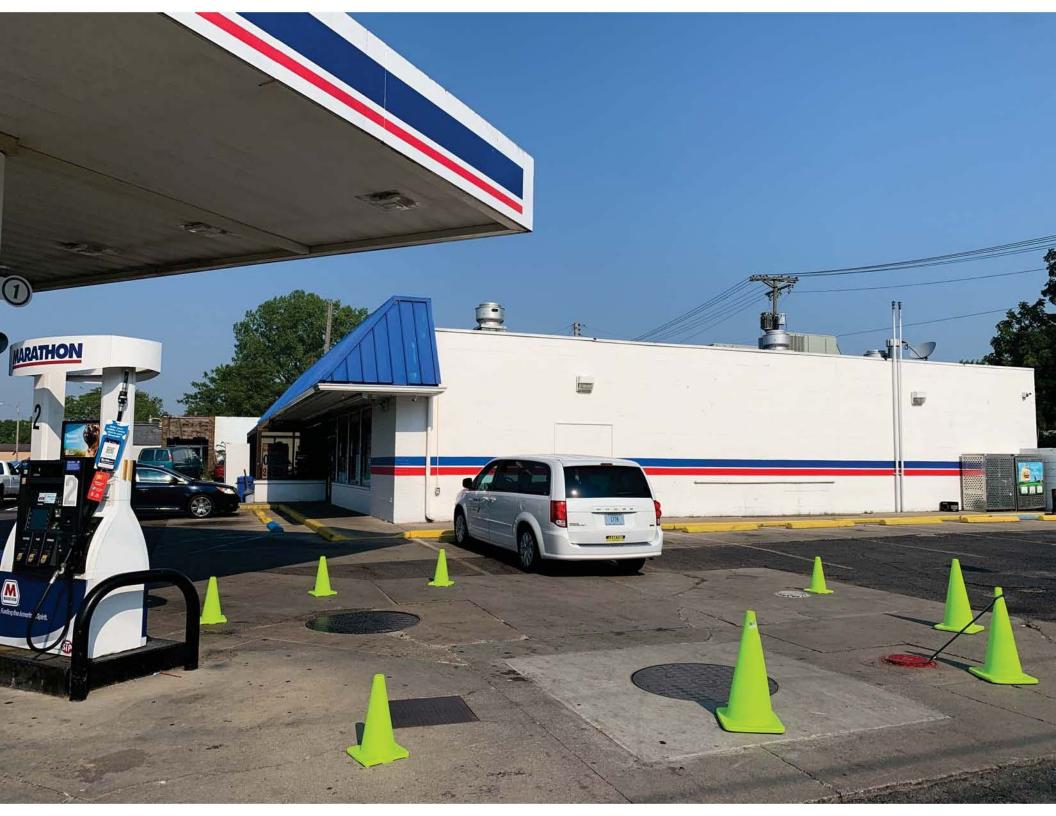
Inspector's Name:	Matt Rozycki
Date:	June 17, 2024
Time In:	09:30
Time Out:	10:00
Inspection Type:	Initial

FACILITY NAME / LOCATION													
FACILITY NAME FACILITY ADDRESS (number and street)													
GPM 14	2204 W 9th S												
ADDRESS (line 2	2)	Marion			STATE IN		ZIP COD	° 6953		COUN	Gra	ant	
	UST OWNER												
UST Owner Name (Business Name as registered with the Secretary of State) BUSINESS ID (From the Secretary of State)										of State)			
RI CS3 LLC								2007042300657					
PREFIX	FIRST NAME Chad		MI	LAST NAME Fluck								SUFF	FIX
TELEPHONE NU		EMAIL ADDRESS	;	II luck									
(804)73	0-1568	cfluck@g	gpmi	nvestments									
			UST	OPERATOR									
UST Operator Name (Business Name as registered with the Secretary of State)											the Secr	etary o	of State)
Village Pantry LLC PREFIX IFIRST NAME			MI	LAST NAME				199	702	13	10	SUFF	-17
PREFIX	Corbin		IVII	Burkholder								SUFF	-17
TELEPHONE NU	I IMBER	EMAIL ADDRESS		1									
(317) 22	0-3651	cburkhol	der@	@gpminvestme	ents.cor	n							
		PF	ROPE	ERTY OWNER									
UST Property Ov	vner Name (Business Name as registered wit	th the Secretary of S	tate)								the Secr)065	-	of State)
PREFIX	FIRST NAME	<u> </u>	МІ	LAST NAME				200	704	230	000	SUFF	-IX
	Rolfe			Lann									., .
TELEPHONE NU		EMAIL ADDRESS											
(765) 66	2-0355			al@gpminvesti		con	า						
				NCE ELEMENTS	3								
All USTs pr	operly registered and up-to-da	ate notification	n form	on file		X	YES		NO				UNK
0/0 :- :							VEC	\ <u></u>	NO I		_		LUNUZ
O/O is in compliance with reporting & record keeping requirements YES X NO										UNK			
No paperwork was provided at the time of O/O is in compliance with release reporting or investigati				records reque	est of it	isp	YES		NO	$\overline{\nabla}$	N/A		UNK
O/O IS IN CO	ompliance with release reporting	ig or investiga	ation				ILS		NO	Δ	IN/A		DINK
O/O is in compliance with all UST closure requirement			<u> </u>		1	X	YES		NO		N/A		UNK
0/0 13 111 00	mphanice with all 001 closure	requirement							110		11/7		Oitix
O/O has met all financial responsibility requirements				I	X	YES		NO		N/A		UNK	
O/O has met an imanoar responsibility requirements													
40 CFR 280, Subpart A installation requirements (partially excluded) n			xcluded) met	Ι	X	YES		NO		N/A		UNK	
	, ,			,	1	• •							
40 CFR 28	0, Subpart B installation and u	pgrade requir	emer	nts met		X	YES		NO				UNK
40 CFR 28	0, Subpart C spill/overfill contr	ol requiremen	nts me	et		X	YES		NO		N/A		UNK
								-	•				
40 CFR 28	0, Subpart C compatibility requ	uirements me	t			X	YES		NO		N/A		UNK
								-					
40 CFR 28	0, Subpart C O&M and testing	requirements	met				YES	X	NO				UNK
	ket test, overfill functio				walkthr	oug		_	rovi	dec	<u>t</u>		
	0, Subpart D release detection						YES	X	NO				UNK
	be functionality test, ar			leak detector t	<u>est</u>								
	O, Subpart J operator training						YES	X	NO				UNK
Onorato	r A B & C certificates w	are not nr	wid	ad									





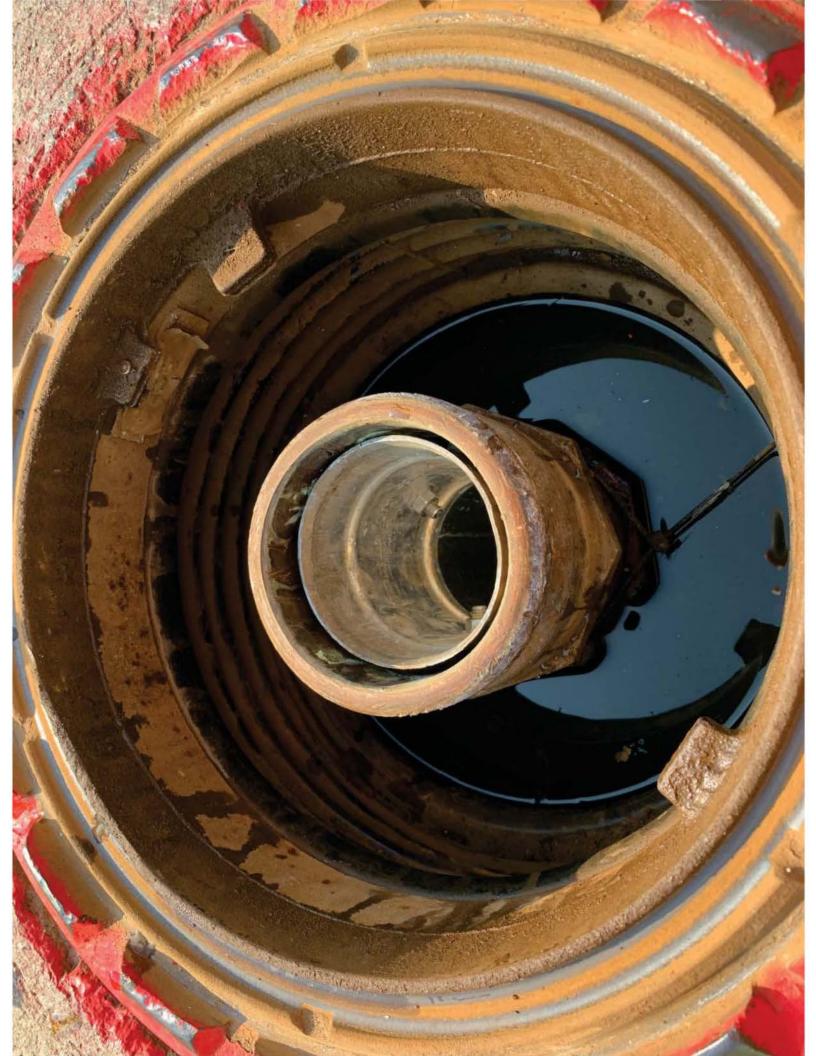


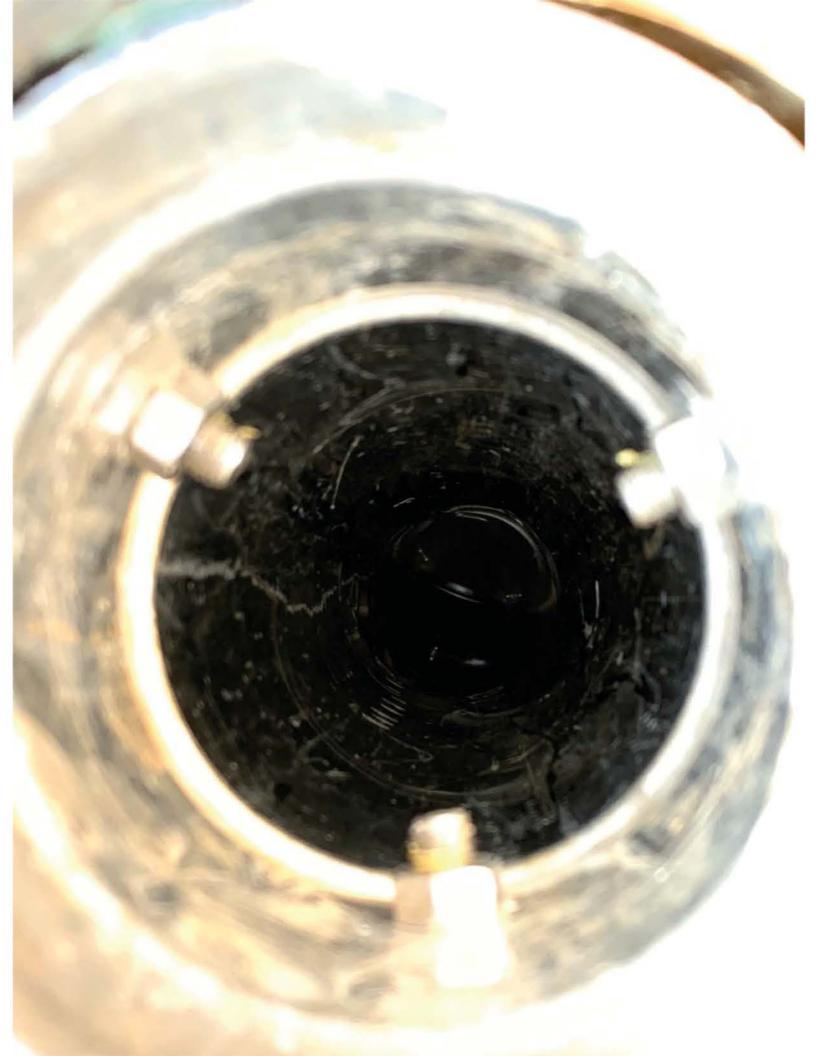








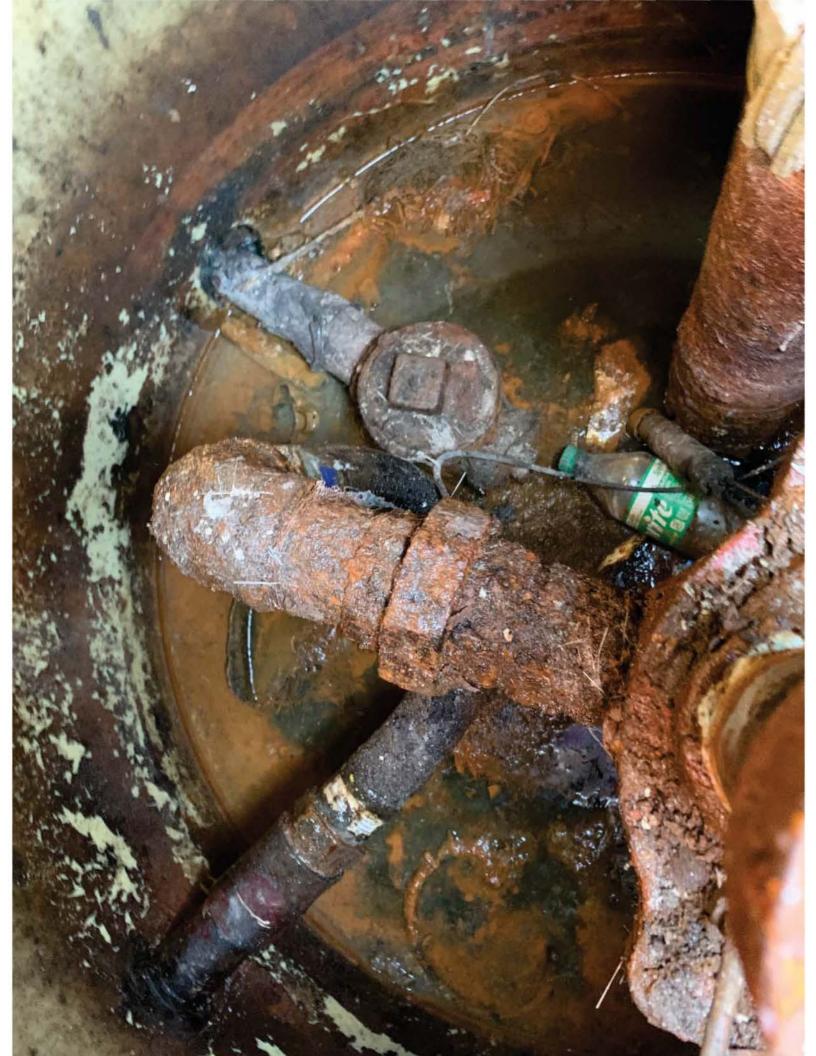






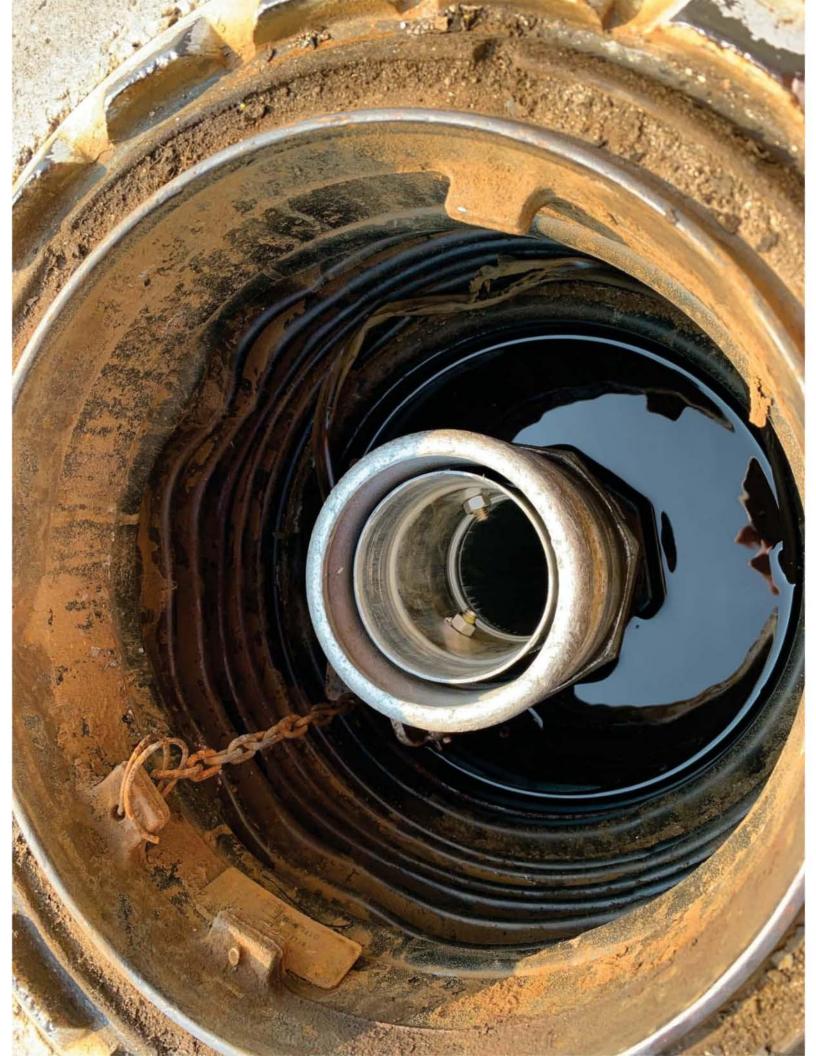


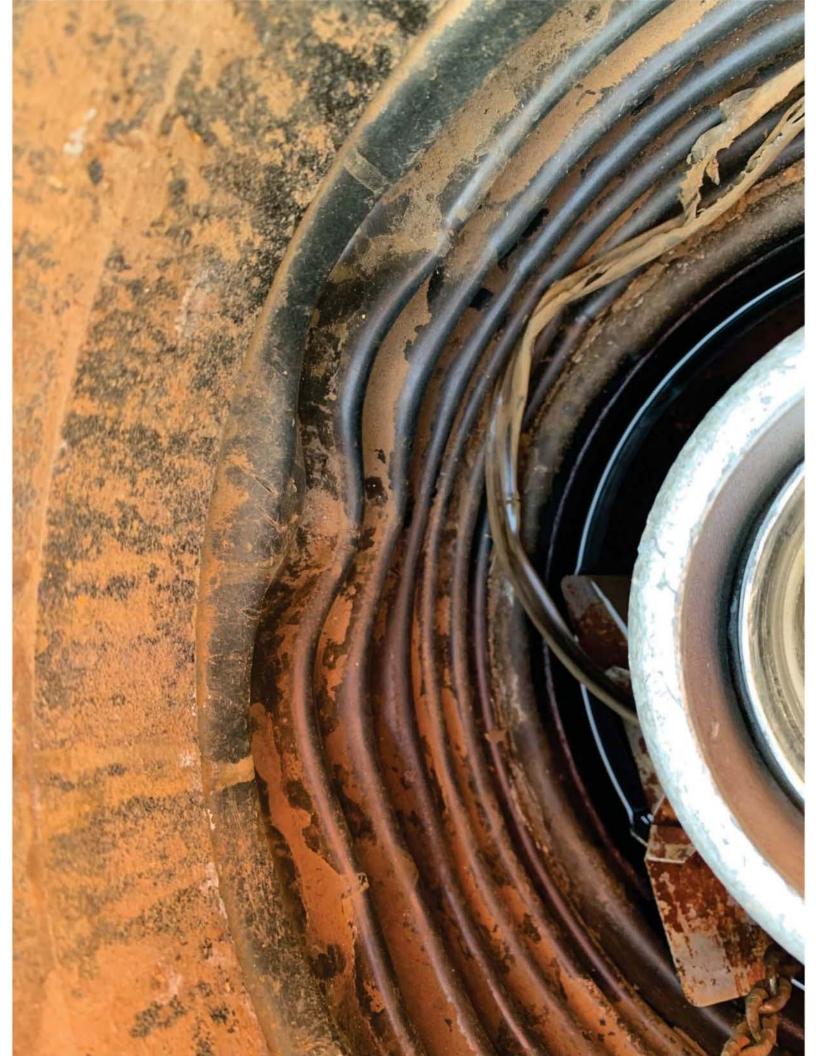




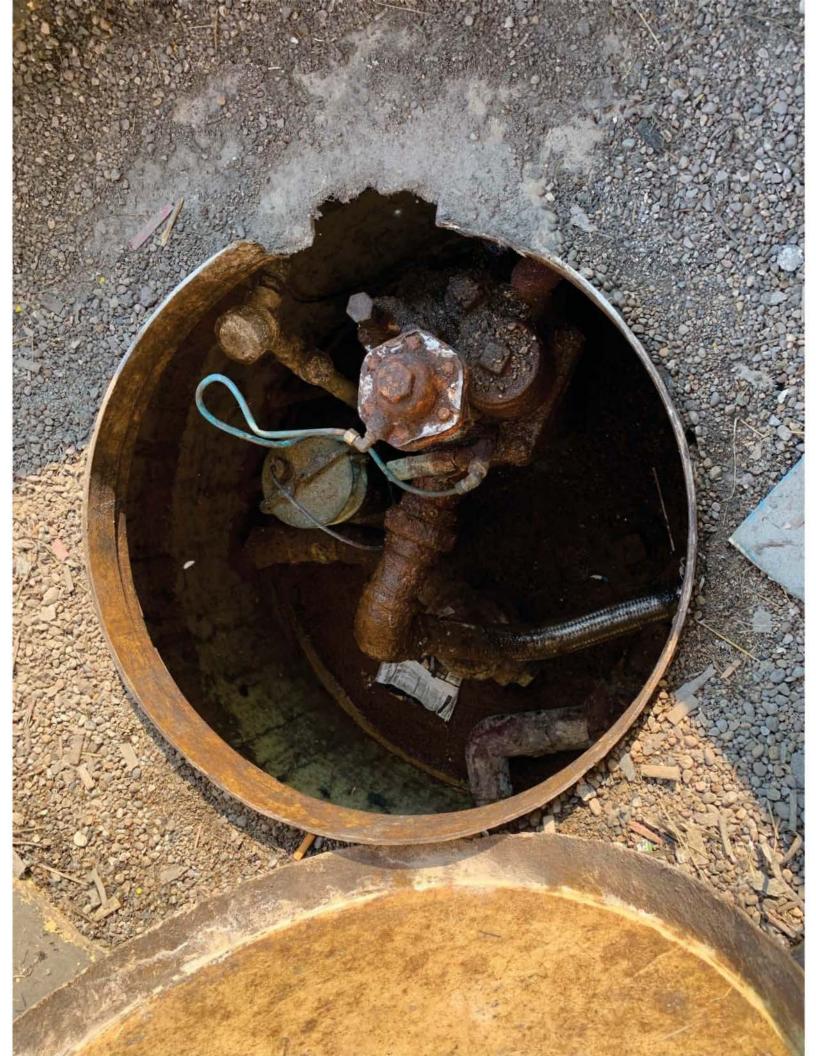


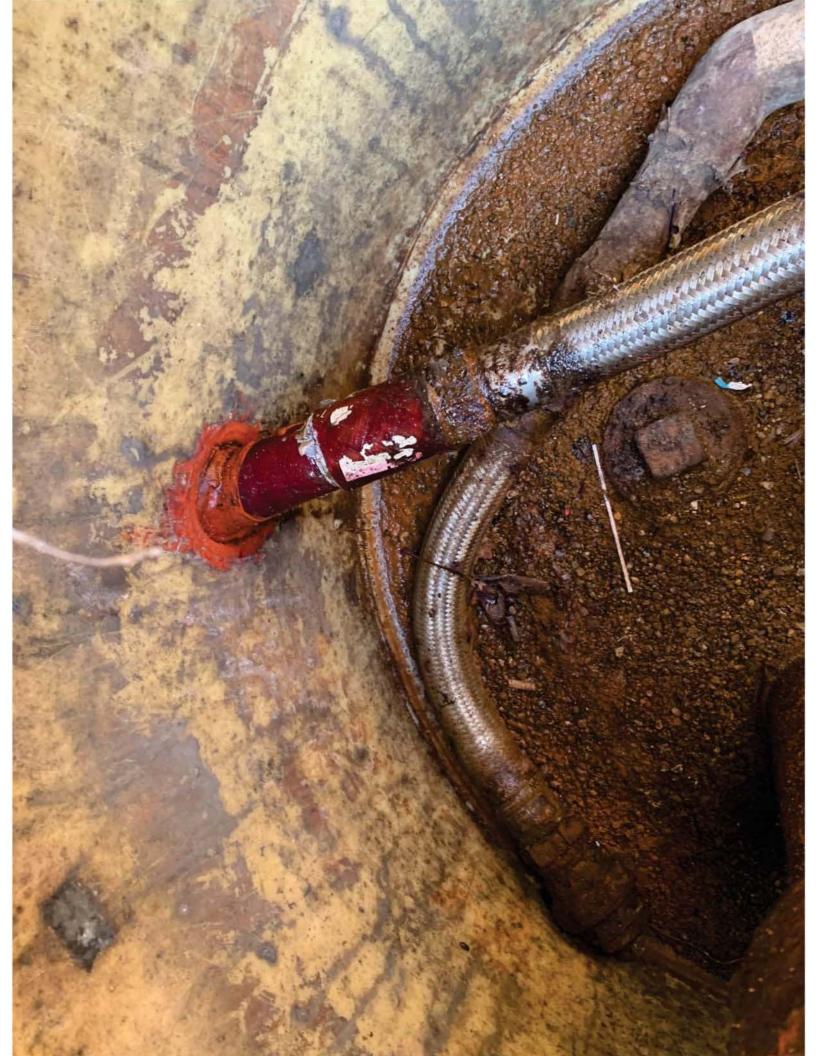


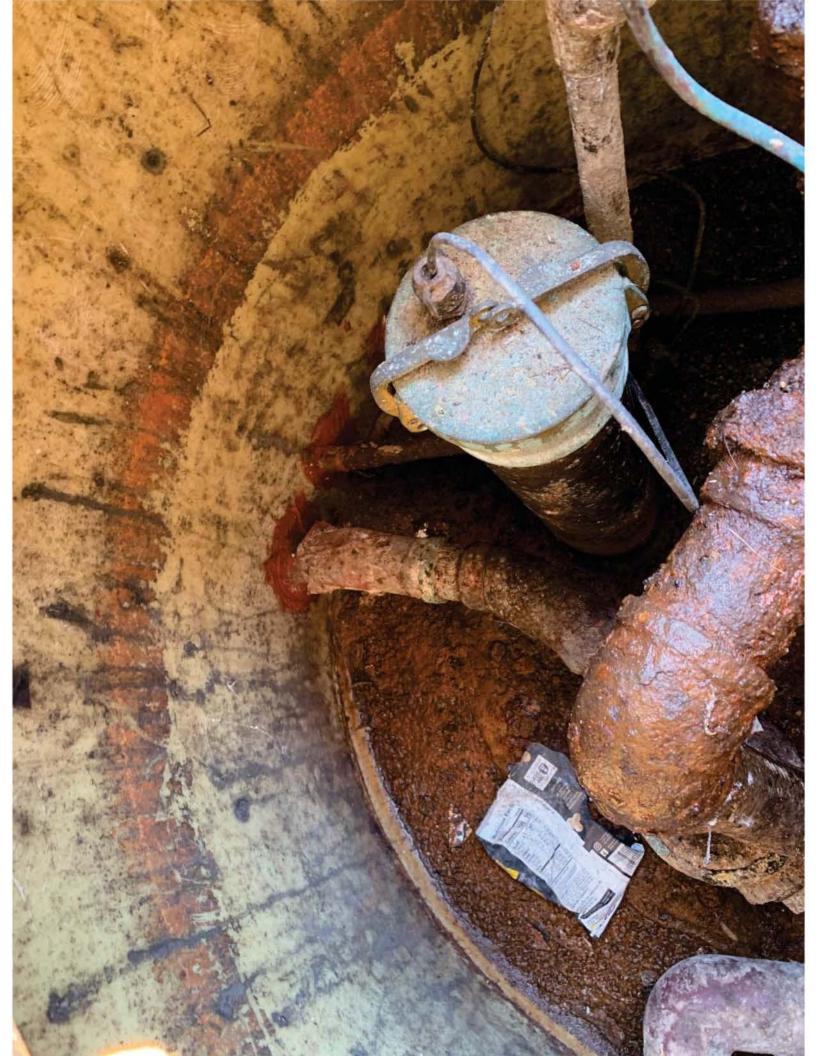










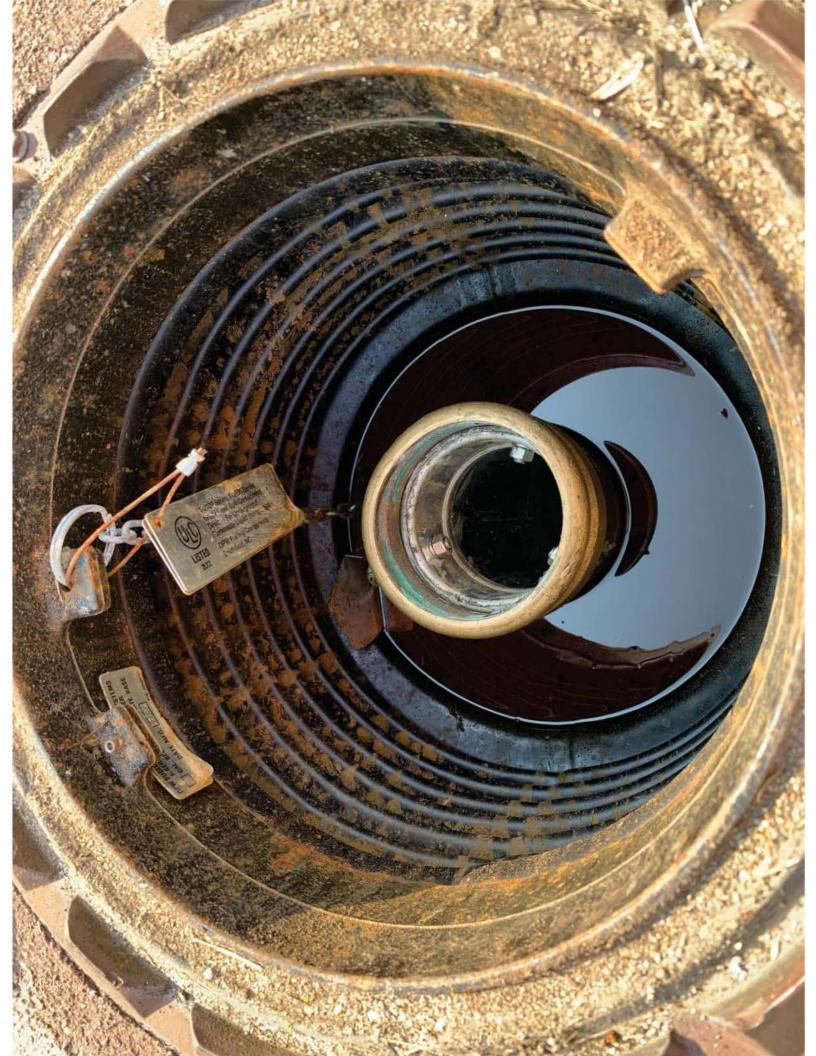




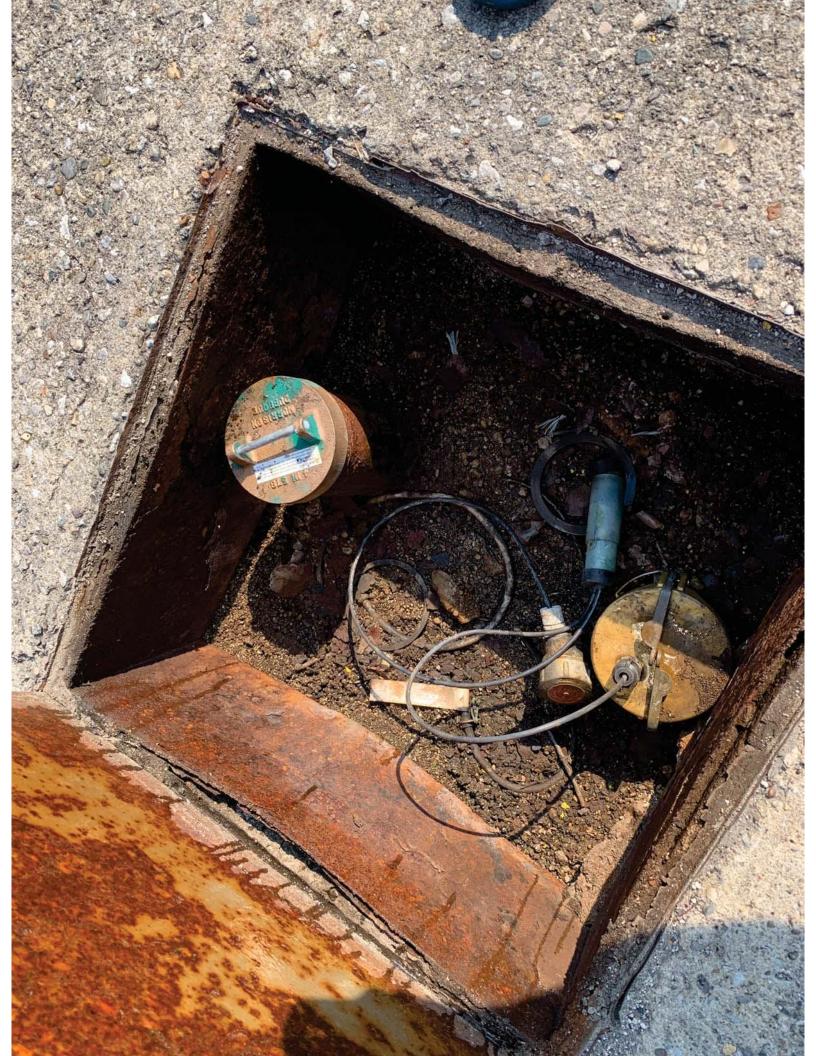




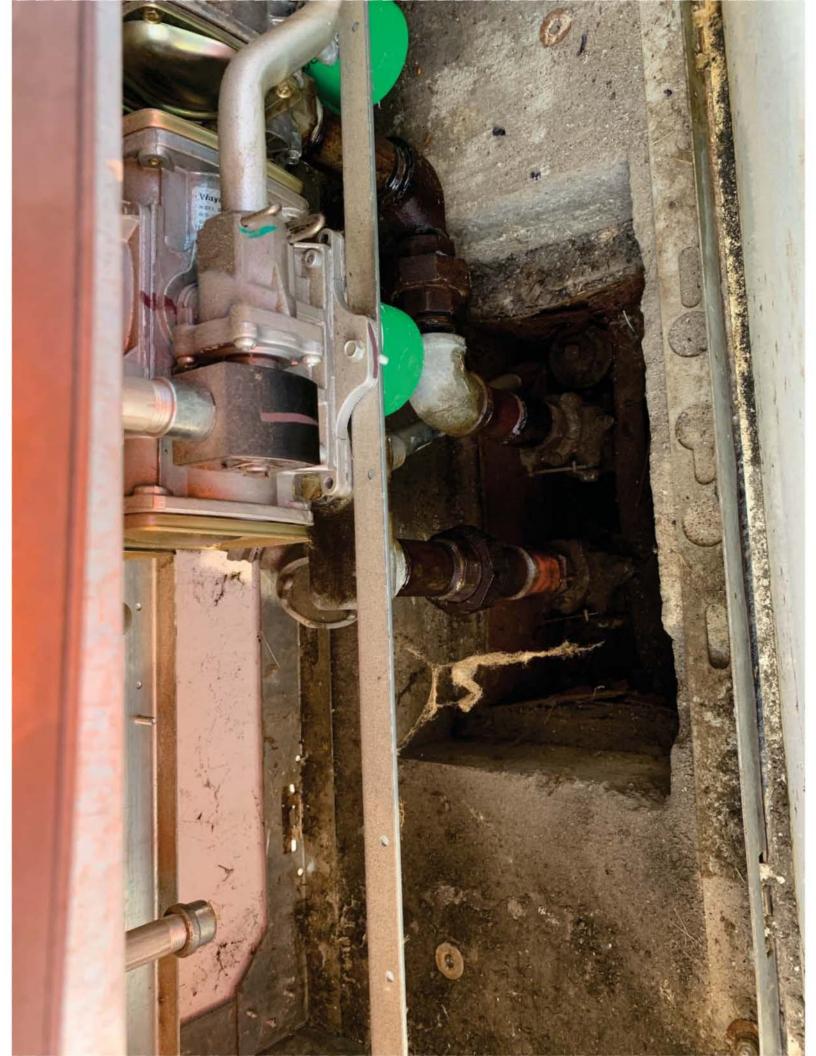


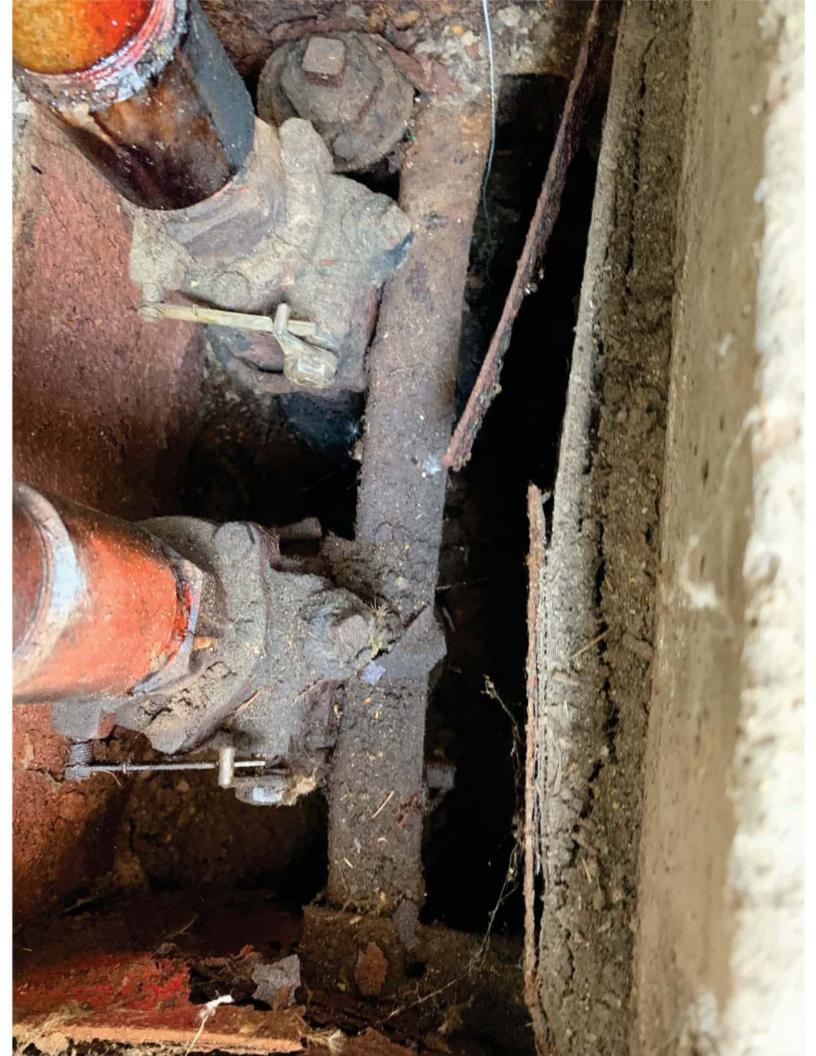


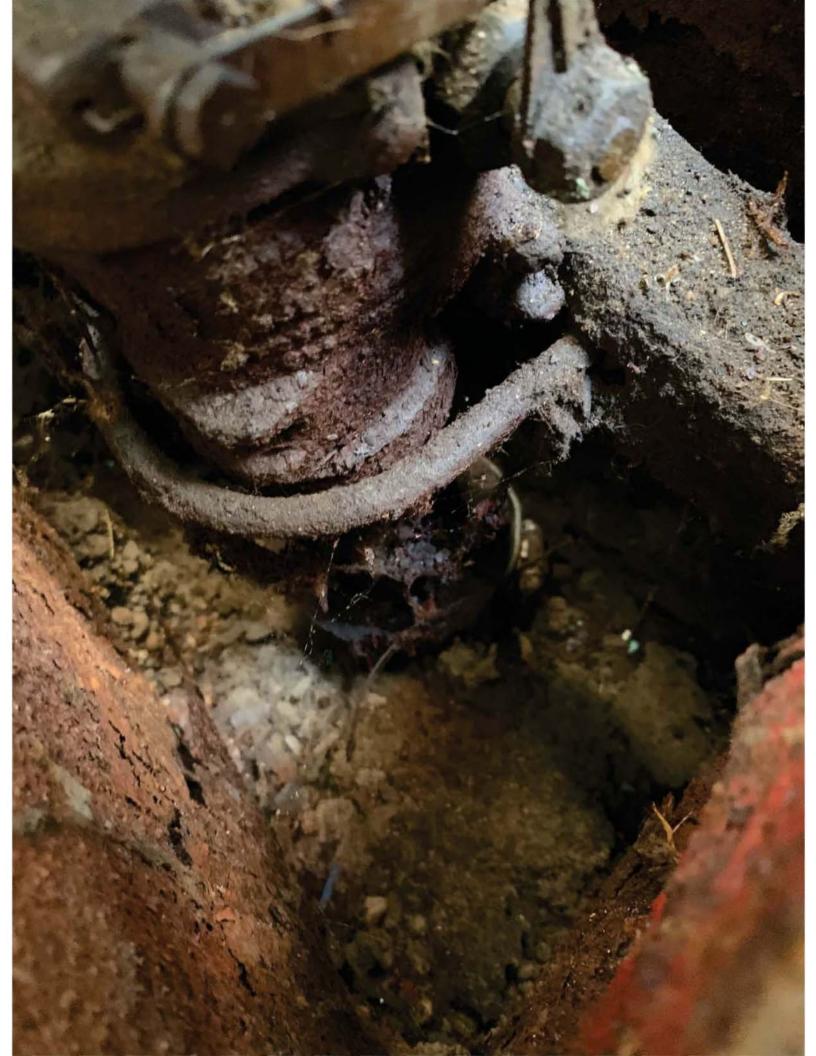


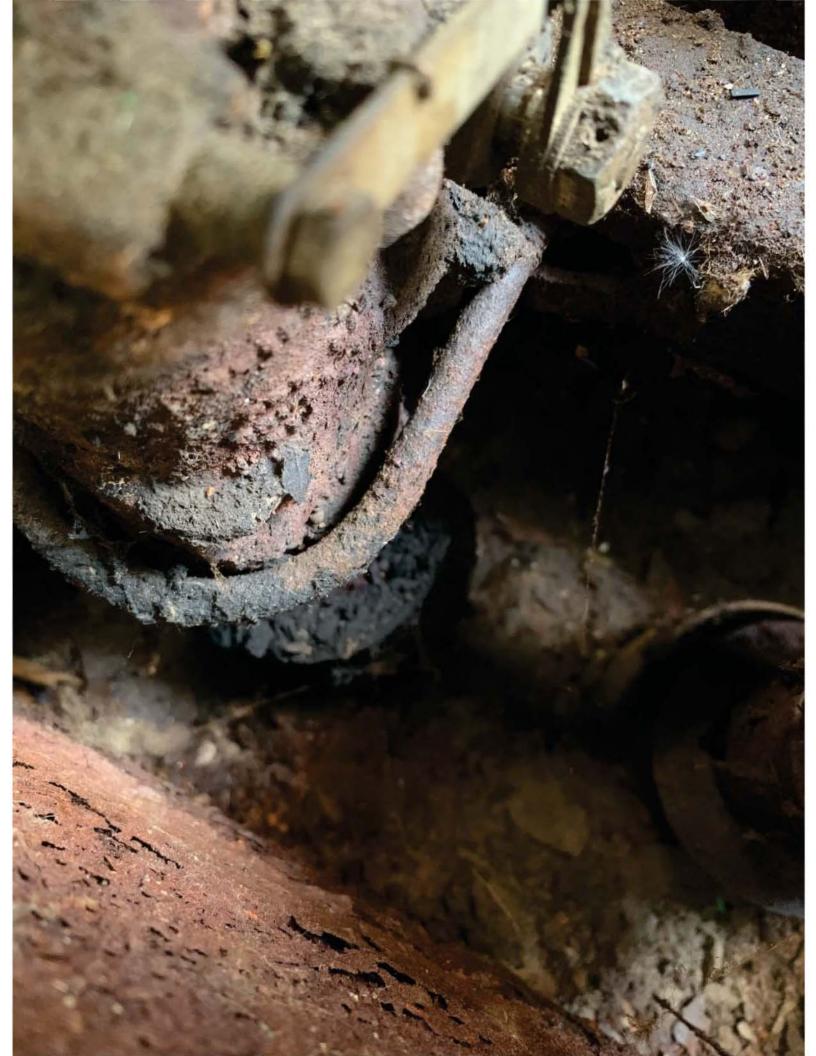




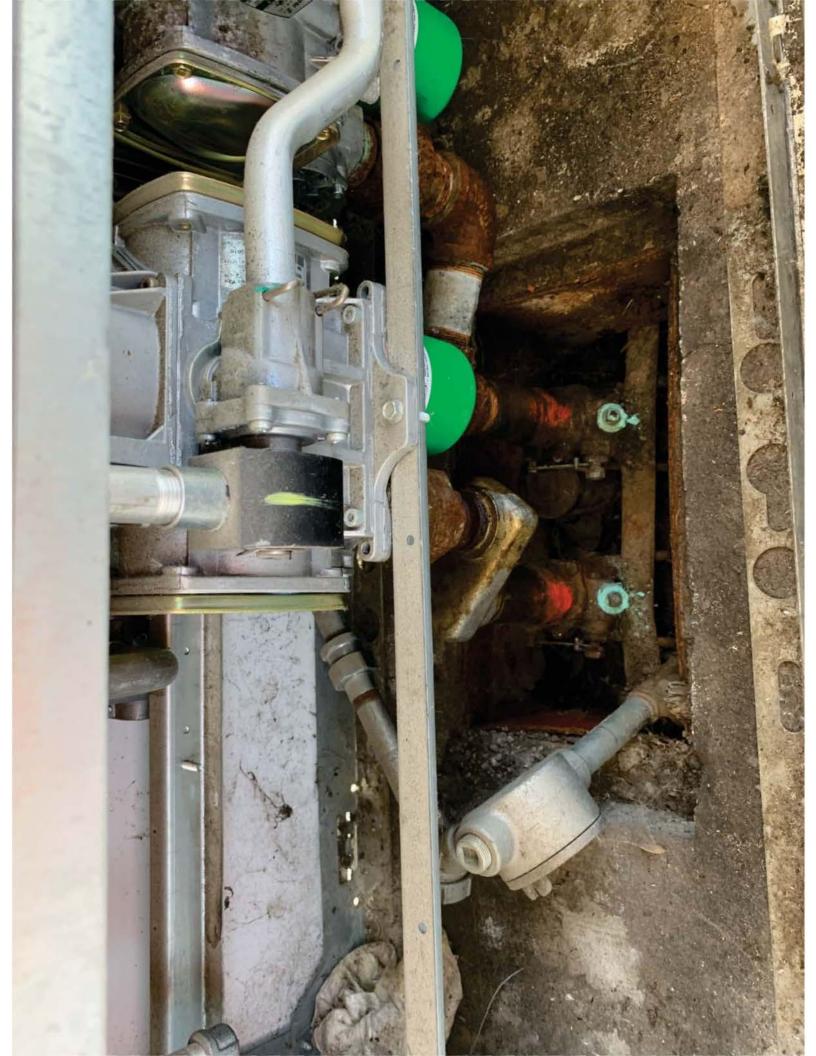




















450 PLUS

ATER VOL = 0.0 GALS

ANK 3: KERO

DLUME = 546 GALS

DLUME = 1454 GALS

ATER = 0.00 INCHES

EMP = 62.33 DEG F DOW, ULLAGE = 6853 GALS E1GHT = 18.49 INCHES ATER = 0.00 INCHES NAMP = 62.33 DEG F ATER = 0.33 DEG F ATER = 0.449 INCHES

JRRENT INVENTORY REPORT

2504 N 914 ST 12 H7 W 914 ST 12 H7 W 914 ST 14 H7 W 91433

MA 0E: 8 45/17/14



276

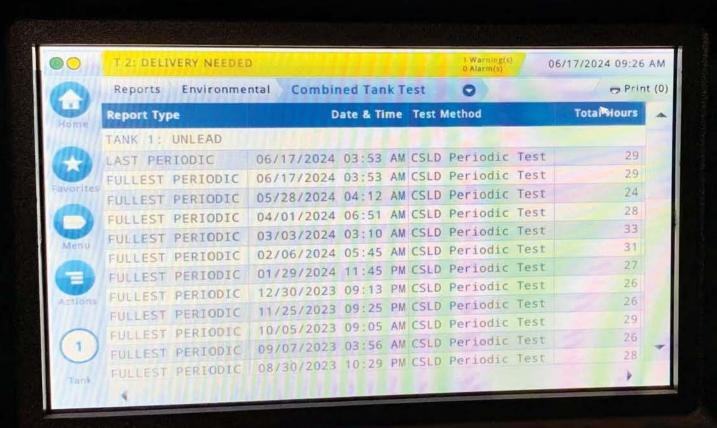




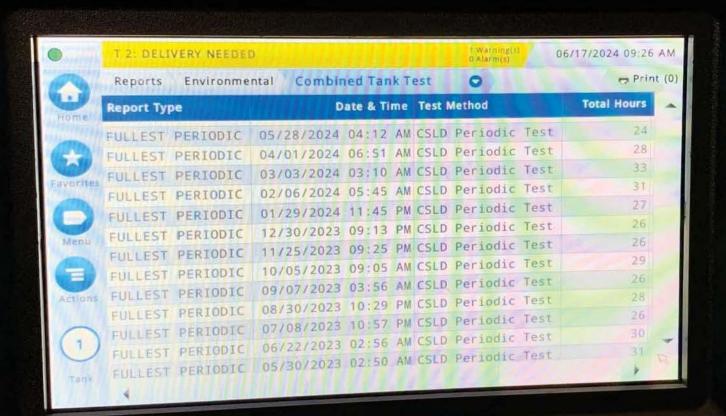




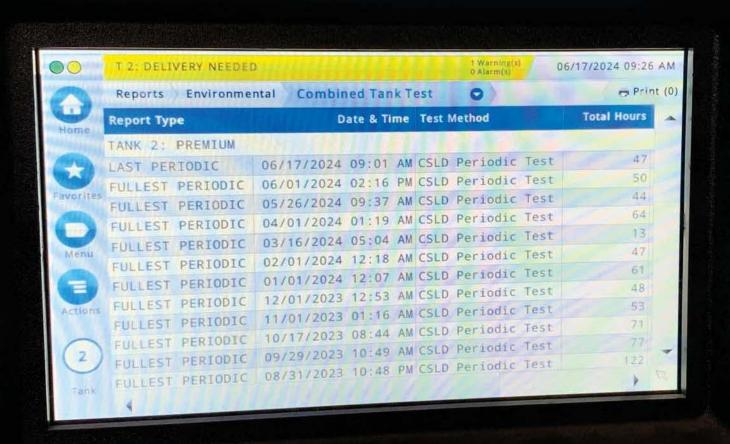








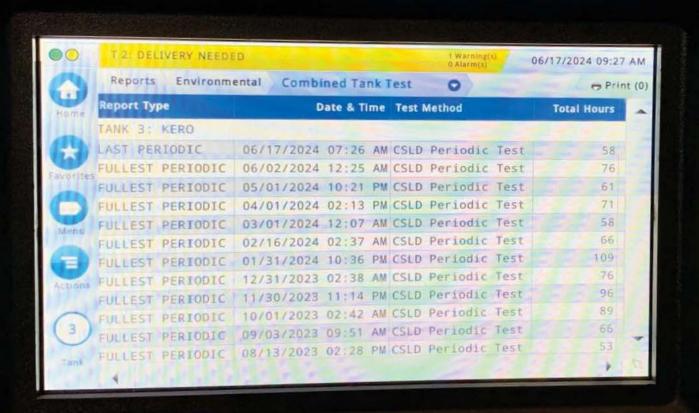
VEEDER-ROOT



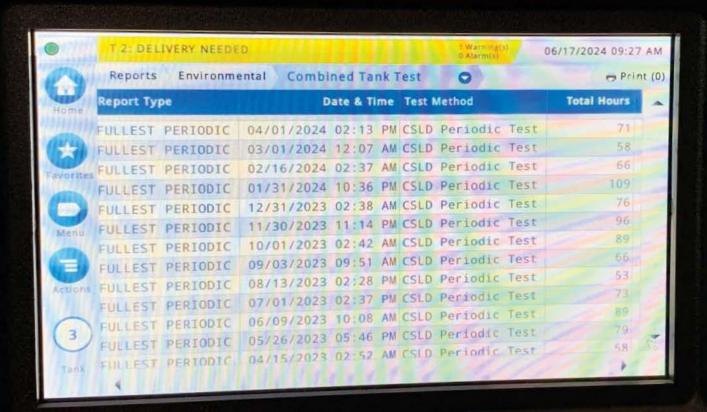


•	T 2: DELIVERY	NEEDED				1 Warning(s 0 Alarm(s)	0	6/17/2024 09:2	6 AM
	Reports Env	ironmental	Combine	ed Tank T	est	0		⊕ Pri	nt (0)
Home	Report Type		Da	te & Time	Test I	Method		Total Hours	-
CHOICE CO.	FULLEST PERI	ODIC 037	6/2024	75:U4 AM	CSED	Periodic	Test	13	
-	FULLEST PERI	ODIC 02/0	1/2024 1	12:18 AM	CSLD	Periodic	Test	47	
200	FULLEST PERI	ODIC 01/0	1/2024 1	12:07 AM	CSLD	Periodic	Test	61	
Favorites	FULLEST PERI	ODIC 12/0	1/2023 1	2:53 AM	CSLD	Periodic	Test	48	12
	FULLEST PERI	ODIC 11/0	1/2023 0	1:16 AM	CSLD	Periodic	Test	53	
	FULLEST PERI	ODIC 10/1	7/2023 0	8:44 AM	CSLD	Periodic	Test	71	
Menu			9/2023 1	0:49 AM	CSLD	Periodic	Test	77	
	FULLEST PERI		1/2023 1	0:48 PM	CSLD	Periodic	Test	122	
	FULLEST PERI					Periodic		111	
Actions	FULLEST PERI					Periodic		101	
		7	A CONTRACTOR OF THE PARTY OF TH			Periodic		144	
0	FULLEST PERI	ODIC DAZA	6/2023 1	0:22 PM	CSLD	Periodic	Test	93	
(2)	POLLEDI FER			3:43 AM	CSLD	Periodic	Test	53	4
	FULLEST PERI	ODIC 0372		The legal way			-	-	
Tank									











Compliance Site Summary

Site GVR ID: 846071 **Customer Name:** GPM Investments

Site ID: 1433 Customer ID: S360100

Site Name: **GPM Investments 1433** Customer Address: 8565 Magellan Pkwy, Site Address:

Richmond, , 23227, US 2204 W. 9th Street, Marion, IN, 46953

Created: **Date Range:** 6/1/23 - 6/19/24 6/19/2024 3:48:38 PM

	6/2023	7/2023	8/2023	9/2023	10/2023	11/2023	12/2023	1/2024	2/2024	3/2024	4/2024	5/2024	6/2024
Total Tanks	3	3	3	3	3	3	3	3	3	3	3	3	3
Total Lines	0	0	0	0	0	0	0	0	0	0	0	0	0
Total Sensors	0	0	0	0	0	0	0	0	0	0	0	0	0
	6/2023	7/2023	8/2023	9/2023	10/2023	11/2023	12/2023	1/2024	2/2024	3/2024	4/2024	5/2024	6/2024
Compliant Tanks	3	3	3	3	3	3	3	3	3	3	3	3	3
Compliant Lines	0	0	0	0	0	0	0	0	0	0	0	0	0
Compliant Sensors	0	0	0	0	0	0	0	0	0	0	0	0	0
	6/2023	7/2023	8/2023	9/2023	10/2023	11/2023	12/2023	1/2024	2/2024	3/2024	4/2024	5/2024	6/2024
Tanks % Compliant	100	100	100	100	100	100	100	100	100	100	100	100	100
Lines % Compliant	0	0	0	0	0	0	0	0	0	0	0	0	0
Sensors % Compliant	0	0	0	0	0	0	0	0	0	0	0	0	0

1 / 1 6/19/2024



Compliance Site Detail

Site GVR ID: 846071 **Customer Name:** GPM Investments

Customer ID: S360100 Site ID: 1433

Site Name: **GPM Investments 1433 Customer Address:** 8565 Magellan Pkwy, **Site Address:**

Richmond, , 23227, US 2204 W. 9th Street, Marion,

IN, 46953

Created: 6/19/2024 3:48:38 PM **Date Range:** 6/1/23 - 6/19/24

			TANKS			
Tank Number	Device Label	Period Start Date	Period End Date	Test Date	Test Type	Compliance Result
1	UNLEAD	6/1/2023	6/30/2023	6/30/2023	0.2 GPH MONTHLY	PASS
2	PREMIUM	6/1/2023	6/30/2023	6/30/2023	0.2 GPH MONTHLY	PASS
3	KERO	6/1/2023	6/30/2023	6/30/2023	0.2 GPH MONTHLY	PASS



Compliance Site Detail

Site GVR ID: 846071 Customer Name: GPM Investments

Site ID: 1433 **Customer ID:** S360100

Site Name: GPM Investments 1433 Customer Address: 8565 Magellan Pkwy,

Richmond, , 23227, US

IN, 46953

2204 W. 9th Street, Marion,

Created: 6/19/2024 3:48:38 PM **Date Range:** 6/1/23 - 6/19/24

			TANKS			
Tank Number	Device Label	Period Start Date	Period End Date	Test Date	Test Type	Compliance Result
1	UNLEAD	7/1/2023	7/31/2023	7/31/2023	0.2 GPH MONTHLY	PASS
2	PREMIUM	7/1/2023	7/31/2023	7/31/2023	0.2 GPH MONTHLY	PASS
3	KERO	7/1/2023	7/31/2023	7/31/2023	0.2 GPH MONTHLY	PASS



Compliance Site Detail

Site GVR ID: 846071 Customer Name: GPM Investments

Site ID: 1433 **Customer ID:** S360100

Site Name: GPM Investments 1433 Customer Address: 8565 Magellan Pkwy,

Richmond, , 23227, US

IN, 46953

2204 W. 9th Street, Marion,

Created: 6/19/2024 3:48:38 PM **Date Range:** 6/1/23 - 6/19/24

			TANKS			
Tank Number	Device Label	Period Start Date	Period End Date	Test Date	Test Type	Compliance Result
1	UNLEAD	8/1/2023	8/31/2023	8/31/2023	0.2 GPH MONTHLY	PASS
2	PREMIUM	8/1/2023	8/31/2023	8/31/2023	0.2 GPH MONTHLY	PASS
3	KERO	8/1/2023	8/31/2023	8/31/2023	0.2 GPH MONTHLY	PASS



Compliance Site Detail

Site GVR ID: 846071 Customer Name: GPM Investments

Site ID: 1433 **Customer ID:** S360100

Site Name: GPM Investments 1433 Customer Address: 8565 Magellan Pkwy,

Richmond, , 23227, US

IN, 46953

2204 W. 9th Street, Marion,

Created: 6/19/2024 3:48:38 PM **Date Range:** 6/1/23 - 6/19/24

			TANKS			
Tank Number	Device Label	Period Start Date	Period End Date	Test Date	Test Type	Compliance Result
1	UNLEAD	9/1/2023	9/30/2023	9/30/2023	0.2 GPH MONTHLY	PASS
2	PREMIUM	9/1/2023	9/30/2023	9/29/2023	0.2 GPH MONTHLY	PASS
3	KERO	9/1/2023	9/30/2023	9/30/2023	0.2 GPH MONTHLY	PASS



Compliance Site Detail

Site GVR ID: 846071 Customer Name: GPM Investments

Site ID: 1433 **Customer ID:** S360100

Site Name: GPM Investments 1433 Customer Address: 8565 Magellan Pkwy,

Richmond, , 23227, US

IN, 46953

2204 W. 9th Street, Marion,

Created: 6/19/2024 3:48:38 PM **Date Range:** 6/1/23 - 6/19/24

			TANKS			
Tank Number	Device Label	Period Start Date	Period End Date	Test Date	Test Type	Compliance Result
1	UNLEAD	10/1/2023	10/31/2023	10/31/2023	0.2 GPH MONTHLY	PASS
2	PREMIUM	10/1/2023	10/31/2023	10/30/2023	0.2 GPH MONTHLY	PASS
3	KERO	10/1/2023	10/31/2023	10/30/2023	0.2 GPH MONTHLY	PASS



Compliance Site Detail

Site GVR ID: 846071 Customer Name: GPM Investments

Site ID: 1433 **Customer ID:** S360100

Site Name: GPM Investments 1433 Customer Address: 8565 Magellan Pkwy,

Richmond, , 23227, US

IN, 46953

2204 W. 9th Street, Marion,

Created: 6/19/2024 3:48:38 PM **Date Range:** 6/1/23 - 6/19/24

TANKS TANKS										
Tank Number	Device Label	Period Start Date	Period End Date	Test Date	Test Type	Compliance Result				
1	UNLEAD	11/1/2023	11/30/2023	11/30/2023	0.2 GPH MONTHLY	PASS				
2	PREMIUM	11/1/2023	11/30/2023	11/30/2023	0.2 GPH MONTHLY	PASS				
3	KERO	11/1/2023	11/30/2023	11/30/2023	0.2 GPH MONTHLY	PASS				

6/19/2024



Compliance Site Detail

Site GVR ID: 846071 Customer Name: GPM Investments

Site ID: 1433 **Customer ID:** S360100

Site Name: GPM Investments 1433 Customer Address: 8565 Magellan Pkwy,

Richmond, , 23227, US

IN, 46953

2204 W. 9th Street, Marion,

Created: 6/19/2024 3:48:38 PM **Date Range:** 6/1/23 - 6/19/24

			TANKS			
Tank Number	Device Label	Period Start Date	Period End Date	Test Date	Test Type	Compliance Result
1	UNLEAD	12/1/2023	12/31/2023	12/31/2023	0.2 GPH MONTHLY	PASS
2	PREMIUM	12/1/2023	12/31/2023	12/31/2023	0.2 GPH MONTHLY	PASS
3	KERO	12/1/2023	12/31/2023	12/31/2023	0.2 GPH MONTHLY	PASS



Compliance Site Detail

Site GVR ID: 846071 Customer Name: GPM Investments

Site ID: 1433 **Customer ID:** S360100

Site Name: GPM Investments 1433 Customer Address: 8565 Magellan Pkwy,

Richmond, , 23227, US

IN, 46953

2204 W. 9th Street, Marion,

Created: 6/19/2024 3:48:38 PM **Date Range:** 6/1/23 - 6/19/24

			TANKS			
Tank Number	Device Label	Period Start Date	Period End Date	Test Date	Test Type	Compliance Result
1	UNLEAD	1/1/2024	1/31/2024	1/31/2024	0.2 GPH MONTHLY	PASS
2	PREMIUM	1/1/2024	1/31/2024	1/31/2024	0.2 GPH MONTHLY	PASS
3	KERO	1/1/2024	1/31/2024	1/31/2024	0.2 GPH MONTHLY	PASS



Compliance Site Detail

Site GVR ID: 846071 Customer Name: GPM Investments

Site ID: 1433 **Customer ID:** S360100

Site Name: GPM Investments 1433 Customer Address: 8565 Magellan Pkwy,

Richmond, , 23227, US

IN, 46953

2204 W. 9th Street, Marion,

Created: 6/19/2024 3:48:38 PM **Date Range:** 6/1/23 - 6/19/24

			TANKS			
Tank Number	Device Label	Period Start Date	Period End Date	Test Date	Test Type	Compliance Result
1	UNLEAD	2/1/2024	2/29/2024	2/29/2024	0.2 GPH MONTHLY	PASS
2	PREMIUM	2/1/2024	2/29/2024	2/29/2024	0.2 GPH MONTHLY	PASS
3	KERO	2/1/2024	2/29/2024	2/29/2024	0.2 GPH MONTHLY	PASS



Compliance Site Detail

Site GVR ID: 846071 Customer Name: GPM Investments

Site ID: 1433 **Customer ID:** S360100

Site Name: GPM Investments 1433 Customer Address: 8565 Magellan Pkwy,

Richmond, , 23227, US

IN, 46953

2204 W. 9th Street, Marion,

Created: 6/19/2024 3:48:38 PM **Date Range:** 6/1/23 - 6/19/24

			TANKS			
Tank Number	Device Label	Period Start Date	Period End Date	Test Date	Test Type	Compliance Result
1	UNLEAD	3/1/2024	3/31/2024	3/31/2024	0.2 GPH MONTHLY	PASS
2	PREMIUM	3/1/2024	3/31/2024	3/31/2024	0.2 GPH MONTHLY	PASS
3	KERO	3/1/2024	3/31/2024	3/31/2024	0.2 GPH MONTHLY	PASS



Compliance Site Detail

Site GVR ID: 846071 Customer Name: GPM Investments

Site ID: 1433 **Customer ID:** S360100

Site Name: GPM Investments 1433 Customer Address: 8565 Magellan Pkwy,

Richmond, , 23227, US

IN, 46953

2204 W. 9th Street, Marion,

Created: 6/19/2024 3:48:38 PM **Date Range:** 6/1/23 - 6/19/24

	TANKS TANKS												
Tank Number	Device Label	Period Start Date	Period End Date	Test Date	Test Type	Compliance Result							
1	UNLEAD	4/1/2024	4/30/2024	4/30/2024	0.2 GPH MONTHLY	PASS							
2	PREMIUM	4/1/2024	4/30/2024	4/30/2024	0.2 GPH MONTHLY	PASS							
3	KERO	4/1/2024	4/30/2024	4/30/2024	0.2 GPH MONTHLY	PASS							



Compliance Site Detail

Site GVR ID: 846071 Customer Name: GPM Investments

Site ID: 1433 **Customer ID:** S360100

Site Name: GPM Investments 1433 Customer Address: 8565 Magellan Pkwy,

Richmond, , 23227, US

IN, 46953

2204 W. 9th Street, Marion,

Created: 6/19/2024 3:48:38 PM **Date Range:** 6/1/23 - 6/19/24

	TANKS TANKS												
Tank Number	Device Label	Period Start Date	Period End Date	Test Date	Test Type	Compliance Result							
1	UNLEAD	5/1/2024	5/31/2024	5/31/2024	0.2 GPH MONTHLY	PASS							
2	PREMIUM	5/1/2024	5/31/2024	5/31/2024	0.2 GPH MONTHLY	PASS							
3	KERO	5/1/2024	5/31/2024	5/31/2024	0.2 GPH MONTHLY	PASS							



Compliance Site Detail

Site GVR ID: 846071 Customer Name: GPM Investments

Site ID: 1433 **Customer ID:** S360100

Site Name: GPM Investments 1433 Customer Address: 8565 Magellan Pkwy,

Richmond, , 23227, US

IN, 46953

2204 W. 9th Street, Marion,

Created: 6/19/2024 3:48:38 PM **Date Range:** 6/1/23 - 6/19/24

	TANKS TANKS											
Tank Number	Device Label	Period Start Date	Period End Date	Test Date	Test Type	Compliance Result						
1	UNLEAD	6/1/2024	6/30/2024	6/19/2024	0.2 GPH MONTHLY	PASS						
2	PREMIUM	6/1/2024	6/30/2024	6/19/2024	0.2 GPH MONTHLY	PASS						
3	KERO	6/1/2024	6/30/2024	6/19/2024	0.2 GPH MONTHLY	PASS						



		Auton	natic Tank G	auge Operation	Inspection						
Owner Name:				Date:	2/26/2	4					
GPM INVESTMENTS				Work Order #:	204096		Facility ID #:	1433.00			
Facility Name:				Office:	R. W. Mercer Co						
MARATHON					Fort Wayne 26	50-489-3566					
Address:				Tester:							
2204 W 9th Street				Lucas Babler							
City, State, Zip Code:				Certification #:							
Marion,IN 46953				UCC109255							
All testing procedures follow the guide		RP1200.		T							
Tank Level M	onitor Brand:			Model							
Configuration, alarm his	story printed and ba	ttery backup tested.			_		_				
Tank Number	1	2	3	4	5	6	7	8			
Product Grade	REGULAR	PREMIUM	KERO								
1. Full Volume, gallons	10000	8000	2000								
2. Tank Diameter, inches	92	92	72								
3. Remove probe from the											
tank, is it free of any damaged	Yes	Yes	Yes								
or missing parts											
4. Do the floats move freely	Yes	Yes	Yes								
5. Does water and fuel levels	Vas	Ves	Yes								
agree with ATG	Yes	Yes	res								
6. Inch level from bottom of											
probe when 90% alarm is	77.5	77.5	64								
triggered											
7. Does this level correspond	v	v	.,								
to the value programmed in ATG	Yes	Yes	Yes								
8. Inch level from bottom of											
probe when water alarm is	1	1	1								
triggered	1	•	1								
9. Does this level correspond											
to the value programmed in	Yes	Yes	Yes								
ATG											
If any results from 3, 4 or 5 are "No", t	he ATG has failed the t	est.									
Test Results	Pass	Pass	Pass								
Comments:		<u>l</u>		L	-1		L	l			



		UST Ove	rfill Inspection	n - Automatic S	Shutoff Device					
Owner Name:				Date:	2/26/24					
GPM INVESTMENTS				Work Order #:	204096		Facility ID#	1433		
Facility Name:				Office:	R. W. Mercer Co.					
MARATHON					Fort Wayne 26	0-489-3566				
Address:				Tester:						
2204 W 9th Street				Lucas Babler Certification #:						
City, State, Zip Code: Marion,IN 46953				UCC109255						
All testing procedures follow the guid	e lines put forth in PEI,	/RP1200.		000103233						
Tank Number	1	2	3	4	5	6	7	8		
Product Grade	REGULAR	PREMIUM	KERO							
Test type	Verification	Verification	Verification							
Overfill prevention device	OPW	OPW	OPW							
brand, if known Drop tube passes visual										
inspection?	Yes	Yes	Yes							
Drop tube removed from tank?	Yes	Yes	Yes							
Drop tube and float mechanisms free of debris?	Yes	Yes	Yes							
Float moves freely without binding and poppet moves into flow path?	Yes	Yes	Yes							
Bypass valve in the drop tube open and free of blockage? (if present)	N/A	N/A	N/A							
A "No" to any of the above items indi	cates a test failure.	•	•	•	•		·	•		
1. Full Volume, gallons										
2. Tank Diameter, inches										
3. Calculated 95%										
Use tank charts to determine height of calculated volume										
5. Measure top fill riser										
6. Calculated upper tube in tank										
7. Subtract 2" from upper length, if required by manufacturer specs.										
8. Calculated minimum upper tube length										
9. Actual measured upper tube length w/out adaptor										
If line 9 is less than line 8 than the dev	vice fails.		·	<u> </u>	<u> </u>					
Test Results	Pass	Pass	Pass							
Comments: overfill drop		g 6" from botton		•	•	•	•			



			Emergency	y Stop Operation	on			
Owner Name:				Date:	2/26/24			
GPM INVESTMENTS				Work Order #:	204096		Facility ID#	1433
Facility Name:				Office:	R. W. Mercer Co.			
MARATHON					Fort Wayne 26	0-489-3566		
Address:				Tester:				
2204 W 9th Street				Lucas Babler				
City, State, Zip Code:				Certification #:				
Marion, IN 46953 All testing procedures follow the guid	a lines put forth in DEI/DE	21200		UCC109255				
E-stop Number	1	2	3	4	5	6	7	8
Location	switch under VR		,	4	, ,	0	,	
	SWITCH UNDER VIX							
1. E-stops labeled and located where easily accessible?	Yes							
2. System fully powered and in normal working condition?	Yes							
3. After activating E-Stop, pov	ver disconnected from	n:	•	1	•	•	•	•
3a. All dispensing devices on all islands?	Yes							
3b. All STPs for all fuel grades?	Yes							
3c. All power, controls and signal circuits associated with the dispensing devices and the STPs? (low voltage disconnect required only after 2003)	Yes							
3d. All other non-intrinsically safe electrical equipment in classified areas surrounding fuel dispensing devices?	Yes							
4. All intrinsically safe electrical equipment remains energized after E-stop activation?	Yes							
5. After testing, E-stop has been reset and site is back to normal operating condition?	Yes							
A "No" to any lines 3a - 3d indicates a	test failure.						_	
Test Results	Pass							
Comments:								



					EZYChe	k System	s Line. Lo	eak Dete	ctor and S	Shear Val	lve Test					
Owner Na						,	,-	Date:	2/26/24							
GPM INV	/ESTMEN	TS						Work Ord	der #:	204096			F	acility ID#	1433	
Facility Na	me:							Office:	R. W. Merc	er Co.						
MARATHO	ON								Fort Wayne	e 260-489	9-3566					
Address:								Tester:								
2204 W 9t								Lucas Bak								
	, Zip Code	:						Certificat								
Marion,IN	46953							UCC1092	55							
Product:	REGULAR	<u>.</u>	Applied	l Pressure:	50	psi		Product: PREMIUM				Applied Pressure: 50 psi				
Start Time	Begin Reading	End Reading	-/+	GPL	Result	GPH	Pass/Fail		Start Time	Begin Reading	End Reading	-/+	GPL	Result	GPH	Pass/Fail
9:45	72	72	0	0.0037	0				9:45	78	78	0	0.0037	0		
10:00	72	72	0	0.0037	0				10:00	78	78	0	0.0037	0		
10:15 10:30	72 72	72	0	0.0037	0				10:15 10:30	78 78	78	0	0.0037	0	-	
10:30	72								10:30	/8						
RESULTS	<u> </u>	<u>l</u>	1	l.	0	<0.050gph	PASS		RESULTS	3	<u>l</u>			0	<0.050gph	PASS
						•		•							•	
	Sump S	ensor Test	N/A	-						Sump S	ensor Test	N/A	_			
	Product	Line Type		-	STP S	Sump Type		-		Product	Line Type		_	STP S	Sump Type	
Product:		_	Applied	l Pressure:		psi			Product:		_	Applied	d Pressure:		psi	
			1		1	ı		1						1		
Start Time	Begin Reading	End Reading	-/+	GPL	Result	GPH	Pass/Fail		Start Time	Begin Reading	End Reading	-/+	GPL	Result	GPH	Pass/Fail
Time	Reading	rteaurig							Time	Reading	ixeauiig					
RESULTS	j.					<0.050gph			RESULTS	5					<0.050gph	
	Sump S	ensor Test								Sump S	ensor Test					
		Line Type			STP S	Sump Type		-			Line Type			STP	Sump Type	
						Med	hanical	Leak D	etector •	Test						
	Leak		Function	Opening	Test Leak			Does the	STP pressure re	emain at or	Does the le		Does the S	TP properly	cycle on/off	
Product	Detector	Resiliency mL	Element Holding	Time	Rate	Metering PSI	Running PSI		e metering pres conds when th		trip wher	n the line	under	normal fuel	system	Pass/Fail
	Mfg.		PSI	<15 sec	mL/Min	1 01	. 51		leak is induced		0 p		opera	ation condit	ions?	
REGULAR	redjacket	16	28	6	189	10	32		Yes			es		Yes		Pass
PREMIUM	fepetro	18	30	8	189	10	32		Yes		Y	es		Yes		Pass
				<u> </u>												
						Ele	ctronic	Leak Do	etector T	est						
Product	Manu-		erating			s are observ		Does the	simulated lea	k cause an					down alarm	Pass/Fail
REGULAR	facturer	pres	sure	,	alarm/snutd	own occurs	<u>'</u>		alarm?		S	ΓP shutdow	n?	atta	ched	
PREMIUM																
							٠.									
					I		Shea	ar Valve	e lest	ı	I			ı	T	
Dispensers	Tested				Disp 1/2	Disp 3/4 REGULAR										
					REGULAR PREMIUM	PREMIUM										
Product Gr	ade:				TIVEIVIIOIVI	TIKEIVIIOIVI										
		ly anchored			Yes	Yes										
		ioned betwe		e or below	Yes	Yes	-					-				
	ace of the dis arm free to	penser islan	d?						1				1		-	1
		p mover	nonnet valv	re?	Yes Yes	Yes Yes			+						1	-
		-							+				 			
can any pro	auct be dispe	ensed when t	tne shear val	ve is closed?	No	No										
Test Result	:s			-	Pass	Pass										
Comments:																

Tester's Name (print):

Lucas Babler



Annual UST System Inspection Checklist

Appendix A-3: Sample form for Annual Underground Storage System inspection Checklist Owner Name: Date: 2/26/24 **GPM INVESTMENTS** Work Order #: 204096 Facility ID# 1433 **Facility Name:** Office: R. W. Mercer Co. Fort Wayne 260-489-3566 MARATHON Address: Tester: 2204 W 9th Street Lucas Babler City, State, Zip Code: Certification #: UCC109255 Marion, IN 46953 Description PEI/RP900 N/A 1 2 3 4 5 6 8 Category Monthly Complete monthly checklist and compare to previously completed monthly checklists 8.4.1 х Monthly inspections reviewed and found adequate 8.4.2 Inspections **ATG Manhole** 8.8 Cap in good condition, sealed tightly, hole sealed where probe wire goes through 8.8.1 Wire splices sealed and wire in good condition 8.8.2 Juntion bos cover, not corroded; intrinisically safe wiring in good condition 8.8.3 Х No exposed wires 8.8.4 ATG Manhole Probe and floats in good condition, both floats present and move 2/26/2024 8.8.5 Test Date Х Х freely(mag Probe) Verify functionality of ATG probe Test Date 2/26/2024 8.8.6 х х 8.8.7 Manhole Cover in good condition х Х Adequate clearance between ATG grade-level cover and below-grade components 8.8.8 Fill Area 8.9 Drop Tube Drop tube extends to within 6" of the tank bottom(if no flow diffuser present 891 Vapor Recovery Poppet of Stage 1 vapor recovery adaptor (also known as a "dry break" moves freely, seals tightly 8.9.2 х Adapto Sigle-Walled Spill Single-walled spill containment manhole tightness tested within Containment х last 3 years Manhole Double-Walled Spil Double-walled spill containment manhole tightness tested within last 3 est Date 8.9.4 years OR inspected monthly Manhole **Overfill Prevention** 8.1 DropTube Shutoff Drop tube shutoff valve passes inspection **Evaluation Date** ##### 8.10.1.1 (Flapper Valve) For drop tube shutoff valves in diesel tanks, excessive corrosion not present 8.10.1.2 Ball float can be removed and inspected 8.10.2.1 Evaluation Date Ball Float Valve Ball float valve passes inspection 8.10.2.2 For ball bloat valves in diesel tanks, excessive corrosion not present 8.10.2.3 Overfill Alarm Overfill alarm pass inspection Evaluation Date 8.10.3.1 Leak Detection 8.11 ATG passess annual inspection **Evaluation Date** 8.11.1.1 Console has no active warnings or alarms 8.11.1.2 Х Alarm history shows no recurring leak alarams 8.11.1.3 x ATG Console Verify in-tank leak detection tests are being completed (if used for leak detection) 8.11.1.4 Verify corect set-up prameters for electronic line leak detection (if Verification Date: 8.11.1.5 x Verify piping leak detection tests are being completed (if used for leak detection) 8.11.1.6 Electronic Leak Leak monitoring console is operational and has no active warnings or alarms 8.11.2.1 **Detection Monitor** 2/26/24 If pressurized piping has been tested in the last year, review the results Test Date 8.11.3.1 Line Tightness If suction piping has been tested within the last 3 years, review the Test Date 8.11.3.2 Testing ELLD has conducted a 0.1 gph test in the last year Test Date 8.11.3.3 8.11.4.1 **Under Pump** Below-grade piping operates at less than atmospheric pressure 8.11.4.2 Check Valve Below-grade piping slopes continuously back to the tank (Suction Pump) There is only one check valve, and it is located as close as practicable to the suction pump 8.11.4.3 Tank Tightness 8.11.5.1 Tank is 10 years old or less Testing results and verify that the test passed Test Date 8.11.5.2 Statistica SIR results for the previous 12 months pre "pass" Inventory 8.11.6.1 Reconciliation (SIR) Continuous Soil est Date 8.11.7.3 Vapor Monitoring Continuou Ground-water Sensing device tested Test Date 8.11.8.1 Monitoring 8.12 **Corrosion Protection**

Galvanic Cathodic	Verify that cathodic protection testing of all metallic components in contact with soil or water has been conducted within the past 3 years and the test passed	Test Date	8.12.1.1	x						
	Verify that cathodic protection testin has been conducted within the past 3 years and the test passed	Test Date	8.12.2.1	х						
Protection	No exposed wires		8.12.2.2	х						
Tank Lining	Lining inspected as required and in good condition	Test Date	8.12.3.1	х						
Miscellaneous I			8.13							
Tank Pad & Pavement	Concrete or asphalt over or near tanks is level, no significant cracks		8.13.1.1		х	х				
Stage II Liquid Collection Points	Cap in good condition, fits tightly, little or no liquid in bottom		8.13.2.1	х						
Stagel Testing	Verify that Stage I testinghas been conducted and test results are passing	Test Date	8.13.3.1	x						
Stage II Testing	passing	Test Date	8.13.4.1	x						
Site Diagram	Site Diagram Site diagram accurately reflects the site conditions				х	х				
Describe any defi	Describe any deficiencies here:									

Tester's Name (print): Lucas Babler	Tester's Signature: Lucas Babler



Annual STP Inspection Checklist Appendix A-3: Sample form for Annual Underground Storage System inspection Checklist Owner Name: Date: 2/26/24 Work Order #: 204096 **GPM INVESTMENTS** Facility ID# 1433 **Facility Name:** Office: R. W. Mercer Co. Fort Wayne 260-489-3566 MARATHON Address: Tester: 2204 W 9th Street ucas Babler City, State, Zip Code: Certification #: Marion, IN 46953 UCC109255 Description Category PEI/RP900 N/A 1 2 3 4 5 6 7 8 8.6 Submersible Turbine Pump (STP) 8.6.1 Visible piping and fittings show no signs of leaking 8.6.2 Piping in good condition Excessive corrosion not present 8.6.3 8.6.5 Sump free of trash and debris unction box(es) have covers, not corroded; conduit and intrinsically safe wirirng in good confition 8.6.8 8.6.9 Flexible connectors not frayed, twisted, kinked or bent beyond manufacturer specifications All STP Mechanical line leak detector properly vented, vent tube not kinked or twisted, vent tube fittings intact and 8.6.10 tightened Test Date 2/26/24 8.6.11 Mechanical line leak detector passes 3.0 gph test Test Date 8.6.12 Electronic line lead detector(ELLD) passes 3.0 gph test ELLD passes 0.2 gph test Test Date 8.6.13 Test Date 8.6.14 ELLD passes 0.1 pgh test Manhole cover at grade in good condition, does not touch sump cover, all bolts present, handles and lift 8.6.24 mechanism in good condition (as applicable) Submersible pump head, flex connector(s) and other metallic product piping are not in contact with soil or Containment 8.6.17 water or are cathodically protected Sump Any water or product removed and disposed of properly 8.6.4 STP: In Sump is free of cracks, holes, bulges or other defects 8.6.6 Containment Penetration fittings intact and secured 8.6.7 Sump Piping intertitial space open to the STP sump (open double-walled piping system only) Piping interstitial space closed to the STP sump (closed double-walled piping system only) 8.6.20 8.6.22 Sump lid, gasket and seals present and in good condition 8.6.23 STP: In Single Walled Single-walled sump tested for integrity every 3 years Test Date 8.6.18 Containment Sump STP: In Double Walled If not continuously monitored or insptected annually, double-walled Test Date 8.6.19 Containment sump tightness tested every 3 years.

re: Lucas Babler	
J	ure: Lucas Babler

Sump

Describe any deficiencies here:



Annual Dispenser Inspection Checklist													
	Appendix A-3: Sample f	orm for Annual U	al Underground Storage System inspection Checklist										
Owner Name:			Date:	2/26/24									
GPM INVESTN	MENTS		Work O	der#:	204096				Fa	cility ID#	1433		
Facility Name:			Office: R. W. Mercer Co.										
MARATHON			Fort Wayne 260-489-3566										
Address:			Tester:										
2204 W 9th Street				Lucas Babler									
City, State, Zip C	Code:		Certification #:										
Marion, IN 46953	3		UCC109255										
Category	Description		•	PEI/RP900	N/A	1	2	3	4	5	6	7	8
Intitial Feul Disp	enser Inspection			8.5									
All Dispensers	All dispenser components are clean and dry			8.5.1		х	х						
All Dispensers	If dispenser sump is present, sump is dry			8.5.2		х	х						
Fuel Dispenser I	nspection			8.6									
	Visible piping and fittings show no signs of leaking			8.6.1		х	х						
	Piping in good condition			8.6.2		х	х						
	Dispenser containment sump free of trash and debris			8.6.5		х	х						
All Dispensers	Junction box(es) have covers, not corroded; conduit and intrinsically safe	wirirng in good confitio	n	8.6.8		x	х						
	Flexible connectors not frayed, twisted, kinked or bent beyond manufactu	urer specifications		8.6.9		х	х						
	Shear valves operate freely and close completely	Test Date 2/2	6/24	8.6.15		х	х						
	Stage II piping functional or else capped and sealed at an elevation lower	that the fuel dispenser	island	8.6.16	х								
Dispensers Without Sumps	Flex connectors and other metallic product piping are not in contact with protected	soil or water or are cat	hodically	8.6.17		x	x						
	Any water or product removed and disposed of properly			8.6.4	х								
	Sump free of cracks, holes, bulges or other defects			8.6.6	х								
Dispensers With	Penetration fittings intact and secured			8.6.7	х								
Sumps	Piping interstitial space open to the dispenser sump or dispenser pan (openly)	en double-walled piping	g system	8.6.21	х								
	Piping interstitial space closed to the dispenser sump (closed double-wall-	ed piping system only)		8.6.22	x								
Sumps	Single-walled sump tested for integrity every 3 years	Test Date		8.6.18	x								
Dispensers With Double-Walled Sumps	illed If not continuously monitored or insptected annually, double-walled sum Test Date			8.6.19	x								
Describe any defi	ciencies here:												



Annual Leak Detection Device Inspection Checklist													
	Appendix A-3: Sample f	orm for Annual U	ndergrou	ınd Stora	ge Syste	m inspec	tion Ched	klist					
Owner Name:			Date:	2/26/24									
GPM INVESTN	MENTS		Work Order #: 204096 Facility ID# 1433										
Facility Name:			Office: R. W. Mercer Co.										
MARATHON			Fort Wayne 260-489-3566										
Address:			Tester:										
2204 W 9th Stre	et		Lucas Babler										
City, State, Zip C	Code:		Certification #:										
Marion, IN 46953	3		UCC1092	255									
Category	Description			PEI/RP900	N/A	1	2	3	4	5	6	7	8
Leak Detection D	evice. Describe loaction (e.g., interstitial, STP, fill, dispenser	on this row:											
	Sensor tested and funtional Test Date				х								
Liquid Sensor	Sensor properly mounted at the bottom of the containment sump or pan (containment sump or pan sor only)				x								
Sensor proberly mounted at the bottom of double-walled tank (double-walled tank sensor only)					x								
Sensor tested and funtional Test Date					х								
Discriminating Sensor properly mounted at the bottom of the containment sump or pan (containment sump or only)		pan sensor		x									
Sensor	Sensor proberly mounted at the bottom of double-walled tank (double-w	alled tank snesor only)			x								
Hydrostatic	Sensor tested and funtional	Test Date			х								
Sensor	Hydrostatic sensor properly positioned				х								
	Sensor tested and funtional	Test Date			х								
Vacuum/Pressure	Alarm sounds when pressure or vacuum is released	Test Date			х								
Sensor	Entire interstitial space under pressure or vacuum (closed double-walled piping system only)	Test Date			x								
Visually Monitored Double-Walled Sump	red Leak detection device is within recommeded limits				x								
Dispenser Pan	Sensor tested and funtional	Test Date			х								
	Dispenser pan float mecanism free to move and properly adjusted	Test Date			x								
x													

Tester's Name (print): Lucas Babler	Tester's Signature: Lucas Babler
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	Annual	Fill Containment	Sump Inspe	ction C	hecklis	t											
	Appendix A-3: Sample f	orm for Annual Und	erground Stora	ge Syste	m inspe	ction Che	cklist										
Owner Name: Date:					re: 2/26/24												
GPM INVEST	ork Order #: 204096 Facility ID# 1433																
Facility Name:	fice: R. W. Mercer Co.																
MARATHON					Fort Wayne 260-489-3566												
Address: Tester:					·												
2204 W 9th Stre	ucas Babler																
					Certification #:												
Marion, IN 4695		JCC109255															
Category Description			PEI/RP900	N/A	1	2	3	4	5	6	7	8					
Fill Sump																	
Any water or product removed and disposed of properly					х	х											
	Visible piping and fittings show no signs of leaking				х	х											
	Piping in good condition		8.6.2		х	х											
	Excessive corrosion not present		8.6.3		х	х											
	Sump free of trash and debris		8.6.5		х	х											
	Sump is free of cracks, holes, bulges or other defects		8.6.6		х	х											
Fill Containment	Penetration fittings intact and secured		8.6.7		х	х											
Sump	Junction box(es) have covers, not corroded; conduit and intrinsically safe	wiring in good condition	8.6.8		x	x											
	Flexible connectors not frayed, twisted, kinked or bent beyond manufactors	urer specifications	8.6.9		х	х											
	Piping Interstitial space open to the fill sump (open double-walled piping	system only)	8.6.20	х													
	Piping Interstitial space closed to the fill sump (closed double-walled piping	ng system only)	8.6.22	х													
	Sump lid, gasket and seals present and in good condition		8.6.23		х	х											
	Manhole cover at grade in good condition, does not touch sump cover, all bolts present, handles and lift mechanism in good condition (as applicable)				v	v											
Single-Walled Fill Sump	Single-walled sump tested for integrity every 3 years	Test Date		x	Î												
Double-Walled Fill If not continuously monitored or inspected annually, double-walled sump Sumpl tightness tested every 3 years. Test Date				x													

Tester's Name (print): Lucas Babler	Tester's Signature: Lucas Babler



Owner Name: GPM INVESTMEN Facility Name: MARATHON Address: 2204 W 9th Street City, State, Zip Code Marion,IN 46953 Category De	le:	D W O To	ate: 2/26/24 /ork Order #: ffice: R. W. Mo Fort Ware ester: ucas Babler	204096 ercer Co.	•		cklist	Fac	cility ID#	1433												
GPM INVESTMEN Facility Name: MARATHON Address: 2204 W 9th Street City, State, Zip Code Marion, IN 46953	le:	O To LL	Vork Order #: ffice: R. W. Me Fort War ester: ucas Babler	204096 ercer Co.	489-3566			Fac	cility ID#	1433												
Facility Name: MARATHON Address: 2204 W 9th Street City, State, Zip Code Marion, IN 46953	le:	O To Lu Co	ffice: R. W. Me Fort War ester: ucas Babler	ercer Co.	489-3566			Fac	cility ID#	1433												
MARATHON Address: 2204 W 9th Street City, State, Zip Code Marion,IN 46953		Te Lu Co	Fort War ester: ucas Babler		489-3566																	
Address: 2204 W 9th Street City, State, Zip Code Marion,IN 46953		Lu Co	ester: ucas Babler	/ne 260-	489-3566						Office: R. W. Mercer Co.											
2204 W 9th Street City, State, Zip Code Marion, IN 46953		Lu Co	ucas Babler				Fort Wayne 260-489-3566															
City, State, Zip Code Marion, IN 46953		Co			Tester:																	
Marion,IN 46953		_			Lucas Babler																	
			Certification #:																			
Category De		Įυ	UCC109255																			
	escription	egory Description			1	2	3	4	5	6	7	8										
Transition Sump	Transition Sump																					
Any	Any water or product removed and disposed of properly																					
Visi	sible piping and fittings show no signs of leaking		8.6.1	х																		
Pipi	8.6.2	х																				
Sump free of trash and debris				х																		
Sump is free of cracks, holes, bulges or other defects				х																		
	netration fittings intact and secured		8.6.7	х																		
Transition Sump _{June}	nction box(es) have covers, not corroded; conduit and intrinsically safe	wiring in good condition	8.6.8	х																		
Flex	exible connectors not frayed, twisted, kinked or bent beyond manufacture	urer specifications	8.6.9	х																		
Pipi	oing Interstitial space open to the fill sump (open double-walled piping	system only)	8.6.20	х																		
Pipi	oing Interstitial space closed to the fill sump (closed double-walled pipi	ng system only)	8.6.22	х																		
Sun	8.6.23	х																				
Manhole cover at grade in good condition, does not touch sump cover, all bolts present, handles and lift mechanism in good condition (as applicable)				х																		
				x																		
Double-Walled If not continuously monitored or inspected annually, double-walled sump Transition Sump tightness tested every 3 years.				x																		
Describe any deficier	ncies here:																					

Tester's Signature: Lucas Babler



	Anı	nual "Other" Sump	o Inspection	Check	ist										
	Appendix A-3: Sample f	orm for Annual Unde	rground Stora	ge Syste	m inspec	tion Che	cklist								
Owner Name:	Date: 2/26/24														
GPM INVEST	Work Order #: 204096 Facility ID# 1433														
Facility Name:		Off	Office: R. W. Mercer Co.												
MARATHON			Fort Wayne 260-489-3566												
Address:	Tester:														
2204 W 9th Stre	Lucas Babler														
City, State, Zip	Certification #:														
51-17 55-15 55-15				UCC109255											
		loci				1 _	Ι.	Ι.			l _				
Category	Description		PEI/RP900	N/A	1	2	3	4	5	6	7	8			
Other Sump. Describe location or function (e.g., suction piping, tank manhole) on this row:															
	Any water or product removed and disposed of properly														
	Visible piping and fittings show no signs of leaking														
Piping in good condition				х											
Sump free of trash and debris				х											
Sump is free of cracks, holes, bulges or other defects				х											
	Penetration fittings intact and secured		8.6.7	х											
Other Sump	Junction box(es) have covers, not corroded; conduit and intrinsically safe	wiring in good condition	8.6.8	х											
	Flexible connectors not frayed, twisted, kinked or bent beyond manufact	urer specifications	8.6.9	х											
	Piping Interstitial space open to the fill sump (open double-walled piping	system only)	8.6.20	х											
	Piping Interstitial space closed to the fill sump (closed double-walled pipi	ng system only)	8.6.22	х											
	Sump lid, gasket and seals present and in good condition		8.6.23	х											
Manhole cover at grade in good condition, does not touch sump cover, all bolts present, handles and lift			lift 8.6.24												
Single-Walled	mechanism in good condition (as applicable)					1	1								
Other Sump	Isingle-walled sump tested for integrity every 3 years Trest pare			x											
Double-Walled If not continuously monitored or inspected annually, double-walled sump Test Date Other Sump tightness tested every 3 years.			8.6.19	x											
Describe any def	iciencies here:														

Tester's Signature: Lucas Babler

Walkthrough Inspection Form

Facility Name: GPM #1433				Facility Number: 7015										
Facility Address: 2204 W 9th Street				Year: 2023										
Facility City: Marion														
Contact Name (print): Chris Jonas				Contact Number:										
Instructions: No later than October 13, 2018 complete this form on a monthly and an and date of the annual walkthrough inspections	nual ba and s	asis. shall b	The fo e mad	rm sha le avai	all be r lable v	naintai vithin d	ined fo	or one usines	year s day	(based of a re	d upor equest	n the t.		
 Spill prevention equipment at UST sy to each delivery. Parts of this form may not apply to complete the task does not apply, check 'not 	ontainn	nent sı	ımps i						30-day	rs may	be ch	∍cked	prior	
Monthly Walkthrough Inspections: Each month, place a check in the corresponding box to affirm the task was completed.	N/A	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	
1-Visually check spill prevention equipment for damage. Remove liquid and debris.							~	~	~	V	~	~	~	
2-Check for and remove obstructions in the fill pipe.							~	~	~	V	~	~	V	
3-Check the fill cap to make sure it is securely on the fill pipe.							~	~	٧	V	~	V	~	
4-Make sure the release detection equipment is operating with no alarms or other unusual operating conditions present.							~	~	~	~	~	~	~	
5-Ensure records of release detection testing are reviewed and current.							~	~	\	~	~	~	V	
6-For double walled spill prevention equipment with interstitial monitoring, check for a leak in the interstitial area.	~													
7-For airport hydrant systems, check hydrant pits and vaults.	\													
Annual Walkthrough Inspections: Once a y	ear, re	cord t	he dat	te the t	ask w	as com	plete	d.		N/A		Date		
8-Visually check containment sumps for dama	age.						-				1/27	7/2023		
9-Visually check containment sumps for leaks	or rele	eases t	o the e	environ	ment.						1/27	/2023		
10-Remove liquid or debris from containment	sumps										1/27	/2023		
11-Check hand held devices such as tank gau	uge stic	ks for	operal	oility ar	nd serv	riceabili	ty.				1/27	7/2023		
12-For double walled containment sumps with interstitial monitoring, check for a leak in the interstitial area.														
13-For airport hydrant systems, check hydran	t pits aı	nd vau	lts (if lo	ocated	in con	fined sp	oace).			~				
Comments: (Record unusual conditions and e	explain	action	s take	n to ad	dress i	issues.	Attac	hed su	ıpplem	ental p	pages i	f need	ed.)	

Walkthrough Inspection Form

Facility Name: GPM #1433				Facility Number: 7015										
Facility Address: 2204 W 9th Street				Year: 2023										
Facility City: Marion														
Contact Name (print): Chris Jonas				Contact Number:										
Instructions: No later than October 13, 2018, owners and op complete this form on a monthly and an annual basis. The date of the annual walkthrough inspections) and shall be made to the annual walkthrough inspections.				rm sha	all be r	naintai	ined f	or one	year	(based	upor	ı the	.II	
 Spill prevention equipment at UST sto each delivery. Parts of this form may not apply to confirm the task does not apply, check 'not 	ontainn	nent sı	umps i						30-day	rs may	be ch	∍cked	prior	
Monthly Walkthrough Inspections: Each month, place a check in the corresponding box to affirm the task was completed.	N/A	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	
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2-Check for and remove obstructions in the fill pipe.							~	V	~	V	~	V	V	
3-Check the fill cap to make sure it is securely on the fill pipe.							~	~	~	~	~	~	V	
4-Make sure the release detection equipment is operating with no alarms or other unusual operating conditions present.							~	~	~	~	V	~	~	
5-Ensure records of release detection testing are reviewed and current.							~	~	>	~	~	~	V	
6-For double walled spill prevention equipment with interstitial monitoring, check for a leak in the interstitial area.	~													
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Comments: (Record unusual conditions and e	explain	action	s take	n to ad	dress i	issues.	Attac	hed su	ıpplem	ental p	pages i	f need	ed.)	



CONTINUATION CERTIFICATE

Western Surety Company hereby continues in force Bor	nd No30113825
briefly described as Underground Storage Tank	
bound unto State of Indiana	,
for GPM Empire, LLC	
	, as Principal,
in the sum of \$ Fifteen Thousand and 00/100	Dollars, for the term beginning
October 6th , 2023 , and ending	October 6th , 2024 , subject to all
the covenants and conditions of the original bond referred t	o above.
This continuation is issued upon the express condition	n that the liability of Western Surety Company
under said Bond and this and all continuations thereof sha	all not be cumulative and shall in no event exceed
the total sum above written.	
Dated this 25th day of August	
	WESTERN SURETY COMPANY
annulli 1944.	

SURET VOLUMENT OF THE PROPERTY OF A VICE AVICE OF THE PROPERTY OF THE PROPERTY

By Larry Kasten, Vice President

THIS "Continuation Certificate" MUST BE FILED WITH THE ABOVE BOND.



Western Surety Company

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS:

That WESTERN SURETY COMPANY, a corporation organized and existing under the laws of the State of South Dakota, and authorized and licensed to do business in the States of Alabama, Alaska, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, District of Columbia, Florida, Georgia, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Hampshire, New Jersey, New Mexico, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Vermont, Virginia, Washington, West Virginia, Wisconsin, Wyoming, and the United States of America, does hereby make, constitute and appoint

States of America, does hereby make, const	itute and appoint
Larry Kasten	ofSioux Falls
State of South Dakota	of Sioux Falls, its regularly elected _Vice President,
	ority hereby conferred upon him to sign, execute, acknowledge and deliver for and on
One <u>Underground Storage Tank</u>	
bond bound unto State of Indiana	
for GPM Empire, LLC	
as Principal in the penalty amount not to exce	eed: \$15,000.00
duly adopted and now in force, to-wit: Section 7. All bonds, policies, undertakings	at the following is a true and exact copy of Section 7 of the by-laws of Western Surety Company s, Powers of Attorney, or other obligations of the corporation shall be executed in the corporate ry, any Assistant Secretary, Treasurer, or any Vice President, or by such other officers as the
Board of Directors may authorize. The Preside Attorneys-in-Fact or agents who shall have authorized authorized the shall have a shall h	ent, any Vice President, Secretary, any Assistant Secretary, or the Treasurer may appoint rity to issue bonds, policies, or undertakings in the name of the Company. The corporate seal is es, undertakings, Powers of Attorney or other obligations of the corporation. The signature of any
	ERN SURETY COMPANY has caused these presents to be executed by its vith the corporate seal affixed this25th day ofAugust,
ATTEST A According	WESTERN SURETY COMPANY By Larry Kasten, Vice President
	THE SURE TO SU
STATE OF SOUTH DAKOTA) ss	E SEAV X
COUNTY OF MINNEHAHA	
On this <u>25th</u> day of Larry Kasten	August , 2023 , before me, a Notary Public, personally appeared and L. Bauder
and Assistant Secretary, respectively, of the voluntary act and deed of said Corporation.	I that they signed the above Power of Attorney as Vice President e said WESTERN SURETY COMPANY, and acknowledged said instrument to be the
M. BENT	mR+

Notary Public

♦७५५५५५५५५५५५५५५५५५५५ ♦ My Commission Expires March 2, 2026

Indiana Department of Environmental Management Underground Storage Tank Program Operator Training Certification

100 North Senate Ave Indianapolis, Indiana, 46204 (800) 451-6027 . (317) 232-8603 www.idem.IN.gov

Certificate of Completion

Awarded to: Chad Fluck

For completion of IDEM's Underground Storage Tank "A" Operator Training in accordance with 329 IAC 9.

License #: 19640

Issue Date: December 09, 2021

Expiration Date: December 09, 2024

Bruno L. Pigott, Commissioner

IDEM may require operator retraining if a UST System managed by the operator has documented deficiencies per 329 IAC 9.

100 North Senate Ave Indianapolis, Indiana, 46204 (800) 451-6027 . (317) 232-8603 www.idem.IN.gov

Certificate of Completion

Awarded to: Corbin Burkholder

For completion of IDEM's Underground Storage Tank "B" Operator Training in accordance with 329 IAC 9.

License #: 18750

Issue Date: June 29, 2021

Expiration Date: June 29, 2024

Bruno L. Pigott, Commissioner

IDEM may require operator retraining if a UST System managed by the operator has documented deficiencies per 329 IAC 9.

