



**UNDERGROUND STORAGE  
TANK INSPECTION REPORT**  
INDIANA DEPARTMENT OF  
ENVIRONMENTAL MANAGEMENT

Inspector's Name:	Doug Fisher
Date:	11/3/2016
Time In:	2:30 PM
Time Out:	3:15 PM
Inspection Type:	Follow-up

**General Information**

Facility Information	
Facility Name	Brazil Marathon
Facility Location	368 E NATIONAL AVE Brazil, IN 47834, Clay County
Facility Mailing Information	368 East National Ave Brazil, IN 47834
Owner Information	
UST Operator Certificate [329 IAC 9-9]	<p>Name: Maganbhai Patel Compliant with IDEM'S UST "A" Operator Training in accordance with 329 IAC 9. Certification Expiration Date: 8/30/2019</p> <p>Name: Magqnbhai Patel Compliant with IDEM'S UST "B" Operator Training in accordance with 329 IAC 9. Certification Expiration Date: 8/30/2019</p> <p>Name: C's are current. Compliant with IDEM'S UST "C" Operator Training in accordance with 329 IAC 9. Certification Expiration Date:</p>

**Operating Information**

Facility Registration Number	3020
GPS Location Collected	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Previously Collected
Financial Assurance Financial Responsibility [329 IAC 9-8]	Yes
Number of Registered Tanks	2
Number of Compartmented USTs	0

**General Comments**

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**Tank Information**

Tank #	Contents	Status	Install Date
1	Gasoline	In Use	6/15/1976
ID	Dimensions	Capacity	Contents
1		4000	Gasoline

Corrosion Protection		Anode Test
Tank	Piping	
Steel Internal Lining No current results.	Fiberglass	
Last Tank Corrosion Test 10/1/2010	Last Piping Corrosion Test	
Release Detection		Spill Protection
Tank	Piping	Spill Bucket
Statistical Inventory Reconciliation No results.	In Line Detect Annual Pressurized Piping Line Leak Detectors Passing results (3/17/2016) by Newton Oil.	Overfill Protection
		Automatic Shutoff

Tank #	Contents	Status	Install Date
2	Gasoline	In Use	6/15/1976

ID	Dimensions	Capacity	Contents
2		5000	Gasoline

Corrosion Protection		Anode Test
Tank	Piping	
Steel Internal Lining No current results.	Fiberglass	
Last Tank Corrosion Test 10/1/2010	Last Piping Corrosion Test	
Release Detection		Spill Protection
Tank	Piping	Spill Bucket
Statistical Inventory Reconciliation No results.	Suction Piping (European)	Overfill Protection

Compliance Checklist	
(Checked box indicates compliant at the time of this site inspection)	
<b>Notification Requirements</b> [329 IAC 9-2-2] <input type="checkbox"/> State Form 45233 (R5/1-14)	<b>Piping Corrosion Protection</b> (Impressed Current) Inspected [329 IAC 9-2-1] & [329 IAC 9-3.1] <input type="checkbox"/>
<b>Reporting and Record Keeping</b> [329 IAC 9-3] <input type="checkbox"/>	<b>Spill Prevention</b> [329 IAC 9-2-1] & [329 IAC 9-3.1] <input type="checkbox"/>
<b>Tanks Corrosion System Protected</b> [329 IAC 9-2] <input type="checkbox"/>	<b>Overfill Device Present</b> [329 IAC 9-2-1] & [329 IAC 9-3.1] <input type="checkbox"/>
<b>Tanks Corrosion Protection</b> (Galvanic) Tested [329 IAC 9-2-1] <input type="checkbox"/>	<b>General Operating and Maintenance</b> [329 IAC 3.1] <input type="checkbox"/>
<b>Tanks Corrosion Protection</b> (Impressed Current) Inspected	<b>Tanks/Piping Repairs Tested</b> [329 IAC 9-3.1-4]

<input type="checkbox"/>	<input type="checkbox"/>
<b>Tanks Interior Lining Inspected</b> [329 IAC 9-2.1-1] <input type="checkbox"/>	<b>Secondary Containment</b> [329 IAC 9-2-1] & [329 IAC 9-3.1] <input type="checkbox"/>
<b>Piping Corrosion System Protected</b> [329 IAC 9-2] <input type="checkbox"/>	<b>Temporary Closure Requirements</b> [329 IAC 9-6-5] <input type="checkbox"/>
<b>Piping Corrosion Protection (Galvanic) Tested</b> [329 IAC 9-2-1] & [329 IAC 9-3.1] <input type="checkbox"/>	<b>Piping Release Detecting System</b> [329 IAC 9-7-2] & [329 IAC 9-7-5] <input type="checkbox"/> Automatic Line Leak Detector; and <input type="checkbox"/> Annual Line Tightness Test
<b>Tank Release Detection System Performance Standards</b> [329 IAC 9-7-2] & [329 IAC 9-7-4] <input type="checkbox"/> Product Inventory Control <input type="checkbox"/> Manual Tank Gauging <input type="checkbox"/> Tank Tightness Testing <input type="checkbox"/> Automatic Tank Gauging <input type="checkbox"/> Tank Interstitial Sensor (monthly) <input type="checkbox"/> Statistical Inventory Reconciliation (SIR) <input type="checkbox"/> Other Type of Release Detection	<b>Tanks and Piping Monitored Periodically for Release</b> [329 IAC 9-7-2] & [329 IAC 9-7-5] <input type="checkbox"/> Monthly Tank Tests <input type="checkbox"/> Monthly Piping Tests (or annual) <input type="checkbox"/> In-line Leak Detectors (annual) <input type="checkbox"/> Monthly Piping STP Sensor Tests
<b>Owner or Operator UST Operator Training Designation</b> <input type="radio"/> "A" Operator Training Certificate of Completion <input type="radio"/> "B" Operator Training Certificate of Completion <input type="radio"/> "C" Operator Training Certificate of Completion	

Inspection Results/Action	
Inspection Results:	Compliant
Facility Status:	Active
Documents and Photos Comments:	
Written Summary of Inspection:	

Inspector Needs:

- 1) Must have Stand Alone form of monthly leak detection for Tanks (not performing SIR properly).
- 2) Must have tanks Precision Tightness Tested by a Certified Contractor due to a lack of monthly leak detection results.
- 3) Must have internal tank liners inspected by Certified Contractor (no results provided).
- 4) East Tank must have drop tube, with dual port vapor recovery, installed.

\*\*Follow Up Inspection (10/13/2016):

- 1) SIR records were provided, therefore no Precision Tank Tightness Testing required.
- 2) Owner has contracted with A&J Petroleum to install new ATG for stand alone monthly leak detection. Contractor also will install East Tank drop tube at that time (next week).
- 3) Armour Shield was onsite to begin "manned entry" liner inspections. Two tanks to be completed in 2 days. (Follow Up after ATG is installed).

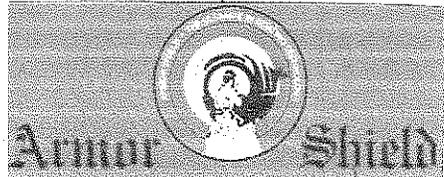
\*\*Follow Up Inspection (11/3/2016):

- 1) SIR is the Stand Alone Method that will be followed.
- 2) East Tank drop tube was installed.
- 3) Internal Liner Manned Entry Inspection passed 10/14/2016.

\*\*Site is in Compliance.

<input type="checkbox"/> Fuel Prohibition/ Red Tag	<input type="checkbox"/> Suspected release found during inspection
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**INTERIOR LINING INSPECTION FORM**



**Armor Shield KY**  
 850 Charlotte Dr Alexandria, KY 41001  
 Office (859)635-1568 Cell (859)743-7187

<b>UST Facility Information</b>		<b>Interior Lining Inspector Information</b>			
UST Facility Contact: <b>KALPESH M PATEL</b>		Person Conducting Test: <b>STEVE WISHAM</b>			
UST Facility Name: <b>BRAZIL FOOD MART</b>		Name of Company: <b>ARMOR SHIELD KY</b>			
Address: <b>368 E. NATIONAL AVE</b>		Address: <b>850 CHARLOTTE DR</b>			
City, County, Zip Code: <b>BRAZIL, IN 47834</b>		City, State, Zip Code: <b>ALEXANDRIA KY 41001</b>			
UST I.D.# and/or AI #: <b>3020</b>		Phone Number: <b>(859) 743-7187</b>			
<b>Owner or Operator Information</b>		<b>General Information</b>			
Owner or Operator: <b>NIRALI ISC</b>		Date of Inspection: <b>10-14-2016</b>			
Address: <b>368 E. NATIONAL AVE</b>		Code of Practice used:			
		<input checked="" type="checkbox"/> NLPA Standard 631 <input type="checkbox"/> API 1631 (Current Edition) <input type="checkbox"/> Video Camera (3 <sup>rd</sup> Party Approved)			
City, State, Zip Code: <b>BRAZIL, IN 47834</b>		Date Lining Installed: <b>-</b>			
Phone Number: <b>MALEENBHAI M. PATEL</b>		Date Lining Last Inspected: <b>4/11/2016</b>			
Answer each question as specified. If there are more than 4 tanks at this site, photocopy pages and complete for additional tanks.		Tank No.	Tank No.	Tank No.	Tank No.
Tank capacity in gallons?		<b>#1 PRIMARY 5000</b>	<b>#2 SECONDARY 4000</b>		
Substance stored? G-gasoline, D-diesel, K-kerosene, E-ethanol >85%, B-biodiesel, O-other(specify)		<b>GAS REGULAR</b>	<b>GAS REGULAR</b>		
<b>TANK CLEANING PRIOR TO INSPECTION</b>					
Interior of tank was cleaned as required for the use of ultrasonic thickness gauging equipment?		<b>(YES)(NO)</b>	<b>(YES)(NO)</b>	<b>(YES)(NO)</b>	<b>(YES)(NO)</b>
Estimate of the volume of sludge removed in gallons? <i>Attach invoice or receipt for removal and disposal.</i>		<b>-0-</b>	<b>-0-</b>		
<b>VISUAL INSPECTION OF LINING</b>					
Evidence of peeling, of internal lining?		<b>(YES)(NO)</b>	<b>(YES)(NO)</b>	<b>(YES)(NO)</b>	<b>(YES)(NO)</b>
Evidence of blistering of internal lining?		<b>(YES)(NO)</b>	<b>(YES)(NO)</b>	<b>(YES)(NO)</b>	<b>(YES)(NO)</b>
Evidence of surface wrinkling of internal lining?		<b>(YES)(NO)</b>	<b>(YES)(NO)</b>	<b>(YES)(NO)</b>	<b>(YES)(NO)</b>
Evidence of roughing of internal lining?		<b>(YES)(NO)</b>	<b>(YES)(NO)</b>	<b>(YES)(NO)</b>	<b>(YES)(NO)</b>
Imperfections in lining repaired in accordance with lining material manufacturer's specifications? <i>Attach documentation on repairs inside.</i>		<b>(YES)(NO)</b> <b>N/A</b>	<b>(YES)(NO)</b> <b>N/A</b>	<b>(YES)(NO)</b>	<b>(YES)(NO)</b>
For each tank, provide description, location and extent of any evidence of peeling, blistering, roughing and wrinkling of internal lining:					
Tank No.					
Tank No.					
Tank No.					
Tank No.					

UST Facility Name: BRAZIL MARATHON

UST Facility I. D. Number: 3020

TESTING OF LINING				
Test procedure used to determine lining thickness? <u>MIL GAUGE</u>				
Number of lining thickness readings taken?	<u>56</u>	<u>48</u>		
Lining minimum thickness is 100 mils and nominal thickness is 125 mils?	(YES)(NO) <u>(YES)</u>	(YES)(NO) <u>(YES)</u>	(YES)(NO)	(YES)(NO)
Inadequate thickness repaired in accordance with lining material manufacturer and tank re-tested with no inadequate thickness detected?	(YES)(NO) <u>(N/A)</u>	(YES)(NO) <u>(N/A)</u>	(YES)(NO) <u>(N/A)</u>	(YES)(NO) <u>(N/A)</u>
Test procedure used to determine lining holidays? <u>TWINKER RISER HD</u>				
Entire surface tested for holidays?	(YES)(NO) <u>(YES)</u>	(YES)(NO) <u>(YES)</u>	(YES)(NO)	(YES)(NO)
Presence of holidays detected?	(YES)(NO) <u>(NO)</u>	(YES)(NO) <u>(NO)</u>	(YES)(NO)	(YES)(NO)
Holidays repaired in accordance with lining material manufacturer and tank re-tested with no holidays detected?	(YES)(NO) <u>(N/A)</u>	(YES)(NO) <u>(N/A)</u>	(YES)(NO) <u>(N/A)</u>	(YES)(NO) <u>(N/A)</u>
Test procedure used to determine lining hardness? <u>BARCOL DUROMETER</u>				
Number of hardness readings taken?	<u>56</u>	<u>48</u>		
Minimum lining hardness?	<u>68</u>	<u>84</u>		
Lining hardness meets manufacturer's specifications?	(YES)(NO) <u>(YES)</u>	(YES)(NO) <u>(YES)</u>	(YES)(NO)	(YES)(NO)
Inadequate hardness repaired in accordance with lining material manufacturer and tank re-tested with no inadequate hardness detected?	(YES)(NO) <u>(N/A)</u>	(YES)(NO) <u>(N/A)</u>	(YES)(NO) <u>(N/A)</u>	(YES)(NO) <u>(N/A)</u>

TANK METAL THICKNESS TEST RESULTS AND TANK REPAIR				
Any holes or perforations found in tank?	(YES)(NO) <u>(NO)</u>	(YES)(NO) <u>(NO)</u>	(YES)(NO)	(YES)(NO)
Original tank metal thickness?	<u>.172</u>	<u>.172</u>		
Average tank metal thickness for entire tank before repair?	<u>.163</u>	<u>.154</u>		
Were any thin wall areas repaired and re-lined?	(YES)(NO) <u>(NO)</u>	(YES)(NO) <u>(NO)</u>	(YES)(NO)	(YES)(NO)
Percentage of original tank metal thickness after repair?	<u>95%</u>	<u>90%</u>		

- RESULTS OF INTERIOR LINING INSPECTION**
- Tank has perforations and/or holes that cannot be repaired in accordance with the selected Code of Practice; **TANK MUST BE PERMANENTLY CLOSED.**
  - After allowable repairs, average metal thickness is less than 75 percent of original tank metal thickness; **TANK MUST BE PERMANENTLY CLOSED.**
  - After allowable repairs, average tank metal thickness is 75 to 84 percent of original tank metal thickness; **CATHODIC PROTECTION IS REQUIRED WITHIN ONE YEAR OF THIS INSPECTION.**
  - After allowable repairs, average tank metal thickness is 85 to 100 percent of original tank metal thickness; **CATHODIC PROTECTION IS NOT REQUIRED RE-INSPECT LINING WITHIN 5 YEARS**

**NEXT INTERIOR LINING INSPECTION REQUIRED**

Month: OCTOBER Day: \_\_\_\_\_ Year: \_\_\_\_\_

*Inspections must be performed every five years after the initial 10-year inspection until DECEMBER 22, 2013.*

**CERTIFICATION**

I certify under penalty of law that the internal inspection was performed in accordance with the appropriate standard and information in that and all attached documents is true, accurate and complete.

Signature of Certified Internal Lining Inspector \_\_\_\_\_ Date \_\_\_\_\_



Detailed Description

TASK #1 - HOLIDAYS REPAIRED IN SEAM AREAS

TASK - #2 - RUST TRAIL HOLIDAYS IN SEAMS REPAIRED - HEAVY CORROSION W/ PERFORATIONS BULKHEAD SEAM NORTH END 6:00 REPAIRED - MULTIPLE BLISTERS REPAIRED - 5 PERFORATIONS REPAIRED

Site Plan

STATION

PUMP ISLAND

#1 5000 Primary

#2 4000 Secondary



**PRESSURE CALCULATION & WATER SENSOR CALIBRATION**

**DATA SHEET**

Test Date 10/31/16

MANUFACTURED BY: ESTABROOK'S INC. 1-877-368-7215

TOTAL TANK VOL. 5000  
 PRODUCT VOL. 1912  
 ULLAGE VOL. 3,088  
 PRODUCT TYPE Regular  
 PBS # (NEW YORK) \_\_\_\_\_  
 TANK # 1

Location Marathon  
 Address 368 E National Ave.  
 City/State/Zip Brazil, TN 47834  
 Location Contact Kalpesh Patel  
 Location Phone \_\_\_\_\_

Depth of Ground Water - Determined

By: Prob  
 Where: Dir\*

**PRESSURE SENSOR CALCULATION**

39.5 x 1026 = 1,027 PSI (1)  
 INCHES OF PRODUCT x WEIGHT OF PRODUCT  
0 x 1036 = 0 PSI (2)  
 INCHES OF WATER IN TANK  
 Line 1 + Line 2 = Total Positive Head Pressure In Tank = 1,027 PSI (3)  
0 x 1036 = 0 PSI (4)  
 INCHES OF WATER OUTSIDE TANK  
 Total Head Pressure Minus Outside Water Pressure = 1,027 +/--PSI (5)  
 Always add .5 PSI + 1,527 PSI (6)  
 NOTE: If Line 6 is Less Than .5 PSI Line 7 Shall be .5 PSI  
 TEST PRESSURE = 1,527 +/--PSI (7)

**ACOUSTIC TEST TIME**

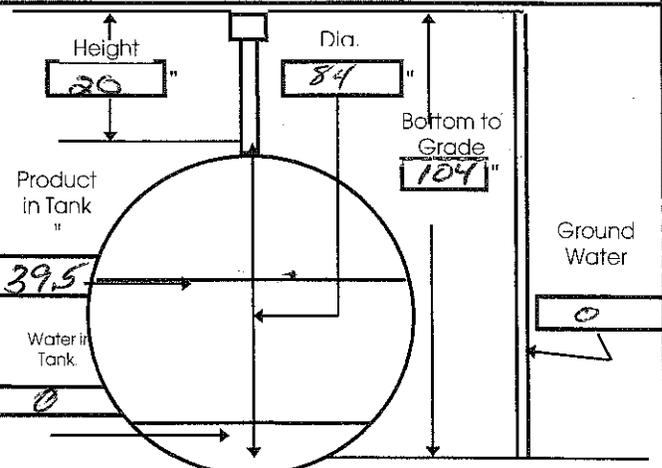
Equipment Calibration due date and serial numbers

	Time	Pressure	Serial Number	Calibration Due Date
Baseline Background:	<u>10:55</u>	<u>0</u>		
Blower Started:	<u>10:58</u>	<u>0</u>	In-Tank Microphone <u>7001</u>	<u>4-17</u>
Test Pressure Reached:	<u>11:12</u>	<u>1,527</u>	Acoustic Signal Processor <u>E0734004</u>	<u>4-17</u>
Blower Turned Off:	<u>11:13</u>	<u>1,644</u>	Pressure Sensor <u>403750911</u>	<u>4-17</u>
Test Began:	<u>11:14</u>	<u>1,636</u>	Water Sensor Display <u>9071</u>	<u>4-17</u>
Test Ended:	<u>11:20</u>	<u>1,535</u>	Water Sensor Probe <u>P1600440</u>	<u>4-17</u>

**WATER SENSOR CALIBRATION**

Added: \_\_\_\_\_  
 Average: \_\_\_\_\_  
 \_\_\_\_\_ + 3780 = \_\_\_\_\_ + .05 \_\_\_\_\_ x 60 = \_\_\_\_\_  
 Avg. Cal. "A" Factor \_\_\_\_\_ Min. Time of Test \_\_\_\_\_

Water Infiltration Test Period  
 Began: \_\_\_\_\_  
 Ended: \_\_\_\_\_





**PRESSURE CALCULATION & WATER SENSOR CALIBRATION  
FINAL REPORT**

Test Date 10/31/16

MANUFACTURED BY: ESTABROOK'S INC. 1-877-368-7215

Location marathon

TOTAL TANK VOL. 5000

Address 368 E National Ave

PRODUCT VOL. 1912

City/State/Zip Brazil, IN

ULLAGE VOL. 3,088

Location Contact Kabesh Patel

PRODUCT TYPE Regular

Location Phone \_\_\_\_\_

PBS # (NEW YORK) \_\_\_\_\_

~~Depth of Groundwater Determined~~

TANK # 1

By: Rob

LOCATION \_\_\_\_\_

Where: Wet Dirt

**THE ACOUSTIC CHARACTERISTIC OF A LEAK REVEALS:**

**TIGHT TANK**  
THIS UNDERGROUND STORAGE TANK PASSES THE CRITERIA SET FORTH BY THE U.S. EPA.

**ULLAGE (DRY) PORTION OF LEAK**  
THIS UNDERGROUND STORAGE TANK FAILS THE CRITERIA SET FORTH BY THE U.S. EPA.

**BELOW PRODUCT LEVEL (WET) PORTION LEAK**  
THIS UNDERGROUND STORAGE TANK FAILS THE CRITERIA SET FORTH BY THE U.S. EPA.

**WATER SENSOR INDICATES:  
(CHECK ONLY ONE)**

No Water Intrusion   
Water Intrusion   
Not Applicable

**Operator Information**

Print Name Patrick Foley Certification # 02-9389  
Sign Name Patrick Foley Expiration Date: 5/19/18  
Testing Firm EPS Telephone # 765-742-4001  
Address 3150 S 460 E  
Lafayette, IN 47905

NEW YORK STATE REQUIREMENT: A DIAGRAM OF THE TANK SYSTEM MUST BE SUBMITTED TO THE STATE WITH THIS REPORT

**EQUIPMENT SERIAL NUMBERS AND CALIBRATION EXPIRATION DATES:**

	Serial Number	Calibration Expiration Date
IN-TANK MICROPHONE	<u>7001</u>	<u>4-17</u>
ACOUSTIC SIGNAL PROCESSOR	<u>E0734004</u>	<u>4-17</u>
PRESSURE SENSOR	<u>403750911</u>	<u>4-17</u>
WATER SENSOR DISPLAY	<u>9071</u>	<u>4-17</u>
WATER SENSOR PROBE	<u>P1600440</u>	<u>4-17</u>



# PRESSURE CALCULATION & WATER SENSOR CALIBRATION

## DATA SHEET

Test Date 10/31/16

MANUFACTURED BY: ESTABROOK'S INC. 1-877-368-7215

TOTAL TANK VOL. 4000  
 PRODUCT VOL. 1847  
 ULLAGE VOL. 2153  
 PRODUCT TYPE Regular  
 PBS # (NEW YORK) \_\_\_\_\_  
 TANK # 2

Location Marathon  
 Address 368 E. National Ave  
 City/State/Zip Brazil, IN 47834  
 Location Contact Kalpesh Patel  
 Location Phone \_\_\_\_\_

Depth of Groundwater Determined

By: Prob  
 Where: Dirt

### PRESSURE SENSOR CALCULATION

38 x 1026 = .988 PSI (1)  
 INCHES OF PRODUCT x WEIGHT OF PRODUCT  
0 x 1036 = 0 PSI (2)  
 INCHES OF WATER IN TANK  
 Line 1 + Line 2 = Total Positive Head Pressure In Tank = .988 PSI (3)  
0 x 1036 = 0 PSI (4)  
 INCHES OF WATER OUTSIDE TANK  
 Total Head Pressure Minus Outside Water Pressure = .988 +/--PSI (5)  
 Always add .5 PSI + 1.488 PSI (6)  
 NOTE: If Line 6 is Less Than .5 PSI Line 7 Shall be .5 PSI  
 TEST PRESSURE = 1.488 +/--PSI (7)

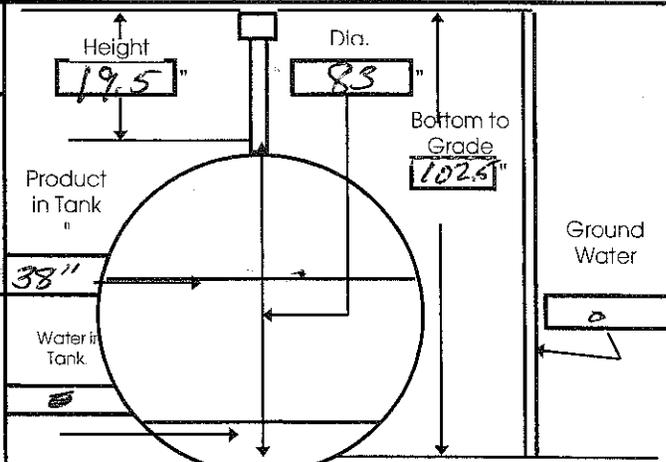
### ACOUSTIC TEST TIME

Equipment Calibration due date and serial numbers

	Time	Pressure	Serial Number	Calibration Due Date
Baseline Background:	<u>10:30</u>	<u>0</u>		
Blower Started:	<u>10:35</u>	<u>0</u>	In-Tank Microphone <u>7001</u>	<u>4-17</u>
Test Pressure Reached:	<u>10:43</u>	<u>1.488</u>	Acoustic Signal Processor <u>E0734004</u>	<u>4-17</u>
Blower Turned Off:	<u>10:44</u>	<u>1.548</u>	Pressure Sensor <u>403750911</u>	<u>4-17</u>
Test Began:	<u>10:44</u>	<u>1.538</u>	Water Sensor Display <u>9071</u>	<u>4-17</u>
Test Ended:	<u>10:47</u>	<u>1.509</u>	Water Sensor Probe <u>P1600440</u>	<u>4-17</u>

### WATER SENSOR CALIBRATION

Added: \_\_\_\_\_  
 Average: \_\_\_\_\_  
 Calculated for Test Period  
 \_\_\_\_\_ ÷ 3780 = \_\_\_\_\_ + .05 x 60 = \_\_\_\_\_  
 Avg. Cal. "A" Factor \_\_\_\_\_ Min. Time of Test \_\_\_\_\_  
 Water Infiltration Test Period  
 Began: \_\_\_\_\_  
 Ended: \_\_\_\_\_





PRESSURE CALCULATION & WATER SENSOR CALIBRATION

FINAL REPORT

Test Date 10/31/16

MANUFACTURED BY: ESTABROOK'S INC. 1-877-368-7215

TOTAL TANK VOL. 4000

PRODUCT VOL. 1847

ULLAGE VOL. 2153

PRODUCT TYPE Regular

PBS # (NEW YORK) \_\_\_\_\_

TANK # 2

LOCATION \_\_\_\_\_

Location Marathon

Address 368 E. National Ave

City/State/Zip Brazil, IN 47834

Location Contact Kalpesh Patel

Location Phone \_\_\_\_\_

By: \_\_\_\_\_

Where: \_\_\_\_\_

Date of Groundwater Determined: \_\_\_\_\_

THE ACOUSTIC CHARACTERISTIC OF A LEAK REVEALS:

- TIGHT TANK  
THIS UNDERGROUND STORAGE TANK PASSES THE CRITERIA SET FORTH BY THE U.S. EPA.
- ULLAGE (DRY) PORTION OF LEAK  
THIS UNDERGROUND STORAGE TANK FAILS THE CRITERIA SET FORTH BY THE U.S. EPA.
- BELOW PRODUCT LEVEL (WET) PORTION LEAK  
THIS UNDERGROUND STORAGE TANK FAILS THE CRITERIA SET FORTH BY THE U.S. EPA.

WATER SENSOR INDICATES:  
(CHECK ONLY ONE)

- No Water Intrusion
- Water Intrusion
- Not Applicable

Operator Information

Print Name Patrick Foley Certification # 02-9389

Sign Name Patrick Foley Expiration Date: 05/19/18

Testing Firm EPS Telephone # 765-742-4001

Address 3150 S 460 E

Lafayette, IN 47905

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PRESSURE SENSOR	<u>403750911</u>	<u>4-17</u>
WATER SENSOR DISPLAY	<u>9071</u>	<u>4-17</u>
WATER SENSOR PROBE	<u>P1600440</u>	<u>4-17</u>

# A&J Petroleum

P.O. Box 335  
 Corydon, IN 47112  
 Ph. (812) 946-6547  
 ajpetroleum@aol.com

## Service Order

\_\_\_\_\_ C.O.D. \_\_\_\_\_ Charge

Today's Date 10-19-16

Customer Name Marathon Phone \_\_\_\_\_

Address \_\_\_\_\_

City Brazil State IN Zip \_\_\_\_\_

<b>Make</b>	<b>Model</b>
<b>Serial #</b>	
<b>Service Requested</b>	

Quantity	Part #	Description	Price	Amount
1		Coronal drop tube		
		Coronal adapter		

**Service Performed:** *Installed coronal drop tube. Fuel tank vent tank.*

Total Material			
Fuel Surcharge			
Helper	/hr		
Travel Time	/hr		
Start Time	Truck charge		
	Labor & service		
Finish Time	Freight charge		
	Mileage		
Hours	Tax		
	Total		

**Date Completed:** \_\_\_\_\_

I hereby certify accept above performance and charges as being satisfactory and I acknowledge that equipment has been left in good condition. A&J Petroleum has the right to remove any equipment installed if payment is not remitted within 30 days of invoice.

Customer Signature \_\_\_\_\_ Technician's Signature [Signature]



# UNDERGROUND STORAGE TANK INSPECTION REPORT

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT  
Office of Land Quality, UST Section  
100 N. Senate Avenue  
Indianapolis, IN 46204-2251  
Telephone: (800) 451-6027 or (317) 234-4112

## UST INSPECTION ADDITIONAL COMMENTS

Date: <b>11/3/2016</b>	Facility ID/Agency ID: <b>3020</b>	Facility Name: <b>Brazil Marathon</b>
Inspector Name: <b>Doug Fisher</b>	Inspector Phone Number: <b>317-727-4766</b>	Inspector Email: <b>dfisher@idem.IN.gov</b>

### COMMENTS

Inspector Needs:

- 1) Must have Stand Alone form of monthly leak detection for Tanks (not performing SIR properly).
- 2) Must have tanks Precision Tightness Tested by a Certified Contractor due to a lack of monthly leak detection results.
- 3) Must have internal tank liners inspected by Certified Contractor (no results provided).
- 4) East Tank must have drop tube, with dual port vapor recovery, installed.

\*\*Follow Up Inspection (10/13/2016):

- 1) SIR records were provided, therefore no Precision Tank Tightness Testing required.
- 2) Owner has contracted with A&J Petroleum to install new ATG for stand alone monthly leak detection. Contractor also will install East Tank drop tube at that time (next week).
- 3) Armour Shield was onsite to begin "manned entry" liner inspections. Two tanks to be completed in 2 days. (Follow Up after ATG is installed).

\*\*Follow Up Inspection (11/3/2016):

- 1) SIR is the Stand Alone Method that will be followed.
- 2) East Tank drop tube was installed.
- 3) Internal Liner Manned Entry Inspection passed 10/14/2016.

\*\*Site is in Compliance.

Facility Representative Initials N. K. B.

Inspector's Initials DAF