



Department of Energy

Richland Operations Office
P.O. Box 550
Richland, Washington 99352

Incoming: 9203571

MAY 22 1992

92-RPB-129

Mr. David B. Jansen, P.E.
Hanford Project Manager
State of Washington
Department of Ecology
Post Office Box 47600
Olympia, Washington 98504-7600

Dear Mr. Jansen:

CHECKLISTS FOR UNDERGROUND STORAGE TANK (UST) REMOVALS

Enclosed are the completed Permanent Closure and Site Assessment Checklists for the six USTs (100-FS-30/31, 200-FS-34/35, and 300-FS-15/16) that were removed from the 100, 200, and 300 Area fire stations, located on the Hanford Site.

As indicated in the checklists, a release was confirmed at all three sites; however, the 100 and 200 Area sites are now considered "clean" after additional excavation was done to immediately remove all the soil that had been contaminated by diesel/gasoline from spills, overfills, etc. Samples were taken for laboratory analysis to confirm the indications given by the field instruments. The 300 Area site, also reported as a "release site," was excavated to a depth of approximately 15 feet, but the extent of the contamination was not reached. A gas probe was installed on May 4, 1992, to a depth of approximately 24 feet and still encountered contamination. Additional gas probes are in the process of being installed to determine the depth and lateral extent of the plume. The 20-Day Status Report for the 300 Area site, as required by Chapter 173-340-450 WAC, was faxed to both the (Ecology) Kennewick office and Lacey office on May 1, 1992. The results of the site assessment conducted at the 300 Area site (USTs 300-FS-15/16) will be included with the 90-Day Site Characterization Report.

All six tanks have been removed from site by a subcontractor (Enviroserve Inc.) for disposal.

The recently received permit applications for all six tanks are also enclosed.



Mr. David B. Jansen
92-RPB-129

-2-

MAY 22 1992

If you have any questions or require additional information, please contact Mr. Steve Stites of my staff at (509) 376-8566.

Sincerely,



R. D. Izatt, Program Manager
Office of Environmental Assurance,
Permits, and Policy

Enclosures

cc w/o encls:
P. Day, EPA
D. Nylander, Ecology
R. Lerch, WHC
M. Mihalic, WHC

9253459D
ATTACHMENT 1
12 Pages



UNDERGROUND STORAGE TANK Permanent Closure/Change-In-Service Checklist

The purpose of this form is to certify the proper closure/change-in-service of underground storage tank (UST) systems. These activities must be conducted in accordance with Chapter 173.360 WAC. Washington State UST rules require the tank owner or operator to notify Ecology in writing 30 days prior to closure or change-in-service of tanks. This must be done by completing the 30 Day Notice form (ECY 010-155).

This Permanent Closure Checklist shall be completed and signed by a Licensed Decommissioning Supervisor. The supervisor shall be on site when all tank permanent closure/change-in-service activities are being conducted. The firm which employs the licensed supervisor shall also be licensed by the Washington State Department of Ecology as a Service Provider. If any of the activities listed below have been supervised by a different licensed supervisor, a separate checklist must be filled out and signed by the licensed supervisor performing those activities.

For further information about completing this form, please contact the Department of Ecology UST Program.

A separate checklist must be completed for each UST system (tank and associated piping), except that UST systems at one site may be reported together by completing page 2 of this form separately for each system. The completed checklist should be mailed to the following address within 30 days of the completion of the closure or change-in-service.

Underground Storage Tank Section
Department of Ecology
Mail Stop PV-11
Olympia, WA 98504-8711

1. UST SYSTEM OWNER AND LOCATION

Site Owner/Operator: U.S. Department of Energy - Richland Operations

Owners Address: 825 Jadwin 550
Street P.O. Box

Richland WA 99352
City State ZIP Code

Telephone: (509) 376-7387

Site ID Number (on invoice or available from Ecology if tank is registered): 012763

Site/Business Name: U.S. Department of Energy - Richland Operations

Site Address: 825 Jadwin P.O. Box 550 Benton
Street County

Richland WA 99352
City State ZIP Code

2. TANK PERMANENT CLOSURE/CHANGE-IN-SERVICE PERFORMED BY:

Firm: Westinghouse Hanford Company License Number: S001592

Address: 1970
Street P.O. Box

Richland WA 99352
City State ZIP Code

Telephone: (509) 376-7411

Licensed Supervisor: Daniel Riley Decommissioning License Number: W000778

3. TANK CLOSURE/CHANGE-IN-SERVICE INFORMATION

1. Tank ID Number (as registered with Ecology): 200W-FS-34 2. Year installed: 1982
3. Tank capacity in gallons: 500 4. Date of last use: 08/91
5. Last substance stored: UNLEADED GASOLINE 6. Date of closure/change-in-service: 4-15-92
7. Type of closure: Closure with Tank Removal In-place Closure Change-in-Service
8. If in-place closure is used, the tank has been filled with the following substance: _____
9. If change-in-service, indicate new substance stored in tank: _____
10. Local permit(s) (if any) obtained from: _____

Always contact local authorities regarding permit requirements.

11. Has a site assessment been completed? Yes No

Unless an external release detection system is operating at the time of closure or change in service, and a report is provided as specified in WAC 173-360-390, a site assessment must be conducted. This site assessment must be conducted by a person registered with the Department of Ecology to perform site assessments. Results of the site assessment must be included with the Site Assessment Checklist (ECY 010-158).

4. CHECKLIST

Each item of the following checklist shall be initialed by the licensed supervisor whose signature appears below.

	Yes	No	NA*
1. Has all liquid been removed from product lines?	SR		
2. Has all product piping been capped or removed?	SR		
3. Have all non-product lines been capped or removed?	SR		
4. Have all liquid and accumulated sludges been removed from the tank?	*		
5. Has the tank been properly purged or inerted?	SR		
6. Have the drop tube, fill pipe, gauge pipe, pumps and other tank fixtures been removed?	SR		
7. Have all tank openings been plugged or capped? NOTE: One plug should have 1/8 inch vent hole.	SR		
8. Have all sludges removed from the tank been designated and disposed of in accordance with the state of Washington's dangerous waste regulations (Chapter 173-303 WAC)?	*		
9. If removed, was tank properly labeled and disposed of in accordance with all applicable local, state and federal regulations?	*		

*Item not applicable

I hereby certify that I have been the licensed supervisor present on site during the above listed permanent closure activities and to the best of my knowledge they have been conducted in compliance with all applicable state and federal laws, regulations and procedures pertaining to underground storage tanks.

Persons submitting false information are subject to penalties under Chapter 173.360 WAC.

May 6, 1992
Date

Daniel Riley
Signature of Licensed Supervisor

5. ADDITIONAL REQUIRED SIGNATURES

Date

5-12-92

Date

Signature of Licensed Service Provider (Item Owner or Authorized Representative)

Ronald E. Serch
Signature of Tank Owner or Authorized Representative



UNDERGROUND STORAGE TANK Permanent Closure/Change-In-Service Checklist

The purpose of this form is to certify the proper closure/change-in-service of underground storage tank (UST) systems. These activities must be conducted in accordance with Chapter 173.360 WAC. Washington State UST rules require the tank owner or operator to notify Ecology in writing 30 days prior to closure or change-in-service of tanks. This must be done by completing the 30 Day Notice form (ECY 010-155).

This Permanent Closure Checklist shall be completed and signed by a Licensed Decommissioning Supervisor. The supervisor shall be on site when all tank permanent closure/change-in-service activities are being conducted. The firm which employs the licensed supervisor shall also be licensed by the Washington State Department of Ecology as a Service Provider. If any of the activities listed below have been supervised by a different licensed supervisor, a separate checklist must be filled out and signed by the licensed supervisor performing those activities.

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Underground Storage Tank Section
Department of Ecology
Mail Stop PV-11
Olympia, WA 98504-8711

1. UST SYSTEM OWNER AND LOCATION

Site Owner/Operator: U.S. Department of Energy - Richland Operations

Owners Address: 825 Jadwin 550
Street P.O. Box

Richland WA 99352
City State ZIP-Code

Telephone: (509) 376-7387

Site ID Number (on invoice or available from Ecology if tank is registered): 012763

Site/Business Name: U.S. Department of Energy - Richland Operations

Site Address: 825 Jadwin P.O. Box 550 Benton
Street County

Richland WA 99352
City State ZIP-Code

2. TANK PERMANENT CLOSURE/CHANGE-IN-SERVICE PERFORMED BY:

Firm: Westinghouse Hanford Company License Number: S001592

Address: 1970
Street P.O. Box

Richland WA 99352
City State ZIP-Code

Telephone: (509) 376-7411

Licensed Supervisor: *Daniel Riley* Decommissioning License Number: W000778

3. TANK CLOSURE/CHANGE-IN-SERVICE INFORMATION

1. Tank ID Number (as registered with Ecology): 300-FS-15 2. Year installed: 1981
3. Tank capacity in gallons: 500 4. Date of last use: 08/91
5. Last substance stored: UNLEADED GASOLINE 6. Date of closure/change-in-service: 4-10-92
7. Type of closure: Closure with Tank Removal In-place Closure Change-in-Service
8. If in-place closure is used, the tank has been filled with the following substance: _____
9. If change-in-service, indicate new substance stored in tank: _____
10. Local permit(s) (if any) obtained from: _____

Always contact local authorities regarding permit requirements.

11. Has a site assessment been completed? Yes No

Unless an external release detection system is operating at the time of closure or change in service, and a report is provided as specified in WAC 173-360-390, a site assessment must be conducted. This site assessment must be conducted by a person registered with the Department of Ecology to perform site assessments. Results of the site assessment must be included with the Site Assessment Checklist (ECY 010-158).

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	Yes	No	NA*
1. Has all liquid been removed from product lines?	DR		
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3. Have all non-product lines been capped or removed?	DR		
4. Have all liquid and accumulated sludges been removed from the tank?	*		
5. Has the tank been properly purged or inerted?	DR		
6. Have the drop tube, fill pipe, gauge pipe, pumps and other tank fixtures been removed?	DR		
7. Have all tank openings been plugged or capped? NOTE: One plug should have 1/8 inch vent hole.	DR		
8. Have all sludges removed from the tank been designated and disposed of in accordance with the state of Washington's dangerous waste regulations (Chapter 173-303 WAC)?	*		
9. If removed, was tank properly labeled and disposed of in accordance with all applicable local, state and federal regulations?	*		

*Item not applicable

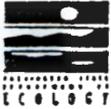
I hereby certify that I have been the licensed supervisor present on site during the above listed permanent closure activities and to the best of my knowledge they have been conducted in compliance with all applicable state and federal laws, regulations and procedures pertaining to underground storage tanks.

Persons submitting false information are subject to penalties under Chapter 173.360 WAC.

May 6, 1992 Daniel Riley
Date Signature of Licensed Supervisor

5. ADDITIONAL REQUIRED SIGNATURES

5-12-92 Ronald E. Lerch
Date Signature of Tank Owner or Authorized Representative



UNDERGROUND STORAGE TANK Permanent Closure/Change-In-Service Checklist

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Underground Storage Tank Section
Department of Ecology
Mail Stop PV-11
Olympia, WA 98504-8711

1. UST SYSTEM OWNER AND LOCATION

Site Owner/Operator: U.S. Department of Energy - Richland Operations

Owners Address: 825 Jadwin 550
Street P.O. Box

Richland WA 99352
City State ZIP-Code

Telephone: (509) 376-7387

Site ID Number (on invoice or available from Ecology if tank is registered): 012763

Site/Business Name: U.S. Department of Energy - Richland Operations

Site Address: 825 Jadwin P.O. Box 550 Benton
Street County

Richland WA 99352
City State ZIP-Code

2. TANK PERMANENT CLOSURE/CHANGE-IN-SERVICE PERFORMED BY:

Firm: Westinghouse Hanford Company License Number: S001592

Address: 1970
Street P.O. Box

Richland WA 99352
City State ZIP-Code

Telephone: (509) 376-7411

Licensed Supervisor: *Daniel Riley* Decommissioning License Number: W000778

3. TANK CLOSURE/CHANGE-IN-SERVICE INFORMATION

1. Tank ID Number (as registered with Ecology): 200W-FS-35 2. Year installed: 1982
3. Tank capacity in gallons: 500 4. Date of last use: 08/91
5. Last substance stored: DIESEL 6. Date of closure/change-in-service: 4-15-92
7. Type of closure: Closure with Tank Removal In-place Closure Change-in-Service
8. If in-place closure is used, the tank has been filled with the following substance: _____
9. If change-in-service, indicate new substance stored in tank: _____
10. Local permit(s) (if any) obtained from: _____

Always contact local authorities regarding permit requirements.

11. Has a site assessment been completed? Yes No

Unless an external release detection system is operating at the time of closure or change in service, and a report is provided as specified in WAC 173-360-390, a site assessment must be conducted. This site assessment must be conducted by a person registered with the Department of Ecology to perform site assessments. Results of the site assessment must be included with the Site Assessment Checklist (ECY 010-158).

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	Yes	No	NA*
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2. Has all product piping been capped or removed?	SR		
3. Have all non-product lines been capped or removed?	SR		
4. Have all liquid and accumulated sludges been removed from the tank?	*		
5. Has the tank been properly purged or inerted?	SR		
6. Have the drop tube, fill pipe, gauge pipe, pumps and other tank fixtures been removed?	SR		
7. Have all tank openings been plugged or capped? NOTE: One plug should have 1/8 inch vent hole.	SR		
8. Have all sludges removed from the tank been designated and disposed of in accordance with the state of Washington's dangerous waste regulations (Chapter 173-303 WAC)?	*		
9. If removed, was tank properly labeled and disposed of in accordance with all applicable local, state and federal regulations?	*		

*Item not applicable

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May 6, 1992
Date

Daniel Riley
Signature of Licensed Supervisor

5. ADDITIONAL REQUIRED SIGNATURES

Date
5-12-92

Signature of Licensed Service Provider (firm) Owner or Authorized Representative
Danald E. Lerch
Signature of Tank Owner or Authorized Representative



UNDERGROUND STORAGE TANK Permanent Closure/Change-In-Service Checklist

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Underground Storage Tank Section
Department of Ecology
Mail Stop PV-11
Olympia, WA 98504-3711

1. UST SYSTEM OWNER AND LOCATION

Site Owner/Operator: U.S. Department of Energy - Richland Operations

Owners Address: 825 Jadwin 550
Street P.O. Box
Richland WA 99352
City State ZIP-Code

Telephone: (509) 376-7387

Site ID Number (on invoice or available from Ecology if tank is registered): 012763

Site/Business Name: U.S. Department of Energy - Richland Operations

Site Address: 825 Jadwin P.O. Box 550 Benton
Street County
Richland WA 99352
City State ZIP-Code

2. TANK PERMANENT CLOSURE/CHANGE-IN-SERVICE PERFORMED BY:

Firm: Westinghouse Hanford Company License Number: S001592

Address: 1970
Street P.O. Box
Richland WA 99352
City State ZIP-Code

Telephone: (509) 376-7411

Licensed Supervisor: Daniel Riley Decommissioning License Number: W000778

This page must be completed separately for each tank permanently closed (decommissioned) or change-in-service at the site. For additional tanks you may photocopy this form prior to completing.

3. TANK CLOSURE/CHANGE-IN-SERVICE INFORMATION

1. Tank ID Number (as registered with Ecology): 100N-FS-31 2. Year installed: 1979
3. Tank capacity in gallons: 500 4. Date of last use: 08/91
5. Last substance stored: DIESEL 6. Date of closure/change-in-service: 4-23-92
7. Type of closure: Closure with Tank Removal In-place Closure Change-in-Service
8. If in-place closure is used, the tank has been filled with the following substance: _____
9. If change-in-service, indicate new substance stored in tank: _____
10. Local permit(s) (if any) obtained from: _____

Always contact local authorities regarding permit requirements.

11. Has a site assessment been completed? Yes No

Unless an external release detection system is operating at the time of closure or change in service, and a report is provided as specified in WAC 173-360-390, a site assessment must be conducted. This site assessment must be conducted by a person registered with the Department of Ecology to perform site assessments. Results of the site assessment must be included with the Site Assessment Checklist (ECY 010-158).

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3. Have all non-product lines been capped or removed?	DR		
4. Have all liquid and accumulated sludges been removed from the tank?	*		
5. Has the tank been properly purged or inerted?	DR		
6. Have the drop tube, fill pipe, gauge pipe, pumps and other tank fixtures been removed?	DR		
7. Have all tank openings been plugged or capped? NOTE: One plug should have 1/8 inch vent hole.	DR		
8. Have all sludges removed from the tank been designated and disposed of in accordance with the state of Washington's dangerous waste regulations (Chapter 173-303 WAC)?	*		
9. If removed, was tank properly labeled and disposed of in accordance with all applicable local, state and federal regulations?	*		

*Item not applicable

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Persons submitting false information are subject to penalties under Chapter 173.360 WAC.

May 6, 1992
Date

Daniel Riley
Signature of Licensed Supervisor

5. ADDITIONAL REQUIRED SIGNATURES

Date
5-12-92
Date

Signature of Licensed Service Provider (rent) Owner or Authorized Representative
Ronald E. Serch
Signature of Tank Owner or Authorized Representative



UNDERGROUND STORAGE TANK Permanent Closure/Change-In-Service Checklist

The purpose of this form is to certify the proper closure/change-in-service of underground storage tank (UST) systems. These activities must be conducted in accordance with Chapter 173.360 WAC. Washington State UST rules require the tank owner or operator to notify Ecology in writing 30 days prior to closure or change-in-service of tanks. This must be done by completing the 30 Day Notice form (ECY 010-155).

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Underground Storage Tank Section
Department of Ecology
Mail Stop PV-11
Olympia, WA 98504-8711

1. UST SYSTEM OWNER AND LOCATION

Site Owner/Operator: U.S. Department of Energy - Richland Operations

Owners Address: 825 Jadwin 550
Street P.O. Box

Richland WA 99352
City State ZIP-Code

Telephone: (509) 376-7387

Site ID Number (on invoice or available from Ecology if tank is registered): 012763

Site/Business Name: U.S. Department of Energy - Richland Operations

Site Address: 825 Jadwin P.O. Box 550 Benton
Street County

Richland WA 99352
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2. TANK PERMANENT CLOSURE/CHANGE-IN-SERVICE PERFORMED BY:

Firm: Westinghouse Hanford Company License Number: S001592

Address: 1970
Street P.O. Box

Richland WA 99352
City State ZIP-Code

Telephone: (509) 376-7411

Licensed Supervisor: Daniel Riley Decommissioning License Number: WAD0778

3. TANK CLOSURE/CHANGE-IN-SERVICE INFORMATION

1. Tank ID Number (as registered with Ecology): 100N-FS-30 2. Year installed: 1979

3. Tank capacity in gallons: 500 4. Date of last use: 08/91

5. Last substance stored: UNLEADED GASOLINE 6. Date of closure/change-in-service: 4-23-92

7. Type of closure: Closure with Tank Removal In-place Closure Change-in-Service

8. If in-place closure is used, the tank has been filled with the following substance: _____

9. If change-in-service, indicate new substance stored in tank: _____

10. Local permit(s) (if any) obtained from: _____

Always contact local authorities regarding permit requirements.

11. Has a site assessment been completed? Yes No

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May 6, 1992 Daniel Riley
Date Signature of Licensed Supervisor

5. ADDITIONAL REQUIRED SIGNATURES

Date Signature of Licensed Service Provider, Owner or Authorized Representative

5-12-92 Ronald E. Serch
Date Signature of Tank Owner or Authorized Representative



UNDERGROUND STORAGE TANK Permanent Closure/Change-In-Service Checklist

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Olympia, WA 98504-8711

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Street P.O. Box

Richland WA 99352
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Telephone: (509) 376-7387

Site ID Number (on invoice or available from Ecology if tank is registered): 012763

Site/Business Name: U.S. Department of Energy - Richland Operations

Site Address: 825 Jadwin P.O. Box 550 Benton
Street County

Richland WA 99352
City State ZIP-Code

2. TANK PERMANENT CLOSURE/CHANGE-IN-SERVICE PERFORMED BY:

Firm: Westinghouse Hanford Company License Number: S001592

Address: 1970
Street P.O. Box

Richland WA 99352
City State ZIP-Code

Telephone: (509) 376-7411

Licensed Supervisor: David Kelley Decommissioning License Number: W000778

3. TANK CLOSURE/CHANGE-IN-SERVICE INFORMATION

1. Tank ID Number (as registered with Ecology): 300-FS-16 2. Year installed: 1981
3. Tank capacity in gallons: 500 4. Date of last use: 08/91
5. Last substance stored: DIESEL 6. Date of closure/change-in-service: 4-10-92
7. Type of closure: Closure with Tank Removal In-place Closure Change-in-Service
8. If in-place closure is used, the tank has been filled with the following substance: _____
9. If change-in-service, indicate new substance stored in tank: _____
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11. Has a site assessment been completed? Yes No

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4. Have all liquid and accumulated sludges been removed from the tank?	*		
5. Has the tank been properly purged or inerted?	SR		
6. Have the drop tube, fill pipe, gauge pipe, pumps and other tank fixtures been removed?	SR		
7. Have all tank openings been plugged or capped? NOTE: One plug should have 1/8 inch vent hole.	SR		
8. Have all sludges removed from the tank been designated and disposed of in accordance with the state of Washington's dangerous waste regulations (Chapter 173-303 WAC)?	*		
9. If removed, was tank properly labeled and disposed of in accordance with all applicable local, state and federal regulations?	*		

*Item not applicable

I hereby certify that I have been the licensed supervisor present on site during the above listed permanent closure activities and to the best of my knowledge they have been conducted in compliance with all applicable state and federal laws, regulations and procedures pertaining to underground storage tanks.

Persons submitting false information are subject to penalties under Chapter 173.360 WAC.

May 6, 1992 Samuel Riley
Date Signature of Licensed Supervisor

5. ADDITIONAL REQUIRED SIGNATURES

Date Signature of Licensed Service Provider (from Owner or Authorized Representative)

5-12-92 Arnold E. Seich
Date Signature of Tank Owner or Authorized Representative

9253459D
ATTACHMENT 2
6 Pages



UNDERGROUND STORAGE TANK Site Check/Site Assessment Checklist

The purpose of this form is to certify the proper investigation of an UST site for the presence of a release. These activities shall be conducted in accordance with Chapter 173.360 WAC. A description of the various situations requiring a site check or site assessment is provided in the guidance document for UST site checks and site assessments.

This Site Check/Site Assessment Checklist shall be completed and signed by a person registered with the Department of Ecology to perform site assessments.

Two copies of the results of the site check or site assessment should be included with this checklist according to the reporting requirements in the guidance document for UST site checks and site assessments.

For further information about completing this form, please contact the Department of Ecology UST Program.

The completed checklist should be mailed to the following address:

Underground Storage Tank Section
Department of Ecology
Mail Stop PV-11
Olympia, WA 98504-8711

1. UST SYSTEM OWNER AND LOCATION			
UST Owner/Operator:	U.S. Department of Energy, Richland Field Office		
Owners Address:	825 Jadwin Avenue	P.O. Box 558	
	<small>Street</small>		<small>P.O. Box</small>
	Richland,	WA	99352
	<small>City</small>	<small>State</small>	<small>ZIP Code</small>
Telephone:	(509) 376-5441		
Site ID Number (on invoice or available from Ecology if tank is registered):	012763		
Site/Business Name:	Hanford		
Site Address:	825 Jadwin Avenue	P.O. Box 558	
	<small>Street</small>		<small>County</small>
	Richland	WA	99352
	<small>City</small>	<small>State</small>	<small>ZIP Code</small>
2. SITE CHECK/SITE ASSESSMENT CONDUCTED BY:			
Registered Person:	R. C. Roos		
Address:	MISN H4-55 ,	WHC ,	
	<small>Street</small>		<small>P.O. Box</small>
	Richland	WA	99352
	<small>City</small>	<small>State</small>	<small>ZIP Code</small>
Telephone:	(509) 376-9218		

3. TANK INFORMATION

1. Tank ID Number (as registered with Ecology): 300-FS-15
300-FS-16 2. Year installed: 1981
 3. Tank capacity in gallons: 500 each 4. Last substance stored: Unleaded gasoline/
 diesel fuel

4. REASON FOR CONDUCTING SITE CHECK/SITE ASSESSMENT

Check one:

- Investigate suspected release due to on-site environmental contamination
- Investigate suspected release due to off-site environmental contamination
- Extend temporary closure of UST system for more than 12 months
- UST system undergoing change-in-service
- UST system permanently closed-in-place
- UST system permanently closed with tank removed
- Required by Ecology or delegated agency for UST system closed before December 22, 1988
- Other (describe): _____

5. CHECKLIST

Each item of the following checklist shall be initiated by the person registered with the Department of Ecology whose signature appears below.

	Yes	No
1. Has the site check/site assessment been conducted according to applicable procedures specified in the UST site check/site assessment guidance issued by the Department of Ecology?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Has a release from the UST system been confirmed? <i>NOTE: Owners/operators must report all confirmed releases to the Department of Ecology or delegated agency within 24 hours.</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Are the results of the site check/site assessment enclosed with this checklist? <i>NOTE: Two copies of the site check/site assessment results must be submitted to the Department of Ecology according to the reporting requirements specified in the UST site check/site assessment guidance.</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

I hereby certify that I have been in responsible charge of performing the site check/site assessment described above. Persons submitting false information are subject to penalties under Chapter 173.360 WAC.

5-11-92 *Richard J. Ross*
 Date Signature of Person Registered with Ecology

6. OWNER'S SIGNATURE

5-12-92 *Ronald E. Litch*
 Date Signature of Tank Owner or Authorized Representative



UNDERGROUND STORAGE TANK Site Check/Site Assessment Checklist

The purpose of this form is to certify the proper investigation of an UST site for the presence of a release. These activities shall be conducted in accordance with Chapter 173.360 WAC. A description of the various situations requiring a site check or site assessment is provided in the guidance document for UST site checks and site assessments.

This Site Check/Site Assessment Checklist shall be completed and signed by a person registered with the Department of Ecology to perform site assessments.

Two copies of the results of the site check or site assessment should be included with this checklist according to the reporting requirements in the guidance document for UST site checks and site assessments.

For further information about completing this form, please contact the Department of Ecology UST Program.

The completed checklist should be mailed to the following address:

Underground Storage Tank Section
Department of Ecology
Mail Stop PV-11
Olympia, WA 98504-8711

1. UST SYSTEM OWNER AND LOCATION

UST Owner/Operator: U.S. Department of Energy, Richland Field Office

Owners Address: 825 Jadwin Avenue, P.O. Box 558

Richland, WA 99352
Street P.O. Box
City State ZIP-Code

Telephone: (509) 376-5441

Site ID Number (on invoice or available from Ecology if tank is registered): 012763

Site/Business Name: Hanford

Site Address: 825 Jadwin Avenue P.O. Box 558

Richland, WA 99352
Street P.O. Box
City State ZIP-Code

2. SITE CHECK/SITE ASSESSMENT CONDUCTED BY:

Registered Person: R. C. Roos

Address: MISN H4-55, WHC, 1970

Richland WA 99352
Street P.O. Box
City State ZIP-Code

Telephone: (509) 376-9218

3. TANK INFORMATION

1. Tank ID Number (as registered with Ecology): 200-FS-34 2. Year installed: 1982
 1. Tank ID Number (as registered with Ecology): 200-FS-35
 3. Tank capacity in gallons: 500 Each 4. Last substance stored: unleaded gasoline/
diesel fuel

4. REASON FOR CONDUCTING SITE CHECK/SITE ASSESSMENT

Check one:

- Investigate suspected release due to on-site environmental contamination
- Investigate suspected release due to off-site environmental contamination
- Extend temporary closure of UST system for more than 12 months
- UST system undergoing change-in-service
- UST system permanently closed-in-place
- UST system permanently closed with tank removed
- Required by Ecology or delegated agency for UST system closed before December 22, 1988
- Other (describe): _____

5. CHECKLIST

Each item of the following checklist shall be initiated by the person registered with the Department of Ecology whose signature appears below.

	Yes	No
1. Has the site check/site assessment been conducted according to applicable procedures specified in the UST site check/site assessment guidance issued by the Department of Ecology?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Has a release from the UST system been confirmed? <i>NOTE: Owners/operators must report all confirmed releases to the Department of Ecology or delegated agency within 24 hours.</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Are the results of the site check/site assessment enclosed with this checklist? <i>NOTE: Two copies of the site check/site assessment results must be submitted to the Department of Ecology according to the reporting requirements specified in the UST site check/site assessment guidance.</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

I hereby certify that I have been in responsible charge of performing the site check/site assessment described above. Persons submitting false information are subject to penalties under Chapter 173.360 WAC.

5-11-92
Date

Richard J. Ross
Signature of Person Registered with Ecology

6. OWNER'S SIGNATURE

5-12-92
Date

Ronald E. Serch
Signature of Tank Owner or Authorized Representative



UNDERGROUND STORAGE TANK Site Check/Site Assessment Checklist

The purpose of this form is to certify the proper investigation of an UST site for the presence of a release. These activities shall be conducted in accordance with Chapter 173.360 WAC. A description of the various situations requiring a site check or site assessment is provided in the guidance document for UST site checks and site assessments.

This Site Check/Site Assessment Checklist shall be completed and signed by a person registered with the Department of Ecology to perform site assessments.

Two copies of the results of the site check or site assessment should be included with this checklist according to the reporting requirements in the guidance document for UST site checks and site assessments.

For further information about completing this form, please contact the Department of Ecology UST Program.

The completed checklist should be mailed to the following address:

Underground Storage Tank Section
Department of Ecology
Mail Stop PV-11
Olympia, WA 98504-8711

1. UST SYSTEM OWNER AND LOCATION

UST Owner/Operator:	U.S. Department of Energy, Richland Field Office		
Owners Address:	825 Jadwin Avenue	P.O. Box 558	
	<small>Street</small> Richland	<small>State</small> WA	<small>P.O. Box</small> 99352
	<small>City</small>	<small>State</small>	<small>ZIP Code</small>
Telephone:	(509) 376-5441		
Site ID Number (on invoice or available from Ecology if tank is registered):	012763		
Site/Business Name:	Hanford		
Site Address:	825 Jadwin Avenue	P. O. Box 558	
	<small>Street</small> Richland	<small>State</small> WA	<small>County</small> 99352
	<small>City</small>	<small>State</small>	<small>ZIP Code</small>

2. SITE CHECK/SITE ASSESSMENT CONDUCTED BY:

Registered Person:	R. C. Roos		
Address:	MISN H4-55, WHC,	1970	
	<small>Street</small> Richland	<small>State</small> WA	<small>P.O. Box</small> 99352
	<small>City</small>	<small>State</small>	<small>ZIP Code</small>
Telephone:	(509) 376-9218		

3. TANK INFORMATION

1. Tank ID Number (as registered with Ecology): 100-FS-30 2. Year installed: 1979
 100-FS-31

3. Tank capacity in gallons: _____ 4. Last substance stored: unleaded gasoline/
diesel fuel

4. REASON FOR CONDUCTING SITE CHECK/SITE ASSESSMENT

Check one:

- Investigate suspected release due to on-site environmental contamination
- Investigate suspected release due to off-site environmental contamination
- Extend temporary closure of UST system for more than 12 months
- UST system undergoing change-in-service
- UST system permanently closed-in-place
- UST system permanently closed with tank removed
- Required by Ecology or delegated agency for UST system closed before December 22, 1988
- Other (describe): _____

5. CHECKLIST

Each item of the following checklist shall be initiated by the person registered with the Department of Ecology whose signature appears below.

	Yes	No
1. Has the site check/site assessment been conducted according to applicable procedures specified in the UST site check/site assessment guidance issued by the Department of Ecology?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Has a release from the UST system been confirmed? <i>NOTE: Owners/operators must report all confirmed releases to the Department of Ecology or delegated agency within 24 hours.</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Are the results of the site check/site assessment enclosed with this checklist? <i>NOTE: Two copies of the site check/site assessment results must be submitted to the Department of Ecology according to the reporting requirements specified in the UST site check/site assessment guidance.</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

I hereby certify that I have been in responsible charge of performing the site check/site assessment described above. Persons submitting false information are subject to penalties under Chapter 173.360 W.A.C.

5-11-92
Date

Richard J. Ross
Signature of Person Registered with Ecology

6. OWNER'S SIGNATURE

5-12-92
Date

Donald E. Leich
Signature of Tank Owner or Authorized Representative

