

**Montana Petroleum Tank Release Compensation Board
Application for Petroleum Release Eligibility
Form 1-R**

Complete this form if there has been a petroleum release from an underground or aboveground petroleum storage tank and/or associated piping at this facility. Submission of this form indicates that the owner or operator of the petroleum storage tanks will be requesting reimbursement for corrective action and/or third party bodily injury or property damage costs. *This form consists of owner/operator and facility information, petroleum storage tank information, piping information, site diagram and certification.* If you require assistance, call 406-444-9710.

A. Contact Information – Please record names of the tank owner, operator and property owner.

Tank Owner	Tank Operator
Name: <input type="text" value="Broadwater County"/>	Name: <input type="text" value="Same"/>
Contact Name: <input type="text" value="Mr. Mike Delger"/>	Contact Name: <input type="text"/>
Address: <input type="text" value="515 Broadway"/>	Address: <input type="text"/>
City, State, Zip: <input type="text" value="Townsend, MT 59644"/>	City, State, Zip: <input type="text"/>
Phone Number: <input type="text" value="1-406-521-0834 (C)"/>	Phone Number: <input type="text"/>
Email Address: <input type="text" value="mdelger@co.broadwater.mt.us"/>	Email Address: <input type="text"/>

Property Owner (if different)

Name: <input type="text" value="Broadwater County"/>	Contact: <input type="text" value="Mr. Mike Delger"/>
Address: <input type="text" value="515 Broadway"/>	Phone Number: <input type="text"/>
City, State, Zip: <input type="text" value="Townsend."/>	Email Address: <input type="text"/>

B. Facility Information – Please record facility and release information.

Facility Name: <input type="text" value="Former Grover's Exxon"/>	DEQ Facility ID Number: <input type="text" value="04-07957"/>
Street Address: <input type="text" value="417 Broadway"/>	County: <input type="text" value="Broadwater"/>
City: <input type="text" value="Townsend, MT"/>	DEQ Release Number: <input type="text" value="0358"/>

C. INSURANCE INFORMATION – Owners or operators of petroleum storage tanks should contact their insurance agent upon the discovery of a petroleum release. The Board requests written documentation from the insurance carrier accepting or denying coverage for the release. Note: According to Montana Code Annotated 75-11-307(5), qualifying insurance payments to an owner or operator paid **before** applying for reimbursement from the Fund are considered toward satisfaction of the co-payment requirements. The costs paid by an insurance provider must be documented in sufficient detail to enable the Board to determine if the costs paid are actual, necessary and reasonable costs for remediation of the release. The Board must also receive a completed Owner/Operator’s Report of Insurance or other Third party Liability Form (PTRCB Form 7) before the first claim can be reimbursed.

Insurance Information:

What date did you have knowledge of the release?	<input type="text" value="N/A"/>	
Do you have insurance that could pay for cleanup of release?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
What are your policy limits?	<input type="text"/>	
What date did you report the release to your insurance agent?	<input type="text"/>	
Have you attached the acceptance or denial notification from the responsible insurance provider?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you settled with your insurance provider?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

D. PETROLEUM STORAGE TANK(S) INFORMATION — Complete for all tanks that are or were at this facility. If there are more than 5 tanks, this section may be printed and completed by hand.

Description by Tank	#1	#2	#3	#4	#5
Underground (U) or Aboveground (A)	U	U			
Capacity (Gallons)	6,000	10,000			
Substance currently or last stored — Gas (G); Diesel (D); Waste Oil (WO); Heating Oil (HO); Aviation (A); Other(O) (Specify in lower box)	HO	G			
Tank material -Fiberglass (F), Bare Steel (BS), Cathodically Protected Steel (CPS), FRP (FRP), Concrete (C), CLAD (CLAD), Poly Tank Jacket (PTJ)	BS	BS			
Date tank installed (Mo/Yr)	5/1969	5/1974			
Date tank last used (Mo/Yr)	6/1990	6/1990			
Is tank currently in use? (Yes/No).	No	No			
Was tank removed from the ground? (Yes/No)	Yes	Yes			
If removed from ground, when? (Mo/Yr)	6/1990	6/1990			
Was tank closed in place? (Yes/No)	No	No			
If closed in place, when? (Mo/Yr)	—	—			
Is/was the tank designed and constructed with rigid inner and outer walls, separated by an interstitial space that is/was capable of being monitored for leakage? (Yes/No)	No	No			
Where is/was the tank located? Farm (F), Ranch (R), Residential (RES) or Commercial property (C).	C	C			
Is/was the tank used to store heating oil which is/was consumed on the premises? (Yes/No)	No	No			
Is/was the tank located at a refinery, terminal of a refiner or oil and gas production facility? (Yes/No)	No	No			
Is/was the tank owned by or exclusively used by an agency of the federal government? (Yes/No)	No	No			
Is/was the tank mobile and used to transport petroleum or petroleum products from one place to another? (Yes/No)	No	No			
Is the tank now or was it ever owned by or under the control of a railroad? (Yes/No)	No	No			
Is this property where tanks are/were located leased from a railroad? (Yes*/No)	No	No			
Was the tank operated by a lessee of the railroad in the course of non-railroad operations? (Yes/No)	No	No			
Is/was the release from the tank? (Include spills and overfills) (Yes(Y) / No(N) / Unknown(U))	U	Yes			

*If yes, copies of present and past property leases or other documentation deemed acceptable by Board staff that would indicate a history of ownership of tanks must be included for the eligibility form to be considered complete.

E. PIPING INFORMATION — Complete for the piping associated with the tank(s) included in Section D.

Description of Piping	#1	#2	#3	#4	#5
Piping type – Pressure (P) or Suction (S)	unknown	S			
Underground (U) or Aboveground (A)	U	U			
Piping material made of:(Fiberglass(FRP),Flex(F) BareSteel(BS),Cathodically Protected Steel(CPS))	BS	BS			
Is piping currently in use? (Yes/No).	No	No			
Date piping was last used (Mo/Yr)	1990	1990			
Is/was the piping removed from ground? (Yes/No), if yes, when (Mo/Yr) in lower box.	Yes 6/1990	Yes 6/1990			
Is/was piping closed in place (Yes/No)? If closed in place, when? (Mo/Yr) in lower box.	No	No			
Is/was the pipe designed and constructed with rigid inner and outer walls separated by an interstitial space that is capable of being monitored for leakage? (Yes/No)	No	No			
Is/was release from the piping? (Yes(Y) /No(N)/Unknown(U))	U	U			
When did you have knowledge of the release? (Mo/Day/Yr) (mm/dd/yy)	1993	1993			

1.0 INTRODUCTION

Grover's Exxon was a retail gasoline service station until October 1992 at which time it ceased operation. The site once had 9 USTs storing a variety of fuels. Two tanks were removed in 1980; a 6,000 gallon # 1 diesel unit and a 4,000 gallon tank, the use of which was not noted. These tanks were replaced in 1980 with a 6,000 gallon diesel tank and a 4,000 gallon gasoline tank.

In 1990, two more tanks were removed; a 6,000 gallon stove oil tank installed in 1969 and a 10,000 gallon gasoline tank (installed in 1974). It appeared the gasoline tank had been leaking. Soil directly beneath the diesel and gasoline tanks was analyzed and revealed a maximum of 550 ppm TPH and 10,000 ppm TPH respectively.

In May of 1993, the five (5) remaining tanks were removed. Two were on the back lot and consisted of the 6,000 gallon diesel and 4,000 gallon gasoline tanks installed on 1980. The diesel tank appeared to be leaking through a seep at one end. Two other tanks, a 1,000gallon gasoline and 2,000 gallon diesel tank between the service station and Oak Street were also removed. Extensive contamination was noted around these tanks, which were installed about 1978.

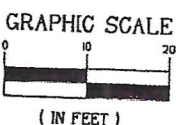
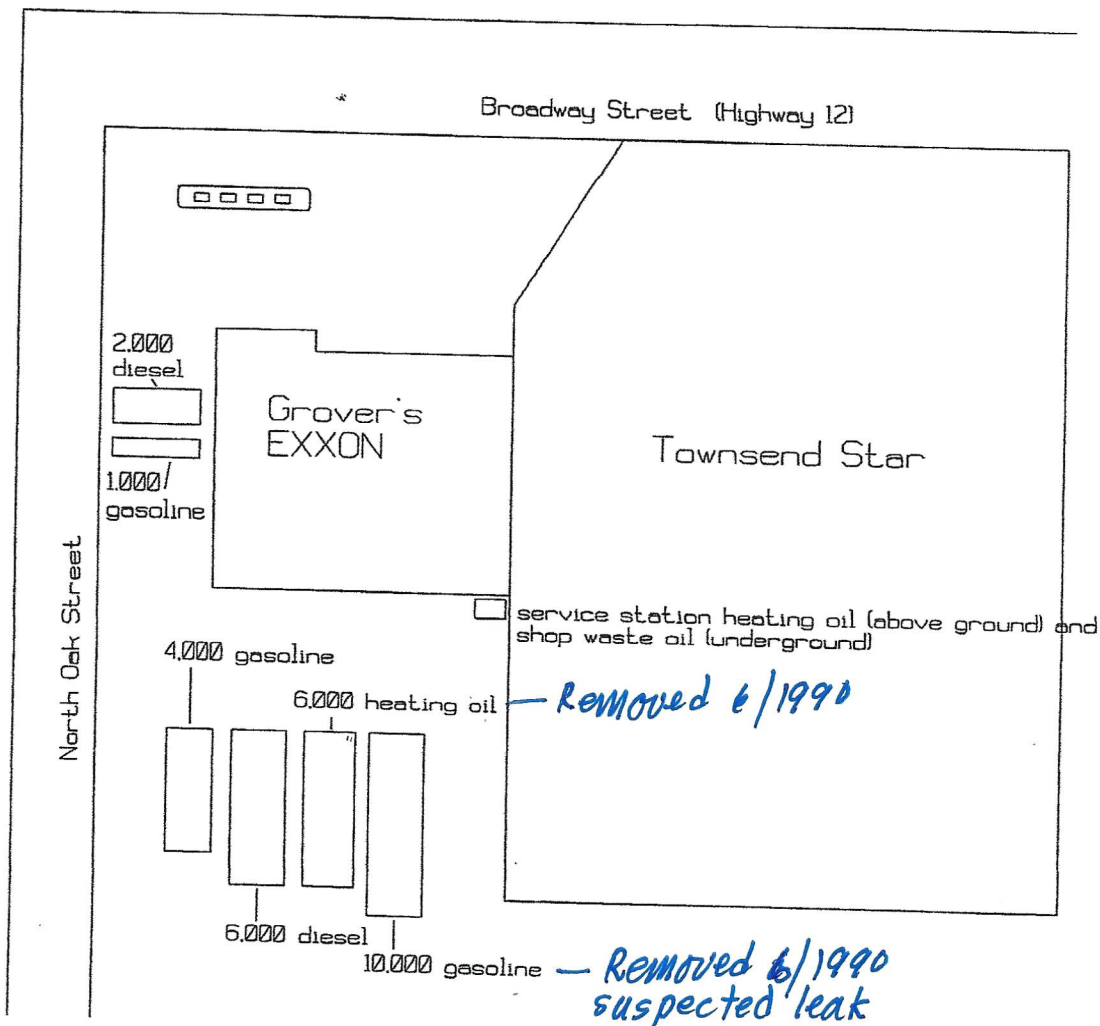
The final UST, a 275 gallon used oil tank, was removed from behind the station. Hydrocarbon, lead, and chromium contamination were present in soil around this tank.

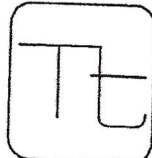
Tetra Tech Inc. initiated an investigation of the site in September 1993 due to the presence of both diesel and gasoline contamination in an alley excavation to install new utilities. Four monitoring wells were installed and soil and groundwater sample analyses clearly showed extensive gasoline and diesel contamination across the entire site.

From 1993 to 1995, Tetra Tech Inc. monitored on and off-site wells to establish trends in levels of contamination and conducted a baseline soil vapor extraction (SVE) study to evaluate the efficacy of the process in a remediating the site. The mixed soil, which included silty sands, constrained the use of SVE as a viable cleanup option. Pump tests on existing wells were also conducted, but low permeability eliminated any pump and treat option as well.

Finally, in November 1995 Tetra Tech Inc. convinced the landowner and DHES that soil removal was the best remedial option.

Historic Tank Locations From Tetra Tech report 1994





Tetra Tech Inc.
Helena, MT

Project: Grover's EXXON
 Date: June 1994 Scale: as shown
 Drawing: Historic Tank Locations
 Figure Number: 3
 File #: c:\cadd6\gcd\towns03.gcd

Figure 3

G. CERTIFICATION

Have you, as the owner/operator of the tank that leaked, been convicted of a substantial violation of state or federal law or rule that relates to the installation operation, or management of petroleum storage tanks?

Yes No

I, the owner or operator of this facility, certify the information contained within this form is true and correct. I fully understand that any fraudulent or erroneous information may jeopardize the eligibility for reimbursement from the Petroleum Tank Release Cleanup fund for this release. With my signature, I authorize the Petroleum Tank Release Compensation Board to visit the site, to verify the information contained within this form, at a time mutually agreed upon by both parties.

Tank Owner, Tank Operator or Property Owner Signature

Tank Owner, Tank Operator or Property Owner name (Typed or printed)

Date

State of _____

County of _____

Signed and Sworn before me on _____ by _____

(SEAL)

Notary Public

Printed or typed

Notary Public for the state of _____

Residing at _____

My Commission Expires _____

Submit completed form to:

**PETROLEUM TANK RELEASE COMPENSATION BOARD
PO BOX 200902
HELENA MT 59620-0902**