

FROM : SALTZ GENERAL CONTR. . . OR

PHONE NO. : 907 262 9094

P01

ALASKA DEPARTMENT OF ENVIRONMENTAL CONSERVATION



NOTIFICATION OF CLOSURE UNDERGROUND STORAGE TANKS



Notice of Closure is required for any tank and/or piping removed, closed in-ground, or changed in service. See 18 AAC 78.085 (e). "Change in service" means to change the use of a UST from containing a regulated substance to a non-regulated substance (such as heating oil).

Facility - Location (Do not use P.O. Box)

Name EDWIN SALTZ
Address H. 18.3 K-Beach RD Box 717
City Soldotna
State/Zip ALASKA 99669
Phone/Fax 907 262-4866 907 262 9094 FAX

Tank Owner

Name EDWIN SALTZ
Address PO Box 747
City Soldotna
State/Zip ALASKA 99669
Phone/Fax 907 262-4866 - 907-262 9094

Facility ID Number:
Scheduled Date for Closure:

0422
9-4-98

This form MUST be completed and sent to ADEC at the address listed below at least 15 and no more than 60 days prior to closure. Alaska Statute 46.03.375 requires those who supervise an UST closure be certified by the State of Alaska for Permitting. A UST with a confirmed release must be permanently removed from the ground. In-place closure or change in service is not allowed. A Site Assessment or Release Investigation in accordance with 18 AAC 78.090 must be performed at time of closure by an impartial third party using "Qualified" persons under a Standard Sampling Procedures Manual (SSPM).

Person to Perform Closure HAROLD JACKSON

UST Worker License # AA 0904

Person and Company to Perform Site Assessment or Release Investigation:

Paula Crowley
TAUKIANJEN PE - NORTHERN TEST LAB

Is the Person "Qualified" and on file with ADEC? -

Method of Closure: Removal (checked), In-ground, Change in Service. (If so, Sec Discussion on Reverse Side) (If so, what is new fuel usage?)

Is there a leak/spill at this site? NO (if so, please notify the closest ADEC office)

Have you contacted the local fire department of your intent to close the tank(s)? YES

Where are the tank, piping, equipment, and sludge to be disposed? CITY LANDFILL

Closure for (please check): [X] Tanks and Piping [] Tanks only [] Piping only

Table with 5 columns: Tank Number, Tank Age, Tank Size, Last Product Stored, Date Last Used. Row 1: 1, 15?, 3000, MISCEL, ?

Closure Notice Submitted By:

[X] Owner [] Operator [] Other

EDWIN SALTZ
(Please print name)

OWNER
(Title)

Edwin Saltz
(Signature)

8-20-98
(Date)

Return Completed Form to: ADEC, Storage Tank Program, 555 Cordova Street, Anchorage, AK 99501, FAX # (907) 269-7507

18-1504 (Rev. 11/99)

RECEIVED
AUG 20 1998