PETROLEUM STORAGE TANK SYSTEM UNDERGROUND AND/OR ABOVEGROUND REMOVAL REPORT

This form is to be completed by the Licensed Petroleum Technician and submitted to Manitoba Conservation and Water Stewardship within 90 days of completion of the project. Manitoba Conservation and Water Stewardship reserves the right to refuse incomplete reports.

1. Site information
Business Name:
Mailing Address:
Storage Tank (s) Location: (legal land description, civic address, section-township-range, GPS, etc.)
Operating Permit #:
Are there any groundwater wells on site? Yes ☐ No ☐
2. Site Diagram
Include a diagram of the site. This diagram shall include, but not be limited to, buildings, storage tank system features (ie: tank nest, pump islands, vent pipes, fill holes, monitoring wells etc.), groundwater wells, utilities, nearby streets, type of property use surrounding site (to the North, South, East, West). It shall be proportional (use graph paper), however exact scale is not necessary. Orientation shall be identified (ie: North arrow).
3. Tank Information
Was liquid removed from tank(s)? Yes ☐ No ☐
Amount of liquid removed
Method of liquid removal
Company(ies) conducting liquid removal:
Disposal Location
Were tank(s) purged and made inert prior to removal? Yes \square No \square
If no, explain why:
Method to purge and make tank(s) inert:

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Condition of Tank(s): Perforation(s) Other Visible Tank Date Tank Tank Found in Tank **Physical** Serial Capacity Product Last Stored in Tank Removed Damage Shell Number (YY-MM-DD) Yes No Yes No No \square Was the product piping removed? Yes □ No \square Was the vent piping removed? Yes □

4. Testing Was soil and groundwater sampling conducted by a third party (ie: environmental consultant) as indicated on the Application for Permit to Remove? Yes □ No □ Name of person/company who performed vapour analysis: □ □ □ □ Name of person/company who performed soil sampling: □ □ □ □ □ Was vapour concentration measured in each tank? Yes □ No □ If yes, instrument used: □ □ No □

Please note all field sample readings and sample names on Page 5 of this Report. Sample names must match the sample locations identified on the Excavation & Sampling Diagram and the samples submitted to the lab for analysis.

Number of field tests:

Instrument last calibrated:

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Soil sampling information:
Name of lab
Address
Number of samples
Type of analysis required
Copy of lab analysis attached. Yes \square No \square
Were water samples submitted for lab analysis? Yes \Box No \Box
Name of lab
Address
Number of samples
Type of analysis required
Copy of lab analysis attached. Yes \square No \square
5. Excavation & Sampling Diagram
Include a diagram of the location of samples taken/recorded in the excavation. It shall be proportional (use graph paper), however exact scale is not necessary. Include relevant sampling points and recorded values (location of vapour level tests and results), where samples were taken, and the name given to the sample. Orientation shall be identified (ie: North arrow).
6. Disposal of Soil
Was any excavated soil removed from site? Yes ☐ No ☐
Soil volume removed
Disposal/treatment site
Copy of weigh bill attached? Yes ☐ No☐

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7. Petroleum Technician Certification Licensed Petroleum Technician License Number _____ Date(s) of tank(s) removal Date of report completion I certify that all the above information contained in this report is true and accurate; (Date) (Signature of Licensed Petroleum Technician) List of accompanying attachments: **For Internal Use Only** Date Received:# # #

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Removal Report Complete:## <\`\^\1\# 1\2\#

EMS OP ID:# # # # #

Approval ID:## #

4. Testing - Cont'd

	N Wall	E Wall	S Wall	W Wall	Base	Excavated Fill	Pipe Trench(es)	Pump Island(s)	Previous Spills	Other:	Groundwater
Sample Name											
Field Reading											
Sample Name											
Field Reading											
Sample Name											
Field Reading											
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