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**United States Army**  
Fort Monmouth, New Jersey

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# **Underground Storage Tank Closure and Site Investigation Report**

***Building 8004  
Wayside Area***

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**NJDEP UST Registration No. 192477-4**

**July 1995**

**SMITH**  
ENVIRONMENTAL TECHNOLOGIES CORPORATION

**UNDERGROUND STORAGE TANK  
CLOSURE AND SITE INVESTIGATION REPORT**

**BUILDING 8004**

**WAYSIDE AREA  
NJDEP UST REGISTRATION NO. 192477-4**

**JULY 1995**

**PROJECT NO.: 09-5004-01  
CONTRACT NO.: DACA51-94-D-0014**

**PREPARED FOR:**

**UNITED STATES ARMY, FORT MONMOUTH, NEW JERSEY  
DIRECTORATE OF PUBLIC WORKS  
BUILDING 167  
FORT MONMOUTH, NJ 07703**

**PREPARED BY:**

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## **EXECUTIVE SUMMARY**

### **UST Closure**

On July 8, 1993, a previously unknown steel underground storage tank (UST) was closed by removal at U.S. Army Fort Monmouth, Fort Monmouth, New Jersey. The UST, New Jersey Department of Environmental Protection (NJDEP) Registration No. 192477-4, was directed as an emergency removal due to its previous unknown existence. The UST was located in front of Building 8004, adjacent to the Petroleum Contaminated Soil Staging Area in the Wayside area of U.S. Army, Fort Monmouth. UST No. 192477-4 was a 4,000-gallon No. 2 diesel UST. The UST fill port was located directly above the tank. The tank closure was performed by All Service Environmental Inc. During the 1960's and 1970's, the UST supplied diesel fuel for emergency generators which were located in Building 8004.

### **Site Assessment**

The site assessment was performed by U.S. Army personnel in accordance with the NJDEP *Technical Requirements for Site Remediation* (N.J.A.C. 7:26E) and the NJDEP *Field Sampling Procedures Manual*. Soils surrounding the tank were screened visually and with air monitoring instruments for evidence of contamination. Following removal the UST was inspected for corrosion holes. No corrosion holes were noted in the UST and no potentially contaminated soils were observed surrounding the tank.

On July 8, 1993, following removal of the UST, post-excavation soil samples C, D, E, F, G, H, I, J, and DUP A were collected from a total of ten (10) locations along the base and sidewalls of the excavation. Two (2) samples (samples A and B) were collected from beneath tank piping. All samples were analyzed for total petroleum hydrocarbons (TPHC).

### **Findings**

All post-excavation soil samples collected from the UST excavation, and from below piping associated with the UST, contained either non-detectable concentrations of contaminants or concentrations below the proposed NJDEP residential direct contact soil cleanup criteria (N.J.A.C. 7:26D and revisions dated February 3, 1994) for total organics of 10,000 mg/kg. Sample B contained a TPHC concentration of 93 mg/kg, and sample D contained a TPHC concentration of 5.5 mg/kg. All other samples contained non-detectable concentrations of contaminants.

### **Site Restoration**

Following receipt of all post-excavation soil sampling results, the excavation was backfilled to grade with a combination of uncontaminated, excavated soil and certified clean fill. The excavated soil was then restored to its original condition.



### Conclusions and Recommendations

Based on the analytical result of the post-excavation soil samples, soils with TPHC concentrations exceeding the NJDEP soil cleanup criteria of 10,000 mg/kg for total organics do not remain in the former location of the UST associated piping.

No further action is proposed in regard to the closure and site assessment of UST No. 192477-4 at Building 8004.



## 1.0 UNDERGROUND STORAGE TANK DECOMMISSIONING ACTIVITIES

### 1.1 OVERVIEW

One underground storage tank (UST), New Jersey Department of Environmental Protection (NJDEP) Registration No. 192477-4, was closed at Building 8004 at U.S. Army Fort Monmouth, Fort Monmouth, New Jersey on July 8, 1993. A site location map is provided on Figure 1. The removal of this UST was directed as an emergency due to its proximity to the Petroleum Contamination Soil Staging Area, and because this UST was not previously known to exist. Following its discovery and closure, the UST was registered with the NJDEP (see post-closure registration letter in Appendix A). Because the UST was located adjacent to the staging area, there was a potential for damage to the UST during soil loading and unloading operations. The UST was a steel, 4,000-gallon tank containing No. 2 diesel oil.

Decommissioning activities for UST No. 192477-4 complied with all applicable federal, state, and local laws and ordinances in effect at the date of decommissioning. These laws included but were not limited to: N.J.A.C. 7:14B-1 et seq., N.J.A.C. 5:23-1 et seq., and Occupational Safety and Health Administration (OSHA) 1910.146 & 1910.120. All permits including but not limited to the NJDEP-approved Decommissioning/Closure Plan were posted onsite for inspection. All Service Environmental Inc., the contractor that conducted the decommissioning activities, is registered and certified by the NJDEP for performing UST closure activities. The Certifications for UST No. 192477-4 are included in Appendix B of this report.

Based on an inspection of the UST, field screening of subsurface soils and analytical results of collected soil samples, the DPW has concluded that no historical discharges are associated with the UST, or associated piping.

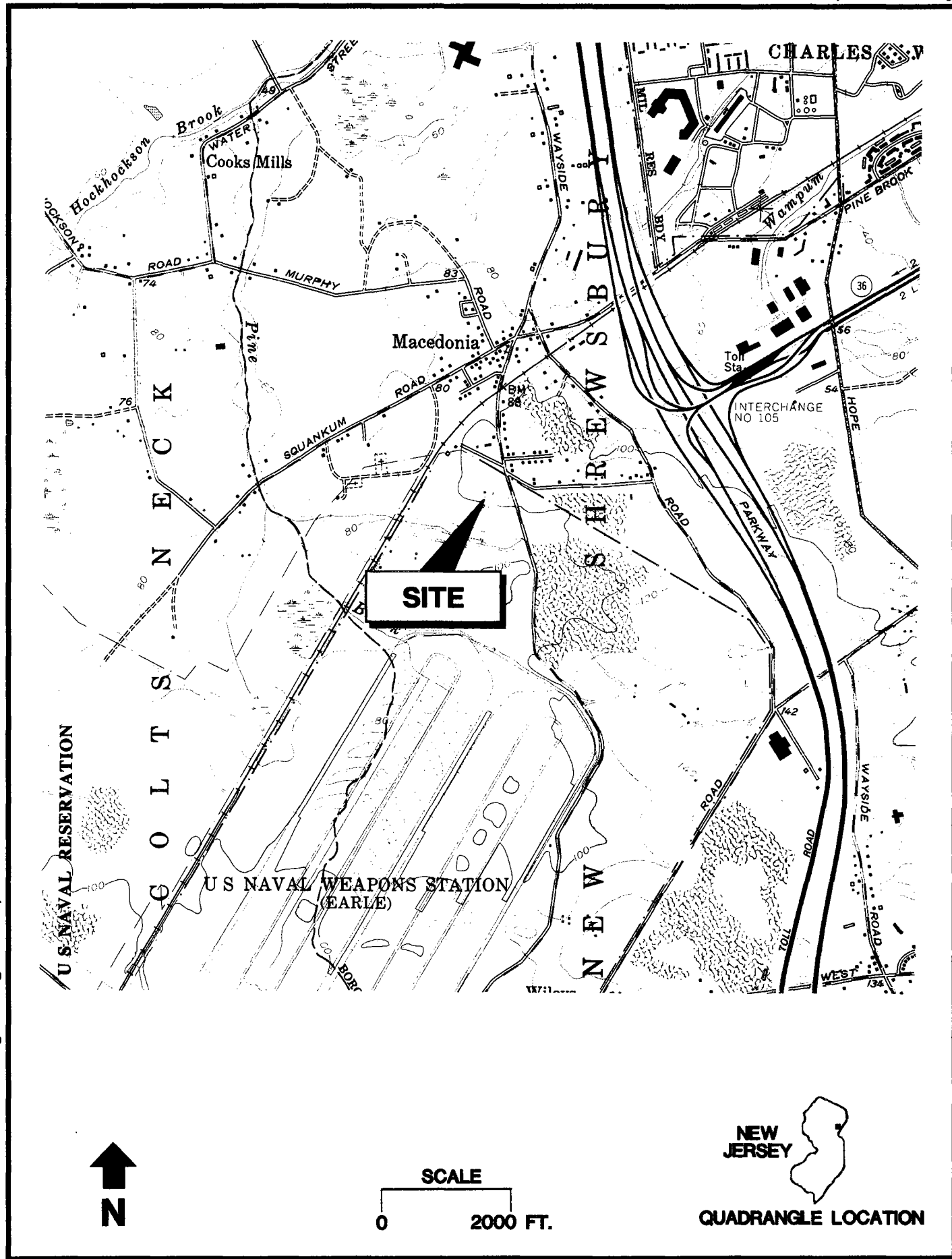
This UST Closure and Site Investigation Report has been prepared by BCM Engineers/Smith Environmental Technologies Corporation to assist the United States Army Directorate of Public Works (DPW) in complying with NJDEP Bureau of Underground Storage Tanks (NJDEP-BUST) regulations. The applicable NJDEP-BUST regulations at the date of closure were the "Interim Closure Requirements for Underground Storage Tank Systems" (N.J.A.C. 7:14B-1 et seq. September 1990 and revisions dated November 1, 1991).

This report was prepared using information required at the time of closure. Where possible, information required by the *Technical Requirements for Site Remediation* (N.J.A.C. 7:26E) (*Technical Requirements*) was included. Section 1 of this UST Closure and Site Investigation Report provides a summary of the UST decommissioning activities. Section 2 of this report describes the site investigation activities. Conclusions and recommendations, including the results of the soil sampling investigation, are presented in the final section of this report.

**SMITH**

**U.S. Army  
Department of Public Works  
Fort Monmouth, New Jersey**

Source: U.S.G.S. Quadrangle Long Branch, N.J.



Project No. 00-5004-01

**Figure 1  
Site Location Map**



## **1.2 SITE DESCRIPTION**

Building 8004 is located in the northern portion of the Wayside area of Fort Monmouth, as shown on Figure 1. Building 8004 is an electric generator building for the Army base. UST No. 192477-4 was located east of Building 8004. A site map is provided on Figure 2. The USTs appurtenant piping ran approximately 8 feet to the fill port area. The fill port area was located directly above the UST.

### **1.2.1 Geological/Hydrogeological Setting**

The following is a description of the geological/hydrogeological setting of the area surrounding Building 8004. Included is description of the regional geology of the area surrounding Fort Monmouth as well as descriptions of the local geology and hydrogeology of the Wayside area.

#### Regional Geology

Monmouth County lies within the New Jersey Section of the Atlantic Coastal Plain physiographic province. The Main Post, Charles Wood, Wayside, and the Evans areas are located in what may be referred to as the Outer Coastal Plain subprovince, or the Outer Lowlands.

In general, New Jersey Coastal Plain formations consist of a seaward-dipping wedge of unconsolidated deposits of clay, silt, and gravel. These formations typically strike northeast-southwest with a dip ranging from 10 to 60 feet per mile and were deposited on Precambrian and lower Paleozoic rocks (Zapcza, 1989). These sediments, predominantly derived from deltaic, shallow marine, and continental shelf environments, date from Cretaceous through the Quaternary Periods. The mineralogy ranges from quartz to glauconite.

The formations record several major transgressive/regressive cycles and contain units which are generally thicker to the southeast and reflect a deeper water environment. Over 20 regional geologic units are present within the sediments of the Coastal Plain. Regressive, upward coarsening deposits are usually aquifers (e.g., Englishtown and Kirkwood Formations, and the Cohansey Sand) while the transgressive deposits act as confining units (e.g., the Merchantville, Marshalltown, and Navesink Formations). The individual thicknesses for these units vary greatly (i.e., from several feet to several hundred feet). The Coastal Plain deposits thicken to the southeast from the Fall Line to greater than 6,500 feet in Cape May County (Brown and Zapcza, 1990).

#### Local Geology

Based on the regional geologic map (Jablonski, 1968), the Tertiary age Vincentown and Kirkwood Formations outcrop at the Wayside area. The Vincentown Formation lies unconformably over the Hornerstown Sand and dips to the southeast at 27 feet per mile. The upper member of the Vincentown Formation ranges from a fine- to medium- grained quartz sand

to a sandy, clayey, limestone. The sand in this member is similar to coquina by its micaceous, glauconitic, calcareous, and fossiliferous attributes.

The Kirkwood Formation unconformably overlies the Vincentown Formation and dips to the southeast at a rate of 20 feet per mile. The lower unit of the Kirkwood Formation appears to be primarily brown silt in Monmouth County (Jablonski). The upper unit is fine yellowish-brown or light gray quartz sand containing layers of clay.

## Hydrogeology

The water table aquifer at the Wayside area is identified as part of the "composite confining units", or minor aquifers. The minor aquifers include the Navesink formation, Red Bank Sand, Tinton Sand, Hornerstown Sand, Vincentown Formation, Manasquan Formation, Shark River Formation, Piney Point Formation, and the basal clay of the Kirkwood Formation.

The Kirkwood Formation has been described by Jablonski to consist of alternating layers of sand and clay that are chiefly discontinuous. Development of the aquifer in the Kirkwood Formation has been limited. Only a small percentage of the county is underlain by an aquifer thickness of 30 feet or more.

According to Jablonski, those wells that tap this aquifer may produce from 5 to 1,236 gallons per minute (gpm). Some well owners have reported water that requires treatment to remove iron. The water has also been reported to contain noticeable amounts of hydrogen sulfide gas, but this can be removed easily by aeration.

Shallow groundwater is locally influenced within the Wayside area by the following factors:

- topography
- nature of the fill material within the Wayside area
- presence of clay and silt lenses in the natural overburden deposits
- local groundwater recharge areas (i.e., streams, lakes).

Due to the fluvial nature of the overburden deposits (i.e., sand and clay lenses), shallow groundwater flow direction is best determined on a case-by-case basis.

Building 8004 is located approximately 750 feet miles north of Pine Brook, the nearest water body. Based on the Wayside area topography, the groundwater flow in the area of Building 8004 is anticipated to be to the southwest.

## 1.3 HEALTH AND SAFETY

Before, during, and after all decommissioning activities, hazards at the work site which may have posed a threat to the Health and Safety of all personnel who were involved with, or were affected by, the decommissioning of the UST system were minimized. All areas which posed, or may have been suspected to pose a vapor hazard were monitored by a qualified individual utilizing an organic vapor analyzer (OVA). The individual ascertained if the area was properly vented to render the area safe, as defined by OSHA.

## 1.4 REMOVAL OF UNDERGROUND STORAGE TANK

### 1.4.1 General Procedures

- All underground obstructions (utilities, etc.) were marked out by the contractor performing the closure prior to excavation activities.
- All activities were carried out with the greatest regard to safety and health and the safeguarding of the environment.
- All excavated soils were visually examined and screened with an OVA for evidence of contamination. Potentially contaminated soils were identified and logged during closure activities.
- Surface materials (i.e., asphalt, concrete, etc.) were excavated and staged separately from all soil and recycled in accordance with all applicable regulations and laws.
- A Sub-Surface Evaluator from the DPW was present during all closure activities.

### 1.4.2 Underground Storage Tank Excavation and Cleaning

Prior to UST decommissioning activities, surficial soil was excavated to expose the UST and associated piping. All free product present in the piping was drained into the UST, and the UST was purged prior to cutting and removal of the piping. After removal of the associated piping, a manway was made in the UST to allow for proper cleaning. The UST was completely emptied of all liquids prior to removal from the ground. Approximately 1,168 gallons of liquid were transported and disposed of by Casie Ecology Oil Salvage, a NJDEP-approved petroleum recycling and disposal company located in Franklinville, New Jersey. Refer to Appendix C for waste manifest (No. NJA-1708445).

The UST was cleaned prior to removal from the excavation in accordance with NJDEP-BUST regulations. After the UST was removed from the excavation, it was staged on polyethylene



sheeting and examined for corrosion holes. Although some erosion was noted on top of the UST, no cracks, punctures or corrosion holes were observed during the inspection by the Sub-Surface Evaluator. Soils surrounding the UST were screened visually and with an OVA for evidence of contamination. No evidence of contamination was noted.

Soil screening was also performed along the piping length from the UST to the fill port. No contamination was noted between the tank and the fill port.

## **1.5 UNDERGROUND STORAGE TANK TRANSPORTATION AND DISPOSAL**

The tank was transported by All Service Environmental Inc., to Mazza and Sons Inc., for recycling in compliance with all applicable regulations and laws. A copy of the UST Disposal Certificate was not available.

The Subsurface Evaluator labeled the UST prior to transport with the following information:

- site of origin
- contact person
- NJDEP UST Facility ID number
- name of transporter/contact person
- destination site/contact person

## **1.6 MANAGEMENT OF EXCAVATED SOILS**

Based on OVA air monitoring and visual observations, no evidence of contamination was noted during excavation of soils surrounding UST No. 0192477-4. Therefore, all excavated soils were used as backfill following removal of the UST.

## **2.0 SITE INVESTIGATION ACTIVITIES**

### **2.1 OVERVIEW**

The Site Investigation was managed and carried out by U.S. Army DPW personnel. All analyses were performed and reported by U.S. Army Fort Monmouth Environmental Laboratory, a NJDEP-certified testing laboratory. All sampling was performed under the direct supervision of a NJDEP Certified Sub-Surface Evaluator according to the methods described in the NJDEP Field Sampling Procedures Manual (1992). Sampling frequency and parameters analyzed complied with the NJDEP-BUST document *"Interim Closure Requirements for Underground Storage Tank Systems"* (September 1990 and revisions dated November 1, 1991) which was the applicable regulation at the date of the closure. All records of the Site Investigation activities are maintained by the Fort Monmouth DPW Environmental Office.

The following Parties participated in Closure and Site Investigation Activities.

- Closure Contractor: All Service Environmental, Inc.  
Contact Person: Mark Turoff  
Phone Number: (914) 365-0800  
NJDEP Company Certification No.: G3100194
- Subsurface Evaluator: Charles Appleby  
Employer: U.S. Army, Fort Monmouth  
Phone Number: (908) 532-6224  
NJDEP Certification No.: 002056
- Analytical Laboratory: U.S. Fort Monmouth Environmental Laboratory  
Contact Person: Brian K. McKee  
Phone Number: (908) 532-4359  
NJDEP Company Certification No.: 13461
- Hazardous Waste Hauler: Casie Ecology Oil Salvage  
Contact Person: Greg Call  
Phone Number: (609) 696-4401  
NJDEP Company Certification No.: S6747

### **2.2 FIELD SCREENING/MONITORING**

Field screening was performed by a NJDEP Certified Sub-Surface Evaluator using an OVA and visual observations to identify potentially contaminated material. Soil excavated from around the tank and appurtenant piping, as well as the UST excavation sidewalls and bottom, were found to be free of potential contamination.

## 2.3 SOIL SAMPLING

On July 8, 1993, following removal of the UST, post-excavation samples A, B, C, D, E, F, G, H, I, J, and DUP A were collected from a total of ten (10) locations along the base and sidewalls of the UST excavation. Two (2) soil samples (samples A, and B) were collected immediately below the former location of piping associated with the UST. All samples were analyzed for TPHC. Because none of the samples exhibited a TPHC concentration exceeding 1,000 milligrams per kilogram (mg/kg), none were analyzed for volatile organic compounds with a forward library search for 10 tentatively identified compounds (VO+10).

The site assessment was performed by U.S. Army personnel in accordance with the NJDEP *Technical Requirements* and the NJDEP *Field Sampling Procedures Manual*. A summary of sampling activities including parameters analyzed is provided on Table 1. The samples were collected using decontaminated stainless steel scoops. Following soil sampling activities, the samples were chilled and delivered to U.S. Fort Monmouth Environmental Laboratory located in Fort Monmouth, New Jersey for analysis.

TABLE 1

SUMMARY OF POST-EXCAVATION SAMPLING ACTIVITIES  
BUILDING 8004, WAYSIDE  
FORT MONMOUTH, NEW JERSEY

| Sample ID | Date of Collection | Date Analysis Started | Matrix | Sample Type     | Analytical Parameters (and USEPA Methods)* | Sampling Method       |
|-----------|--------------------|-----------------------|--------|-----------------|--------------------------------------------|-----------------------|
| A         | 7/8/93             | 7/9/93                | Soil   | Post-Excavation | TPHC                                       | Stainless Steel Scoop |
| B         | 7/8/93             | 7/9/93                | Soil   | Post-Excavation | TPHC                                       | Stainless Steel Scoop |
| C         | 7/8/93             | 7/9/93                | Soil   | Post-Excavation | TPHC                                       | Stainless Steel Scoop |
| D         | 7/8/93             | 7/9/93                | Soil   | Post-Excavation | TPHC                                       | Stainless Steel Scoop |
| E         | 7/8/93             | 7/9/93                | Soil   | Post-Excavation | TPHC                                       | Stainless Steel Scoop |
| F         | 7/8/93             | 7/9/93                | Soil   | Post-Excavation | TPHC                                       | Stainless Steel Scoop |
| G         | 7/8/93             | 7/9/93                | Soil   | Post-Excavation | TPHC                                       | Stainless Steel Scoop |
| H         | 7/8/93             | 7/9/93                | Soil   | Post-Excavation | TPHC                                       | Stainless Steel Scoop |
| I         | 7/8/93             | 7/9/93                | Soil   | Post-Excavation | TPHC                                       | Stainless Steel Scoop |
| J         | 7/8/93             | 7/9/93                | Soil   | Post-Excavation | TPHC                                       | Stainless Steel Scoop |
| DUP A     | 7/8/93             | 7/9/93                | Soil   | Post-Excavation | TPHC                                       | Stainless Steel Scoop |

\* TPHC Total Petroleum Hydrocarbons (Method 418.1 / soil and aqueous)

BCM Engineers Inc. ( BCM Project No. 09-5004-01)

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### **3.0 CONCLUSIONS AND RECOMMENDATIONS**

#### **3.1 SOIL SAMPLING RESULTS**

To evaluate soil conditions following removal of the UST and associated piping, post-excavation soil samples were collected from a total of ten (10) locations on July 8, 1993, and analyzed for TPHC. The post-excavation soil sampling results were compared to the NJDEP residential direct contact total organic contaminants soil cleanup criteria of 10,000 mg/kg (N.J.A.C. 7:26D and revisions dated February 3, 1994). A summary of the analytical results and comparison to the NJDEP soil cleanup criteria is provided on Table 2, and the soil sampling results are shown on Figure 3. The analytical data package summary is provided in Appendix D. The full data package, including associated quality control data, is on file at the U.S. Army Fort Monmouth, DPW.

All samples collected from the UST excavation and from below piping associated with the UST, contained TPHC concentrations below the NJDEP Soil Cleanup Criteria. Sample B contained a TPHC concentration of 93 mg/kg, sample D contained a TPHC concentration of 5.5 mg/kg, and all other samples contained TPHC at non-detectable concentrations.

#### **3.2 CONCLUSIONS AND RECOMMENDATIONS**

The analytical results for all post-excavation soil samples collected from the UST No. 192477-4 closure excavation at Building 8004 were below the NJDEP soil cleanup criteria for total organic contaminants.

Based on the post-excavation soil sampling results, soils with concentrations exceeding the NJDEP soil cleanup criteria of 10,000 mg/kg, do not remain in the former location of the UST or associated piping.

No further action is proposed in regard to the closure and site assessment of UST No. 192477-4 at Building 8004.



TABLE 2

POST-EXCAVATION SOIL SAMPLING RESULTS  
 BUILDING 8004, WAYSIDE  
 FT. MONMOUTH, NEW JERSEY

| Sample ID/Depth | Sample Laboratory ID | Sample Date | Analysis Date | Analytical Method Used | Sample Quantitation Limit (mg/kg) | Compound of Concern | Result (mg/kg) * | NJDEP Soil Cleanup Criteria ** (mg/kg) | Exceeds Cleanup Criteria |
|-----------------|----------------------|-------------|---------------|------------------------|-----------------------------------|---------------------|------------------|----------------------------------------|--------------------------|
| A/3.5-4.0'      | 1238.1               | 7-08-93     | 7-09-93       | Total Solid            | --                                | --                  | 98%              | --                                     | --                       |
|                 |                      |             |               | TPHC                   | 3.3                               | yes                 | ND               | 10,000                                 | --                       |
| B/6.5-7.0'      | 1238.2               | 7-08-93     | 7-09-93       | Total Solid            | --                                | --                  | 92%              | --                                     | --                       |
|                 |                      |             |               | TPHC                   | 3.3                               | yes                 | 93.0             | 10,000                                 | --                       |
| C/3.5-4.0'      | 1238.3               | 7-08-93     | 7-09-93       | Total Solid            | --                                | --                  | 88%              | --                                     | --                       |
|                 |                      |             |               | TPHC                   | 3.3                               | yes                 | ND               | 10,000                                 | --                       |
| D/6.5-7.0'      | 1238.4               | 7-08-93     | 7-09-93       | Total Solid            | --                                | --                  | 90%              | --                                     | --                       |
|                 |                      |             |               | TPHC                   | 3.3                               | yes                 | 5.5              | 10,000                                 | --                       |
| E/3.5-4.0'      | 1238.5               | 7-08-93     | 7-09-93       | Total Solid            | --                                | --                  | 89%              | --                                     | --                       |
|                 |                      |             |               | TPHC                   | 3.3                               | yes                 | ND               | 10,000                                 | --                       |
| F/3.5-4.0'      | 1238.6               | 7-08-93     | 7-09-93       | Total Solid            | --                                | --                  | 92%              | --                                     | --                       |
|                 |                      |             |               | TPHC                   | 3.3                               | yes                 | ND               | 10,000                                 | --                       |
| G/6.5-7.0'      | 1238.7               | 7-08-93     | 7-09-93       | Total Solid            | --                                | --                  | 96%              | --                                     | --                       |
|                 |                      |             |               | TPHC                   | 3.3                               | yes                 | ND               | 10,000                                 | --                       |
| H/3.5-4.0'      | 1238.8               | 7-08-93     | 7-09-93       | Total Solid            | --                                | --                  | 90%              | --                                     | --                       |
|                 |                      |             |               | TPHC                   | 3.3                               | yes                 | ND               | 10,000                                 | --                       |
| I/6.5-7.0'      | 1238.9               | 7-08-93     | 7-09-93       | Total Solid            | --                                | --                  | 96%              | --                                     | --                       |
|                 |                      |             |               | TPHC                   | 3.3                               | yes                 | ND               | 10,000                                 | --                       |
| J/3.5-4.0'      | 1238.10              | 7-08-93     | 7-09-93       | Total Solid            | --                                | --                  | 88%              | --                                     | --                       |
|                 |                      |             |               | TPHC                   | 3.3                               | yes                 | ND               | 10,000                                 | --                       |
| DUP A/3.5-4.0'  | 1238.11              | 7-08-93     | 7-09-93       | Total Solid            | --                                | --                  | 98%              | --                                     | --                       |
|                 |                      |             |               | TPHC                   | 3.3                               | yes                 | ND               | 10,000                                 | --                       |

\* Unless noted otherwise

\*\* NJDEP Residential Direct Contact soil cleanup criteria for total organics

-- Not applicable / does not exceed criteria

TPHC Total Petroleum Hydrocarbons



## **APPENDIX A**

### **POST-CLOSURE REGISTRATION LETTER**



NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION  
AND ENERGY

INVOICE NO.  
930785510

NEW JERSEY UNDERGROUND STORAGE TANK PROGRAM  
REGISTRATION INVOICE

| UST No. | Category | Tanks | Billing Date | Due Date | Amount Due           |
|---------|----------|-------|--------------|----------|----------------------|
| 0192477 | ACF      | 3     | 07/15/93     | 08/14/93 | \$ <del>100.00</del> |

275

KEEP THIS PORTION FOR YOUR RECORDS

PLEASE NOTE: Pursuant to N.J.A.C. 7:14-8:10, you may be liable for penalties of up to \$50,000 for non-payment of fees. Any penalty incurred may be recovered in a summary proceeding, N.J.S.A. 58:10A-10.

| TYPE OF NOTICE | REGISTRATION PERIOD | FACILITY: BILLED                                                 | COUNTY   |
|----------------|---------------------|------------------------------------------------------------------|----------|
| FIRST BILLING  | 10/01/93 - 09/30/94 | US ARMY FORT MONMOUTH<br>WAYSIDE AREA<br>FORT MONMOUTH, NJ 07703 | MONMOUTH |

*All UST's Removed. + 1 Found + Removed*

MESSAGES: \*\*\* SEE FEE SCHEDULE ON BACK \*\*\*

*POR - Placed 5/10/93*

*15 x 7 years = 105*  
*1 Removed 170*  
*275*

REMINDER:

- Return the BOTTOM PORTION of this INVOICE with your PAYMENT
- Sign and return the **Annual Certification Questionnaire** Form.
- Mark any changes in the Facility's status on the **ANNUAL CERTIFICATION REGISTRATION QUESTIONNAIRE BLACK BAR** Form and return with your Payment.

Note: If there are no changes, do not return the Form.

- Return the required Forms and Payment via the enclosed envelope.

*100.00*  
*+ 170 for change.*

Send Billing Inquiries to:  
NJDEPE  
Division of Responsible Party Site Remediation  
Bureau of Underground Storage Tanks  
CN 028  
Trenton, NJ 08625-0028

or contact directly at  
(609)-984-3156

INVOICE NO.  
930785510

247511 2 97



**DEPARTMENT OF THE ARMY**  
Headquarters: U.S. Army Garrison Fort Monmouth  
Fort Monmouth, New Jersey 07703-5000



REPLY TO  
ATTENTION OF

Directorate of Engineering  
and Housing

September 15, 1993

New Jersey Department of  
Environmental Protection and Energy  
Bureau of Revenue  
CN 417  
Trenton, NJ 08625 - 0417  
ATTN: Ms. DiClaudio, Bureau of Underground Storage Tanks

Dear Ms. DiClaudio:

Please excuse the lateness of this Annual Certification. As we discussed the UST data currently on file at the NJDEPE may not be complete. I have provided a listing of each UST by facility ID#. Each listing includes the Facility Registration number, Tank ID number, size, contents and current status. The attached registration correction forms contain change in service notifications as well as system modifications.

The following is a summation of the enclosed fees and new registration information:

|                           |                    |    |        |
|---------------------------|--------------------|----|--------|
| Wayside Area-0192477      |                    |    |        |
| Annual Registration       | 0 USTs.....        | \$ | 90.00* |
| New Registrations         | 1 UST.....         |    | 15.00  |
| Closure Fee UST# 4        | 1 Closure Fee..... |    | 170.00 |
| Evans North Area-0192468  |                    |    |        |
| Annual Registration       | 4 USTs.....        | \$ | 100.00 |
| Charles Wood East-0192486 |                    |    |        |
| Annual Registration       | 29 USTs.....       | \$ | 280.00 |

\* indicates a facility which has had the USTs removed. An additional UST was found and removed at the site. If the correct fee is \$100.00 please credit the excess \$5.00 to the Charles Wood East Facility. If the correct fee is \$15.00 please credit the excess \$90.00 to the Charles Wood East Facility.

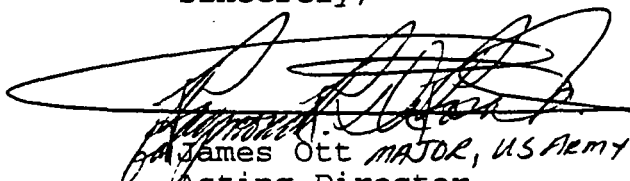
The Site Assessment Report for the new UST registration has been given the number 0192477-04 and will be forwarded to the Division of Responsible Party Site Remediation as soon as it is completed. An Annual Certification Registration Questionnaire for the Facility has been completed and is attached.

At the time of initial registration, Fort Monmouth provided your department with several detailed maps of each of the above referenced areas located at Fort Monmouth. Each of those detailed maps indicates all building locations (by number) located at Fort Monmouth.

To identify any specific UST, correlate the corresponding building number located in the inventory with the building number on the detailed area map. Due to the complexity of our facility's registrations, we have developed and are currently using this system for locating and managing our USTs.

If the information provided in this enclosure is inadequate or you require further information with regard to any UST activities please contact Mr. Charles Appleby, Environmental Protection Specialist, at (908) 532-6224.

Sincerely,

A handwritten signature in black ink, appearing to read 'James Ott', is written over a horizontal line.

James Ott MAJOR, US ARMY  
Acting Director  
Directorate of Engineering and  
Housing

**State of New Jersey**  
**DEPARTMENT OF ENVIRONMENTAL PROTECTION AND ENERGY**  
**DIVISION OF RESPONSIBLE PARTY SITE REMEDIATION**  
**BUREAU OF APPLICABILITY AND COMPLIANCE**  
**Registration and Billing Section**  
**CN 028**  
**Trenton, N.J. 08625-0028**  
**1-800-722-TANK**

**For State Use Only:**

|          | YES | NO |
|----------|-----|----|
| Ck.      |     |    |
| A/C      |     |    |
| Inv.     |     |    |
| R/F      |     |    |
| Sp. Hnd. |     |    |
| Staff    |     |    |

# Annual Certification Questionnaire

Compliance with this Annual Certification will meet all requirements of State Law P.L. 1986, c. 102, The Underground Storage of Hazardous Substances Act (N.J.S.A. 58:10A-21) and the Underground Storage Tank Regulations (N.J.A.C. 7:14B-1 through 15).

## IMPORTANT INFORMATION

- FEE:** The Fee Schedule is printed on the reverse side of the billing invoice. Please make your payment instrument payable to: "Treasurer", State of New Jersey. Use of the enclosed return envelope will expedite processing.
- PENALTY:** Failure by owner or operator of a regulated underground storage tank to comply with any requirement of the State UST Act or regulations may result in the penalties set forth in N.J.S.A. 58:10A-10.
- EMERGENCY:** If a discharge or spill occurs, the NJDEPE Hotline at (609) 292-7172 must be called IMMEDIATELY - 24 hours a day.
- UPGRADE**
- EXEMPTION:** Residential heating oil underground storage tanks are exempt from all upgrade requirements.

## DATES TO KNOW (critical deadlines)

- December 22, 1989 - All federally regulated tank systems installed before 1965 (or of unknown age) must have installed leak detection.
- December 22, 1990 - All federally regulated tank systems installed between 1965-1969 must have installed leak detection.
- December 22, 1991 - All federally regulated tank systems installed between 1969-1974 must have installed leak detection.
- December 22, 1992 - All federally regulated tank systems installed between 1974-1979 must have installed leak detection.
- December 22, 1993 - All regulated tanks must install cathodic protection, monitoring systems and, spill/overfill protection (non-residential heating oil tanks excluded).
- August 6, 1994 - All non-residential heating oil tanks installed prior to August 6, 1974 must install cathodic protection, monitoring systems, and spill/overfill protection.
- August 6, 1995 - All non-residential heating oil tanks installed on or after August 6, 1974 must install cathodic protection, monitoring systems, and spill/overfill protection.
- December 22, 1998 - All regulated hazardous waste substance systems must have secondary containment (petroleum products and waste oil tank systems excluded).

## SECTION A

## REGISTRATION & BILLING

Have there been any changes to this facility's registration status during the last twelve months that have not been reported to this office?

☒ YES ☐ NO

If YES, please check the appropriate type of change(s) below and complete the enclosed REGISTRATION QUESTIONNAIRE (black bar on face of the form) with NEW information ONLY. Then, complete the remainder of this form and submit to this office.

- ☐ Company Name and Address
- ☐ Facility Location
- ☐ Operator
- ☐ Contact Person
- ☐ Type of Product(s) Stored
- ☐ Spills, accidents, leaks or releases
- ☐ Substantial Modification(s)

PLEASE  
USE  
REGISTRATION FORM  
WITH BLACK BAR AT THE TOP  
FOR  
REPORTING  
THIS INFORMATION

☒ Other (please specify)

modification - Change to site

If NO, please complete the remainder of this form and return to this office.

## SECTION B

## MONITORING SYSTEMS

1. Does this facility have a secondary containment system which was installed before the effective date of the UST Technical regulations?
- ☐ YES ☒ NO
- If Yes, does the secondary containment system comply with all provisions of these regulations?
- ☐ YES ☐ NO
2. Does this facility have a monitoring system which is in compliance with N.J.A.C. 7:14B-4.5(e) (for systems installed prior to the effective date of these regulations) or N.J.A.C. 7:14B-6 (for systems installed after the effective date of these regulations)?
- ☒ YES ☐ NO
- If No, please be aware that the facility must meet the appropriate deadline. (See Dates to Know at top of this page).
3. Does this facility have an UST system installed prior to 1965 or of unknown age?
- ☐ YES ☒ NO
- If Yes, has the facility installed a leak detection system that complies with all provisions of the Federal UST Technical Regulations 40 CFR 280.40?
- ☐ YES ☐ NO
- If No, were the closure procedures completed as required by the Federal UST Technical Regulations 40 CFR 280.71, 72?
- ☒ YES ☐ NO

**SECTION C****RECORDKEEPING/COMPLIANCE**

Please answer all the questions in this Section on a facility basis. Any one tank not in compliance requires a "NO" answer for the entire facility.

1. Does this facility have cathodic protection systems?

☐ YES ☒ NO

If Yes, are the systems properly operated and maintained as required by the UST Technical Regulations Subchapter 6.6?

☐ YES ☐ NO

2. Are the performance claims and documentation of monitoring systems maintained by the owner or operator as required by Subchapter 6.6?

☒ YES ☐ NO

3. Are the proper monitoring, testing, sampling, repair and inventory records kept on-site as required by Subchapter 6.6?

☒ YES ☐ NO

4. Is the proper Release Response Plan kept on-site per Subchapter 5.5?

☒ YES ☐ NO

5. Does the facility have spill and overfill protection systems per Subchapter 5.2(a) (5)?

☒ YES ☐ NO

If yes, are they properly operated and maintained as required by the UST Technical Regulations?

☒ YES ☐ NO

6. Have all Fill Ports been permanently marked as per API #1637 as stated in Subchapter 4.5(h)?

☒ YES ☐ NO

**SECTION D****FINANCIAL RESPONSIBILITY**

All facilities are required to obtain financial responsibility assurance by the deadlines listed in Subchapter 14. Please list the appropriate financial information below:

Type

Carrier/Issuing agency

Date Effective

Policy Number

\$ Amount

**CERTIFICATIONS**

Who must sign?

**CERTIFICATION NO. 1:**

Must be signed by the highest ranking individual at the facility with overall responsibility

**CERTIFICATION NO. 2:**

Must be signed as follows

- : For corporations, by the vice president or higher
- : For sole proprietorships, by the proprietor
- : For partnerships, by the general partner
- : For government or public agency, by the principal executive officer or ranking official

NOTE: IF THE PERSON SIGNING CERTIFICATION No. 2 IS THE SAME AS THE PERSON SIGNING CERTIFICATION No. 1, THEN CERTIFICATION No. 1 ONLY NEEDS TO BE SIGNED. (If different persons are required to sign No. 1 and No. 2, then they must do so.)

No. 1

"I certify under penalty of law that the information provided in this document is true, accurate and complete. I am aware that there are significant civil and criminal penalties for submitting false, inaccurate or incomplete information, including fines and/or imprisonment."

(Signature)

(Typed/Printed Name)

(Title)

(Date Signed)

0192486 - Charles Wood East AREA  
0192477 - WAYSIDE AREA  
0192468 - EVANS NORTH AREA

(UST Number)

UST-017 (12/91)

No. 2

"I certify under penalty of law that I have personally examined and am familiar with the information submitted in this transmittal and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate and complete. I am aware that there are significant civil and criminal penalties for submitting false, inaccurate or incomplete information, including the possibility of fines and/or imprisonment."

(Signature)

(Typed/Printed Name)

(Title)

(Date Signed)

# State of New Jersey

## DEPARTMENT OF ENVIRONMENTAL PROTECTION AND ENERGY

### DIVISION OF RESPONSIBLE PARTY SITE REMEDIATION

CN 028

Trenton, N.J. 08625-0028

FOR STATE USE ONLY

UST #

YES NO

CK. IN.

☐

☐

AMT.

☐

☐

AUTH.

☐

☐

SP. ROUTE

☐

☐

SITE PLN.

☐

☐

SIGN.

☐

☐

COMCODE:

☐

### \*\*\* ANNUAL CERTIFICATION \*\*\*

### UNDERGROUND STORAGE TANK REGISTRATION QUESTIONNAIRE

Bureau of Applicability and Compliance  
Registration and Billing Section  
1-800-722-TANK

Use this form ONLY when submitting corrections/changes to registration at Annual Certification

#### General Facility Information

1. Facility Name U.S. ARMY FORT MONMOUTH

2. Facility Location WABIDE

FORT MONMOUTH NUMBER AND STREET

MONMOUTH CITY OR MUNICIPALITY

NJ STATE 07703 ZIP CODE

07703 COUNTY

3. Owner's mailing address: DEH BLDG 167

FORT MONMOUTH NUMBER AND STREET

MONMOUTH CITY OR MUNICIPALITY

NJ STATE 07703 ZIP CODE

07703 COUNTY

4. Owner's name: U.S. ARMY

5. Contact person (Facility Operator) DINKER RAI DESAI

6. Contact telephone number: 908 AREA CODE 532 PERSON OR TITLE 1475 NUMBER

7. Total number of facility underground storage tanks

☐

(Complete Questions 12 thru 32 for each tank)

8. Total facility underground storage tank capacity (gallons)

☐

9. Status of owner: (mark one)

A. ☐ CURRENT B. ☐ FORMER

10. Type of owner A. ☐ State B. ☐ Commercial C. ☐ Local D. ☒ Federal E. ☐ Charitable F. ☐ Residence G. ☐ Ownership (mark one) or Public School Uncertain

11a. Two copies of a site plan are submitted with this registration A. ☐ YES B. ☐ NO

Submit two (2) copies of SITE PLAN showing facility or property boundary, buildings and the location of ALL underground storage tanks. EITHER, an existing engineering site plan, if available, OR a neat and legible hand-drawn sketch of the site may be submitted. In either case the site plan or sketch MUST show the location and distances that tanks, buildings, and dispensers are from the facility's property boundary. Include all tanks that are: E (existing/in use), P (empty), M (emergency), A (abandoned), C (other). Each underground tank on the site plan or sketch shall be numbered in accordance with the instructions for question 12. The number assigned to a tank on the site plan or sketch MUST match and be identical to the tank identification number assigned to that tank on this form.

INCLUDE FACILITY NAME, OWNER'S NAME, FACILITY ADDRESS AND TELEPHONE NUMBER ON ALL SITE PLANS.

11b. Do you have financial responsibility assurance? ☐ YES ☐ NO

(Type)

(Company/Carrier)

(Policy Number)

(Expiration Date)



### SPECIFIC TANK INFORMATION

|                                                          | TANK NO.                                                                | TANK NO.                                          | TANK NO.                                          | TANK NO.                                          | TANK NO.                                          |
|----------------------------------------------------------|-------------------------------------------------------------------------|---------------------------------------------------|---------------------------------------------------|---------------------------------------------------|---------------------------------------------------|
| 12. Tank Identification number:                          | 0009                                                                    | 0000                                              | 0000                                              | 0000                                              | 0000                                              |
| 13. CAS number (hazardous substances only)               | 00000000                                                                | 00000000                                          | 00000000                                          | 00000000                                          | 00000000                                          |
| 14. Tank age (years)                                     | 00                                                                      | 00                                                | 00                                                | 00                                                | 00                                                |
| 15. Tank size (gallons)                                  | 1,000                                                                   | 0000                                              | 0000                                              | 0000                                              | 0000                                              |
| 16. Tank contents (MARK ONE X)                           |                                                                         |                                                   |                                                   |                                                   |                                                   |
| A. Leaded gasoline                                       | <input type="checkbox"/>                                                | <input type="checkbox"/>                          | <input type="checkbox"/>                          | <input type="checkbox"/>                          | <input type="checkbox"/>                          |
| B. Unleaded gasoline                                     | <input type="checkbox"/>                                                | <input type="checkbox"/>                          | <input type="checkbox"/>                          | <input type="checkbox"/>                          | <input type="checkbox"/>                          |
| C. Alcohol enriched gasoline                             | <input type="checkbox"/>                                                | <input type="checkbox"/>                          | <input type="checkbox"/>                          | <input type="checkbox"/>                          | <input type="checkbox"/>                          |
| D. Light diesel fuel (No. 1-D)                           | <input type="checkbox"/>                                                | <input type="checkbox"/>                          | <input type="checkbox"/>                          | <input type="checkbox"/>                          | <input type="checkbox"/>                          |
| E. Medium diesel fuel (No. 2-D)                          | <input type="checkbox"/>                                                | <input type="checkbox"/>                          | <input type="checkbox"/>                          | <input type="checkbox"/>                          | <input type="checkbox"/>                          |
| F. Waste oil                                             | <input type="checkbox"/>                                                | <input type="checkbox"/>                          | <input type="checkbox"/>                          | <input type="checkbox"/>                          | <input type="checkbox"/>                          |
| G. Kerosene (No. 1)                                      | <input type="checkbox"/>                                                | <input type="checkbox"/>                          | <input type="checkbox"/>                          | <input type="checkbox"/>                          | <input type="checkbox"/>                          |
| H. Home heating oil (No. 2)                              | <input checked="" type="checkbox"/>                                     | <input type="checkbox"/>                          | <input type="checkbox"/>                          | <input type="checkbox"/>                          | <input type="checkbox"/>                          |
| J. Heating oil (No. 4)                                   | <input type="checkbox"/>                                                | <input type="checkbox"/>                          | <input type="checkbox"/>                          | <input type="checkbox"/>                          | <input type="checkbox"/>                          |
| K. Heavy heating oil (No. 6)                             | <input type="checkbox"/>                                                | <input type="checkbox"/>                          | <input type="checkbox"/>                          | <input type="checkbox"/>                          | <input type="checkbox"/>                          |
| L. Aviation fuel                                         | <input type="checkbox"/>                                                | <input type="checkbox"/>                          | <input type="checkbox"/>                          | <input type="checkbox"/>                          | <input type="checkbox"/>                          |
| M. Hazardous substances (please specify)                 |                                                                         |                                                   |                                                   |                                                   |                                                   |
| N. Motor oil                                             | <input type="checkbox"/>                                                | <input type="checkbox"/>                          | <input type="checkbox"/>                          | <input type="checkbox"/>                          | <input type="checkbox"/>                          |
| P. Lubricating Oil                                       | <input type="checkbox"/>                                                | <input type="checkbox"/>                          | <input type="checkbox"/>                          | <input type="checkbox"/>                          | <input type="checkbox"/>                          |
| Q. Sewage                                                | <input type="checkbox"/>                                                | <input type="checkbox"/>                          | <input type="checkbox"/>                          | <input type="checkbox"/>                          | <input type="checkbox"/>                          |
| R. Sewage sludge                                         | <input type="checkbox"/>                                                | <input type="checkbox"/>                          | <input type="checkbox"/>                          | <input type="checkbox"/>                          | <input type="checkbox"/>                          |
| S. Hazardous waste (specify ID number)                   |                                                                         |                                                   |                                                   |                                                   |                                                   |
| T. Industrial wastewater                                 | <input type="checkbox"/>                                                | <input type="checkbox"/>                          | <input type="checkbox"/>                          | <input type="checkbox"/>                          | <input type="checkbox"/>                          |
| U. Mineral spirits                                       | <input type="checkbox"/>                                                | <input type="checkbox"/>                          | <input type="checkbox"/>                          | <input type="checkbox"/>                          | <input type="checkbox"/>                          |
| V. Mixtures (please specify)                             |                                                                         |                                                   |                                                   |                                                   |                                                   |
| W. Emergency spill tank (specify substance)              |                                                                         |                                                   |                                                   |                                                   |                                                   |
| X. Other petroleum products (please specify)             |                                                                         |                                                   |                                                   |                                                   |                                                   |
| Y. Other (please specify)                                |                                                                         |                                                   |                                                   |                                                   |                                                   |
| 17. Tank and piping construction (MARK ALL THAT APPLY X) | Tank Piping                                                             | Tank Piping                                       | Tank Piping                                       | Tank Piping                                       | Tank Piping                                       |
| A. Bare steel                                            | <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> |
| B. Carbon steel                                          | <input type="checkbox"/> <input type="checkbox"/>                       | <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> |
| C. Galvanized steel                                      | <input type="checkbox"/> <input type="checkbox"/>                       | <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> |
| D. Coated steel                                          | <input type="checkbox"/> <input type="checkbox"/>                       | <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> |
| E. Iron (cast or ductile)                                | <input type="checkbox"/> <input type="checkbox"/>                       | <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> |
| F. Cathodically protected steel                          | <input type="checkbox"/> <input type="checkbox"/>                       | <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> |
| G. Fiberglass-coated steel                               | <input type="checkbox"/> <input type="checkbox"/>                       | <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> |
| H. Other metallic (please specify)                       |                                                                         |                                                   |                                                   |                                                   |                                                   |
| J. Fiberglass-reinforced plastic                         | <input type="checkbox"/> <input type="checkbox"/>                       | <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> |
| K. Other non-metallic (please specify)                   |                                                                         |                                                   |                                                   |                                                   |                                                   |
| L. Other (please specify)                                |                                                                         |                                                   |                                                   |                                                   |                                                   |
| 18. Tank and piping structure (MARK ALL THAT APPLY X)    | Tank Piping                                                             | Tank Piping                                       | Tank Piping                                       | Tank Piping                                       | Tank Piping                                       |
| A. Single wall                                           | <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> |
| B. Double wall                                           | <input type="checkbox"/> <input type="checkbox"/>                       | <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> |
| C. Manway in tank                                        | <input type="checkbox"/>                                                | <input type="checkbox"/>                          | <input type="checkbox"/>                          | <input type="checkbox"/>                          | <input type="checkbox"/>                          |
| 19. Internal tank and piping lining (MARK ONE X)         | Tank Piping                                                             | Tank Piping                                       | Tank Piping                                       | Tank Piping                                       | Tank Piping                                       |
| A. YES (please specify type of material)                 |                                                                         |                                                   |                                                   |                                                   |                                                   |
| B. None                                                  | <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> |



TANK NO. 1

TANK NO. 2

TANK NO. 3

TANK NO. 4

TANK NO. 5

Tank I D. No.

10 3 4

10 3 4

10 3 4

10 3 4

10 3 4

## 27. Tank status (MARK ONE X)

|                                                 |                          |                          |                          |                          |                          |
|-------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| A. In-use                                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| † B. Empty less than 12 months :                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| † C. Empty 12 months or more :                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| † D. Emergency spill tank (sump)                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| † E. Abandoned, in place, filled and sealed     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| F. Other (please specify) <i>Removed 7/1/93</i> |                          |                          |                          |                          |                          |

## 28. Spill recovery system on-site (MARK ONE X)

|        |                                     |                          |                          |                          |                          |
|--------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| A. Yes | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B. No  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

## 29. Overfill protection (tank only) (MARK ONE X)

|        |                                     |                          |                          |                          |                          |
|--------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| A. Yes | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B. No  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

## 30. Spill containment around fill pipe (MARK ONE X)

|        |                                     |                          |                          |                          |                          |
|--------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| A. Yes | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B. No  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

† If boxes 27 B, C, D, E above have been answered – answer questions 31 and 32 below.

## 31. Substance last used in tank (MARK ONE X)

|                                              |                          |                          |                          |                          |                          |
|----------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| A. Leaded gasoline                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B. Unleaded gasoline                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| C. Alcohol enriched gasoline                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| D. Light diesel fuel (No. 1-D)               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| E. Medium diesel fuel (No. 2-D)              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| F. Waste oil                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| G. Kerosene (No. 1)                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| H. Home heating oil (No. 2)                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| J. Heating oil (No. 4)                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| K. Heavy heating oil (No. 6)                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| L. Aviation fuel                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| M. Hazardous substances (per Fact Sheet)     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| N. Motor oil                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| P. Lubricating Oil                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Q. Sewage                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| R. Sewage sludge                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| S. Hazardous waste (specify ID number)       |                          |                          |                          |                          |                          |
| T. Industrial wastewater                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| U. Mineral spirits                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| V. Mixtures (please specify)                 |                          |                          |                          |                          |                          |
| W. Emergency spill tank (specify substance)  |                          |                          |                          |                          |                          |
| X. Other petroleum products (please specify) |                          |                          |                          |                          |                          |
| Y. Other (please specify)                    |                          |                          |                          |                          |                          |

## 32. Estimated date last used (month/year)

Mo. Yr.

Mo. Yr.

Mo. Yr.

Mo. Yr.

Mo. Yr.

## OWNER OR OPERATOR CERTIFICATION

"I certify under penalty of law that the information provided in this document is true, accurate and complete. I am aware that there are significant civil and criminal penalties for submitting false, inaccurate or incomplete information, including fines and/or imprisonment."

*James OTT*  
 (SIGNATURE)  
 Mr. James OTT Asst. Dir. Directorate of Env. r.  
 (PRINT OR TYPE NAME)

21 SEP  
 (DATE)

(TITLE)

08/11/93

US ARMY FORT MONMOUTH  
NJDEPE REGISTRATI

Wayside AR

NJDEPE FACILITY  
REGISTRATION #

NJDEPE  
UST #

SIZE CONTENTS  
GAL.

CURRENT  
STATUS  
IU-IN USE  
NIU-NOTIU

|        |   |                  |
|--------|---|------------------|
| 192477 | 1 | 1000 #2 FUEL OIL |
| 192477 | 2 | 550 #2 FUEL OIL  |
| 192477 | 3 | 550 #2 FUEL OIL  |
| 192477 | 4 | 4000 #2 FUEL OIL |

REMOVED 7/8/93  
REMOVED 7/8/93  
REMOVED 7/8/93  
REMOVED 7/8/93

|                            |  |                                 |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                        |  |
|----------------------------|--|---------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| SAI REQUESTION #<br>707662 |  | SAI ACCOUNT #<br>5099 0750      |  | <input type="checkbox"/> This Purchase Order is issued on behalf of the U.S. Government under prime contract # DAAB07-91-C-B517.<br>This Purchase Order is a Government rated order, certified for National Defense use, you are required to follow all the provisions of the Defense Priorities and allocations system regulation (15CFR Part 350) DPAS Rating DO A7.<br><br><input type="checkbox"/> This Purchase order is issued for Serv-Air use. |  | PURCHASE ORDER NO.<br>R3-2512<br><br>BILL TO:<br><b>E-Systems Inc./Serv-Air</b><br><b>P. O. Box 360</b><br><b>Fort Monmouth, N.J. 07703</b><br><b>Tel. (908) 542-5990</b><br><b>Fax (908) 542-5994</b> |  |
| SHIP VIA<br>AIR MAIL       |  | MARK PACKAGES P.O. #<br>R3-2512 |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | SHIP TO:<br><br><b>E-Systems Inc./Serv-Air</b><br><b>Bldg. 480</b><br><b>Fort Monmouth, N.J. 07703</b>                                                                                                 |  |
| F.O.B.<br>WEST             |  | TERMS<br>PREPAY                 |  | S/L/D                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                                                                                                                                        |  |
| REFERENCE                  |  |                                 |  | VENDOR ADDRESS:<br>STATE OF NJ, NJDEP 922000005<br>BUREAU OF REVENUE<br>CN417<br>TRENTON NJ 08625 0417                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                                                                                                                                        |  |

| SHIP DATE | QUANTITY | UM | PART NUMBER | FMC | DESCRIPTION  | UNIT PRICE | AMOUNT |
|-----------|----------|----|-------------|-----|--------------|------------|--------|
| 9/30/93   | 7EA      |    | 0912477-4   |     | REGISTRATION | 15.00      | 105.00 |
| 9/30/93   | 1EA      |    | 0192477-4   |     | REMOVAL      | 170.00     | 170.00 |

**SERV-AIR, INC.**  
 An E-SYSTEMS Company  
 P.O. BOX 1669 Greenville, Texas 75401-1669

NationsBank of North Carolina  
 Asheville, North Carolina

66-798  
 531

A-145110

CHECK NUMBER  
 A-145110

AMOUNT  
 \$275.00

DATE  
 8-24-93

PAY \$\*\*\*\*\*\$275 and 00/cents\*\*\*\*\*\$275.00\*\*\*\*\*

IN FULL SETTLEMENT OF ITEMS LISTED ON REMITTANCE ADVICE

State of N.J. NJDEP  
 Bureau of Revenue  
 CN 417  
 Trenton, NJ 08625-0417

*mk Bent*

(COUNTER SIGNATURE NOT REQUIRED ON CHECKS UNDER \$5,000)

TOTAL 275.00

⑈0145110⑈ ⑆053107989⑆ 485000111⑈

THIS IS A FIRM FIXED PRICE PURCHASE ORDER UNLESS OTHERWISE NOTED  
 The Purchase Order and all the rights and obligations of the Buyer and Seller  
 hereunder shall be governed by the State of New Jersey.

Show purchase order number/call number on packing list.

2. Discounts are computed from date acceptable invoice is received by Accounting Dept.

ABOVE INSTRUCTIONS AND CONDITIONS ON REVERSE SIDE OF THIS ORDER ARE PART OF THIS ORDER TO WHICH SELLER AGREES BY ACCEPTANCE OF THIS ORDER

☐ Serv-Air Exemption Certificate # 75-1425564-001 applies to this order.

5696

THIS PURCHASE ORDER (A) BECOMES A BINDING CONTRACT ON TERMS SET FORTH HEREIN WHEN IT IS ACCEPTED EITHER BY ACKNOWLEDGMENT, COMMENCEMENT OF EFFORT/OR DELIVERY (B) IS THE ENTIRE CONTRACT, AND NO CHANGES ARE BINDING ON BUYER UNLESS EVIDENCED BY THE BUYER'S DULY EXECUTED PURCHASE ORDER/CHANGE NOTICE SIGNED BY BUYERS AUTHORIZED REPRESENTATIVE

BY *Barbara Steele*

**SMITH**

**APPENDIX B**  
**CERTIFICATIONS**



UST # \_\_\_\_\_  
Date Rec'd \_\_\_\_\_  
TMS # \_\_\_\_\_  
Staff \_\_\_\_\_

State of New Jersey  
Department of Environmental Protection and Energy  
Division of Responsible Party Site Remediation  
CN 029  
Trenton, NJ 08625-0029  
Tel. # 609-984-3156  
Fax. # 609-292-5604

Scott A. Weiner  
Commissioner

Karl J. Delaney  
Director

**UNDERGROUND STORAGE TANK  
SITE ASSESSMENT SUMMARY**

*Under the provisions of the Underground Storage  
of Hazardous Substances Act  
in accordance with N.J.A.C. 7:14B*

This Summary form shall be used by all owners and operators of Underground Storage Tank Systems (USTS) who have either reported a release and are subject to the site assessment requirements of N.J.A.C. 7:14B-8.2 or who have closed USTS pursuant to N.J.A.C. 7:14B-9.1 et seq. and are subject to the site assessment requirements of N.J.A.C. 7:14B-9.2 and 9.3.

**INSTRUCTIONS:**

- Please print legibly or type.
- Fill in all applicable blanks. This form will require various attachments in order to complete the Summary. The technical guidance document, Interim Closure Requirements for UST's, explains the regulatory (and technical) requirements for closure and the Scope of Work, Investigation and Corrective Action Requirements for Discharges from Underground Storage Tanks and Piping Systems explains the regulatory (and technical) requirements for corrective action.
- Return one original of the form and all required attachments to the above address.
- Attach a scaled site diagram of the subject facility which shows the information specified in Item IV B of this form.
- Explain any "No" or "N/A" response on a separate sheet.

26 JUL 1995

Date of Submission \_\_\_\_\_

Building 8004

00192477-4  
FACILITY REGISTRATION #

I. FACILITY NAME AND ADDRESS

U.S. Army Fort Monmouth New Jersey  
Directorate of Engineering and Housing Building 167  
Fort Monmouth New Jersey 07703 County Monmouth  
Telephone No. 908-532-6224

OWNER'S NAME AND ADDRESS, if different from above

Telephone No. \_\_\_\_\_

## II. DISCHARGE REPORTING REQUIREMENTS

A. Was contamination found? ☐ Yes ☒ No If Yes, Case No. \_\_\_\_\_  
(Note: All discharges must be reported to the Environmental Action Hotline (609) 292-7172)

B. The substance(s) discharged was(were) N/A

C. Have any vapor hazards been mitigated? ☐ Yes ☐ No ☒ N/A

## III. DECOMMISSIONING OF TANK SYSTEMS

Closure Approval No. Emergency Removal

The site assessment requirements associated with tank decommissioning are explained in the Technical Guidance Document, Interim Closure Requirements for UST's, Section V. A-D. Attach complete documentation of the methods used and the results obtained for each of the steps of tank decommissioning used. Please include a site map which shows the locations of all samples and borings, the location of all tanks and piping runs at the facility at the beginning of the tank closure operation and annotated to differentiate the status of all tanks and piping (e.g., removed, abandoned, temporarily closed, etc.). The same site map can be used to document other parts of the site assessment requirements, if it is properly and legibly annotated.

## IV. SITE ASSESSMENT REQUIREMENTS

### A. Excavated Soil

Any evidence of contamination in excavated soil will require that the soil be classified as either Hazardous Waste or Non-Hazardous Waste. Please include all required documentation of compliance with the requirements for handling contaminated excavated soil (if any was present) as explained in the technical guidance documents for closure and corrective action. Describe amount of soil removed, its classification, and disposal location.

### B. Scaled Site Diagrams

1. Scaled site diagrams must be attached which include the following information:

- North arrow and scale
- The locations of the ground water monitoring wells
- Location and depth of each soil sample and boring
- All major surface and sub-surface structures and utilities
- Approximate property boundaries
- All existing or closed underground storage tank systems, including appurtenant piping
- A cross-sectional view indicating depth of tank, stratigraphy and location of water table
- Locations of surface water bodies

### C. Soil samples and borings (check appropriate answer)

1. Were soil samples taken from the excavation as prescribed? ☒ Yes ☐ No ☐ N/A

2. Were soil borings taken at the tank system closure site as prescribed? ☐ Yes ☐ No ☒ N/A

3. Attach the analytical results in tabular form and include the following information about each sample:

- Customer sample number (keyed to the site map)
- The depth of the soil sample
- Soil boring logs
- Method detection limit of the method used
- QA/QC information as required



D. Ground Water Monitoring

1. Number of ground water monitoring wells installed: 0
2. Attach the analytical results of the ground water samples in tabular form. Include the following information for each sample from each well:
  - a. Site diagram number for each well installed
  - b. Depth of ground water surface
  - c. Depth of screened interval
  - d. Method detection limit of the method used
  - e. Well logs
  - f. Well permit numbers
  - g. QA/QC Information as required

V. SOIL CONTAMINATION

- A. Was soil contamination found? Yes X No  
If "Yes", please answer Question B-E  
If "No", please answer Question B
- B. The highest soil contamination still remaining in the ground has been determined to be:
1. N/A ppb total BTEX, N/A ppb total non-targeted VOC
  2. N/A ppb total B/N, N/A ppb total non-targeted B/N
  3. 93.0 ppm TPHC
  4. N/A ppb \_\_\_\_\_ (for non-petroleum substance)
- C. Remediation of free product contaminated soils
1. All free product contaminated soil on the property boundaries and above the water table are believed to have been removed from the subsurface Yes X No
  2. Free product contaminated soils are suspected to exist below the water table Yes X No
  3. Free product contaminated soils are suspected to exist off the property boundaries. Yes X No
- D. Was the vertical and horizontal extent of contamination determined? Yes No X N/A
- E. Does soil contamination intersect ground water? Yes No X N/A

VI. GROUND WATER CONTAMINATION N/A

- A. Was ground water contamination found? Yes No  
If "Yes", please answer Questions B-G.  
If "No", please answer only Question B.
- B. The highest ground water contamination at any 1 sampling location and at any 1 sampling event to date has been determined to be:
1. \_\_\_\_\_ ppb total BTEX, \_\_\_\_\_ ppb total non-targeted VOC
  2. \_\_\_\_\_ ppb total B/N, \_\_\_\_\_ ppb total non-targeted B/N
  3. \_\_\_\_\_ ppb total MTBE, \_\_\_\_\_ ppb total TBA
  4. \_\_\_\_\_ ppb \_\_\_\_\_ (for non-petroleum substance)
  5. greatest thickness of separate phase product found \_\_\_\_\_
  6. separate phase product has been delineated Yes No N/A
- C. Result(s) of well search
1. A well search (including a review of manual well records) indicates that private, municipal or commercial wells do exist within the distances specified in the Scope of Work. Yes No N/A
  2. The number of these wells identified is \_\_\_\_\_

D. Proximity of wells and contaminant plume

1. The shallowest depth of any well noted in the well search which may be in the horizontal or vertical potential path(s) of the contaminant plume(s) is \_\_\_\_\_ feet below grade (consideration has been given for the effects of pumping, subsurface structures, etc. on the direction(s) of contaminant migration). This well is \_\_\_\_\_ feet from the source and its screening begins at a depth of \_\_\_\_\_ feet.
2. The shallowest depth to the top of the well screen for any well in the potential path of the plume(s) (as described in D1 above) is \_\_\_\_\_ feet below grade. This well is located \_\_\_\_\_ feet from the source.
3. The closest horizontal distance of a private, commercial or municipal well in the potential path of the plume (as determined in D1) is \_\_\_\_\_ feet from the source. This well is \_\_\_\_\_ feet deep and screening begins at a depth of \_\_\_\_\_ feet.

E. A plan for separate phase product recovery has been included. ☐ Yes ☐ No ☐ N/A

F. A ground water contour map has been submitted which includes the ground water elevations for each well.  
☐ Yes ☐ No ☐ N/A

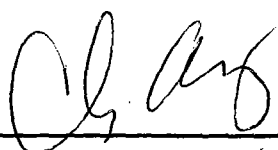
G. Delineation of contamination

1. The ground water contaminants have been delineated to MCLs or lower values at the property boundaries. ☐ Yes ☐ No
2. The plume is suspected to continue off the property at concentrations greater than MCLs.  
☐ Yes ☐ No
3. Off property access (circle one):    is being sought    has been approved    has been denied

VII. SITE ASSESSMENT CERTIFICATION [preparer of site assessment plan - N.J.A.C. 7:14B-8.3(b) & 9.5(a)3]

The person signing this certification as the "Qualified Ground Water Consultant" (as defined in N.J.A.C. 7:14B-1.6) responsible for the design and implementation of the site assessment plan as specified in N.J.A.C. 7:14B-8.3(a) & 9.2(b)2, must supply the name of the certifying organization and certification number.

*"I certify under penalty of law that the information provided in this document is true, accurate, and complete and was obtained by procedures in compliance with N.J.A.C. 7:14B-8 and 9. I am aware that there are significant penalties for submitting false, inaccurate, or incomplete information, including fines and/or imprisonment."*

NAME (Print or Type) Charles Appleby SIGNATURE 

COMPANY NAME U.S. Army Fort Monmouth DATE 7-27-95  
(Preparer of Site Assessment Plan)

CERTIFYING ORGANIZATION NJDEP CERTIFICATION NUMBER 2056

VIII. TANK DECOMMISSIONING CERTIFICATION [person performing tank decommissioning portion of closure plan - N.J.A.C. 7:14B-9.5(a)4]

*"I certify under penalty of law that tank decommissioning activities were performed in compliance with N.J.A.C. 7:14B-9.2(b)3. I am aware that there are significant penalties for submitting false, inaccurate, or incomplete information, including fines and/or imprisonment."*

NAME (Print or Type) ALL SERVICE ENVIRONMENTAL, INC. SIGNATURE [Signature]  
COMPANY NAME 523 Route 303 DATE 9-30-93  
STATEN ISLAND, NY 10023  
(Performer of Tank Decommissioning)

IX. CERTIFICATIONS BY THE RESPONSIBLE PARTY(IES) OF THE FACILITY

A. The following certification shall be signed by the highest ranking individual with overall responsibility for that facility [N.J.A.C. 7:14B-2.3(c)1].

*"I certify under penalty of law that the information provided in this document is true, accurate, and complete. I am aware that there are significant penalties for submitting false, inaccurate, or incomplete information, including fines and/or imprisonment."*

NAME (Print or Type) James Ott SIGNATURE [Signature]  
COMPANY NAME U.S. Army Fort Monmouth DATE 7/27/95

B. The following certification shall be signed as follows [according to the requirements of N.J.A.C. 7:14B-2.3(C)2]:

1. For a corporation, by a principal executive officer of at least the level of vice president.
2. For a partnership or sole proprietorship, by a general partner or the proprietor, respectively; or
3. For a municipality, State, Federal or other public agency by either the principal executive officer or ranking elected official.
4. In cases where the highest ranking corporate partnership, governmental officer or official at the facility as required in A above is the same person as the official required to certify in B, only the certification in A need to be made. In all other cases, the certifications of A and B shall be made.

*"I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false, inaccurate, or incomplete information, including fines and/or imprisonment."*

NAME (Print or Type) \_\_\_\_\_ SIGNATURE \_\_\_\_\_  
COMPANY NAME \_\_\_\_\_ DATE \_\_\_\_\_

**SMITH**

**APPENDIX C**  
**WASTE MANIFEST**



State of New Jersey  
Department of Environmental Protection and Energy  
Hazardous Waste Regulation Program  
Manifest Section

CN 028, Trenton, NJ 08625-0028

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved, OMB No. 2050-0039. Expires 9-30-94

| UNIFORM HAZARDOUS WASTE MANIFEST                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | 1. Generator's US EPA ID No.                                                 | Manifest Document No. | 2. Page 1                                               | Information in the shaded areas is not required by Federal law |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------|-----------------------|---------------------------------------------------------|----------------------------------------------------------------|
| 3. Generator's Name and Mailing Address<br><b>NWS-EARLE - Code 096</b><br><b>Route 34</b><br><b>Carls Neck, N.J. 07722-5000</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | 4. Generator's Phone<br><b>908 577-2515</b>                                  |                       | 5. State Manifest Document Number<br><b>NJA 1708443</b> |                                                                |
| 6. Transporter 1 Company Name<br><b>Casle Ecology Oil Salvage, Inc.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | 7. Transporter 1 US EPA ID Number<br><b>N J T D 0 A 5 9 9 5 6 9 3</b>        |                       | 8. State Trans ID<br><b>NJDEP8074745429</b>             |                                                                |
| 9. Transporter 2 Company Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  | 10. Transporter 2 US EPA ID Number                                           |                       | 11. Transporter's Phone                                 |                                                                |
| 12. Designated Facility Name and Site Address<br><b>Casle Ecology Oil Salvage, Inc.</b><br><b>7A Casle/Proctank</b><br><b>3209 N. Mill Rd.</b><br><b>Elizabeth, N.J. 07208</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | 13. Designated Facility US EPA ID Number<br><b>N J T D 0 A 5 9 9 5 6 9 3</b> |                       | 14. State Facility ID<br><b>006141107</b>               |                                                                |
| 15. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)<br><b>Combustible Liquid, N.O.S.</b><br><b>Combustible Liquid, NA1993</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | 16. Containers<br>a. No. b. Type<br><b>0 0 1 T</b>                           |                       | 17. Total Quantity<br><b>118.50</b>                     |                                                                |
| 18. Additional Descriptions for Materials Listed Above<br><b>100% Water 40 Gallons</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  | 19. Handling Codes for Wastes Listed Above<br><b>FCR001</b><br><b>502</b>    |                       | 20. Unit<br><b>118.50</b>                               |                                                                |
| 21. Special Handling Instructions and Additional Information<br><b>24 hour emergency response telephone 1(908) 577-2000</b><br><b>CFR 0092F2 E.R.C. 127</b><br><b>Co-Generator: US Army Fort Monmouth, Main Post NJ 07030-5977</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                                              |                       |                                                         |                                                                |
| 22. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.<br>I am a large quantity generator. I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best management method that is available to me and that I can afford. |  |                                                                              |                       |                                                         |                                                                |
| 23. Printed/Typed Name<br><b>JOHN PAWLUS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  | 24. Signature<br><i>John Pawlus</i>                                          |                       | 25. Month Day Year<br><b>07 28 93</b>                   |                                                                |
| 26. Transporter 1 Acknowledgement of Receipt of Materials<br>Printed/Typed Name<br><b>Tim McLessa</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | 27. Signature<br><i>Tim McLessa</i>                                          |                       | 28. Month Day Year<br><b>07 28 93</b>                   |                                                                |
| 29. Transporter 2 Acknowledgement of Receipt of Materials<br>Printed/Typed Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | 30. Signature                                                                |                       | 31. Month Day Year                                      |                                                                |
| 32. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.<br>Printed/Typed Name<br><b>Roy C. Clermont</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                              |                       |                                                         |                                                                |
| 33. Signature<br><i>Roy C. Clermont</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                                                              |                       |                                                         |                                                                |
| 34. Month Day Year<br><b>07 28 93</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                              |                       |                                                         |                                                                |

**SMTH**

**APPENDIX D**

**SOIL ANALYTICAL DATA PACKAGE**

Report of Analysis  
U.S. Army, Fort Monmouth Environmental Laboratory  
NJDEPE Certification # 13461

Client: U.S. Army  
DEH, SELFM-EH-EV  
Bldg. 167  
Ft. Monmouth, NJ 07703

Lab. ID #: 1238.1-.11  
Sample Rec'd: 07/09/93  
Analysis Start: 07/09/93  
Analysis Comp: 07/09/93

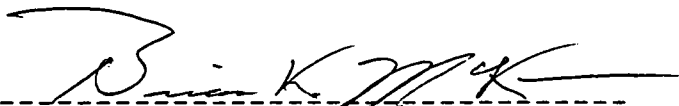
Analysis: 418.1 (TPH)  
Matrix: Soil  
Analyst: S. Hubbard

NJDEPE UST Reg. #: 00192477-4 TBR  
TMS #: Emergency Removal  
NJDEPE Case #:  
Location #: Bldg. # 8004

| Lab ID. | Description  | %Solid | Result | MDL<br>(mg/Kg) |
|---------|--------------|--------|--------|----------------|
| 1238.1  | Site A #     | 98     | ND     | 3.3            |
| 1238.2  | Site B #     | 92     | 93.0   | 3.3            |
| 1238.3  | Site C #     | 88     | ND     | 3.3            |
| 1238.4  | Site D #     | 90     | 5.5    | 3.3            |
| 1238.5  | Site E #     | 89     | ND     | 3.3            |
| 1238.6  | Site F #     | 92     | ND     | 3.3            |
| 1238.7  | Site G #     | 96     | ND     | 3.3            |
| 1238.8  | Site H #     | 90     | ND     | 3.3            |
| 1238.9  | Site I #     | 96     | ND     | 3.3            |
| 1238.10 | Site J #     | 88     | ND     | 3.3            |
| 1238.11 | Site K #     | 98     | ND     | 3.3            |
| M. Bl.  | METHOD BLANK | 100    | ND     | 3.3            |

Notes: ND = Not Detected, MDL = Method Detection Limit  
\* = Silica Gel Added # = hNu reading is ND

1238.11 DUP = 100%; 1238.11 SPIKE = 80%

  
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Brian K. McKee  
Laboratory Director



SERV-AIR, INC.

An E-SYSTEMS Company

P.O. #:

Chain of Custody

|                                    |  |                            |                                    |                    |                 |                     |  |                     |         |
|------------------------------------|--|----------------------------|------------------------------------|--------------------|-----------------|---------------------|--|---------------------|---------|
| Project #:                         |  | Sampler:                   |                                    | Date / Time        |                 | Analysis Parameters |  | Start:              |         |
| Customer: <i>DEH Environmental</i> |  | <i>Charles Appleby</i>     |                                    | <i>7/8/93 1425</i> |                 |                     |  | Finish:             |         |
| Phone: <i>X26224</i>               |  | Site Name:                 |                                    |                    |                 |                     |  |                     |         |
|                                    |  | <i>Bldg 8004</i>           |                                    |                    |                 |                     |  |                     |         |
|                                    |  | <i>UST Site Assessment</i> |                                    |                    |                 |                     |  |                     |         |
| Lab Sample ID Number               |  | Date/Time                  | Customer Sample Location/ID Number | Sample Matrix      | # of Bottles    | TPHC                |  | Preservation Method |         |
| 1238.1                             |  | <i>7/8/93 1425</i>         | <i>Site A</i>                      | <i>Soil</i>        | <i>1</i>        | <i>X</i>            |  | <i>HNW</i>          | Remarks |
| .2                                 |  | <i>1426</i>                | <i>B</i>                           |                    | <i>1</i>        | <i>X</i>            |  | <i>ND</i>           |         |
| .3                                 |  | <i>1427</i>                | <i>C</i>                           |                    | <i>1</i>        | <i>X</i>            |  | <i>ND</i>           |         |
| .4                                 |  | <i>1428</i>                | <i>D</i>                           |                    | <i>1</i>        | <i>X</i>            |  | <i>ND</i>           |         |
| .5                                 |  | <i>1429</i>                | <i>E</i>                           |                    | <i>1</i>        | <i>X</i>            |  | <i>ND</i>           |         |
| .6                                 |  | <i>1430</i>                | <i>F</i>                           |                    | <i>1</i>        | <i>X</i>            |  | <i>ND</i>           |         |
| .7                                 |  | <i>1431</i>                | <i>G</i>                           |                    | <i>1</i>        | <i>X</i>            |  | <i>ND</i>           |         |
| .8                                 |  | <i>1432</i>                | <i>H</i>                           |                    | <i>1</i>        | <i>X</i>            |  | <i>ND</i>           |         |
| .9                                 |  | <i>1433</i>                | <i>I</i>                           |                    | <i>1</i>        | <i>X</i>            |  | <i>ND</i>           |         |
| .10                                |  | <i>1434</i>                | <i>J</i>                           |                    | <i>1</i>        | <i>X</i>            |  | <i>ND</i>           |         |
| .11                                |  | <i>1425</i>                | <i>K duplicate of</i>              |                    | <i>1</i>        | <i>X</i>            |  | <i>ND</i>           |         |
| Relinquished By (signature)        |  | Date / Time                | Received By (signature)            |                    | Shipped By:     |                     |  |                     |         |
| <i>[Signature]</i>                 |  | <i>7/8/93 1800</i>         | <i>[Signature]</i>                 |                    |                 |                     |  |                     |         |
| Relinquished By (signature)        |  | Date / Time                | Received for Lab by (signature):   |                    | Date / Time     |                     |  |                     |         |
| <i>[Signature]</i>                 |  | <i>1</i>                   | <i>[Signature]</i>                 |                    | <i>7-9 0800</i> |                     |  |                     |         |

Note: A drawing depicting sample location should be attached or drawn on the reverse side of this chain of custody.



Sarah O'Halloran July 9, 1993

Blank

33.75 (93 ml)

67.5 (168 ml)

R. 9992

135 (324 ml)

1238.1

1238.2

• 1238.3

• 1238.4

• 1238.5

• 1238.6

• 1238.7

• 1238.8

• 1238.9

• 1238.10

• 1238.11

• 1238.11 DVP

1238.11 spike