



**VIA CERTIFIED MAIL: 7011 0470 0000 2968 5851**

September 23, 2013

Ms. Jeannette Debartolomeo  
Maryland Department of the Environment  
Oil Control Program  
1800 Washington Boulevard  
Baltimore, MD 21230

**RE: UST Testing Records  
Southside Facility #20025  
31 Heather Lane  
Perryville, Cecil County, Maryland  
MDE Case No. 2006-0489-CE  
MDE Facility No. 1190**

Dear Ms. Debartolomeo:

In a Maryland Department of Environment (MDE) Site Status Letter dated July 30, 2013, the MDE requested Southside Oil, LLC (Southside) provide copies of the most recent helium testing of the gasoline underground storage tank (UST) systems and the most recent spill catchment basin test results for the above referenced project (Site). The testing results are attached and are summarized below.

- On December 18, 2012, Tanknology completed testing at the Site including spill catchment basin testing. The spill catchment basins passed except for the vapor basin of the regular gasoline UST.
- On February 23, 2013, Spigler Petroleum Equipment, LLC completed a hydrostatic test of the spill catchment basin testing for the vapor basin of the regular gasoline UST and the hydrostatic test passed.
- On August 23, 2013, Tanknology completed Pressure Decay and Helium Decay tests and the tests passed.

Southside and Kleinfelder appreciate the continued cooperation and assistance of the MDE in the successful completion of this project. Please contact the undersigned at (410) 850-0404 or Ms. Amanda Pearce with Southside Oil at (804) 706-4702 if there are questions.

Sincerely yours,  
**Kleinfelder East, Inc.**



Donald A. Trego, QEP  
Program Manager



Mark C. Steele  
Principal Professional

**Attachments**

cc: Mr. Marshall Hare – Southside Oil, LLC  
Ms. Amanda Pearce – Southside Oil, LLC



# Testing and Inspection Certificate

Tanknology Inc.  
11000 North MoPac Expressway, Suite 500, Austin, TX 78759  
800-800-4633 www.tanknology.com

Test Date	12/18/2012	Tanknology WO#	MA2-8505854
Test Purpose	COMPLIANCE	Customer PO#	

<u>Customer</u>	<u>Location</u>
SOUTHSIDE OIL 1011 BOULDER SPRINGS DRIVE SUITE 100 RICHMOND, VA 23225 Attn: MARSHALL HARE (804) 706-4702	Southside 20025 31 Heather Lane Perryville, MD 21903 Attn: (410) 642-2883

Test / Inspection Description	Item Tested	Date Tested	Result
Line Leak Detector (3 GPH)	Tank 1 Line 1 REGULAR	12/18/2012	Pass
Line Leak Detector (3 GPH)	Tank 1 Line 1 PLUS	12/18/2012	Pass
Line Leak Detector (3 GPH)	Tank 1 Line 1 SUPREME	12/18/2012	Pass
Line Leak Detector (3 GPH)	Tank 4 Line 1 Diesel	12/18/2012	Pass
Impact Valve Inspection	See test report for details	12/18/2012	Pass
Leak Detection Monitoring System Inspection	See test report for details	12/18/2012	Pass
Spill Containment / Bucket	REGULAR SB 1 - Fill - Direct	12/18/2012	Pass
Spill Containment / Bucket	REGULAR SB 1 - Vapor - Direct	12/18/2012	Fail
Spill Containment / Bucket	PLUS SB 1 - Fill - Direct	12/18/2012	Pass
Spill Containment / Bucket	SUPREME SB 1 - Fill - Direct	12/18/2012	Pass
Spill Containment / Bucket	Diesel SB 1 - Fill - Direct	12/18/2012	Pass
Stage I or II Pressure Decay	See test report for details	12/18/2012	Pass
Air or Vapor to Liquid Ratio	See test report for details	12/18/2012	Pass

Tanknology Representative: Theodore Bezel Telephone: (800) 964-0010	Technician: Michael Collins Technician Certification: (See forms)
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**LDT 5000 Field Test Apparatus**  
**Line Leak Detector Test**

Work Order: 8505854 Date: 12/18/2012  
Site Name / ID: Southside 20025 / 20025  
Address: 31 Heather Lane  
City: Perryville State: MD Zip: 21903

Tank ID	1	1	1	4		
Product	REGULAR	PLUS	SUPREME	Diesel		
Product Line	1	1	1	1		
Tested From	14	14	14	4		
Existing/New	Existing	Existing	Existing	Existing		
Mechanical/Electronic	Electronic	Electronic	Electronic	Electronic		
Manufacturer/Model	Veeder Root VLLD	Veeder Root VLLD	Veeder Root VLLD	Veeder Root VLLD		
Serial No.	249198	249213	249249	314968		
Pump Operating Pressure (psi)	30.00	32.00	32.00	32.00		
Calibrated Leak (ml/min)	189.0	189.0	189.0	189.0		
Calibrated Leak (gph)	3.00	3.00	3.00	3.00		
Holding PSI <i>*N/A for Electronic LD's</i>						
Resiliency (ml) <i>*N/A for Electronic LD's</i>						
Metering PSI <i>*N/A for Electronic LD's</i>						
Opening Time (sec) <i>*N/A for Electronic LD's</i>						
Test Results	Pass	Pass	Pass	Pass		

Technician Comments:

Technician Name: Michael Collins Certification #: 94337  
Technician Signature: *Michael Collins* Expire Date: 10/27/2014



# Impact Valve Inspection

## Impact Valve Operational Inspection

Work Order: 8505854  
 Site Name/ID: Southside 20025  
 Address: 31 Heather Lane  
 City: Perryville

Date: 12/18/2012  
 State: MD Zip: 21903

Dispenser Number	Grade	Secure Mount?	Valve Lock?	Pass/ Fail	Comments
1/2	87	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="radio"/> Pass <input type="radio"/> Fail <input type="radio"/> Not Tested	
1/2	89	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="radio"/> Pass <input type="radio"/> Fail <input type="radio"/> Not Tested	
1/2	93	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="radio"/> Pass <input type="radio"/> Fail <input type="radio"/> Not Tested	
3/4	40	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="radio"/> Pass <input type="radio"/> Fail <input type="radio"/> Not Tested	
5/6	87	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="radio"/> Pass <input type="radio"/> Fail <input type="radio"/> Not Tested	
5/6	89	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="radio"/> Pass <input type="radio"/> Fail <input type="radio"/> Not Tested	
5/6	93	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="radio"/> Pass <input type="radio"/> Fail <input type="radio"/> Not Tested	
7/8	87	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="radio"/> Pass <input type="radio"/> Fail <input type="radio"/> Not Tested	
7/8	89	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="radio"/> Pass <input type="radio"/> Fail <input type="radio"/> Not Tested	
7/8	93	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="radio"/> Pass <input type="radio"/> Fail <input type="radio"/> Not Tested	
9/10	87	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="radio"/> Pass <input type="radio"/> Fail <input type="radio"/> Not Tested	
9/10	89	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="radio"/> Pass <input type="radio"/> Fail <input type="radio"/> Not Tested	
9/10	93	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="radio"/> Pass <input type="radio"/> Fail <input type="radio"/> Not Tested	
11/12	87	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="radio"/> Pass <input type="radio"/> Fail <input type="radio"/> Not Tested	
11/12	89	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="radio"/> Pass <input type="radio"/> Fail <input type="radio"/> Not Tested	
11/12	93	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="radio"/> Pass <input type="radio"/> Fail <input type="radio"/> Not Tested	
13/14	87	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="radio"/> Pass <input type="radio"/> Fail <input type="radio"/> Not Tested	
13/14	89	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="radio"/> Pass <input type="radio"/> Fail <input type="radio"/> Not Tested	
13/14	93	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="radio"/> Pass <input type="radio"/> Fail <input type="radio"/> Not Tested	

**Technician Comments:**

Technician Name: Michael Collins  
 Signature:

# MONITORING SYSTEM CERTIFICATION

This form is used to document testing and servicing of tank and piping leak monitoring equipment. If required by applicable law, a copy of the completed form must be provided by the Testing Contractor or owner to the governing UST agency as required by regulation.

**A. General Information**

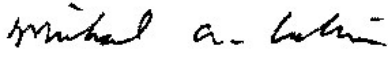
Facility Name: Southside 20025 Bldg. No.: \_\_\_\_\_  
 Site Address: 31 Heather Lane City: Perryville Zip: 21903  
 Facility Contact Person: \_\_\_\_\_ Contact Phone No.: 642-2883  
 Make/Model of Monitoring System: Veeder Root TLS350R Date of Testing/Servicing: 12/18/2012

**B. Inventory of Equipment Tested/Certified** Check the appropriate boxes to indicate specific equipment inspected/serviced:

<p><b>Tank ID:</b> <u>1 - REGULAR</u></p> <p><input checked="" type="checkbox"/> In-Tank Gauging Probe. Model: <u>MAG 1 Probe</u></p> <p><input checked="" type="checkbox"/> Annular Space or Vault Sensor. Model: <u>407</u></p> <p><input checked="" type="checkbox"/> Piping Sump / Trench Sensor(s). Model: <u>112</u></p> <p><input type="checkbox"/> Fill Sump Sensor(s). Model: _____</p> <p><input type="checkbox"/> Mechanical Line Leak Detector. Model: _____</p> <p><input checked="" type="checkbox"/> Electronic Line Leak Detector. Model: <u>Veeder Root VLLD</u></p> <p><input type="checkbox"/> Tank Overfill / High-Level Sensor. Model: _____</p> <p><input type="checkbox"/> Other (specify equipment type and model in Section E on Page 2).</p>	<p><b>Tank ID:</b> <u>1 - PLUS</u></p> <p><input checked="" type="checkbox"/> In-Tank Gauging Probe. Model: <u>MAG 1 Probe</u></p> <p><input checked="" type="checkbox"/> Annular Space or Vault Sensor. Model: <u>407</u></p> <p><input checked="" type="checkbox"/> Piping Sump / Trench Sensor(s). Model: <u>112</u></p> <p><input type="checkbox"/> Fill Sump Sensor(s). Model: _____</p> <p><input type="checkbox"/> Mechanical Line Leak Detector. Model: _____</p> <p><input checked="" type="checkbox"/> Electronic Line Leak Detector. Model: <u>Veeder Root VLLD</u></p> <p><input type="checkbox"/> Tank Overfill / High-Level Sensor. Model: _____</p> <p><input type="checkbox"/> Other (specify equipment type and model in Section E on Page 2).</p>
<p><b>Tank ID:</b> <u>1 - SUPREME</u></p> <p><input checked="" type="checkbox"/> In-Tank Gauging Probe. Model: <u>MAG 1 Probe</u></p> <p><input checked="" type="checkbox"/> Annular Space or Vault Sensor. Model: <u>407</u></p> <p><input checked="" type="checkbox"/> Piping Sump / Trench Sensor(s). Model: <u>112</u></p> <p><input type="checkbox"/> Fill Sump Sensor(s). Model: _____</p> <p><input type="checkbox"/> Mechanical Line Leak Detector. Model: _____</p> <p><input checked="" type="checkbox"/> Electronic Line Leak Detector. Model: <u>Veeder Root VLLD</u></p> <p><input type="checkbox"/> Tank Overfill / High-Level Sensor. Model: _____</p> <p><input type="checkbox"/> Other (specify equipment type and model in Section E on Page 2).</p>	<p><b>Tank ID:</b> <u>4 - Diesel</u></p> <p><input checked="" type="checkbox"/> In-Tank Gauging Probe. Model: <u>MAG 1 Probe</u></p> <p><input checked="" type="checkbox"/> Annular Space or Vault Sensor. Model: <u>407</u></p> <p><input checked="" type="checkbox"/> Piping Sump / Trench Sensor(s). Model: <u>112</u></p> <p><input type="checkbox"/> Fill Sump Sensor(s). Model: _____</p> <p><input type="checkbox"/> Mechanical Line Leak Detector. Model: _____</p> <p><input checked="" type="checkbox"/> Electronic Line Leak Detector. Model: <u>Veeder Root VLLD</u></p> <p><input type="checkbox"/> Tank Overfill / High-Level Sensor. Model: _____</p> <p><input type="checkbox"/> Other (specify equipment type and model in Section E on Page 2).</p>
<p><b>Dispenser ID:</b> <u>1/2</u></p> <p><input checked="" type="checkbox"/> Dispenser Containment Sensor(s). Model: <u>322</u></p> <p><input checked="" type="checkbox"/> Shear Valve(s).</p> <p><input type="checkbox"/> Dispenser Containment Float(s) and Chain(s).</p>	<p><b>Dispenser ID:</b> <u>3/4</u></p> <p><input checked="" type="checkbox"/> Dispenser Containment Sensor(s). Model: <u>322</u></p> <p><input checked="" type="checkbox"/> Shear Valve(s).</p> <p><input type="checkbox"/> Dispenser Containment Float(s) and Chain(s).</p>
<p><b>Dispenser ID:</b> <u>5/6</u></p> <p><input checked="" type="checkbox"/> Dispenser Containment Sensor(s). Model: <u>322</u></p> <p><input checked="" type="checkbox"/> Shear Valve(s).</p> <p><input type="checkbox"/> Dispenser Containment Float(s) and Chain(s).</p>	<p><b>Dispenser ID:</b> <u>7/8</u></p> <p><input checked="" type="checkbox"/> Dispenser Containment Sensor(s). Model: <u>322</u></p> <p><input checked="" type="checkbox"/> Shear Valve(s).</p> <p><input type="checkbox"/> Dispenser Containment Float(s) and Chain(s).</p>
<p><b>Dispenser ID:</b> <u>9/10</u></p> <p><input checked="" type="checkbox"/> Dispenser Containment Sensor(s). Model: <u>322</u></p> <p><input checked="" type="checkbox"/> Shear Valve(s).</p> <p><input type="checkbox"/> Dispenser Containment Float(s) and Chain(s).</p>	<p><b>Dispenser ID:</b> <u>11/12</u></p> <p><input checked="" type="checkbox"/> Dispenser Containment Sensor(s). Model: <u>322</u></p> <p><input checked="" type="checkbox"/> Shear Valve(s).</p> <p><input type="checkbox"/> Dispenser Containment Float(s) and Chain(s).</p>

\*If the facility contains more tanks or dispensers, copy this form. Include information for every tank and dispenser at the facility.

**C. Certification - I certify that the equipment identified in this document was inspected/serviced in accordance with the manufacturers' guidelines. Attached to this Certification is a Plot Plan showing the layout of monitoring equipment. For any equipment capable of generating such reports, I have also attached a copy of the report; (check all that apply):**  System set-up  Alarm history report

Technician Name (print): Michael Collins Signature:   
 Certification No.: \_\_\_\_\_ License No.: \_\_\_\_\_  
 Testing Company Name: Tanknology Phone No.: (800) 800-4633  
 Testing Company Address: 11000 N. MoPac Expressway Suite 500 Date of Testing/Servicing: 12/18/2012

# MONITORING SYSTEM CERTIFICATION

This form is used to document testing and servicing of tank and piping leak monitoring equipment. If required by applicable law, a copy of the completed form must be provided by the Testing Contractor or owner to the governing UST agency as required by regulation.

**A. General Information**

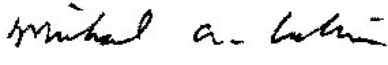
Facility Name: Southside 20025 Bldg. No.: \_\_\_\_\_  
 Site Address: 31 Heather Lane City: Perryville Zip: 21903  
 Facility Contact Person: \_\_\_\_\_ Contact Phone No.: 642-2883  
 Make/Model of Monitoring System: \_\_\_\_\_ Date of Testing/Servicing: 12/18/2012

**B. Inventory of Equipment Tested/Certified** Check the appropriate boxes to indicate specific equipment inspected/serviced:

<p><b>Tank ID:</b> _____</p> <p><input type="checkbox"/> In-Tank Gauging Probe. Model: _____</p> <p><input type="checkbox"/> Annular Space or Vault Sensor. Model: _____</p> <p><input type="checkbox"/> Piping Sump / Trench Sensor(s). Model: _____</p> <p><input type="checkbox"/> Fill Sump Sensor(s). Model: _____</p> <p><input type="checkbox"/> Mechanical Line Leak Detector. Model: _____</p> <p><input type="checkbox"/> Electronic Line Leak Detector. Model: _____</p> <p><input type="checkbox"/> Tank Overfill / High-Level Sensor. Model: _____</p> <p><input type="checkbox"/> Other (specify equipment type and model in Section E on Page 2).</p>	<p><b>Tank ID:</b> _____</p> <p><input type="checkbox"/> In-Tank Gauging Probe. Model: _____</p> <p><input type="checkbox"/> Annular Space or Vault Sensor. Model: _____</p> <p><input type="checkbox"/> Piping Sump / Trench Sensor(s). Model: _____</p> <p><input type="checkbox"/> Fill Sump Sensor(s). Model: _____</p> <p><input type="checkbox"/> Mechanical Line Leak Detector. Model: _____</p> <p><input type="checkbox"/> Electronic Line Leak Detector. Model: _____</p> <p><input type="checkbox"/> Tank Overfill / High-Level Sensor. Model: _____</p> <p><input type="checkbox"/> Other (specify equipment type and model in Section E on Page 2).</p>
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<p><b>Dispenser ID:</b> <u>13/14</u></p> <p><input checked="" type="checkbox"/> Dispenser Containment Sensor(s). Model: <u>322</u></p> <p><input checked="" type="checkbox"/> Shear Valve(s).</p> <p><input type="checkbox"/> Dispenser Containment Float(s) and Chain(s).</p>	<p><b>Dispenser ID:</b> _____</p> <p><input type="checkbox"/> Dispenser Containment Sensor(s). Model: _____</p> <p><input type="checkbox"/> Shear Valve(s).</p> <p><input type="checkbox"/> Dispenser Containment Float(s) and Chain(s).</p>
<p><b>Dispenser ID:</b> _____</p> <p><input type="checkbox"/> Dispenser Containment Sensor(s). Model: _____</p> <p><input type="checkbox"/> Shear Valve(s).</p> <p><input type="checkbox"/> Dispenser Containment Float(s) and Chain(s).</p>	<p><b>Dispenser ID:</b> _____</p> <p><input type="checkbox"/> Dispenser Containment Sensor(s). Model: _____</p> <p><input type="checkbox"/> Shear Valve(s).</p> <p><input type="checkbox"/> Dispenser Containment Float(s) and Chain(s).</p>
<p><b>Dispenser ID:</b> _____</p> <p><input type="checkbox"/> Dispenser Containment Sensor(s). Model: _____</p> <p><input type="checkbox"/> Shear Valve(s).</p> <p><input type="checkbox"/> Dispenser Containment Float(s) and Chain(s).</p>	<p><b>Dispenser ID:</b> _____</p> <p><input type="checkbox"/> Dispenser Containment Sensor(s). Model: _____</p> <p><input type="checkbox"/> Shear Valve(s).</p> <p><input type="checkbox"/> Dispenser Containment Float(s) and Chain(s).</p>

\*If the facility contains more tanks or dispensers, copy this form. Include information for every tank and dispenser at the facility.

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Technician Name (print): Michael Collins Signature:   
 Certification No.: \_\_\_\_\_ License No.: \_\_\_\_\_  
 Testing Company Name: Tanknology Phone No.: (800) 800-4633  
 Testing Company Address: 11000 N. MoPac Expressway Suite 500 Date of Testing/Servicing: 12/18/2012

**D. Results of Testing/Serviceing**

Software Version Installed: 131.01

Complete the following checklist:

<input checked="" type="radio"/> Yes	<input type="radio"/> No*	Is the audible alarm operational?
<input checked="" type="radio"/> Yes	<input type="radio"/> No*	Is the visual alarm operational?
<input checked="" type="radio"/> Yes	<input type="radio"/> No*	Were all sensors visually inspected, functionally tested, and confirmed operational?
<input checked="" type="radio"/> Yes	<input type="radio"/> No*	Were all sensors installed at lowest point of secondary containment and positioned so that other equipment will not interfere with their proper operation?
<input checked="" type="radio"/> Yes	<input type="radio"/> No* <input type="radio"/> N/A	If alarms are relayed to a remote monitoring station, is all communications equipment (e.g. modem) operational?
<input checked="" type="radio"/> Yes	<input type="radio"/> No* <input type="radio"/> N/A	For pressurized piping systems, does the turbine automatically shut down if the piping secondary containment monitoring system detects a leak, fails to operate, or is electrically disconnected? If yes: which sensors initiate positive shut-down? ( <i>Check all that apply</i> ) <input checked="" type="checkbox"/> Sump/Trench Sensors; <input checked="" type="checkbox"/> Dispenser Containment Sensors. Did you confirm positive shut-down due to leaks <u>and</u> sensor failure/disconnection? <input checked="" type="radio"/> Yes; <input type="radio"/> No
<input type="radio"/> Yes	<input type="radio"/> No* <input checked="" type="radio"/> N/A	For tank systems that utilize the monitoring system as the primary tank overfill warning device (i.e. no mechanical overfill prevention valve is installed), is the overfill warning alarm visible and audible at the tank fill point(s) and operating properly? If so, at what percent of tank capacity does the alarm trigger? %
<input type="radio"/> Yes*	<input checked="" type="radio"/> No	Was any monitoring equipment replaced? If yes, identify specific sensors, probes, or other equipment replaced and list the manufacturer name and model for all replacement parts in Section E, below.
<input type="radio"/> Yes*	<input checked="" type="radio"/> No	Was liquid found inside any secondary containment systems designed as dry systems? ( <i>Check all that apply</i> ) <input type="checkbox"/> Product; <input type="checkbox"/> Water. If yes, describe causes in Section E, below.
<input checked="" type="radio"/> Yes	<input type="radio"/> No*	Was monitoring system set-up reviewed to ensure proper settings? Attach set up reports, if applicable
<input checked="" type="radio"/> Yes	<input type="radio"/> No*	Is all monitoring equipment operational per manufacturer's specifications?

\* In Section E below, describe how and when these deficiencies were or will be corrected.

**E. Comments:**



**F. In-Tank Gauging / SIR Equipment:**

- Check this box if tank gauging is used only for inventory control.
- Check this box if no tank gauging or SIR equipment is installed.

This section must be completed if in-tank gauging equipment is used to perform leak detection monitoring.

**Complete the following checklist:**

<input checked="" type="radio"/> Yes	<input type="radio"/> No*	Has all input wiring been inspected for proper entry and termination, including testing for ground faults?
<input checked="" type="radio"/> Yes	<input type="radio"/> No*	Were all tank gauging probes visually inspected for damage and residue buildup?
<input checked="" type="radio"/> Yes	<input type="radio"/> No*	Was accuracy of system product level readings tested?
<input checked="" type="radio"/> Yes	<input type="radio"/> No*	Was accuracy of system water level readings tested?
<input checked="" type="radio"/> Yes	<input type="radio"/> No*	Were all probes reinstalled properly?
<input checked="" type="radio"/> Yes	<input type="radio"/> No*	Were all items on the equipment manufacturer's maintenance checklist completed?

\* In the Section H, below, describe how and when these deficiencies were or will be corrected.

**G. Line Leak Detectors (LLD):**

- Check this box if LLDs are not installed.

**Complete the following checklist:**

<input checked="" type="radio"/> Yes	<input type="radio"/> No* <input type="radio"/> N/A	For equipment start-up or annual equipment certification, was a leak simulated to verify LLD performance? <i>(Check all that apply)</i> Simulated leak rate: <input checked="" type="checkbox"/> 3 g.p.h.; <input type="checkbox"/> 0.1 g.p.h.; <input type="checkbox"/> 0.2 g.p.h.
<input checked="" type="radio"/> Yes	<input type="radio"/> No*	Were all LLDs confirmed operational and accurate within regulatory requirements?
<input checked="" type="radio"/> Yes	<input type="radio"/> No*	Was the testing apparatus properly calibrated?
<input type="radio"/> Yes	<input type="radio"/> No* <input checked="" type="radio"/> N/A	For mechanical LLDs, does the LLD restrict product flow if it detects a leak?
<input checked="" type="radio"/> Yes	<input type="radio"/> No* <input type="radio"/> N/A	For electronic LLDs, does the turbine automatically shut off if the LLD detects a leak?
<input checked="" type="radio"/> Yes	<input type="radio"/> No* <input type="radio"/> N/A	For electronic LLDs, does the turbine automatically shut off if any portion of the monitoring system is disabled or disconnected?
<input checked="" type="radio"/> Yes	<input type="radio"/> No* <input type="radio"/> N/A	For electronic LLDs, does the turbine automatically shut off if any portion of the monitoring system malfunctions or fails a test?
<input checked="" type="radio"/> Yes	<input type="radio"/> No* <input type="radio"/> N/A	For electronic LLDs, have all accessible wiring connections been visually inspected?
<input checked="" type="radio"/> Yes	<input type="radio"/> No*	Were all items on the equipment manufacturer's maintenance checklist completed?

\* In the Section H, below, describe how and when these deficiencies were or will be corrected.

**H. Comments:**

DID OVERALL MONITOR SYSTEM TESTING PASS (Check One)? YES  NO   
INCONCLUSIVE

### SPILL/OVERFILL CONTAINMENT BOXES

Facility is Not Equipped With Fill Riser Containment Sumps <input checked="" type="checkbox"/>			
Fill Riser Containment Sumps are Present, but were Not Tested <input type="checkbox"/>			
	Spill Box # Tank 1 REGULAR Fill - Direct	Spill Box # Tank 1 PLUS Fill - Direct	Spill Box # Tank 1 SUPREME Fill - Direct
Bucket Diameter:	10.00	10.00	10.00
Bucket Depth:	14.50&	15.00&	15.50&
Test Method Developed By:	Industry Standard	Industry Standard	Industry Standard
Test Method Used By:	Vacuum	Vacuum	Vacuum
Test Equipment Used:	VACUUM TEST	VACUUM TEST	VACUUM TEST
Equipment Resolution:	0.1 gph	0.1 gph	0.1 gph
Wait time between applying pressure/vacuum/water and starting test	0 min	0 min	0 min
Test Start Time:	23:13:00	23:15:00	00:15:00
Initial Reading (R <sub>i</sub> ):	30.00 in. H2O	30.00 in. H2O	30.00 in. H2O
Test End Time:	23:14:00	23:16:00	00:16:00
Final Reading (R <sub>f</sub> ):	30.00 in. H2O	26.00 in. H2O	28.00 in. H2O
Test Duration:	1 min	1 min	1 min
Change in Reading (R <sub>f</sub> -R <sub>i</sub> ):	0.00 in. H2O	-4.00 in. H2O	-2.00 in. H2O
Pass/Fail Threshold or Criteria:	+/- 4.00	+/- 4.00	+/- 4.00
<b>Test Result:</b>	Pass	Pass	Pass

**Comments ?** (include information on repairs made prior to testing, and recommended follow-up for failed tests)

Vapor bucket would not pull vacuum

WO: 8505854

**SPILL/OVERFILL CONTAINMENT BOXES**Facility is Not Equipped With Fill Riser Containment Sumps Fill Riser Containment Sumps are Present, but were Not Tested 

	Spill Box # Tank 4 Diesel Fill - Direct	Spill Box # Tank 1 REGULAR Vapor - Direct	Spill Box #
Bucket Diameter:	10.00	10.00	
Bucket Depth:	14.50&	12.50&	&
Test Method Developed By:	Industry Standard	Industry Standard	
Test Method Used By:	Vacuum	Vacuum	
Test Equipment Used:	VACUUM TEST	VACUUM TEST	
Equipment Resolution:	0.1 gph	0.1 gph	
Wait time between applying pressure/vacuum/water and starting test	0 min	0 min	min
Test Start Time:	23:10:00	23:12:00	
Initial Reading (R <sub>i</sub> ):	30.00 in. H2O	in. H2O	
Test End Time:	23:11:00		
Final Reading (R <sub>f</sub> ):	28.00 in. H2O	in. H2O	
Test Duration:	1 min		
Change in Reading (R <sub>f</sub> -R <sub>i</sub> ):	-2.00 in. H2O	in. H2O	
Pass/Fail Threshold or Criteria:	+/- 4.00	+/- 4.00	+/-
<b>Test Result:</b>	Pass	Fail	

**Comments ?** (include information on repairs made prior to testing, and recommended follow-up for failed tests)

Vapor bucket would not pull vacuum

WO: 8505854

## Stage II Testing Results Summary Page

### Facility Information

Facility Name: Southside 20025 ARMA Premise No.: 20025

Address: 31 Heather Lane Perryville MD 21903

Contact/Title:      Phone: 642-2883

### Other Contact Information

Name:      Title:     

Address:     

Phone:     

### Testing Information

Testing Company: TANKNOLOGY INC. Phone: (800) 800-4633

Address: 11000 N.MOPAC EXPWY #500 AUSTIN TX 78759

Contact: Theodore Bezel Test conducted by: Michael Collins

Stage II System Type: G-70-150 ARMA Notification Date: Emailed by Theodore Bezel

Test	Performed (Y or N)	Date	Pass or Fail?	Comments
Dynamic Back Pressure				
Leak Test (Pressure Decay)	Yes	12/18/2012	Pass	
Liquid Blockage Test				
Air to Liquid Ratio	Yes	12/18/2012	Pass	Disp #5/6,#9 not tested-out of service
Healy Nozzle Regulation Test				
Vapor Return Leak Tightness Test				
Vapor Return Line Vacuum Integrity test				





### Tanknology Air to Liquid Ratio Form

**Store Information**

Site Name: Southside 20025  
 Address: 31 Heather Lane  
Perryville MD 21903  
 Phone: 642-2883

**Testing Company**

Name: TANKNOLOGY INC.  
 Address: 11000 N.MoPac Expressway, #500  
AUSTIN, TX 78759  
 Phone: 1-(800)-800-4633

Allowable A/L: 0.90 - 1.20  
 CARB EO: G-70-150

Test Unit Serial Number: VS-0401  
 Test Unit Calibration Date: 9/27/2012

Meter Leak Tests: Pre-Test Leak Check (Pass/Fail):  
 (For TriTester only) Post-Test Leak Check (Pass/Fail):

Note: Bulb must not inflate  
 in less than 30 seconds.

Dispenser Number	Product Grade	Nozzle Model #	Nozzle Manufacturer	A/L	GPM	PASS /FAIL	Comments
1	87	OPW	12VW-4400	1.02	8.64	Pass	
1	89	OPW	12VW-4400	1.00	8.88	Pass	
1	93	OPW	12VW-4400	1.03	8.13	Pass	
2	87	CATLOW		1.08	9.14	Pass	
2	89	CATLOW		1.06	8.00	Pass	
2	93	CATLOW		1.03	8.49	Pass	
5	87						Out of Service
5	89						Out of Service
5	93						Out of Service
6	87						Out of Service
6	89						Out of Service
6	93						Out of Service
7	87	CATLOW		1.02	8.42	Pass	
7	89	CATLOW		1.04	8.72	Pass	
7	93	OPW	12VW-4400	1.03	7.80	Pass	
8	87	OPW	11VAI-27R	1.12	9.32	Pass	
8	89	OPW	11VAI-27R	1.11	8.72	Pass	
8	93	OPW	11VAI-27R	1.08	8.34	Pass	
9	87	CATLOW					Unable to test-gallons display not functioning
9	89	CATLOW					Unable to test-gallons display not functioning
9	93	CATLOW					Unable to test-gallons display not functioning
10	87	OPW	11VAI-27R	1.17	9.14	Pass	
10	89	OPW	11VAI-27R	1.20	8.88	Pass	
10	93	OPW	11VAI-27R	1.18	8.34	Pass	
11	87	CATLOW		1.06	8.64	Pass	
11	89	CATLOW		1.03	9.05	Pass	
11	93	CATLOW		1.07	8.20	Pass	
12	87	OPW	11VAI-27R	1.07	8.36	Pass	
12	89	OPW	11VAI-27R	1.03	7.80	Pass	
12	93	OPW	11VAI-27R	1.13	8.80	Pass	

Tester: Michael Collins

Certification #: 94341

Signature: *Michael A. Collins*

Test Date: 12/18/2012

WO: 8505854



**Tanknology Air to Liquid Ratio Form**

**Store Information**

Site Name: Southside 20025  
Address: 31 Heather Lane  
Perryville MD 21903  
Phone: 642-2883

**Testing Company**

Name: TANKNOLOGY INC.  
Address: 11000 N.MoPac Expressway, #500  
AUSTIN, TX 78759  
Phone: 1-(800)-800-4633

Allowable A/L: 0.90 - 1.20  
CARB EO: G-70-150

Test Unit Serial Number: VS-0401  
Test Unit Calibration Date: 9/27/2012

Meter Leak Tests: Pre-Test Leak Check (Pass/Fail):  
(For TriTester only) Post-Test Leak Check (Pass/Fail):

Note: Bulb must not inflate in less than 30 seconds.

Dispenser Number	Product Grade	Nozzle Model #	Nozzle Manufacturer	A/L	GPM	PASS /FAIL	Comments
13	87	CATLOW		1.08	7.61	Pass	
13	89	CATLOW		1.08	8.49	Pass	
13	93	Husky	V-34	0.98	8.06	Pass	
14	87	CATLOW		1.02	8.13	Pass	
14	89	CATLOW		1.02	7.86	Pass	
14	93	CATLOW		1.01	8.06	Pass	

Tester: Michael Collins

Certification #: 94341

Signature: *Michael Collins*

Test Date: 12/18/2012

WO: 8505854

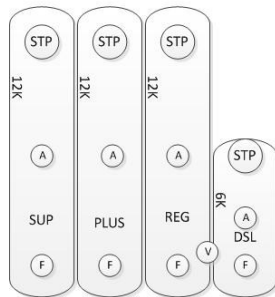
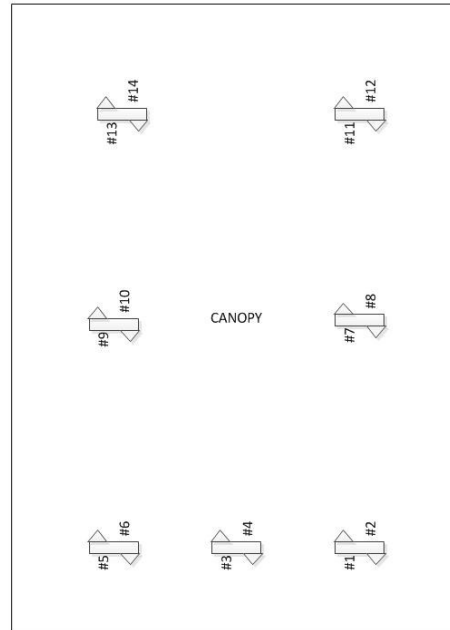


# Site Diagram

(This site diagram is for reference only and is not drawn to scale)

Work Order: 8505854  
Site ID / Name: 20025 / Southside 20025  
Address: 31 Heather Lane  
City: Perryville State: MD Zip: 21903

Heather lane



○ VENTS



	<b>Tanknology Inc.</b> 8501 N. MoPac Expressway, Suite 400 Austin, TX 78759 (800) 964-0010 <b>JOB CLEARANCE FORM &amp;                  SITE SAFETY CHECKLIST - OVF</b>	Policy 100-29-A Rev: D Revised: 8/04/2008
---	---	---

Site Name/#: <i>Southside Oil #20025</i>	Street Address: <i>31 Heather LN Perryville, MD</i>	W.O. # <i>8505854</i>
Arrival Time: <i>18:50</i>	Departure Time: <i>3:00</i>	Travel Time: <i>1.75 hrs</i>
Others on site:		Date: <i>12-18-12</i>

Scope of Work and Tasks Performed (JSA's must be available for all tasks):  
*Test LQS, EU, PD, AL, ATG, SB*

Repairs to Equipment or Parts Provided:  
*1 Hr. Labor 1-61JSK-44CB, 1-53236242400800*

Follow-up actions required; equipment isolated; comments:  
*Vapor spill Buckets needs Hydro Test, Disp 5/6: #9 not all tested - out of service*

**PPE - PERSONAL PROTECTIVE EQUIPMENT REQUIRED (Check items used or mark ~ if not applicable)**

<input checked="" type="checkbox"/> Safety Vest	<input checked="" type="checkbox"/> Safety Glasses	<input checked="" type="checkbox"/> Gloves	<input type="checkbox"/> Hearing Protection
<input checked="" type="checkbox"/> Steel Toe Boots	<input checked="" type="checkbox"/> Splash Goggles	<input type="checkbox"/> Hard Hat	<input type="checkbox"/> Other

**PRE-TEST PROCEDURES (Check each item completed or mark ~ if not applicable)**

1.  Discuss safety procedures with site personnel. Nearest hospital: \_\_\_\_\_
2.  Prior to fuel deliveries the UST system must be placed back into working order.
3.  Secure entire work area with barricades (cones, flags, and caution tape, pennant flags, or other perimeter guard).
4.  Place fire extinguishers and "No Smoking" signs in the work area.
5.  Implement Lockout/Tagout per API 1646 (when accessing product piping during tasks)
  - All applicable equipment disabled during test(s).
  - Secure the circuit breaker(s) with lockout devices and tags.
  - Secure nozzles with "Out of Service" bags and nylon ties.
  - Verify LOTO is complete by trying to operate pumps.
  - Close ball valves or check valves on product piping.
  - Disconnect electrical "bayonet" connector from the STP(s).

SIGN IN		Lead Technician Name	Lead Technician Signature
<b>General Safety Checks:</b> All site personnel have been informed. Fuel delivery has been informed. Is a fuel delivery due today? _____ LOTO procedures have been discussed and agreed. Work areas barricaded to protect workers, staff & public.		<i>Michael A. Collins</i>	<i>Michael A. Collins</i>
		Site Representative Name	Site Representative Signature
		<i>Lauren Gobbe</i>	<i>Lauren Gobbe</i>
I have discussed job clearance form with technician.			

**POST-TEST PROCEDURES (Check each item completed or mark ~ if not applicable)**

1.  Remove all "Lockout/Tagout" devices.
2.  Run all pumps and verify there are no leaks:
  - Leak Detector Threads on STP's
  - Impact Valve Test Ports under dispensers
  - Functional Elements & Relief Screws
3.  Install lead wire seal on all test plugs & leak detectors that were serviced.  
 Count LD threads: L1 \_\_\_\_\_ L2 \_\_\_\_\_ L3 \_\_\_\_\_ L4 \_\_\_\_\_ L5 \_\_\_\_\_ L6 \_\_\_\_\_
4.  Check following components operational:
  - Ball floats, dry breaks & caps
  - Cathodic protection operational
  - Containment sumps are dry
  - Dispensers & POS operational
  - Dispenser panels are replaced
  - Drop tubes, fill adapters & caps
  - Leak detectors & vent tubes
  - Manhole covers and sump lids
  - Monitoring system is operational
  - Shear valves are open
  - Siphon lines and manifold valves
  - Siphon lines and manifold valves
  - STP fittings and bayonet connectors
  - Vents (not capped, plugged or isolated)
5.  Remove barricades.

SIGN OUT & Operator Verification of Work (OVF)		Lead Technician Name	Lead Technician Signature
<b>General Safety Checks:</b> Work area has been left tidy & safe. Site staff are aware of work status including any remaining isolation. Changes to equipment are documented and communicated. All incidents, near incidents, and unsafe situations reported.		<i>Michael A. Collins</i>	<i>Michael A. Collins</i>
		Site Representative Name	Site Representative Signature
		<i>Lauren Gobbe</i>	<i>Lauren Gobbe</i>
Site Representative Comments:			

284456 EXXON  
32 HEATHER LN.  
PERRYVILLE.MD 22093  
G02179595205001

DEC 18. 2012 6:56 PM

SYSTEM STATUS REPORT

Q 2:CONT HANDLE ALM

INVENTORY REPORT

T 1:REGULAR  
VOLUME = 9628 GALS  
ULLAGE = 1999 GALS  
90% ULLAGE= 836 GALS  
TC VOLUME = 9680 GALS  
HEIGHT = 70.38 INCHES  
WATER VOL = 0 GALS  
WATER = 0.00 INCHES  
TEMP = 52.3 DEG F

T 2:PLUS  
VOLUME = 2301 GALS  
ULLAGE = 9326 GALS  
90% ULLAGE= 8163 GALS  
TC VOLUME = 2301 GALS  
HEIGHT = 23.79 INCHES  
WATER VOL = 0 GALS  
WATER = 0.00 INCHES  
TEMP = 59.8 DEG F

T 3:SUPREME  
VOLUME = 2191 GALS  
ULLAGE = 9436 GALS  
90% ULLAGE= 8273 GALS  
TC VOLUME = 2193 GALS  
HEIGHT = 23.01 INCHES  
WATER VOL = 0 GALS  
WATER = 0.00 INCHES  
TEMP = 58.0 DEG F

T 4:DIESEL  
VOLUME = 2814 GALS  
ULLAGE = 3115 GALS  
90% ULLAGE= 2522 GALS  
TC VOLUME = 2820 GALS  
HEIGHT = 44.16 INCHES  
WATER VOL = 0 GALS  
WATER = 0.00 INCHES  
TEMP = 54.7 DEG F

\*\*\*\*\* END \*\*\*\*\*

284456 EXXON  
32 HEATHER LN.  
PERRYVILLE.MD 22093  
G02179595205001

DEC 19. 2012 2:55 AM

SYSTEM STATUS REPORT

D 8:ALARM CLEAR WARNING

ALARM HISTORY REPORT

----- SYSTEM ALARM -----  
PAPER OUT  
DEC 13. 2012 3:04 PM  
PRINTER ERROR  
DEC 13. 2012 3:06 PM

\*\*\*\*\* END \*\*\*\*\*

SOFTWARE REVISION LEVEL  
VERSION 131.01  
SOFTWARE# 346131-100-B  
CREATED - 11.03.22.16.44

S-MODULE# 330160-160-A  
SYSTEM FEATURES:  
PERIODIC IN-TANK TESTS  
ANNUAL IN-TANK TESTS  
BIR  
PLLD  
0.10 AUTO  
0.20 REPETITIV  
WPLLD  
0.10 AUTO  
0.20 REPETITIV

284456 EXXON  
32 HEATHER LN.  
PERRYVILLE.MD 22093  
G02179595205001

DEC 19. 2012 2:58 AM

SYSTEM STATUS REPORT

D 8:ALARM CLEAR WARNING

INVENTORY REPORT

T 1:REGULAR  
VOLUME = 9514 GALS  
ULLAGE = 2113 GALS  
90% ULLAGE= 950 GALS  
TC VOLUME = 9564 GALS  
HEIGHT = 69.55 INCHES  
WATER VOL = 0 GALS  
WATER = 0.00 INCHES  
TEMP = 52.5 DEG F

T 2:PLUS  
VOLUME = 2275 GALS  
ULLAGE = 9352 GALS  
90% ULLAGE= 8189 GALS  
TC VOLUME = 2276 GALS  
HEIGHT = 23.61 INCHES  
WATER VOL = 0 GALS  
WATER = 0.00 INCHES  
TEMP = 58.7 DEG F

T 3:SUPREME  
VOLUME = 2159 GALS  
ULLAGE = 9468 GALS  
90% ULLAGE= 8305 GALS  
TC VOLUME = 2161 GALS  
HEIGHT = 22.77 INCHES  
WATER VOL = 0 GALS  
WATER = 0.00 INCHES  
TEMP = 58.0 DEG F

T 4:DIESEL  
VOLUME = 2793 GALS  
ULLAGE = 3136 GALS  
90% ULLAGE= 2543 GALS  
TC VOLUME = 2799 GALS  
HEIGHT = 43.90 INCHES  
WATER VOL = 0 GALS  
WATER = 0.00 INCHES  
TEMP = 54.7 DEG F

\*\*\*\*\* END \*\*\*\*\*

SYSTEM SETUP

DEC 18, 2012 6:57 PM

SYSTEM UNITS

U.S.  
SYSTEM LANGUAGE  
ENGLISH  
SYSTEM DATE/TIME FORMAT  
MON DD YYYY HH:MM:SS xM

284456 EXXON  
32 HEATHER LN.  
PERRYVILLE.MD 22093  
G02179595205001

SHIFT TIME 1 : 12:00 AM  
SHIFT TIME 2 : DISABLED  
SHIFT TIME 3 : DISABLED  
SHIFT TIME 4 : DISABLED

SHIFT BIR PRINTOUTS  
DISABLED  
DAILY BIR PRINTOUTS  
DISABLED  
TICKETED DELIVERY  
DISABLED  
TANK PER TST NEEDED WRN  
DISABLED  
TANK ANN TST NEEDED WRN  
DISABLED

LINE RE-ENABLE METHOD  
PASS LINE TEST

LINE PER TST NEEDED WRN  
DISABLED  
LINE ANN TST NEEDED WRN  
DISABLED

PRINT TO VOLUMES  
ENABLED

TEMP COMPENSATION  
VALUE (DEG F) : 60.0  
STICK HEIGHT OFFSET  
DISABLED  
ULLAGE: 90%

H-PROTOCOL DATA FORMAT  
HEIGHT  
PRECISION TEST DURATION  
HOURS: 60  
0.20 GPH LINE TEST  
AUTO-CONFIRM: ENABLED  
0.10 GPH LINE TEST  
AUTO-CONFIRM: ENABLED  
PRINT PRECISION LINE  
TEST RESULTS: DISABLED  
DAYLIGHT SAVING TIME  
ENABLED  
START DATE  
MAR WEEK 3 SUN  
START TIME  
2:00 AM  
END DATE  
NOV WEEK 1 SUN  
END TIME  
2:00 AM

RE-DIRECT LOCAL PRINTOUT  
DISABLED

EURO PROTOCOL PREFIX  
S

SYSTEM SECURITY

CODE : 000000

TANK CHART SECURITY  
DISABLED

CUSTOM ALARMS  
DISABLED

SERVICE NOTICE  
DISABLED

ISO 3166 COUNTRY  
CODE:

MASS/DENSITY  
DISABLED

COMMUNICATIONS SETUP

PORT SETTINGS:

COMM BOARD : 2 (S-SAT )  
BAUD RATE : 9600  
PARITY : NONE  
STOP BIT : 1 STOP  
DATA LENGTH: 8 DATA  
RS-232 SECURITY  
CODE : DISABLED  
DTR NORMAL STATE: HIGH

COMM BOARD : 3 (S-SAT )  
BAUD RATE : 9600  
PARITY : NONE  
STOP BIT : 1 STOP  
DATA LENGTH: 8 DATA  
RS-232 SECURITY  
CODE : DISABLED  
DTR NORMAL STATE: HIGH

RECEIVER SETUP:

D 8:VEEDER ROOT (FMS)  
CALL 8606512828  
RCVR TYPE: COMPUTER  
PORT NO: 2  
RETRY NO: 5  
RETRY DELAY: 5  
CONFIRMATION REPORT: OFF

AUTO DIAL TIME SETUP:

D 8:VEEDER ROOT (FMS)  
DIAL ON DATE  
NOV 26, 2012  
DIAL TIME : 11:49 PM  
RECEIVER REPORTS:

RS-232 END OF MESSAGE  
DISABLED

AUTO DIAL ALARM SETUP

D 8:VEEDER ROOT (FMS)

IN-TANK ALARMS  
ALL:LEAK ALARM  
ALL:HIGH WATER ALARM  
ALL:OVERFILL ALARM  
ALL:LOW PRODUCT ALARM  
ALL:SUDDEN LOSS ALARM  
ALL:HIGH PRODUCT ALARM  
ALL:INVALID FUEL LEVEL  
ALL:PROBE OUT  
ALL:HIGH WATER WARNING  
ALL:DELIVERY NEEDED  
ALL:MAX PRODUCT ALARM  
ALL:GROSS TEST FAIL  
ALL:PERIODIC TEST FAIL  
ALL:ANNUAL TEST FAIL  
ALL:PER TST NEEDED WRN  
ALL:ANN TST NEEDED WRN  
ALL:PER TST NEEDED ALM  
ALL:ANN TST NEEDED ALM  
ALL:TANK TEST ACTIVE  
ALL:NO CSLD IDLE TIME  
ALL:TANK SIPHON BREAK  
ALL:CSLD INCR RATE WARN  
ALL:ACCU.CHART CAL WARN  
ALL:RECON WARNING  
ALL:RECON ALARM  
ALL:LOW TEMP WARNING  
ALL:MISSING TICKET WARN  
ALL:GROSS FAIL LINE TNK

LIQUID SENSOR ALMS  
ALL:FUEL ALARM  
ALL:SENSOR OUT ALARM  
ALL:SHORT ALARM  
ALL:WATER ALARM  
ALL:WATER OUT ALARM  
ALL:HIGH LIQUID ALARM  
ALL:LOW LIQUID ALARM  
ALL:LIQUID WARNING

RECEIVER ALARMS  
SERVICE REPORT WARN  
ALARM CLEAR WARNING  
DELIVERY REPORT WRN  
NO DIAL TONE ALARM

PRESSURE LINE LEAK  
 ALL:GROSS LINE FAIL  
 ALL:ANNUAL LINE FAIL  
 ALL:PER TST NEEDED WRN  
 ALL:PER TST NEEDED ALM  
 ALL:PLLD OPEN ALARM  
 ALL:UNKNOWN ALARM  
 ALL:PLLD SHUTDOWN ALARM  
 ALL:UNKNOWN ALARM  
 ALL:UNKNOWN ALARM  
 ALL:PERIODIC LINE FAIL  
 ALL:ANN TST NEEDED WRN  
 ALL:ANN TST NEEDED ALM  
 ALL:LOW PRESSURE ALARM  
 ALL:UNKNOWN ALARM  
 ALL:CONT HANDLE ALM  
 ALL:FUEL OUT  
 ALL:LN EQUIP FAULT ALM

SMARTSENSOR ALARMS  
 ALL:SETUP DATA WARNING

ALL:COMMUNICATION ALARM  
 ALL:SENSOR FAULT ALARM  
 ALL:FUEL WARNING  
 ALL:FUEL ALARM  
 ALL:WATER WARNING  
 ALL:WATER ALARM  
 ALL:HIGH LIQUID WARNING  
 ALL:HIGH LIQUID ALARM  
 ALL:LOW LIQUID WARNING  
 ALL:LOW LIQUID ALARM  
 ALL:TEMPERATURE WARNING  
 ALL:RELAY ACTIVE  
 ALL:INSTALL ALARM  
 ALL:SENSOR FAULT WARN  
 ALL:VACUUM WARNING  
 ALL:NO VACUUM ALARM

IN-TANK SETUP

T 1:REGULAR  
 PRODUCT CODE : 1  
 THERMAL COEFF : .000700  
 TANK DIAMETER : 92.00  
 TANK PROFILE : 4 PTS  
 FULL VOL : 11627  
 69.0 INCH VOL : 9438  
 46.0 INCH VOL : 5814  
 23.0 INCH VOL : 2190  
 METER DATA : YES  
 END FACTOR: NONE  
 CAL UPDATE: NEVER

FLOAT SIZE: 4.0 IN.

WATER WARNING : 1.0  
 HIGH WATER LIMIT: 2.0  
 WATER ALARM FILTER: LOW

MAX OR LABEL VOL: 11627  
 OVERFILL LIMIT : 90%  
 : 10464  
 HIGH PRODUCT : 100%  
 : 11627  
 DELIVERY LIMIT : 3%  
 : 449

LOW PRODUCT : 449  
 LEAK ALARM LIMIT: 15  
 SUDDEN LOSS LIMIT: 99  
 TANK TILT : 0.00  
 PROBE OFFSET : 0.00

SIPHON MANIFOLDED TANKS  
 T#: NONE  
 LINE MANIFOLDED TANKS  
 T#: NONE

LEAK MIN PERIODIC: 25%  
 : 2906

LEAK MIN ANNUAL : 50%  
 : 5813

PERIODIC TEST TYPE  
 STANDARD

ANNUAL TEST FAIL  
 ALARM DISABLED

PERIODIC TEST FAIL  
 ALARM DISABLED

GROSS TEST FAIL  
 ALARM ENABLED

ANN TEST AVERAGING: OFF  
 PER TEST AVERAGING: OFF

TANK TEST NOTIFY: OFF

TNK TST SIPHON BREAK:OFF

DELIVERY DELAY : 3 MIN  
 PUMP THRESHOLD : 10.00%

T 2:PLUS  
 PRODUCT CODE : 2  
 THERMAL COEFF : .000700  
 TANK DIAMETER : 92.00  
 TANK PROFILE : 4 PTS  
 FULL VOL : 11627  
 69.0 INCH VOL : 9438  
 46.0 INCH VOL : 5814  
 23.0 INCH VOL : 2190  
 METER DATA : YES  
 END FACTOR: NONE  
 CAL UPDATE: NEVER

FLOAT SIZE: 4.0 IN.

WATER WARNING : 1.0  
 HIGH WATER LIMIT: 2.0  
 WATER ALARM FILTER: LOW

MAX OR LABEL VOL: 11627  
 OVERFILL LIMIT : 90%  
 : 10464  
 HIGH PRODUCT : 100%  
 : 11627  
 DELIVERY LIMIT : 3%  
 : 449

LOW PRODUCT : 449  
 LEAK ALARM LIMIT: 15  
 SUDDEN LOSS LIMIT: 99  
 TANK TILT : 0.00  
 PROBE OFFSET : 0.00

SIPHON MANIFOLDED TANKS  
 T#: NONE  
 LINE MANIFOLDED TANKS  
 T#: NONE

LEAK MIN PERIODIC: 25%  
 : 2906

LEAK MIN ANNUAL : 50%  
 : 5813

PERIODIC TEST TYPE  
 STANDARD

ANNUAL TEST FAIL  
 ALARM DISABLED

PERIODIC TEST FAIL  
 ALARM DISABLED

GROSS TEST FAIL  
 ALARM ENABLED

ANN TEST AVERAGING: OFF  
 PER TEST AVERAGING: OFF

TANK TEST NOTIFY: OFF

TNK TST SIPHON BREAK:OFF

DELIVERY DELAY : 3 MIN  
 PUMP THRESHOLD : 10.00%

T 3: SUPREME  
 PRODUCT CODE : 3  
 THERMAL COEFF : .000700  
 TANK DIAMETER : 92.00  
 TANK PROFILE : 4 PTS  
 FULL VOL : 11627  
 69.0 INCH VOL : 9438  
 46.0 INCH VOL : 5814  
 23.0 INCH VOL : 2190  
 METER DATA : YES  
 END FACTOR : NONE  
 CAL UPDATE : NEVER

FLOAT SIZE: 4.0 IN.  
 WATER WARNING : 1.0  
 HIGH WATER LIMIT: 2.0  
 WATER ALARM FILTER: LOW  
 MAX OR LABEL VOL: 11627  
 OVERFILL LIMIT : 90%  
 : 10464  
 HIGH PRODUCT : 100%  
 : 11627  
 DELIVERY LIMIT : 3%  
 : 449  
 LOW PRODUCT : 449  
 LEAK ALARM LIMIT: 15  
 SUDDEN LOSS LIMIT: 99  
 TANK TILT : 0.00  
 PROBE OFFSET : 0.00

SIPHON MANIFOLDED TANKS  
 T#: NONE  
 LINE MANIFOLDED TANKS  
 T#: NONE

LEAK MIN PERIODIC: 25%  
 : 2906  
 LEAK MIN ANNUAL : 50%  
 : 5813

PERIODIC TEST TYPE  
 STANDARD

ANNUAL TEST FAIL  
 ALARM DISABLED

PERIODIC TEST FAIL  
 ALARM DISABLED

GROSS TEST FAIL  
 ALARM ENABLED

ANN TEST AVERAGING: OFF  
 PER TEST AVERAGING: OFF

TANK TEST NOTIFY: OFF

TNK TST SIPHON BREAK: OFF

DELIVERY DELAY : 3 MIN  
 PUMP THRESHOLD : 10.00%

T 4: DIESEL  
 PRODUCT CODE : 4  
 THERMAL COEFF : .000450  
 TANK DIAMETER : 92.00  
 TANK PROFILE : 1 PT  
 FULL VOL : 5929  
 METER DATA : YES  
 END FACTOR : NONE  
 CAL UPDATE : NEVER

FLOAT SIZE: 4.0 IN.  
 WATER WARNING : 1.0  
 HIGH WATER LIMIT: 2.0  
 WATER ALARM FILTER: LOW  
 MAX OR LABEL VOL: 5929  
 OVERFILL LIMIT : 90%  
 : 5336  
 HIGH PRODUCT : 100%  
 : 5929  
 DELIVERY LIMIT : 4%  
 : 251  
 LOW PRODUCT : 251  
 LEAK ALARM LIMIT: 15  
 SUDDEN LOSS LIMIT: 99  
 TANK TILT : 0.00  
 PROBE OFFSET : 0.00

SIPHON MANIFOLDED TANKS  
 T#: NONE  
 LINE MANIFOLDED TANKS  
 T#: NONE

LEAK MIN PERIODIC: 25%  
 : 1482

LEAK MIN ANNUAL : 50%  
 : 2964

PERIODIC TEST TYPE  
 STANDARD

ANNUAL TEST FAIL  
 ALARM DISABLED

PERIODIC TEST FAIL  
 ALARM DISABLED

GROSS TEST FAIL  
 ALARM ENABLED

ANN TEST AVERAGING: OFF  
 PER TEST AVERAGING: OFF

TANK TEST NOTIFY: OFF

TNK TST SIPHON BREAK: OFF

DELIVERY DELAY : 3 MIN  
 PUMP THRESHOLD : 10.00%

LEAK TEST METHOD  
 TEST CSLD : ALL TANK  
 Pd = 95%  
 CLIMATE FACTOR: MODERATE

GROSS TEST  
 AUTO-CONFIRM: DISABLED

REPORT ONLY:  
 DISABLED

TST EARLY STOP: DISABLED

LEAK TEST REPORT FORMAT  
 NORMAL

PRESSURE LINE LEAK SETUP

Q 1: REGULAR

TYP: 2.0/3.0 IN FIBERGLASS  
 2.0 IN DIA LEN: 383 FEET

3.0 IN DIA LEN: 0 FEET

0.20 GPH TEST: REPETITIV  
 0.10 GPH TEST: AUTO  
 SHUTDOWN RATE: 3.0 GPH  
 LOW PRESSURE SHUTOFF: YES  
 LOW PRESSURE : 5 PSI

T 1: REGULAR  
 DISPENSE MODE:  
 STANDARD  
 SENSOR: HIGH PRESSURE  
 PRESSURE OFFSET: 0.0 PSI

MECHANICAL BLENDER: NO

Q 2:PLUS

TYP:2.0/3.0IN FIBERGLASS  
2.0IN DIA LEN: 388 FEET

3.0IN DIA LEN: 0 FEET

0.20 GPH TEST: REPETITIV  
0.10 GPH TEST: AUTO  
SHUTDOWN RATE: 3.0 GPH  
LOW PRESSURE SHUTOFF:YES  
LOW PRESSURE : 5 PSI

T 2:PLUS

DISPENSE MODE:  
STANDARD  
SENSOR: HIGH PRESSURE  
PRESSURE OFFSET: 0.0PSI

MECHANICAL BLENDER: NO

Q 3:SUPREME

TYP:2.0/3.0IN FIBERGLASS  
2.0IN DIA LEN: 343 FEET

3.0IN DIA LEN: 0 FEET

0.20 GPH TEST: REPETITIV  
0.10 GPH TEST: AUTO  
SHUTDOWN RATE: 3.0 GPH  
LOW PRESSURE SHUTOFF:YES  
LOW PRESSURE : 5 PSI

T 3:SUPREME

DISPENSE MODE:  
STANDARD  
SENSOR: HIGH PRESSURE  
PRESSURE OFFSET: 0.0PSI

MECHANICAL BLENDER: NO

Q 4:DIESEL

TYP:2.0/3.0IN FIBERGLASS  
2.0IN DIA LEN: 265 FEET

3.0IN DIA LEN: 0 FEET

0.20 GPH TEST: REPETITIV  
0.10 GPH TEST: AUTO  
SHUTDOWN RATE: 3.0 GPH  
LOW PRESSURE SHUTOFF:YES  
LOW PRESSURE : 5 PSI

T 4:DIESEL

DISPENSE MODE:  
STANDARD  
SENSOR: HIGH PRESSURE  
PRESSURE OFFSET: 0.0PSI

MECHANICAL BLENDER: NO

LINE LEAK LOCKOUT SETUP

-----  
LOCKOUT SCHEDULE  
DAILY  
START TIME: DISABLED  
STOP TIME : DISABLED

LIQUID SENSOR SETUP

-----  
L 1:DISP.1-2  
DUAL FLT. HIGH VAPOR  
CATEGORY : DISPENSER PAN

L 2:DISP. 3-4 DIESEL  
DUAL FLT. HIGH VAPOR  
CATEGORY : DISPENSER PAN

L 3:DISP. 5-6  
DUAL FLT. HIGH VAPOR  
CATEGORY : DISPENSER PAN

L 4:DISP. 7-8  
DUAL FLT. HIGH VAPOR  
CATEGORY : DISPENSER PAN

L 5:DISP.9-10  
DUAL FLT. HIGH VAPOR  
CATEGORY : DISPENSER PAN

L 6:DISP. 11-12  
DUAL FLT. HIGH VAPOR  
CATEGORY : DISPENSER PAN

L 7:DISP. 13-14  
DUAL FLT. HIGH VAPOR  
CATEGORY : DISPENSER PAN

L 9:REGULAR ANNULAR  
TRI-STATE (SINGLE FLOAT)  
CATEGORY : ANNULAR SPACE

L11:SUPREME ANNULAR  
TRI-STATE (SINGLE FLOAT)  
CATEGORY : ANNULAR SPACE

L12:DIESEL ANNULAR  
TRI-STATE (SINGLE FLOAT)  
CATEGORY : ANNULAR SPACE

L13:PLUS ANNULAR  
TRI-STATE (SINGLE FLOAT)  
CATEGORY : ANNULAR SPACE

OUTPUT RELAY SETUP

-----  
R 1:INSIDE ALARM  
TYPE:  
STANDARD  
NORMALLY OPEN

IN-TANK ALARMS  
ALL:HIGH WATER ALARM  
ALL:SUDDEN LOSS ALARM  
ALL:PROBE OUT  
ALL:HIGH WATER WARNING  
ALL:GROSS TEST FAIL  
ALL:PERIODIC TEST FAIL  
ALL:ANNUAL TEST FAIL  
ALL:PER TST NEEDED WRN  
ALL:ANN TST NEEDED WRN  
ALL:PER TST NEEDED ALM  
ALL:ANN TST NEEDED ALM  
ALL:CSLD INCR RATE WARN

LIQUID SENSOR ALMS  
ALL:FUEL ALARM  
ALL:SENSOR OUT ALARM  
ALL:WATER ALARM  
ALL:HIGH LIQUID ALARM

PRESSURE LINE LEAK  
ALL:GROSS LINE FAIL  
ALL:ANNUAL LINE FAIL  
ALL:PER TST NEEDED WRN  
ALL:PLLD SHUTDOWN ALARM  
ALL:FUEL OUT

SMARTSENSOR ALARMS  
ALL:COMMUNICATION ALARM  
ALL:FUEL WARNING  
ALL:FUEL ALARM  
ALL:WATER WARNING

ALL:WATER ALARM  
ALL:HIGH LIQUID WARNING  
ALL:HIGH LIQUID ALARM  
ALL:INSTALL ALARM

PLLD LINE DISABLE SETUP

Q 1:REGULAR

IN-TANK ALARMS  
T 1:HIGH WATER ALARM  
T 1:LOW PRODUCT ALARM

LIQUID SENSOR ALMS  
L 1:FUEL ALARM  
L 3:FUEL ALARM  
L 4:FUEL ALARM  
L 5:FUEL ALARM  
L 6:FUEL ALARM  
L 7:FUEL ALARM  
L 9:FUEL ALARM  
L 1:HIGH LIQUID ALARM  
L 3:HIGH LIQUID ALARM  
L 4:HIGH LIQUID ALARM  
L 5:HIGH LIQUID ALARM  
L 6:HIGH LIQUID ALARM  
L 7:HIGH LIQUID ALARM

SMARTSENSOR ALARMS  
s 1:FUEL ALARM  
s 1:WATER ALARM

Q 2:PLUS

IN-TANK ALARMS  
T 2:HIGH WATER ALARM  
T 2:LOW PRODUCT ALARM

LIQUID SENSOR ALMS  
L 1:FUEL ALARM  
L 3:FUEL ALARM  
L 4:FUEL ALARM  
L 5:FUEL ALARM  
L 6:FUEL ALARM  
L 7:FUEL ALARM  
L 13:FUEL ALARM  
L 1:HIGH LIQUID ALARM  
L 3:HIGH LIQUID ALARM  
L 4:HIGH LIQUID ALARM  
L 5:HIGH LIQUID ALARM  
L 6:HIGH LIQUID ALARM  
L 7:HIGH LIQUID ALARM

SMARTSENSOR ALARMS  
s 2:FUEL ALARM  
s 2:WATER ALARM

Q 3:SUPREME

IN-TANK ALARMS  
T 3:HIGH WATER ALARM  
T 3:LOW PRODUCT ALARM

LIQUID SENSOR ALMS  
L 1:FUEL ALARM  
L 3:FUEL ALARM  
L 4:FUEL ALARM  
L 5:FUEL ALARM  
L 6:FUEL ALARM  
L 7:FUEL ALARM  
L 11:FUEL ALARM  
L 1:HIGH LIQUID ALARM  
L 3:HIGH LIQUID ALARM  
L 4:HIGH LIQUID ALARM  
L 5:HIGH LIQUID ALARM  
L 6:HIGH LIQUID ALARM  
L 7:HIGH LIQUID ALARM

Q 4:DIESEL

IN-TANK ALARMS  
T 4:HIGH WATER ALARM  
T 4:LOW PRODUCT ALARM

LIQUID SENSOR ALMS  
L 2:FUEL ALARM  
L 12:FUEL ALARM  
L 2:HIGH LIQUID ALARM

SMARTSENSOR ALARMS  
s 4:FUEL ALARM  
s 4:WATER ALARM

RECONCILIATION SETUP

AUTOMATIC DAILY CLOSING  
TIME: 2:00 AM

AUTO SHIFT #1 CLOSING  
TIME: DISABLED

AUTO SHIFT #2 CLOSING  
TIME: DISABLED

AUTO SHIFT #3 CLOSING  
TIME: DISABLED

AUTO SHIFT #4 CLOSING  
TIME: 12:00 AM

PERIODIC RECONCILIATION  
MODE: MONTHLY  
ALARM: DISABLED

TEMP COMPENSATION  
STANDARD  
METER CALIBRATION  
OFFSET: 0.000%

BUS SLOT FUEL METER TANK  
TANK MAP EMPTY

SMARTSENSOR SETUP

s 1:REGULAR STP SUMP  
CATEGORY MAG SENSOR

ALM UPGRADE DELAY 504  
PROGRAMMABLE YES

MIN THRESHOLD 1.7  
MAX THRESHOLD 22.0

FUEL ALARM  
FUEL HT > 1.6  
PROGRAMMABLE NO  
UPGRADE NO

WATER WARNING  
WATER HT > 2.0  
PROGRAMMABLE YES  
UPGRADE YES

WATER ALARM  
WATER HT > 20.0  
PROGRAMMABLE YES  
UPGRADE NO

INSTALL ALARM  
INSTALL POS > 4.0  
PROGRAMMABLE NO  
UPGRADE NO

s 2:PLUS STP SUMP  
CATEGORY MAG SENSOR

ALM UPGRADE DELAY 504  
PROGRAMMABLE YES

MIN THRESHOLD 1.7  
MAX THRESHOLD 22.0

FUEL ALARM  
FUEL HT > 1.6  
PROGRAMMABLE NO  
UPGRADE NO

WATER WARNING  
WATER HT > 2.0  
PROGRAMMABLE YES  
UPGRADE YES

WATER ALARM  
WATER HT > 20.0  
PROGRAMMABLE YES  
UPGRADE NO

INSTALL ALARM  
INSTALL POS > 4.0  
PROGRAMMABLE NO  
UPGRADE NO

s 3:SUPREME STP SUMP  
CATEGORY MAG SENSOR

ALM UPGRADE DELAY 504  
PROGRAMMABLE YES

MIN THRESHOLD 1.7  
MAX THRESHOLD 22.0

FUEL ALARM  
FUEL HT > 1.6  
PROGRAMMABLE NO  
UPGRADE NO

WATER WARNING  
WATER HT > 2.0  
PROGRAMMABLE YES  
UPGRADE YES

WATER ALARM  
WATER HT > 20.0  
PROGRAMMABLE YES  
UPGRADE NO

INSTALL ALARM  
INSTALL POS > 4.0  
PROGRAMMABLE NO  
UPGRADE NO

s 4:DIESEL STP SUMP  
CATEGORY MAG SENSOR

ALM UPGRADE DELAY 504  
PROGRAMMABLE YES

MIN THRESHOLD 1.7  
MAX THRESHOLD 22.0

FUEL ALARM  
FUEL HT > 1.6  
PROGRAMMABLE NO  
UPGRADE NO

WATER WARNING  
WATER HT > 2.0  
PROGRAMMABLE YES  
UPGRADE YES

WATER ALARM  
WATER HT > 20.0  
PROGRAMMABLE YES  
UPGRADE NO

INSTALL ALARM  
INSTALL POS > 4.0  
PROGRAMMABLE NO  
UPGRADE NO

ALARM HISTORY REPORT

----- IN-TANK ALARM -----

T 1:REGULAR

HIGH WATER ALARM  
DEC 18, 2012 11:02 PM  
DEC 18, 2012 10:32 PM

OVERFILL ALARM  
DEC 18, 2012 10:56 PM

SUDDEN LOSS ALARM  
DEC 18, 2012 10:29 PM  
DEC 18, 2012 10:27 PM

INVALID FUEL LEVEL  
DEC 18, 2012 10:28 PM

PROBE OUT  
DEC 18, 2012 11:00 PM  
DEC 18, 2012 10:27 PM

HIGH WATER WARNING  
DEC 18, 2012 11:02 PM  
DEC 18, 2012 10:32 PM

MAX PRODUCT ALARM  
DEC 18, 2012 10:56 PM  
DEC 18, 2012 10:44 PM  
DEC 18, 2012 10:29 PM

LOW TEMP WARNING  
DEC 18, 2012 10:28 PM

----- IN-TANK ALARM -----

T 2:PLUS

HIGH WATER ALARM  
DEC 18, 2012 11:02 PM  
DEC 18, 2012 10:30 PM

OVERFILL ALARM  
DEC 18, 2012 10:55 PM

SUDDEN LOSS ALARM  
DEC 18, 2012 10:28 PM  
DEC 18, 2012 10:25 PM

INVALID FUEL LEVEL  
DEC 18, 2012 10:26 PM

PROBE OUT  
DEC 18, 2012 10:59 PM  
DEC 18, 2012 10:25 PM

HIGH WATER WARNING  
DEC 18, 2012 11:02 PM  
DEC 18, 2012 10:30 PM

MAX PRODUCT ALARM  
DEC 18, 2012 10:54 PM  
DEC 18, 2012 10:27 PM

LOW TEMP WARNING  
DEC 18, 2012 11:00 PM  
DEC 18, 2012 10:27 PM

ALARM HISTORY REPORT

----- IN-TANK ALARM -----

T 3:SUPREME

HIGH WATER ALARM  
DEC 18, 2012 10:27 PM

OVERFILL ALARM  
DEC 18, 2012 10:24 PM

LOW PRODUCT ALARM  
DEC 18, 2012 10:37 PM

SUDDEN LOSS ALARM  
DEC 18, 2012 10:37 PM  
DEC 18, 2012 10:23 PM

INVALID FUEL LEVEL  
DEC 18, 2012 10:23 PM

PROBE OUT  
DEC 18, 2012 10:48 PM  
DEC 18, 2012 10:23 PM

HIGH WATER WARNING  
DEC 18, 2012 10:27 PM

DELIVERY NEEDED  
DEC 18, 2012 10:37 PM

MAX PRODUCT ALARM  
DEC 18, 2012 10:25 PM

T 4:DIESEL

HIGH WATER ALARM  
DEC 19, 2012 2:15 AM

OVERFILL ALARM  
DEC 19, 2012 2:12 AM

LOW PRODUCT ALARM  
DEC 19, 2012 2:07 AM

SUDDEN LOSS ALARM  
DEC 19, 2012 2:06 AM

INVALID FUEL LEVEL  
DEC 19, 2012 2:07 AM

PROBE OUT  
DEC 19, 2012 2:25 AM  
DEC 19, 2012 2:06 AM

HIGH WATER WARNING  
DEC 19, 2012 2:15 AM

DELIVERY NEEDED  
DEC 19, 2012 2:07 AM

MAX PRODUCT ALARM  
DEC 19, 2012 2:12 AM

LOW TEMP WARNING  
DEC 19, 2012 2:27 AM

ALARM HISTORY REPORT

----- SENSOR ALARM -----

L 1:DISP. 1-2  
DISPENSER PAN  
HIGH LIQUID ALARM  
DEC 18, 2012 10:21 PM

SENSOR OUT ALARM  
DEC 18, 2012 10:26 AM

HIGH LIQUID ALARM  
DEC 18, 2012 10:24 AM

----- SENSOR ALARM -----

L 2:DISP. 3-4 DIESEL  
DISPENSER PAN  
FUEL ALARM  
DEC 19, 2012 1:02 AM

ALARM HISTORY REPORT

----- SENSOR ALARM -----

L 3:DISP. 5-6  
DISPENSER PAN  
HIGH LIQUID ALARM  
DEC 18, 2012 10:22 PM

ALARM HISTORY REPORT

----- SENSOR ALARM -----

L 4:DISP. 7-8  
DISPENSER PAN  
HIGH LIQUID ALARM  
DEC 18, 2012 10:21 PM

ALARM HISTORY REPORT

----- SENSOR ALARM -----

L 5:DISP. 9-10  
DISPENSER PAN  
HIGH LIQUID ALARM  
DEC 18, 2012 10:21 PM

ALARM HISTORY REPORT

----- SENSOR ALARM -----

L 6:DISP. 11-12  
DISPENSER PAN  
HIGH LIQUID ALARM  
DEC 18, 2012 10:20 PM

ALARM HISTORY REPORT

----- SENSOR ALARM -----

L 7:DISP. 13-14  
DISPENSER PAN  
HIGH LIQUID ALARM  
DEC 18, 2012 10:20 PM

ALARM HISTORY REPORT

----- SENSOR ALARM -----

L 9:REGULAR ANNULAR  
ANNULAR SPACE  
FUEL ALARM  
DEC 18, 2012 10:42 PM



ALARM HISTORY REPORT

----- SENSOR ALARM -----  
L11: SUPREME ANNULAR  
ANNULAR SPACE  
FUEL ALARM  
DEC 18, 2012 10:49 PM  
  
FUEL ALARM  
DEC 18, 2012 10:39 PM  
  
SENSOR OUT ALARM  
DEC 13, 2012 11:26 AM

----- SENSOR ALARM -----  
L12: DIESEL ANNULAR  
ANNULAR SPACE  
FUEL ALARM  
DEC 19, 2012 1:59 AM  
  
FUEL ALARM  
DEC 19, 2012 1:56 AM  
  
FUEL ALARM  
DEC 19, 2012 1:46 AM

----- SENSOR ALARM -----  
L13: PLUS ANNULAR  
ANNULAR SPACE  
FUEL ALARM  
DEC 18, 2012 11:06 PM  
  
FUEL ALARM  
DEC 18, 2012 11:01 PM  
  
SETUP DATA WARNING  
DEC 13, 2012 3:00 PM

----- SENSOR ALARM -----  
Q 1: REGULAR  
PLLD SHUTDOWN ALARM  
DEC 18, 2012 9:26 PM  
  
GROSS LINE FAIL  
DEC 18, 2012 9:26 PM  
  
PLLD SHUTDOWN ALARM  
DEC 18, 2012 10:24 AM

ALARM HISTORY REPORT

----- SENSOR ALARM -----  
Q 2: PLUS  
PLLD SHUTDOWN ALARM  
DEC 18, 2012 10:02 PM

GROSS LINE FAIL  
DEC 18, 2012 10:02 PM

CONT HANDLE ALM  
DEC 18, 2012 12:04 PM

PLLD SHUTDOWN ALARM  
DEC 18, 2012 10:24 AM

PLLD SHUTDOWN ALARM  
DEC 13, 2012 2:37 PM

PLLD SHUTDOWN ALARM  
DEC 13, 2012 2:25 PM

PLLD SHUTDOWN ALARM  
DEC 13, 2012 2:20 PM

PLLD SHUTDOWN ALARM  
DEC 13, 2012 2:12 PM

PLLD SHUTDOWN ALARM  
DEC 13, 2012 1:56 PM

PLLD SHUTDOWN ALARM  
DEC 13, 2012 1:51 PM

ALARM HISTORY REPORT

----- SENSOR ALARM -----  
Q 3: SUPREME  
PLLD SHUTDOWN ALARM  
DEC 18, 2012 9:58 PM

GROSS LINE FAIL  
DEC 18, 2012 9:58 PM

PLLD SHUTDOWN ALARM  
DEC 18, 2012 10:24 AM

PLLD SHUTDOWN ALARM  
DEC 13, 2012 10:59 AM

PLLD SHUTDOWN ALARM  
NOV 27, 2012 11:41 AM

ALARM HISTORY REPORT

----- SENSOR ALARM -----  
Q 4: DIESEL  
PLLD SHUTDOWN ALARM  
DEC 19, 2012 1:34 AM

GROSS LINE FAIL  
DEC 19, 2012 1:34 AM

PLLD SHUTDOWN ALARM  
DEC 19, 2012 1:02 AM

--- SMARTSENSOR ALARM ---  
s 1: REGULAR STP SUMP  
WATER ALARM  
DEC 18, 2012 10:29 PM

--- SMARTSENSOR ALARM ---  
s 2: PLUS STP SUMP  
WATER ALARM  
DEC 18, 2012 10:30 PM

--- SMARTSENSOR ALARM ---  
s 3: SUPREME STP SUMP  
INSTALL ALARM  
DEC 18, 2012 10:37 PM

WATER ALARM  
DEC 18, 2012 10:32 PM

INSTALL ALARM  
DEC 18, 2012 10:31 PM

ALARM HISTORY REPORT

--- SMARTSENSOR ALARM ---  
s 4: DIESEL STP SUMP  
WATER ALARM  
DEC 19, 2012 1:47 AM

**Spigler Petroleum Equipment, LLC**  
**125 Airport Dr., Suite 36, Westminster, MD 21157**  
**Phone: 443.471.7600 Fax: 410.848.4956**

**Spill Bucket Testing Report Form**

*This form is intended for use by contractors performing annual testing of UST spill containment structures. The completed form and printouts from tests (if applicable), should be provided to the facility owner/operator for submittal to the local regulatory agency.*

**1. FACILITY INFORMATION**

Facility Name: <u>PILOT OIL EXXON 20025</u>	Date of Testing: <u>4/23/13</u>
Facility Address: <u>31 Heather Lane Perryville MD 21903</u>	
Facility Contact: <u>James Bowers</u>	Phone:
Name of Local Agency Inspector (if present during testing): <u>N/A</u>	

**2. TESTING CONTRACTOR INFORMATION**

Company Name: <u>Spigler Petroleum Equipment</u>
Technician Conducting Test: <u>Donald M. Beard</u>
Credentials: <u>MDE UST Tech</u> Other (Specify)
License Number(s): <u>MDIC 2013-1294T</u>

**3. SPILL BUCKET TESTING INFORMATION**

Test Method Used:	<input checked="" type="checkbox"/> Hydrostatic	<input type="checkbox"/> Vacuum	<input type="checkbox"/> Other	
Weather Conditions/Temp: <u>CLOUDY 45°</u>	Equipment Resolution:			
Identify Spill Bucket (By Tank Number, Stored Product, etc.)	<b>1</b> <u>VAPOR</u>	<b>2</b>	<b>3</b>	<b>4</b>
Bucket Installation Type:	Direct Bury <input checked="" type="checkbox"/> Contained in Sump	Direct Bury <input type="checkbox"/> Contained in Sump	Direct Bury <input type="checkbox"/> Contained in Sump	Direct Bury <input type="checkbox"/> Contained in Sump
Manufacturer:	<u>OPW</u>			
Size: (Gallons)	<u>5 gal.</u>			
Test Start Time:	<u>7:20 AM</u>			
Initial Reading:	<u>10 7/8"</u>			
Test End Time:	<u>8:20 AM</u>			
Final Reading:	<u>10 7/8"</u>			
Test Duration:	<u>1 hr.</u>			
Change in Reading:	<u>0</u>			
Pass/Fail Threshold or Criteria:	<u>1/8"</u>			
<b>Test Result:</b>	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail

**Comments** – (include information on repairs made prior to testing, and recommended follow-up for failed tests)

NEXT TEST DUE: APR. 2014

**CERTIFICATION OF TECHNICIAN RESPONSIBLE FOR CONDUCTING THIS TESTING**

*I hereby certify that all the information contained in this report is true, accurate, and in full compliance with legal requirements.*

Technician's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

4/23/13



# Testing and Inspection Certificate

Tanknology Inc.  
11000 North MoPac Expressway, Suite 500, Austin, TX 78759  
800-800-4633 www.tanknology.com

Test Date	8/23/2013	Tanknology WO#	MA2-8515612
Test Purpose	RE-TEST	Customer PO#	

<u>Customer</u> SOUTHSIDE OIL 1011 BOULDER SPRINGS DRIVE SUITE 100 RICHMOND, VA 23225 Attn: LEE ACORS (804) 706-4702	<u>Location</u> Southside 20025 31 Heather Lane Perryville, MD 21903 Attn: (410) 642-2883
--	--

Test / Inspection Description	Item Tested	Date Tested	Result
Pressure Decay	See test report for details	8/23/2013	Pass
Helium Decay Test	See test report for details	8/23/2013	Pass

Tanknology Representative: Telephone:	Technician: Donte Moore Technician Certification: (See forms)
--	--

# Stage II Testing Results Summary Page

## Facility Information

Facility Name: Southside 20025 ARMA Premise No.: 20025

Address: 31 Heather Lane Perryville MD 21903

Contact/Title:      Phone: 410-642-2883

## Other Contact Information

Name:      Title:     

Address:     

Phone:     

## Testing Information

Testing Company: TANKNOLOGY INC. Phone: (800) 800-4633

Address: 11000 N.MOPAC EXPWY #500 AUSTIN TX 78759

Contact: Theodore Bezel Test conducted by: Donte Moore

Stage II System Type:      ARMA Notification Date: Emailed by Theodore Bezel

Test	Performed (Y or N)	Date	Pass or Fail?	Comments
Dynamic Back Pressure				
Leak Test (Pressure Decay)	Yes	8/23/2013	Pass	
Liquid Blockage Test				
Air to Liquid Ratio				
Healy Nozzle Regulation Test				
Vapor Return Leak Tightness Test				
Vapor Return Line Vacuum Integrity test				



## 2"wc Pressure Decay Test

### Store Information

Site Name: Southside 20025  
 Address: 31 Heather Lane  
Perryville MD 21903  
 Phone: 642-2883

### Testing Company

Name: TANKNOLOGY INC.  
 Address: 11000 N. MOPAC EXPRESSWAY, SUITE 500  
AUSTIN, TX 78759  
 Phone: (512) 451-6334

Phase I System? \_\_\_\_\_  
 Phase II System? ASSIST  
 Total # of Nozzles 36  
 Products per Nozzle 1

Vapor System Manifolder? \_\_\_\_\_ Yes  
 Vapor Pot Present? \_\_\_\_\_ NO  
 Total # of Gas Tanks 3

Tank Information		1	2	3	Total
1.	Product Grade	REGULAR	PLUS	SUPREME	
2.	Actual Tank Capacity, gallons	11627	11627	11627	34881
3.	Gasoline Volume, gallons	6853	3025	2681	12559
4.	Ullage, (V) gallons (line #2 minus line#3)	4774	8602	8946	22322
Test Information		1	2	3	All
5.	Start Time	13:38			13:38
6.	Initial Test Pressure, inches H2O	2.00			2.00
7.	Pressure after 1 minute, inches H2O	2.00			2.00
8.	Pressure after 2 minutes, inches H2O	1.99			1.99
9.	Pressure after 3 minutes, inches H2O	1.98			1.98
10.	Pressure after 4 minutes, inches H2O	1.97			1.97
11.	Pressure after 5 minutes, inches H2O	1.98			1.98
12.	Allowable Final Pressure	1.96			1.96
13.	Pass / Fail (Enter "GF" for Gross failure)	Pass			Pass

Enter time of last delivery.

DIGITAL MANOMETER What type of pressure device used?  
9/5/2013 Calibration date for pressure device (90 days).  
0.00 Enter initial tank ullage pressure (Vent if over 0.5 in. w.c., then start the 30 min no dispensing period)  
2.00 Enter flowmeter rate, F(Must be 1 to 5 CFM).  
00:07:20 Calculate ullage fill time, **t2**.  $t2 = V / [1522]F$   
00:14:40 Calculate gross failure time (Twice t2).  
0.01 Enter ending value of drift test (Must be 0.01 in. w.c. or less).  
N/A Record Vapor Coupler Integrity Test Assembly pressure after 1 minute and location.  
DRY BREAK Nitrogen introduction point. Phase I vapor coupler or Phase II vapor riser?

Comments:

Tester: Donte Moore

Certification #: 43041

Signature:

Test Date: 8/23/2013

WO: 8515612

### SUMMARY OF HELIUM TEST DATA

SOURCE INFORMATION		FACILITY PARAMETERS		
Facility Name and address: Southside 20025 31 Heather Lane	Facility Representative and Title ,	Did TP 201.3 Pass Prior to Helium Test? (circle) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  Date and Time of passed TP 201.3 : 8/23/2013 13:38:00		
Weather - COOL Temperature: 70	Date of Helium Test: 8/23/2013 Time of Helium Test: 15:30:00	Vapor Manifold? <input checked="" type="checkbox"/> Y or <input type="checkbox"/> N		
Conditions (circle): Sunny <input type="checkbox"/> <input checked="" type="checkbox"/> Cloudy <input type="checkbox"/> Rain Other (describe)				
1. Pressure system up to 1? WC with Helium Did you confirm Helium is Present at all test areas (circle): <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Record Areas where Helium was found and all repairs made: DISPNSERS #7, #9-10, #11-12, #13		
Test Equipment Used: DIGITAL MANOMETER  Serial Number: TK-5813		Include Site Diagram and Secondary Piping Test Results(if applicable) in Report PackageN/A		
HeliumTest Results at 5.0? wc and Comments				
<u>Tank #:</u>	1	2	3	Total
1. Product Grade	REGULAR	PLUS	SUPREME	
2. Actual Tank Capacity, gallons	11627	11627	11627	34881
3. Gasoline Volume	6853	3025	2681	12559
4. Ullage, gallons (#2-#3)	4774	8602	8946	22322
5. Initial Pressure, inches H2O	5.00			
6. Pressure After 1 Minute, inches H2O	5.02			
7. Pressure After 2 Minutes, inches H2O	5.02			
8. Pressure After 3 Minutes, inches H2O	5.03			
9. Pressure After 4 Minutes, inches H2O	5.04			
10. Final Pressure After 10 Minutes, inches H2O	5.10			
11. Allowable Final Pressure	5.00	5.00	5.00	5.00
	Pass			Pass
Test Conducted by: Donte Moore	Test Company: TANKNOLOGY INC.	Date of Test: 8/23/2013		

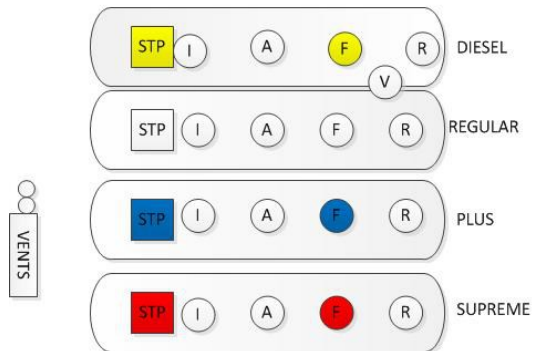
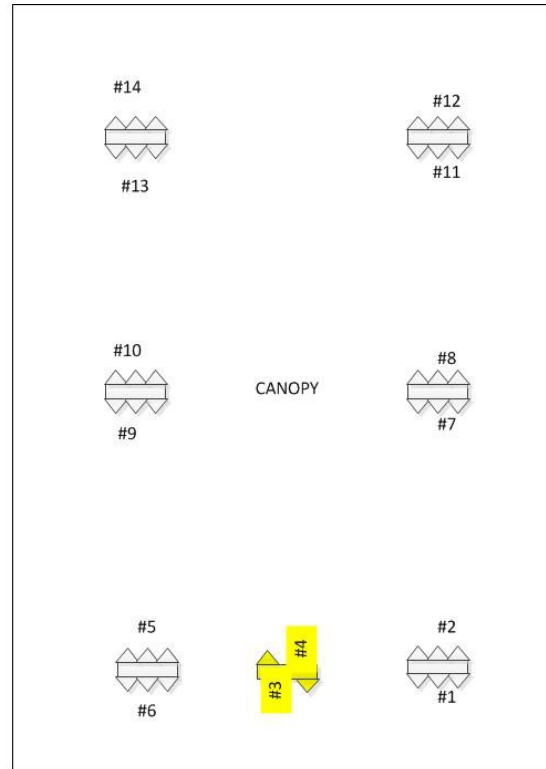
WO: 8515612



# Site Diagram

(This site diagram is for reference only and is not drawn to scale)

Work Order: 8515612  
Site ID / Name: 20025 / Southside 20025  
Address: 31 Heather Lane  
City: Perryville State: MD Zip: 21903





**Tanknology Inc.**  
8501 N. MoPac Expressway, Suite 400 Austin, TX 78759 (800) 964-0010

Policy 100-29-A  
Rev: D  
Revised: 8/04/2008

## JOB CLEARANCE FORM & SITE SAFETY CHECKLIST - OVF

Site Name/#: 20025		Street Address: 21 Heather Lane Perryville, MD 21903		W.O.# 8575612
Arrival Time: 10:00 am	Departure Time: 16:00	Travel Time:	Others on site:	Date 8/23/13

Scope of Work and Tasks Performed (JSA's must be available for all tasks):  
Pressure Decay, Helium test

Repairs to Equipment or Parts Provided:  
2 Hours labor waiting for equipment

Follow-up actions required; equipment isolated; comments:  
Vac motors need replaced Dispenser 7 Right Vac motor Dispenser 11 12 Both  
Dispenser 9-10 Both Dispenser 13 Right Vac motor

**PPE - PERSONAL PROTECTIVE EQUIPMENT REQUIRED (Check items used or mark ~ if not applicable)**

<input checked="" type="checkbox"/> Safety Vest	<input checked="" type="checkbox"/> Safety Glasses	<input checked="" type="checkbox"/> Gloves	<input type="checkbox"/> Hearing Protection
<input checked="" type="checkbox"/> Steel Toe Boots	<input checked="" type="checkbox"/> Splash Goggles	<input type="checkbox"/> Hard Hat	<input type="checkbox"/> Other

**PRE-TEST PROCEDURES (Check each item completed or mark ~ if not applicable)**

- Discuss safety procedures with site personnel. Nearest hospital: Perryville
- Prior to fuel deliveries the UST system must be placed back into working order.
- Secure entire work area with barricades (cones, flags, and caution tape, pennant flags, or other perimeter guard).
- Place fire extinguishers and "No Smoking" signs in the work area.
- Implement Lockout/Tagout per API 1646 (when accessing product piping during tasks)
  - All applicable equipment disabled during test(s).
  - Secure the circuit breaker(s) with lockout devices and tags.
  - Secure nozzles with "Out of Service" bags and nylon ties.
  - Verify LOTO is complete by trying to operate pumps.
  - Close ball valves or check valves on product piping.
  - Disconnect electrical "bayonet" connector from the STP(s).

**General Safety Checks:**  
All site personnel have been informed.  
Fuel delivery has been informed.  
Is a fuel delivery due today? \_\_\_\_\_  
LOTO procedures have been discussed and agreed.  
Work areas barricaded to protect workers, staff & public.

Lead Technician Name <u>Scott Ramsey</u>	Lead Technician Signature 
Site Representative Name <u>X Terri Harding</u>	Site Representative Signature 

I have discussed job clearance form with technician.

**POST-TEST PROCEDURES (Check each item completed or mark ~ if not applicable)**

- Remove all "Lockout/Tagout" devices.
- Run all pumps and verify there are no leaks:
  - Leak Detector Threads on STP's
  - Impact Valve Test Ports under dispensers
  - Functional Elements & Relief Screws
- Install lead wire seal on all test plugs & leak detectors that were serviced.  
Count LD threads: L1 \_\_\_ L2 \_\_\_ L3 \_\_\_ L4 \_\_\_ L5 \_\_\_ L6 \_\_\_
- Check following components operational:
  - Ball floats, dry breaks & caps
  - Containment sumps are dry
  - Dispenser panels are replaced
  - Leak detectors & vent tubes
  - Monitoring system is operational
  - Siphon lines and manifold valves
  - STP fittings and bayonet connectors
  - ATG probes, sensors, & caps
  - Cathodic protection operational
  - Dispensers & POS operational
  - Drop tubes, fill adapters & caps
  - Manhole covers and sump lids
  - Shear valves are open
  - Siphon lines and manifold valves
  - Vents (not capped, plugged or isolated)
- Remove barricades.

**SIGN OUT & Operator Verification of Work (OVF)**

**General Safety Checks:**  
Work area has been left tidy & safe.  
Site staff are aware of work status including any remaining isolation.  
Changes to equipment are documented and communicated.  
All incidents, near incidents, and unsafe situations reported.

Lead Technician Name <u>Scott Ramsey</u>	Lead Technician Signature 
Site Representative Name <u>X Terri Harding</u>	Site Representative Signature 

Site Representative Comments: