



Florida Department of Environmental Protection
Twin Towers Office Bldg. • 2600 Blair Stone Road • Tallahassee, Florida 32399-2400

DEP Form # 62-761.900(2)
Form Title <u>Storage Tank Registration Form</u>
Effective Date <u>July 13, 1998</u>
DEP Application No. _____ (Filed in by DEP)

Storage Tank Facility Registration Form

Submit a completed form for the facility when registration of storage tanks or compression vessels is required by Chapter 376.303, Florida Statutes

Please review **Registration Instructions** before completing the form.

Please check all that apply	<input type="checkbox"/> New Registration	<input type="checkbox"/> New Owner	<input type="checkbox"/> New Tanks
	<input type="checkbox"/> Facility Info Update/Correction	<input checked="" type="checkbox"/> Owner Info Update/Correction	<input type="checkbox"/> Tank Info Update/Correction

A. FACILITY INFORMATION

County: <u>Lee</u>	DEP Facility ID: <u>368519478</u>
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Facility Name: Shell Station

Facility Address: 3289 S. Cleveland Ave. City: Fort Myers Zip: 33901

Facility Contact: Dan H. Courtney Business Phone: (941) 332-1676

Facility Type(s): Former Shell station NAICS Code: _____ Financial Responsibility: _____

24 Hour Emergency Contact: _____ Emergency Phone: (____) _____

B. RESPONSIBLE PERSON INFORMATION - Identify Individual(s) or Business(es) responsible for storage tank management, fueling operations, and/or cleanup activities at the facility location named above. Provide additional information in an attachment if necessary.

Name: <u>Courtney Enterprises, Inc.</u>	Facility - Responsible Person Relation Type:	Effective Date
Mail address: <u>P.O. Box 1090</u>	<input checked="" type="checkbox"/> Facility Account Owner (pays fees)	
City, ST, Zip: <u>Fort Myers, Florida 33902</u>	Facility Account Owner information must be provided when the facility contains active or out of service storage tanks on site.	
Contact: <u>Dan H. Courtney</u>		
Telephone: <u>(941) 332-1676</u>	STCM Account Number (if known)	
Identify other appropriate facility relationships for this party: <input type="checkbox"/> Facility Owner/Operator <input checked="" type="checkbox"/> Property Owner <input type="checkbox"/> Storage Tank Owner		

Name: <u>Newman Oil Company</u>	Other owner, relationship type(s)	Effective Date
Mail address: <u>9131 Southmont Cove, Apt. 301</u>	<input type="checkbox"/> Facility Owner/Operator	
City, ST, Zip: <u>Fort Myers, FL 33908</u>	<input type="checkbox"/> Property Owner	
Contact: <u>William Earl Newman</u>	<input checked="" type="checkbox"/> Storage Tank Owner	
Telephone: <u>(941) 481-8577</u>	<input type="checkbox"/> Other:	

See attachment for additional information

C. TANK/VESSEL INFORMATION - Complete one row for each storage tank or compression vessel system located at this facility.

Tank ID	TV	AU	Capacity	Installed	Content	Status/Effective Date	Construction	Piping	Monitoring
N/A - Tanks removed									

Certified Contractor (performing tank installation or removal): _____ DBPR License No.: _____

Registration Certification: To the best of my knowledge and belief, all information submitted on this form is true, accurate, and complete.

Dan H. Courtney, President

Printed Name & Title

Signature

Date

DEP 62-761.900(2)

Northwest District
160 Governmental Center Blvd.
Pensacola, FL 32501
850-595-8360

Northeast District
7825 Baymeadows Way,
Suite B200
Jacksonville, FL 32256
904-448-4300

Central District
3319 Maguire Blvd.,
Suite 232
Orlando, FL 32803
407-894-7555

Southwest District
3804 Coconut Palm Drive
Tampa, FL 33619
813-744-6100

Southeast District
400 North Congress Ave.,
W Palm Beach, FL 33416
561-681-6600

South District
2296 Victoria Ave.,
Suite 304
Fort Myers, FL 33901
941-332-6975

Marathon Branch Office
2796 Overseas Hwy.,
Suite 221
Marathon, FL 33050
305-289-2310

RECEIVED
D.E.P.
JAN 14 2002
D.E.P. - South District

Attachment to Storage Tank Facility Registration Form for
DEP Facility ID 368519478
Shell Station, 3289 S. Cleveland Ave., Fort Myers, FL 33901

B. Responsible Person Information – Additional Party:

Name: Motiva Enterprises LLC
Mail Address: 16057 Tampa Palms Blvd., PMB 333
City, ST, Zip: Tampa, FL 33647
Contact: Toni M. Atwell
Telephone: (813) 971-2693

Relationship: Agent for Shell Oil Company (Lessee)

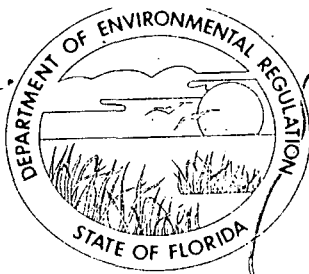
STORAGE TANK
REGULATION
2002 JAN 18 AM 11:33
D.E.P.

RECEIVED

JAN 14 2002

RECEIVED

D.E.P. - South District



ALL TANKS & Piping
RECEIVED Removed From
DER This Facility 8-17-89
90 JUL -2 AM 10:43
RJR

STORAGE TANK
REGULATION

1. Facility previously registered with DER? Yes ☒ No ☐
2. DER Facility Number, if known 368519478
3. Business/Site Name: Shell-Community
Physical Location: Street 3289 CLEUGLAND AVE.
City FT MYERS FL Zip 33901 County LEE 36
4. Tank Owner: Name Anderson Oil Co
Mailing Address 3705 ANDERSON AVE.
City FT MYERS State FLA Zip 33916 Telephone (813) 332-1030
5. Tanks: Number of Tanks Owned: _____

Complete the following chart using the codes listed below for all tanks with capacity of 550 gallons or less, (use additional pages if needed.)

Tank	Size (in gallons)	Contents	Status	Placement
1	550	L	U	UW
2				
3				
4				
5				
6				

DATA ENTERED

SEP 21 1990

LAURIE GINGER

If assistance is needed in completing this form, please call:

904/488-0300
or 1-800-422-LEAK

Signature of Tank Owner or Authorized Representative

R. J. (Jim) L. White
Plant Mgr
Anderson Oil Co

Date: 9-11-87

Codes and Instructions for Use in Question 5:

CONTENTS:

- A = leaded gasoline
B = unleaded gasoline
C = unleaded gasohol
D = vehicular diesel
F = aviation gas
G = jet fuel
K = kerosene
L = used (waste) oil
M = diesel (boilers & generators)
N = leaded gasohol
O = new oil
V = hazardous substance (write in name)

STATUS:

- U = currently in use
I = Temporarily out of use with intent for future use
If permanently out of use indicate whether:
A = abandoned and filled with an inert material
E = abandoned and left empty
F = abandoned with product remaining
B = removed from location

PLACEMENT:

- Underground:
UW = underground (10% or more buried)
Aboveground:
(more than 90% is not buried)
AC = incontact with ground (previous base)
AV = elevated above ground

Stationary Tank Registration/Notification Form

Form 17-1.218(2)

COMMUNITY SHELL AUTO CARE
3289 CLEVELAND AV
FT MYERS

FL 33901

FACILITY LOCATION

ADDRESS: 3289 CLEVELAND AV
CITY: FT MYERS FL

FL 33901

Use this form to comply with the following requirements of the
Stationary Tank Rule Chapter 17-61, Florida Administrative Code.

1. Each owner or operator shall register the following with the department:
 - a. All existing facilities by December 31, 1984. (Questions 1-19)
 - b. All new storage systems or facilities at least 10 days prior to the start of installation of tanks except in the cases of emergency replacement. (Questions 1-19)
 - c. A non-pollutant containing installation which is to be converted to a facility, at least 10 days prior to the placement of pollutants in such a facility. (Questions 1-19)
2. Each owner or operator shall notify the department of the following:
 - a. All storage systems within 10 days of abandonment. (Questions 1, 12, 16, 20)
 - b. Facility sale within 10 days of sale. Notice shall be made by the seller. (Answer questions 1, 7, and 11. Question 7 about the new owner.)
 - c. Retrofitting within 10 days of completion. (Questions 1-19)
3. You may notify the department of a change of operator. (Questions 1-6)

29054

Agency Use Only

AGR105920000

DOR080105920

PLEASE PRINT OR TYPE

2. Facility number (DER will provide this number) 368519478 3. Date 12-18-84
4. Federal Employment Identification (number used to file IRS forms) 59-1671389
5. County Code (see enclosed letter) 36
6. Operator of facility ALAN ATWOOD Effective date (only for change of operator): N/A Telephone number: (813) 936-8392
7. Company/Person owning tanks and piping Newman Oil Co. Address: 3705 Anderson Ave. Ft. Myers, Fla. 33901 Contact person: Mike Newman Telephone number: (813) 332-1030 Effective date (only for change of owner): N/A
8. How many tanks at this location have an individual storage capacity of greater than 550 gallons and store vehicular fuel made from petroleum?
5 Underground 0 Aboveground
9. Facility location: Latitude 0 Longitude 0 Section 25 Township 44S Range 24E
This information is listed on property deeds, and in the offices of the property appraiser and tax assessor.
10. Sketch the facility on a separate page showing the APPROXIMATE location of buildings, tanks, and dispensers.
A. Draw a line from tank to dispenser to show which are connected by piping.
B. Label each tank as Tank 1, Tank 2, etc.
C. Write the date and your facility number, if known, or name and address exactly as it appears above.
D. Keep a copy of your sketch.

REFER TO TANKS BY THESE LABELS IN ANY COMMUNICATION WITH THE DEPARTMENT.
DESCRIBE PIPING BY THE NUMBER OF THE TANK IT IS ATTACHED TO.

11. TO THE BEST OF MY KNOWLEDGE AND BELIEF ALL INFORMATION SUBMITTED ON THIS FORM IS TRUE, ACCURATE, AND COMPLETE

Name of owner, operator or authorized representative

Signature of owner, operator or authorized representative

KEEP A COPY OF THIS FORM FOR YOUR RECORDS

DEC 31 1984

MAIL TO: DER Stationary Tank Registration
2600 Blair Stone Road
Room 603
Tallahassee, Florida 32301

SOLID WASTE
SUBSECTION

INSTRUCTIONS: Use one row across for each tank counted in question 8. The tank number must agree with the number on the sketch of your facility. A new tank installed where a registered tank was removed should be given the number of the removed tank with an R and a number added. Example: Tank 3R1 is first replacement for tank 3. It is in the same place where tank 3 was. Tank 3R2 is the second replacement for tank 3. Attach extra pages if necessary. Write your facility number, if known, or name and address, exactly as it appears on the front of the form, on all extra pages.

(12) Tank Number	(13) Tank Size in Gallons	(14) Tank Contents (see List 14 below)	(15) Tank Installation Date. Month/Year (put X if unknown)	(16) Underground or Aboveground Tank (write U or A)	(17) Tank Construction Specifics (see List 17U or 17A below)	(18) Integral Piping System Construction Specifics (see List 18 below)	(19) Monitoring System Type (see List 19)	(20) Tank Disposal Method (see List 20)
1	4000	B	X	U	C	D	I	
2	4000	B	X	U	C	D	I	
3	4000	B	X	U	C	D	I	
4	4000	B	X	U	C	D	I	
5	10,000	A	X	U	C	D	I	

ENTER THE LETTERS WHICH APPLY TO EACH TANK IN THE BOXES ABOVE. **WRITE ALL THAT APPLY.**

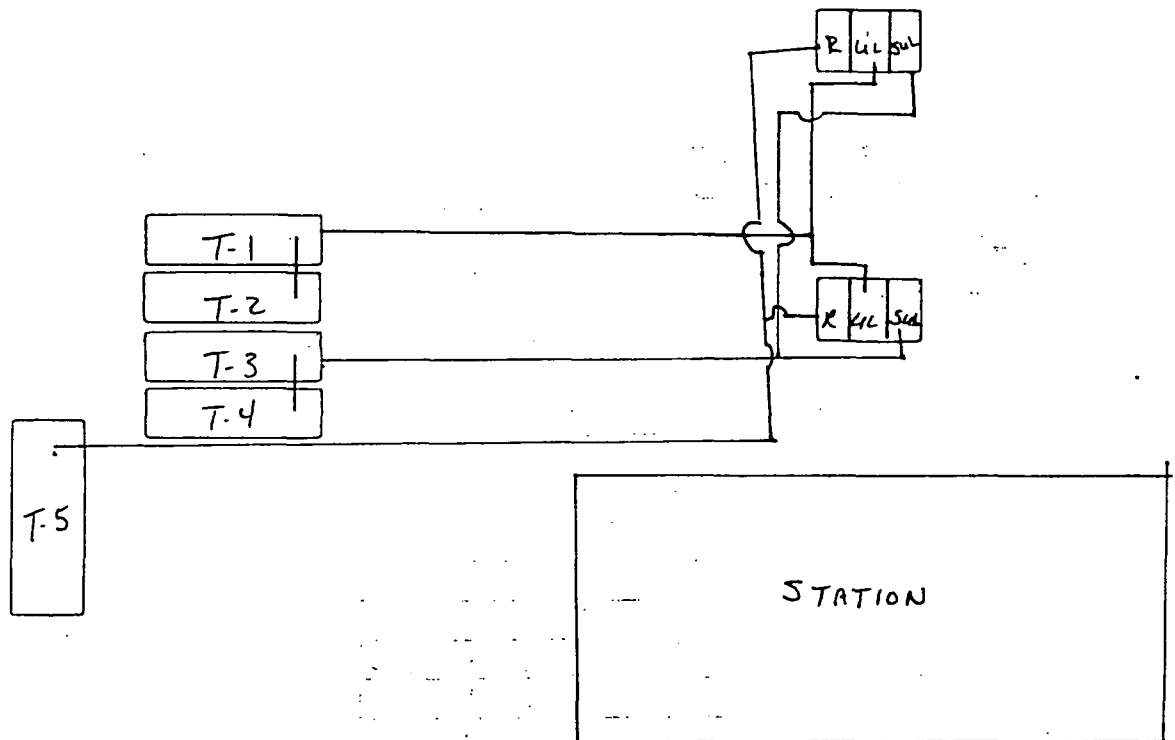
List 14	List 17U UNDERground Tanks	List 17A ABOVEground Tanks	List 18	List 19	List 20
Tank contents are: A. leaded gasoline. B. unleaded gasoline. C. Alcohol enriched gasoline. D. diesel fuel. E. aviation fuel. Z. other.	Underground tank: A. has overfill protection. B. is interior lined. C. is painted/asphalted steel. D. is of unknown type. E. is fiberglass type. F. is fiberglass-clad steel. G. is sacrificial anode type. H. is impressed current type. I. is double walled. J. is concrete. K. is in secondary containment. N. is or has none of the above.	Aboveground tank: O. has overfill protection. P. is surrounded by impervious dike. Q. is surrounded by earth dike. R. rests on an impervious base. S. rests on a earth/gravel base. T. has interior lined bottom. U. is cathodically protected. V. is built of/coated with corrosion resistant materials. W. is supported above the soil. Z. is or has none of the above.	Integral Piping System has: A. no parts in contact with the soil. Parts contacting the soil which are: B. unprotected metal. C. built of corrosion resistant materials. D. corrosion resistant coated. E. cathodically protected. F. double-walled. G. within a secondary containment. H. interior lined. M. none of the above.	Monitoring system is: A. automatically sampled well(s). B. manually sampled well(s). C. groundwater monitoring plan. D. SPCC plan. E. well/detector in secondary containment. F. in-ground detector. G. within walls of double-walled tank. H. continuous in piping. I. not required. N. none of the above.	Tank disposal method. A. Filling. B. Removal. C. Retrofitting. F. Other.

3289 CLEVELAND Ave

FT. MYERS

12-18-84

CLEVELAND AVE





Postcard Notification Form Underground Storage Tanks Less Than or Equal to 550 Gallons

1. Facility previously registered with DER? Yes ☒ No ☐
2. DER Facility Number, if known 368519478
3. Business/Site Name: Community Shell-Community
Physical Location: Street 3289 CLEVELAND AVE.
City FT MYERS FL Zip 33901 County LEE
4. Tank Owner: Name Newman Oil Co.
Mailing Address 3705 Anderson Ave.
City FT MYERS State FLA Zip 33916 Telephone (813) 332-1030
5. Tanks: Number of Tanks Owned: _____

Complete the following chart using the codes listed below for all tanks with capacity of 550 gallons or less, (use additional pages if needed.)

Tank	Size (in gallons)	Contents	Status	Placement
1	550	L	U	UW
2				
3				
4				
5				
6				

If assistance is needed in completing this form, please call:

904/488-0300
or 1-800-422-LEAK

Signature of Tank Owner or Authorized Representative

R. J. (Jim) Wolfe
Plant mgr
Newman Oil Co

Date: 9-11-87

Codes and Instructions for Use in Question 5:

CONTENTS:

A = leaded gasoline
B = unleaded gasoline
C = unleaded gasohol
D = vehicular diesel
F = aviation gas
G = jet fuel
K = kerosene
L = used (waste) oil
M = diesel (boilers & generators)
N = leaded gasohol
O = new oil
V = hazardous substance (write in name)

STATUS:

U = currently in use
I = Temporarily out of use with intent for future use

If permanently out of use indicate whether:
A = abandoned and filled with an inert material
E = abandoned and left empty
F = abandoned with product remaining
B = removed from location

PLACEMENT:

Underground:
UW = underground (10% or more buried)

Aboveground:
(more than 90% is not buried)
AC = incontact with ground (pervious base)
AV = elevated above ground

4. Questions concerning the tanks program can be directed to the DER Hot Line at: 1-800-422-LEAK.

If emergency or hazardous conditions exist at your site, immediately contact DER.

Just fill out and fold the pre-stamped, pre-addressed postcard.

3. How to File

All owners or operators of nonresidential underground tanks storing 550 gallons or less of petroleum products.

2. Who Should File This Form?

Notification to DER by use of this form is required to be eligible for the Early Detection Incentive (EDI) program. The EDI program provides for a waiver of cost liability to the tank owner and operator for site clean-up, provided any known or suspected leak is reported to DER from 7/1/86 to 10/1/87. If a leak is known or suspected an EDI form must be completed in addition to this form, and returned to DER. For more information or for EDI forms call 1-800-422-LEAK.

1. Why File This Form?

Postcard Notification Form Facts



RECEIVED
SEP 16 1987

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO. 92 TALLAHASSEE, FLORIDA

87 SEP 16 PM 1:34

POSTAGE WILL BE PAID BY ADDRESSEE

BUREAU OF
WASTE MANAGEMENT

Department of Environmental Regulation

Bureau of Waste Management
Twin Towers Office Building
2600 Blair Stone Road
Tallahassee Florida 32399-9978



STATE OF FLORIDA
DEPARTMENT OF ENVIRONMENTAL REGULATION
2600 BLAIR STONE ROAD
TWIN TOWERS OFFICE BUILDING
TALLAHASSEE, FLORIDA 32399-2400



NEWM705 339162019 1690 07/18/91
FORWARDING TIME EXPIRED
NEWMAN OIL COMPANY
4804 LAUREL LN
FORT MYERS FL 33908-2023
RETURN TO SENDER

FIRST CLASS

3685 19416
3685 19418

JOSEPH G MAY
NEWMAN OIL CO
3705 ANDERSON AVE
FT MYERS, FL 33901