



Discharge Reporting Form

PLEASE PRINT OR TYPE

DEP Form # 62-761.900(1)
Form Title <u>Discharge Reporting Form</u>
Effective Date _____

Instructions are on the reverse side. Please complete all applicable blanks

1. Facility ID Number (if registered): _____ 2. Date of form completion: JUNE 20, 2014

3. General information

Facility name: FORMER BAY TANK & FABRICATION CO., INC
 Facility Owner or Operator: BAY TANK & FABRICATION CO., INC
 Facility Contact Person _____ Telephone number: () _____ County: BAY
 Facility Mailing address: 3247 COUNTRY CLUB ROAD, LYNN HAVEN, FL 32444
 Location of discharge (facility street address): 1910 INDUSTRIAL DRIVE, PANAMA CITY
 Latitude and Longitude of discharge (if known.) _____

4. Date of receipt of test results or discovery of confirmed discharge: JUNE 18, 2014 month/day/year 5. Estimated number of gallons discharged: UNKNOWN

6. Discharge affected: Air Soil Ground water Drinking water well(s) Shoreline Surface water (water body name) _____

7. Method of discovery (check all that apply)

<input type="checkbox"/> Liquid detector (automatic or manual)	<input type="checkbox"/> Internal inspection	<input type="checkbox"/> Closure/Closure Assessment
<input type="checkbox"/> Vapor detector (automatic or manual)	<input type="checkbox"/> Inventory control	<input checked="" type="checkbox"/> Groundwater analytical samples
<input type="checkbox"/> Tightness test	<input type="checkbox"/> Monitoring wells	<input checked="" type="checkbox"/> Soil analytical tests or samples
<input type="checkbox"/> Pressure test	<input type="checkbox"/> Automatic tank gauging	<input type="checkbox"/> Visual observation
<input type="checkbox"/> Statistical Inventory Reconciliation	<input type="checkbox"/> Manual tank gauging	<input checked="" type="checkbox"/> Other <u>PHASE II ESA</u>

8. Type of regulated substance discharged: (check one)

<input checked="" type="checkbox"/> Unknown	<input type="checkbox"/> Used/waste oil	<input type="checkbox"/> Jet fuel	<input type="checkbox"/> Heating oil	<input type="checkbox"/> New/lube oil
<input type="checkbox"/> Gasoline	<input type="checkbox"/> Aviation gas	<input checked="" type="checkbox"/> Diesel	<input type="checkbox"/> Kerosine	<input type="checkbox"/> Mineral acid

Hazardous substance - includes CERCLA substances from USTs above reportable quantities, pesticides, ammonia, chlorine, and derivatives
 (write in name or Chemical Abstract Service (CAS) number) _____
 Other _____

9. Discharge originated from a: (check all that apply)

<input type="checkbox"/> Dispensing system	<input type="checkbox"/> Pipe	<input type="checkbox"/> Barge	<input type="checkbox"/> Pipeline	<input type="checkbox"/> Vehicle
<input checked="" type="checkbox"/> Tank	<input type="checkbox"/> Fitting	<input type="checkbox"/> Tanker ship	<input type="checkbox"/> Railroad tankcar	<input type="checkbox"/> Airplane
<input checked="" type="checkbox"/> Unknown	<input type="checkbox"/> Valve failure	<input type="checkbox"/> Other Vessel	<input type="checkbox"/> Tank truck	<input type="checkbox"/> Drum

Other _____

10. Cause of the discharge: (check all that apply)

<input type="checkbox"/> Loose connection	<input type="checkbox"/> Puncture	<input checked="" type="checkbox"/> Spill	<input type="checkbox"/> Collision	<input checked="" type="checkbox"/> Corrosion
<input type="checkbox"/> Fire/explosion	<input type="checkbox"/> Overfill	<input type="checkbox"/> Human error	<input type="checkbox"/> Vehicle Accident	<input type="checkbox"/> Installation failure

Other _____

11. Actions taken in response to the discharge: A PHASE II ESA DISCOVERED THE IMPACTED SOIL & GROUNDWATER. ADDITIONAL TESTING IS CURRENTLY BEING PERFORMED. PROPOSALS FOR EXCAVATION HAVE BEEN REQUESTED.

12. Comments: _____

13. Agencies notified (as applicable):

<input type="checkbox"/> State Warning Point 1-800-320-0519	<input type="checkbox"/> National Response Center 1-800-424-8802	<input type="checkbox"/> Fire Department	<input type="checkbox"/> County Tanks Program	<input checked="" type="checkbox"/> NDEP (district/person) <u>ALEX WEBSIDER @ DEP STATE #1</u>
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14. To the best of my knowledge and belief all information submitted on this form is true, accurate, and complete.

TERRANCE B. WYATT
Printed Name of Owner, Operator or Authorized Representative

Terrance B. Wyatt
Signature of Owner, Operator or Authorized Representative.

RECEIVED

JUN 25 2014

NORTHWEST FLORIDA
DEP

Oil spills to navigable waters of the United States and releases of a reportable quantities of CERCLA hazardous substances must be reported immediately to the National Response Center. Reports to the National Response Center of oil spills to navigable waters need not be repeated to any other federal, state, or local agency. Conditions at the site that do not involve spills to navigable waters of the United States, or CERCLA hazardous substances, that pose an immediate threat to human health or the environment must be reported to the State Warning Point or the Local Fire Department. Never-the-less, this form must be submitted for all discharges from facilities with storage tank systems, and sites in accordance with Chapters 62-761 and 770, F.A.C.

**State Warning Point
1-800-320-0519**

**National Response Center
1-800-424-8802**

**Local Fire Department
(obtain local number)**

This form must be used to report any confirmed discharge, or of any one of the following, unless the discharge is from a previously-known and reported discharge:

- 1.. Results of analytical or field tests of surface water, groundwater, or soils indicating the presence of contamination by:
 - a. A hazardous substance from a UST;
 - b. A regulated substance, other than petroleum products; or
 - c. Petroleum products' chemicals of concern specified in Chapter 62-770, F.A.C.;
2. A spill or overflow event of a regulated substance to soil equal to or exceeding 25 gallons, unless the regulated substance has a more stringent reporting requirement specified in CFR Title 40, Part 302;
3. Free product or sheen of a regulated substance present in surface or groundwater, soils, basements, sewers, and utility lines at the facility or in the surrounding area
4. Soils stained by regulated substances observed during a closure assessment performed in accordance with Rule 62-761.800, F.A.C.

A copy of this form must be delivered or faxed to the County within 24 hours of the discovery of a discharge, or before the close of the next business day. It is recommended that the original copy be sent in the mail. If the discharge occurs at a county-owned facility, a copy of the form must be faxed or delivered to the local DEP District office.

DEP District Office Addresses:

Northwest District
160 Governmental Center, Suite 308
Pensacola, FL 32501-5794
Phone: 850-595-8360
FAX: 850-595-8417

Northeast District
7825 Baymeadows Way, Suite B 200
Jacksonville, FL. 32256-7590
Phone: 904-807-3300
FAX: 904-448-4366

Central District
3319 Maguire Blvd., Suite 232
Orlando, FL 32803-3767
Phone: 407-894-7555
FAX: 407-897-6499

ALEX. WEBSTER @ DEP. STATE. FL. US

Southwest District
13051 North Telecom Parkway
Temple Terrace, FL 33637-0926
Phone: 813-632-7600
FAX: 813-632-7665

South District
2295 Victoria Ave. Suite 364
Ft. Myers FL 33901-2549
Phone: 239-332-6975
FAX: 239-332-6969

Southeast District
400 N. Congress Ave., 3rd Floor
West Palm Beach, FL 33401
Phone: 561-681-6600
FAX: 561-681-6755