

## EXECUTIVE SUMMARY

### DESCRIPTION

Environmental Data Resources, Inc.'s (EDR) City Directory Report is a screening tool designed to assist environmental professionals in evaluating potential liability on a target property resulting from past activities. EDR's City Directory Report includes a search of available business directory data at approximately five year intervals.

### RECORD SOURCES

The EDR City Directory Report accesses a variety of business directory sources, including Haines, InfoUSA, Polk, Cole, Bresser, and Stewart. Listings marked as EDR Digital Archive access Cole and InfoUSA records. The various directory sources enhance and complement each other to provide a more thorough and accurate report.

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### RESEARCH SUMMARY

The following research sources were consulted in the preparation of this report. A check mark indicates where information was identified in the source and provided in this report.

<u>Year</u>	<u>Target Street</u>	<u>Cross Street</u>	<u>Source</u>
2020	☑	☑	EDR Digital Archive
2017	☑	☑	Cole Information
2014	☑	☑	Cole Information
2010	☑	☑	Cole Information
2005	☑	☑	Cole Information
2000	☑	☑	Cole Information
1995	☑	☑	Cole Information
1992	☑	☑	Cole Information

## FINDINGS

### TARGET PROPERTY STREET

1140 Monroe Landing Road  
Oak Harbor, WA 98277

<u>Year</u>	<u>CD Image</u>	<u>Source</u>
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### MONROE LANDING RD

2020	pg A2	EDR Digital Archive
2017	pg A5	Cole Information
2014	pg A7	Cole Information
2010	pg A9	Cole Information
2005	pg A11	Cole Information
2000	pg A13	Cole Information

### N MONROE LANDING RD

1995	pg A15	Cole Information
1992	pg A17	Cole Information

## FINDINGS

### CROSS STREETS

<u>Year</u>	<u>CD Image</u>	<u>Source</u>
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### BALDA RD

2020	pg. A1	EDR Digital Archive
2017	pg. A4	Cole Information
2014	pg. A6	Cole Information
2010	pg. A8	Cole Information
2005	pg. A10	Cole Information
2000	pg. A12	Cole Information

### N BALDA RD

1995	pg. A14	Cole Information
1992	pg. A16	Cole Information

## **City Directory Images**



**BALDA RD 2020**

1141	Terrance Krueger
1175	Joseph Robertson Sheron Robertson
1177	Landyn Hoffmann Peter Falkenberg Shelley Hoffmann
1289	Aaron Trumbull Alexis Trumbull Bradley Trumbull Lashelle Trumbull
1329	Alison Varner
1348	Johnny Encinas Tammy Encinas
1354	Darcy Vander-Voet Leslie Vander Voet
1372	Jennifer Bassett Todd Bassett
1420	Judy Hood
1450	Eric Peterson
1471	Daniel Long Randall Giffin Tamela Hamberg
1510	Harold Boatman Reka Adamson
1536	Aimee Bissitt Edwin Adamson Shirley Adamson
1564	Corey Johnson Leslie Burns
1583	Skip Chestnut Walter Bankowski
1602	Keeli Archer Logan Archer Mark Archer Vera McMillan Vicki Archer
1608	Joan Klope Katelyn Klope Kelly Ranz
1619	Richard Toft

**MONROE LANDING RD 2020**

876	Cheryl Jenkins John Jenkins
881	H Strickland
884	Elizabeth Swackhamer Kevin Swackhamer William Swackhamer
892	Jackie Calkins Mark Saia Sandra Hall Shawn Calkins
895	Claudia Stelle Gerald Allen Gerald Werfhorst Jerry Vandewerfhorst Katherine Werfhorst Werfhorst Vande WHIDBEY FENCING
904	Joseph Thibodeaux Rafael Morales
910	Bethany Horr Clifford Horr Marilyn Horr
915	Eileen Hale Jared Vandewerfhor
929	Christine Thedens Roger Thedens
934	Dennis Amos Tracy Amos
937	Tracy Webster
938	Tracy Webster
941	Art Sem Beth Sem Edward Sem Henry Sem Jeanette Sem Mark Sem Paige Sem
944	Morris Stadler
1000	Nicholas St. Onge
1044	George Rector
1074	Albert Hawkins Beauman Davis Heather Davis Sean Davis
1084	Guinivere Lupien Jeannie Lupien Omer Lupien
1159	Claire Schricker
1160	NWHIDBEY FIRE RESCUE
1171	Kent Ramier

**MONROE LANDING RD 2020 (Cont'd)**

1203	Howard Haveman Randall Haveman Steven Haveman
1315	Cathy Kind
1347	Danica Rapp Jeannie Helton John Howell Todd Rapp
1355	Christina Gibeault Lori McKole Mark McKole
1375	Ryan Thompson
1403	ATM BLUE FOX DRIVE-IN THEATRE Charnique Bratt Dan Uggleman Darrell Bratt Jonathan Atkins Lori Bratt Nick Bratt
1459	Kelli Sheridan
1480	Angela Salo

**BALDA RD 2017**

1141	KRUEGER, TERRY L
1175	ROBERTSON, ANDREW S
1177	HOFFMANN, SHELLEY G
1289	TRUMBULL, AARON
1329	KASH, MARK
	LETENDER, NICHOLE
	VARNER, ALISON T
1348	ENCINAS, JOHN C
1350	DILLY, CLAUDE L
1354	BALOCCO, DEVON
1372	BASSETT, TODD M
1420	HOOD, JUDY L
1471	DURBIN, SHAWN P
1510	HENDRICKS-BOATMAN, LINDA J
1536	BISSITT, AMBER
1583	BANKOWSKI, LYNETTE C
1602	ARCHER, MARK S
1608	BROWN, JUSTIN L
1619	TOFT, DICK J
1637	WILLIAMS, JAMES K

**MONROE LANDING RD 2017**

876	JENKINS, JOHN
884	SWACKHAMER, WILLIAM L
892	HALL, SANDRA I
895	VANDEWERFHORST, JERRY A
	WHIDBEY FENCING
904	FLORES, RALPH D
910	HORR, CASEY J
915	HALE, EILEEN M
929	THEDENS, ROGER F
934	REMMICK, BONNIE J
938	WEBSTER, TRACY A
941	SEM, HENRY A
948	SHELTON, ROBERTA J
1000	SIRES, JOSEPH S
1044	RECTOR, GEORGE A
1140	A J EISENBERG AIRPORT LLC
	JET CITY SKY DIVING
1171	RAMIER, KENT D
1212	BOWLES, THOMAS D
1286	CANEPP, W
1292	DUNN, KENNETH W
1315	FAIRHAVEN ADULT FAMILY HOME
	HAMPTON, KELLIE M
1347	MCKOLE, MARK M
1355	WEISZBROD, COLEEN
1403	BLUE FOX DRIVEIN THEATRE
1422	BAINBRIDGE, NICHOLAS
1480	SALO, ANGELA

**BALDA RD 2014**

1000	OCCUPANT UNKNOWN,
1141	KRUEGER, TERRY L
1175	ROBERTSON, BRIAN
1177	FALKENBERG, PETER M
1289	TRUMBULL, BRADLEY A
1329	ARNSBERGER, MARILYN R
	LEOPARD, CAROLYN L
1348	YRUEGAS, RUDY
1350	DILLY, CLAUDE L
1354	BALOCCO, DEVON
1372	RIP, JOYCE D
1420	HOOD, JUDY L
1450	GJESDAL, BRIAN D
1471	DURBIN, SHAWN P
1485	OCCUPANT UNKNOWN,
1510	HENDRICKS-BOATMAN, LINDA J
1536	ADAMSON, EDWIN T
1577	OCCUPANT UNKNOWN,
1583	WAAGA, DUSTIN C
1602	ARCHER, MARK S
1608	ORTH, MARK
1618	TOFT, ROSEMARY
1619	TOFT, LUKAS D
1637	WILLIAMS, JAMES K

**MONROE LANDING RD 2014**

839	VANZANDEN, THEODORE J
876	JOHNSON, SUE
881	STRICKLAND, H S
883	DYER, DAVID
884	SWACKHAMER, WILLIAM L
885	SALO-LEDESKY, LAURA
892	CALKINS, SHAWN R
895	VANDEWERFHORST JERRY & KATHERINE
	VANDEWERFHORST, JERRY A
904	JIMENEZ, ROXANA G
910	HORR, CASEY J
915	OCCUPANT UNKNOWN,
929	KUHUSKI, SYLVIA D
934	HUNT, FORREST R
938	OCCUPANT UNKNOWN,
941	SEM, HENRY A
944	STADLER, MORRIS C
948	SHELTON, ROBERTA J
1000	SIRES, JOSEPH S
1044	RECTOR, GEORGE A
1074	OCCUPANT UNKNOWN,
1084	CARPENTER, JACK
1140	A J EISENBERG AIRPORT LLC
1159	OCCUPANT UNKNOWN,
1171	ROBERTS, JOE R
1180	MORGAN, P
1203	HAVEMAN, HOWARD A
1212	BOWLES, THOMAS D
1286	CANEPP, W
1292	OCCUPANT UNKNOWN,
1315	FAIRHAVEN ADULT FAMILY HOME
	HAMPTON, KELLIE M
1347	MCKOLE, MARK M
1355	CASSATT, SARAH E
1403	BLUE FOX DRIVEIN THEATRE
	BRATTLAND GO KARTS & ARCADE
1422	BAINBRIDGE, NICHOLAS
1459	OCCUPANT UNKNOWN,
1480	GROBERG, ALICIA M

**BALDA RD 2010**

1141	KRUEGER, TERRY L
1175	ROBERTSON, JOSEPH G
1329	ANDERSON, MARILYN R
1350	DILLY, CLAUDE L
1420	HOOD, JUDY L
1471	DURBIN, SHAWN P
1510	HENDRICKS-BOATMAN, L
1536	ADAMSON, EDWIN T
1577	SPECK, GREG J
1583	CHESNUT, ROBERT D
1602	ARCHER, MARK S
1608	NELSON, ROY G
1619	TOFT, MAGGIE



**MONROE LANDING RD 2010**

839	ELDER, JAMES C
876	STALTER, STEPHANIE A
883	DYER, DAVID
884	SWACKHAMER, WILLIAM L
885	SALO-LEDESKY, LAURA
892	NORDLUND, WESLEY D
895	VANDEWERFHORST, JERRY A
	WHIDBEY FENCING
904	JIMENEZ, ARELY
910	HORR, CLIFF J
929	KUHUSKI, SYLVIA D
941	SEM, HENRY A
944	STADLER, MORRIS C
948	SHELTON, WILLIAM H
1000	SIRES, JOSEPH S
1044	RECTOR, GEORGE A
1084	HARDWOOD FLOORS
	LUPIEN, OMER J
1159	OISTEN, CHARLES E
1171	BATES, DUANE L
1180	MORGAN, P
1200	BOWLES, THOMAS D
1203	HAVEMAN, STEVE D
1212	BOWLES, THOMAS D
1315	FAIRHAVEN ADULT FAMILY HOME
	LUDEMANN, TERRI R
1347	MCKOLE, MARK K
1403	ATKINS, DANIELLE
	BLUE FOX DRIVEIN THEATRE
1422	BAINBRIDGE, NICHOLAS
1459	SHERIDAN, KELLI
1480	FEALEY, GUY E

**BALDA RD 2005**

1141	KRUEGER, TERRY L
1175	ROBERTSON, JOSEPH G
1177	NEWMAN, PAUL
1350	DILLY, CLAUDE L
1372	RIP, JOYCE D
1420	HOOD, ROBIN L
1450	GJESDAL, BRIAN D
1471	BRYANT, BOB
1485	DYNES FARMS
1510	HENDRICKS-BOATMAN, L
1536	ADAMS, ED R
1602	ARCHER, M S
1637	WILLIAMS, HERBERT W

**MONROE LANDING RD 2005**

839	ELDER, CHRIS C
895	WHIDBEY FENCING
904	THIBODEAUX, JOSEPH J
910	KRUM, RAYMOND L
929	KUHUSKI, SYLVIA D
934	LUNA, RENE L
938	BUSTAMANTE, JUANA A
941	SEM, HENRY A
944	STADLER, MORRIS C
948	SHELTON, WILLIAM H
1000	SIRES, JOSEPH S
1044	RECTOR, GEORGE A
1084	HARDWOOD FLOORS
	JUST FACTS
	LUPIEN, OMER J
1159	OISTEN, CHARLES E
1200	BOWLES, THOMAS D
1203	HAVEMAN, STEVE D
1212	BOWLES, THOMAS
1286	JORDAN, ESTHER L
1315	FAIRHAVEN
1347	MCKOLE, MARK K
1355	SAVAGE, PHYLLIS N
1375	CRONIN, RICHARD A
1403	BRATT, DARRELL C
1422	VALLEY VIEW FARMS

**BALDA RD 2000**

1177	NEWMAN, P
1289	STRADER, DARYL R
1329	BOWEN, PAT
1350	DILLY, CLAUDE L
1354	VANDERVOET, LES
1372	RIP, L
1420	HOOD, ROBIN
1450	SULLIVAN, DONALD L
1471	DRINKARD, CLINTON R
1536	ADAMSON, ED
1583	CHESNUT, ROBERT
1637	WILLIAMS, H W

**MONROE LANDING RD 2000**

839	ELDER, J C
876	WITTMANN, INGER
892	BENNETT, C L
895	VANDEWERFHORST, JERRY
910	MUSTANG CORRAL
915	LUSK, JOHN
941	SEM, HENRY
944	STADLER, MORRIS
948	SHELTON, WILLIAM H
1000	SIRES, JOSEPH S
1044	RECTOR, GEORGE
1084	LUPIEN, WES
1140	HARBOR AIR
1159	OISTEN, CHARLES
1171	MARSHALL, ERIC
1200	BOWLES, THOMAS
1203	HAVEMAN, HOWARD
1212	NELSON, L
1286	JORDAN, ESTHER L
1315	LUKE, N
	MUELLER, LOUISE
1355	SAVAGE, ROBERT M
1375	CRONIN, RICHARD
1403	BLUE FOX DRIVE IN THEATRE
	BRATT, DARRELL
	BRATTLAND GO KARTS
1422	VANDERVOET, CORNIE

## N BALDA RD

1995

1249	NELSON, ROY
1259	TIAPULA, RUTH
1289	STRADER, DARYL R
1329	ASMUS, JOHN A
1354	VANDERVOET, LES
1372	RIP, L
	RIPS ROOFING & CONSTR
1420	HOOD, ROBIN
1450	SAPP, ROBERT
	SULLIVAN, DONALD L
1510	HENDRICKSBTMN, L
1536	ADAMSON, ED
1608	NORTHERN, IAN G
1619	NEO LIFE DISTRIBUTOR
	WATER DOME SYSTEM
1657	WALDMAN, IRV
1661	ZYLSTRA, RAYMOND S
1680	FLOWER, JAMES
1687	CAMBURN, DONALD R
1706	PINTLER, RICHARD

**N MONROE LANDING RD 1995**

839	ELDER, J C
876	OCCUPANT UNKNOWNN
884	OCCUPANT UNKNOWNN
892	AMSBURY, BURL
	STAEHLE, MARK
895	WHIDBEY FENCING
904	OCCUPANT UNKNOWNN
910	KRUM, RAYMOND
915	RUTLEDGE, SHARON J
934	HOLGUIN, ESTELLA A
938	OCCUPANT UNKNOWNN
941	SEM, HENRY
944	STADLER, MORRIS
948	SHELTON, WILLIAM H
1000	SIRES, JOSEPH S
1044	RECTOR, GEORGE
1074	OCCUPANT UNKNOWNN
1084	LUPIEN, WES
1140	BUDGET RENT A CAR
	HARBOR AIRLINES
1159	AARROW STAGE LINES
	COWIE, ANDREW H
1169	BUCHOLZ, KURT C
1171	RITTER, DAN
1200	BOWLES, THOMAS
1212	MARTIN, JOY A
1286	JORDAN, ESTHER L
1315	BRAY, ELSA M
	CARLSON, FANNIE
	NIEMI, V F
1347	BAKER, LORI D
	MCKOLE, MARK
1355	SAVAGE, ROBERT M
1375	EBY, CORKY
1403	BLUE FOX DRI VIN THEATRE
	BRATT, DARRELL
	BRATTLAND GO KARTS
1422	VANDERVOET, CORNIE


**N BALDA RD****1992**

1289	STRADER, DARYL R
1329	ASMUS, JOHN A
1354	VANDERVOET, LES
1372	RIP, L
1420	HOOD, ROBIN
1450	SULLIVAN, DONALD L
1485	BURT, PAUL
1510	ADAMSON, ED
1608	NORTHERN, IAN G
1657	WALDMAN, IRV
1680	FLOWER, JAMES
1687	CAMBURN, DONALD R
1706	PINTLER, RICHARD A
15106	HENDRICKS, KURT L



**N MONROE LANDING RD 1992**

839	SMITH, JERRY
876	WITTMANN, EDMUND
892	AMSBURY, BURL
	STAEHLE, MARK
941	SEM, HENRY
944	STADLER, MORRIS
948	SHELTON, WILLIAM H
1000	SIRES, JOSEPH S
1044	RECTOR, GEORGE
1084	LUPIEN, WES
1169	BUCHOLZ, KURT C
1171	RITTER, DAN
1200	BOWLES, THOMAS
1212	VELASQUEZ, DOUGLAS
1286	JORDAN, ESTHER L
1315	COLLIER, RAYMOND
1347	BAKER, LORI D
	MCKOLE, MARK
1355	SAVAGE, ROBERT M
1375	SMITH, M
1403	BRATT, DARRELL
	SEXTON, BERT
1422	VANDERVOET, CORNIE



A.J. Eisenberg Airport  
1140 Monroe Landing Road  
Oak Harbor, WA 98277

Inquiry Number: 7309021.3  
April 14, 2023

## Certified Sanborn® Map Report



6 Armstrong Road, 4th floor  
Shelton, CT 06484  
Toll Free: 800.352.0050  
[www.edrnet.com](http://www.edrnet.com)

# Certified Sanborn® Map Report

04/14/23

**Site Name:**

A.J. Eisenberg Airport  
1140 Monroe Landing Road  
Oak Harbor, WA 98277  
EDR Inquiry # 7309021.3

**Client Name:**

Stantec  
601 SW 2nd Ave, Suite 1400  
Portland, OR 97204  
Contact: Jamie Hoffman



The Sanborn Library has been searched by EDR and maps covering the target property location as provided by Stantec were identified for the years listed below. The Sanborn Library is the largest, most complete collection of fire insurance maps. The collection includes maps from Sanborn, Bromley, Perris & Browne, Hopkins, Barlow, and others. Only Environmental Data Resources Inc. (EDR) is authorized to grant rights for commercial reproduction of maps by the Sanborn Library LLC, the copyright holder for the collection. Results can be authenticated by visiting [www.edrnet.com/sanborn](http://www.edrnet.com/sanborn).

The Sanborn Library is continually enhanced with newly identified map archives. This report accesses all maps in the collection as of the day this report was generated.

## Certified Sanborn Results:

**Certification #** 47FB-47EC-87CB

**PO #** 203723167

**Project** A.J. Eisenberg Airport

### UNMAPPED PROPERTY

This report certifies that the complete holdings of the Sanborn Library, LLC collection have been searched based on client supplied target property information, and fire insurance maps covering the target property were not found.



Sanborn® Library search results

Certification #: 47FB-47EC-87CB

The Sanborn Library includes more than 1.2 million fire insurance maps from Sanborn, Bromley, Perris & Browne, Hopkins, Barlow and others which track historical property usage in approximately 12,000 American cities and towns. Collections searched:

- ☒ Library of Congress
- ☒ University Publications of America
- ☒ EDR Private Collection

*The Sanborn Library LLC Since 1866™*

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A.J. Eisenberg Airport  
1140 Monroe Landing Road  
Oak Harbor, WA 98277

Inquiry Number: 7309021.4

April 14, 2023

# EDR Historical Topo Map Report

with QuadMatch™



6 Armstrong Road, 4th floor  
Shelton, CT 06484  
Toll Free: 800.352.0050  
[www.edrnet.com](http://www.edrnet.com)

# EDR Historical Topo Map Report

04/14/23

**Site Name:**

A.J. Eisenberg Airport  
1140 Monroe Landing Road  
Oak Harbor, WA 98277  
EDR Inquiry # 7309021.4

**Client Name:**

Stantec  
601 SW 2nd Ave, Suite 1400  
Portland, OR 97204  
Contact: Jamie Hoffman



EDR Topographic Map Library has been searched by EDR and maps covering the target property location as provided by Stantec were identified for the years listed below. EDR's Historical Topo Map Report is designed to assist professionals in evaluating potential liability on a target property resulting from past activities. EDR's Historical Topo Map Report includes a search of a collection of public and private color historical topographic maps, dating back to the late 1800s.

**Search Results:****Coordinates:**

<b>P.O.#</b>	203723167	<b>Latitude:</b>	48.251408 48° 15' 5" North
<b>Project:</b>	A.J. Eisenberg Airport	<b>Longitude:</b>	-122.678642 -122° 40' 43" West
		<b>UTM Zone:</b>	Zone 10 North
		<b>UTM X Meters:</b>	523855.15
		<b>UTM Y Meters:</b>	5344293.71
		<b>Elevation:</b>	138.00' above sea level

**Maps Provided:**

2020	1939, 1943
2017	1936
2014	
1998	
1973	
1953	
1951	
1943	

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## ***Topo Sheet Key***

This EDR Topo Map Report is based upon the following USGS topographic map sheets.

### **2020 Source Sheets**



Oak Harbor  
2020  
7.5-minute, 24000



Coupeville  
2020  
7.5-minute, 24000

### **2017 Source Sheets**



Oak Harbor  
2017  
7.5-minute, 24000



Coupeville  
2017  
7.5-minute, 24000

### **2014 Source Sheets**

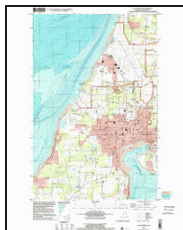


Oak Harbor  
2014  
7.5-minute, 24000



Coupeville  
2014  
7.5-minute, 24000

### **1998 Source Sheets**



Oak Harbor  
1998  
7.5-minute, 24000  
Aerial Photo Revised 1998

## **Topo Sheet Key**

This EDR Topo Map Report is based upon the following USGS topographic map sheets.

### **1973 Source Sheets**



Coupeville  
1973  
7.5-minute, 24000  
Aerial Photo Revised 1973



Oak Harbor  
1973  
7.5-minute, 24000  
Aerial Photo Revised 1972

### **1953 Source Sheets**



Coupeville  
1953  
7.5-minute, 24000  
Aerial Photo Revised 1951

### **1951 Source Sheets**



Deception Pass  
1951  
15-minute, 62500

### **1943 Source Sheets**



DECEPTION PASS  
1943  
15-minute, 50000

## ***Topo Sheet Key***

This EDR Topo Map Report is based upon the following USGS topographic map sheets.

### **1939, 1943 Source Sheets**



Coupeville  
1939  
15-minute, 62500  
Aerial Photo Revised 1936



Deception Pass  
1943  
15-minute, 62500

### **1936 Source Sheets**

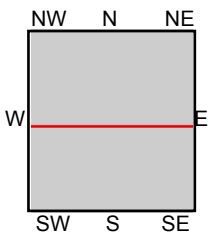
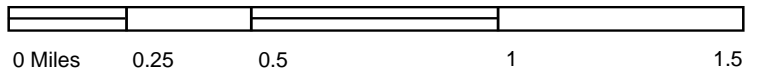


COUPEVILLE  
1936  
15-minute, 50000





This report includes information from the following map sheet(s).



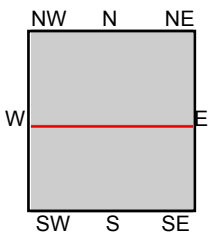
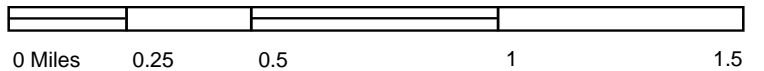
TP, Oak Harbor, 2020, 7.5-minute  
S, Coupeville, 2020, 7.5-minute

SITE NAME: A.J. Eisenberg Airport  
ADDRESS: 1140 Monroe Landing Road  
Oak Harbor, WA 98277  
CLIENT: Stantec





This report includes information from the following map sheet(s).



TP, Oak Harbor, 2017, 7.5-minute  
S, Coupeville, 2017, 7.5-minute

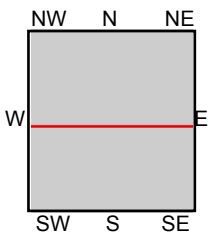
SITE NAME: A.J. Eisenberg Airport  
ADDRESS: 1140 Monroe Landing Road  
Oak Harbor, WA 98277  
CLIENT: Stantec







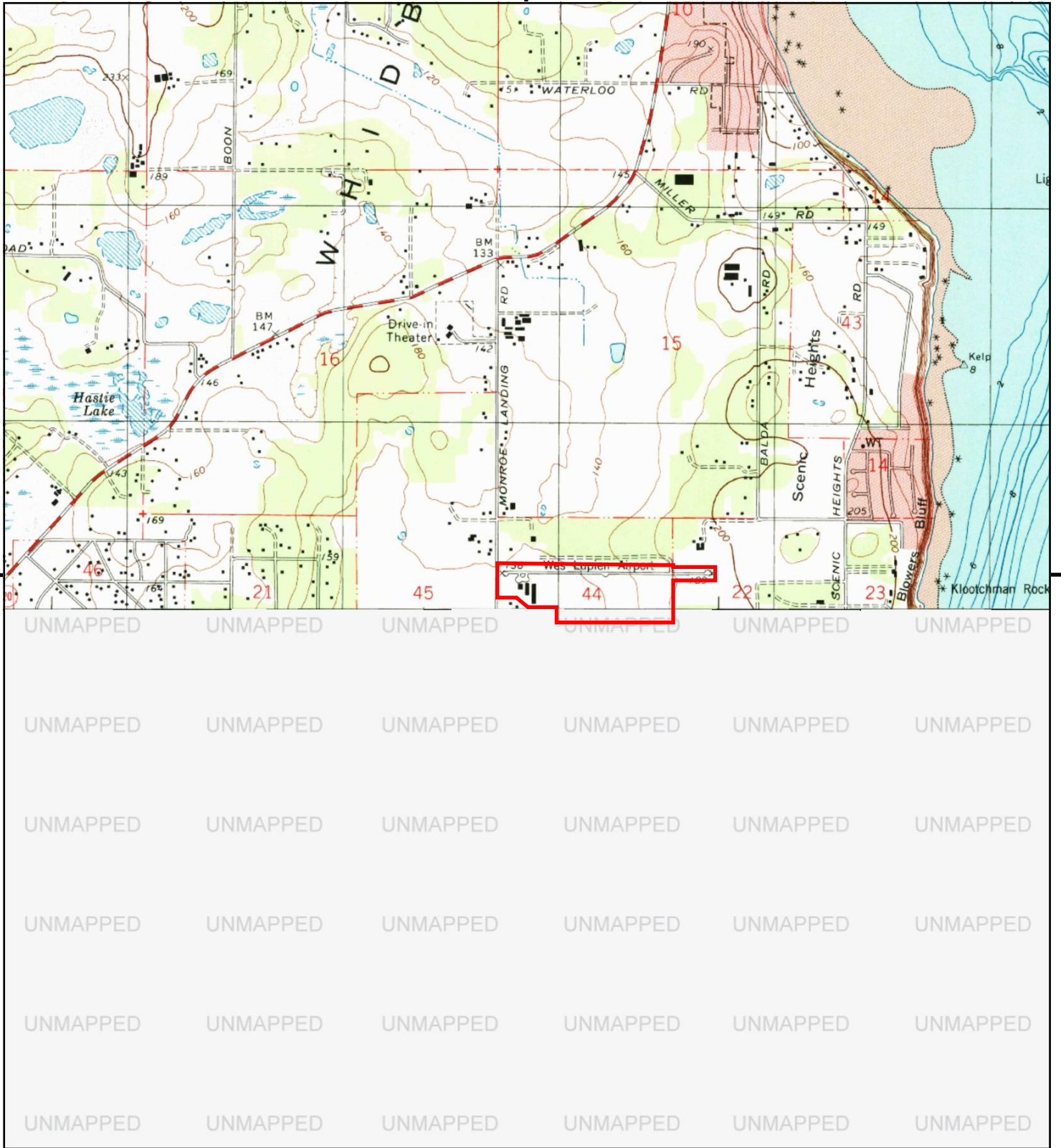
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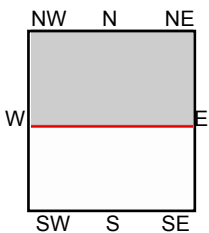
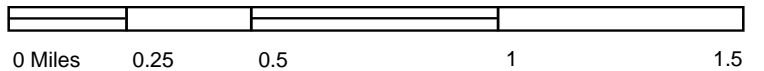
TP, Oak Harbor, 2014, 7.5-minute  
S, Coupeville, 2014, 7.5-minute

SITE NAME: A.J. Eisenberg Airport  
ADDRESS: 1140 Monroe Landing Road  
Oak Harbor, WA 98277  
CLIENT: Stantec





This report includes information from the following map sheet(s).



TP, Oak Harbor, 1998, 7.5-minute

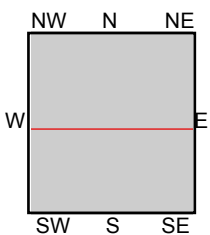
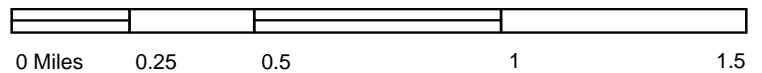
SITE NAME: A.J. Eisenberg Airport  
 ADDRESS: 1140 Monroe Landing Road  
 Oak Harbor, WA 98277  
 CLIENT: Stantec







This report includes information from the following map sheet(s).

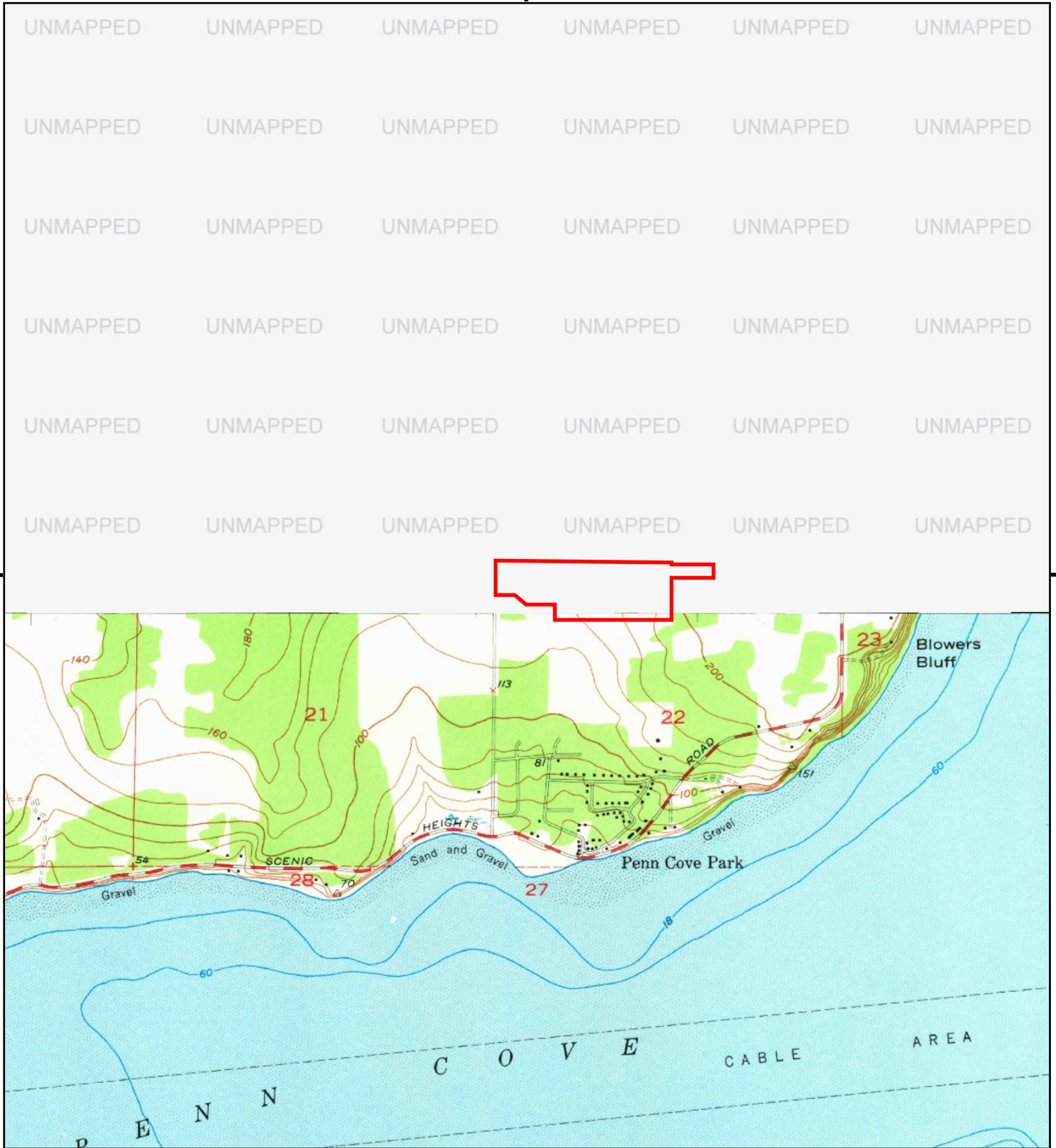


TP, Oak Harbor, 1973, 7.5-minute  
S, Coupeville, 1973, 7.5-minute

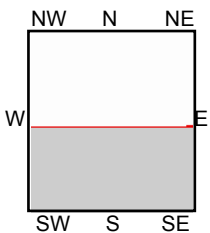
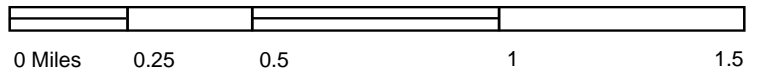
SITE NAME: A.J. Eisenberg Airport  
ADDRESS: 1140 Monroe Landing Road  
Oak Harbor, WA 98277  
CLIENT: Stantec







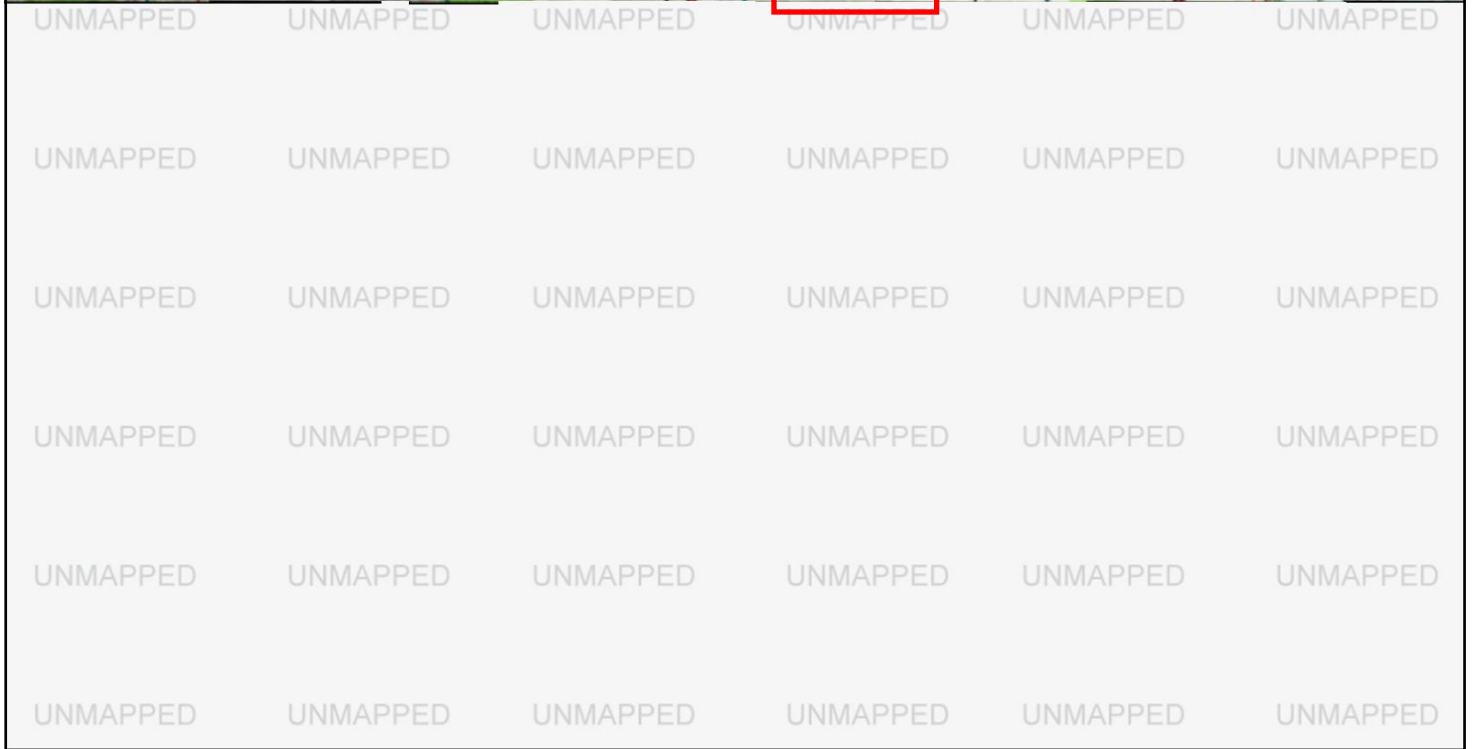
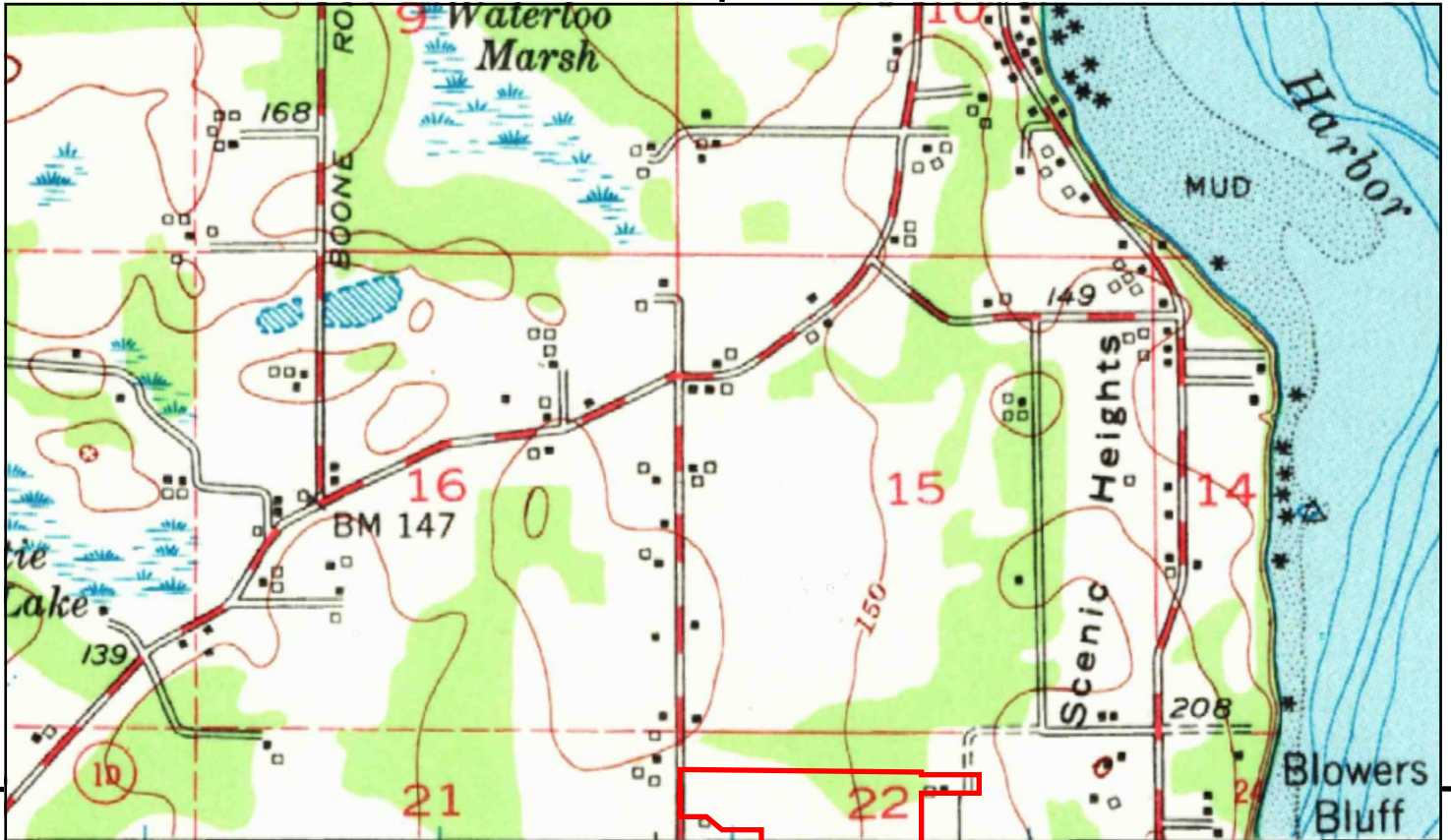
This report includes information from the following map sheet(s).



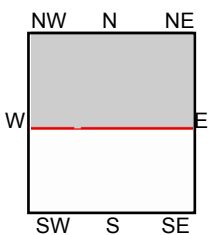
S. Coupeville, 1953, 7.5-minute

SITE NAME: A.J. Eisenberg Airport  
 ADDRESS: 1140 Monroe Landing Road  
 Oak Harbor, WA 98277  
 CLIENT: Stantec





This report includes information from the following map sheet(s).



TP, Deception Pass, 1951, 15-minute

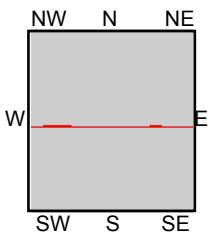
SITE NAME: A.J. Eisenberg Airport  
ADDRESS: 1140 Monroe Landing Road  
Oak Harbor, WA 98277  
CLIENT: Stantec







This report includes information from the following map sheet(s).



TP, Deception Pass, 1943, 15-minute  
S, Coupeville, 1939, 15-minute

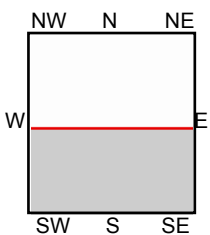
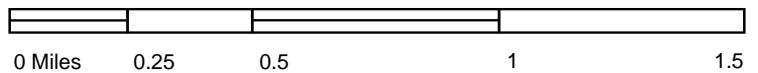
SITE NAME: A.J. Eisenberg Airport  
ADDRESS: 1140 Monroe Landing Road  
Oak Harbor, WA 98277  
CLIENT: Stantec







This report includes information from the following map sheet(s).



S, COUPEVILLE, 1936, 15-minute

SITE NAME: A.J. Eisenberg Airport  
 ADDRESS: 1140 Monroe Landing Road  
 Oak Harbor, WA 98277  
 CLIENT: Stantec



# **APPENDIX F**

## **AGENCY RECORDS**

**Northwest Tank & Environmental Services, Inc.**

21120 Hwy 9 SE

Woodinville, WA 98072

PH: (800) 742-9620 FAX: (425) 645-7881

<http://www.nwtank.com>

Monday, April 3, 2023

AJ Eisenberg Airport  
200 West Mercer, Suite 202  
Seattle, WA 98119-4012

Oak Harbor Airport  
1140 Monroe Landing  
Oak Harbor, WA 98277-8232

RE: Job ID 114989

Dear Valued Customer:

The **Official Report** including all test results and any supporting documentation are enclosed. The test data covered in this report are specific to each test conducted. For your convenience, a summary of testing conducted is provided on the report cover page.

Unless stated otherwise, all compliance testing data must be maintained on site for a minimum of **5 years**. Instructions for specific test types may follow.

Please call if you have any questions or require additional information.

Sincerely,

A handwritten signature in black ink, appearing to be 'RJ', is written over a horizontal line.

Northwest Tank & Environmental Services, Inc.



Maintain all test reports on-site for a minimum of 5 years.

OFFICIAL REPORT

Test Report For:

*Client*

AJ Eisenberg Airport  
200 West Mercer, Suite 202  
Seattle, WA 98119-4012  
**Job #: 114989**

*Site*


Oak Harbor Airport  
1140 Monroe Landing  
Oak Harbor, WA 98277-8232  
UST Site ID: 2270

Date Testing Conducted

Wednesday March 29, 2023

Testing Summary

Line Test Annual (1-3 lines)	Pass
Tank Monitor Certification and ATG Probe Inspection	Pass
Annual Walk Through Inspection	COMPLETE
Leak Detector Test Annual (when tested without lines)	Pass

Report Analyst:  Certified Supervisor: Scott Pike Certificate #: 5053249-U3

## Work Acknowledgement Form

**Customer Name:** AJ Eisenberg Airport    **UST Site ID:** 2270  
**Site Name:** Oak Harbor Airport  
**Site Address:** 1140 Monroe Landing, Oak Harbor  
**Job Number:** 114989  
**Ticket / PO#:** Invoice  
**Date Of Service:** 03/29/2023

Testing Company: Northwest Tank & Environmental Services, Inc.  
**Primary Technician:** Scott Pike  
**Address:** 21120 Hwy 9 SE  
**City/State/Zip:** Woodinville, WA 98072  
**PH:** (800) 742-9620

<b>Start Time:</b>	11:07 AM	<b>End Time:</b>	12:38 PM	<b>Number of Technicians:</b>	1
--------------------	----------	------------------	----------	-------------------------------	---

**Scope of work scheduled:**

Line Test Annual (1-3 lines)  
Tank Monitor Certification and ATG Probe Inspection  
Annual Walk Through Inspection  
Leak Detector Test Annual (when tested without lines)

**Site Representative Upon**

**Checkin:** Chris

**Signature:**

C E T

**Monitoring System Issues Observed Upon Arrival:**

None

**Dispenser and UST System Issues Observed Upon Arrival:**

None

**Dispatch Notes:**

**Technician Comments:**

Replaced all panel bulbs on t1s , Tank #2 still out of service

-----Tank Monitor-----

--Tank\_monitors--

#1: Tested Back Up Battery

-----WA Leak Testing Checklist-----

Comments - Tank #2 closed

**Parts Installed**

Qty	Part #	Model	Name	Serial #	Core Retained	Repair Time
1	FUEL	NWT	Fuel Surcharge	null	null	0
3	576011-034	Veeder-Root	Veeder-Root - Panel Lamp	NA	N/A	5

**Monitoring System Issues Noted at Departure:**

None

**Dispenser and UST System Issues Noted at Departure:**

None

**Post-Operation Checks**

Technician has pumped from each product? N/A

Have all isolated mechanisms been removed? Yes

Technician has walked the site for remaining tools and hazards?  
Yes

Dispensers out of stand-alone? N/A

Technician Signature:

**Site Representative at Checkout:**



C E T

## Monitoring System Certification

This form must be used to document testing and servicing of monitoring equipment. A separate certification or report must be prepared for each monitoring system control panel by the technician who performs the work. A copy of this form must be provided to the tank system owner/operator. The owner/operator must submit a copy of this form to the local agency regulating UST systems within 30 days of test date.

### A. General Information

**Facility Contact Person:** Yvette Eisenberg  
**Make / Model Monitoring System:** V-RTLS 300

**Company Name:** AJ Eisenberg Airport  
**Site Address:** 1140 Monroe Landing  
**UST Site ID:** 2270  
**Date Of Testing:** 03/29/2023  
**Site Name:** Oak Harbor Airport  
**City, State, ZIP:** Oak Harbor, WA 98277-8232  
**Facility Phone Number:** 206-722-3333  
**Serial #:** 70743697405001

### B. Inventory of Equipment Tested/Certified

Tank #: 1 Avgas		
In-Tank Gauging Probe	Mag 1 Probe	
Annular Space or Vault Sensor:	N/A	
Piping Sump / Trench Sensor:	N/A	
Fill Sump Sensor:	N/A	
Mechanical Line Leak Detector:	FX1V	
Electronic Line Leak Detector:	N/A	
Tank Overfill / High Level Sensor:	DTFV	
Other:		

Dispenser ID:	1/2	Dispenser ID:	3/4
Dispenser Containment Sensors Model:	N/A	Dispenser Containment Sensors Model:	N/A
Shear Valves: Yes	Floats & Chains: N/A	Shear Valves: Yes	Floats & Chains: N/A

### 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 information (e.g. manufacturers' checklists) necessary to verify that this information is correct and 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):

Technician Name: Scott Pike  
Certification Number:  
Expiration Date:  
Signature:

Testing Company Name: Northwest Tank & Environmental Services, Inc.  
Address: 21120 Hwy 9 SE Woodinville, WA 98072  
Date of Testing: 03/29/2023

**D. Results of Testing/Service**

Yes	Is the audible alarm operational?
Yes	Is the visual alarm operational?
N/A	Were all sensors visually inspected, functionally tested, and confirmed operational?
N/A	If alarms are relayed to a remote monitoring station, is all communications equipment operational?
No	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?
N/A	If yes: which sensors initiate positive shut-down?
N/A	Did you confirm positive shut-down due to leaks and sensor failure/disconnection?
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?
N/A	If so, at what percent of tank capacity does the alarm trigger?
Yes	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.
No	Was liquid found in any secondary containment systems designed as dry systems?
N/A	If yes, what type of liquid?
Yes	Was monitoring system set-up reviewed to ensure proper settings? Attach setup reports, if applicable.
Yes	Is all monitoring equipment operational per manufacturers specifications?

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

**E. Comments**

Tested Back Up Battery

State Tank ID	Product	Manual Stick Readings(inches)	Gauge Readings(inches)	Difference
1	Avgas	21	20.78	.22

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

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

Yes	Has all input wiring been inspected for proper entry and termination, including testing for ground faults?
Yes	Were all tank gauging probes visually inspected for damage and residue buildup?
Yes	Was accuracy of system product level readings tested?
Yes	Was accuracy of system water level readings tested?
Yes	Were all probes reinstalled properly?
Yes	Were all items on the equipment manufacturer's maintenance checklist completed?

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

Yes	For equipment startup or annual equipment certification, was leak simulated to verify LLD performance?
3 GPH	Leak Rate
Yes	Were all LLDs confirmed operational and accurate within regulatory requirements?
Yes	Was the testing apparatus properly calibrated?
Yes	For mechanical LLDs, does the LLD restrict product flow if it detects a leak?
N/A	For electronic LLDs, does the turbine automatically shut off if the LLD detects a leak?
N/A	For electronic LLDs, does the turbine automatically shut off if any portion of the monitoring system is disabled or disconnected?
N/A	For electronic LLDs, does the turbine automatically shut off if any portion of the monitoring system malfunctions or fails a test?
N/A	For electronic LLDs, have all accessible wiring connections been visually inspected?
Yes	Were all items on the equipment manufacturer's maintenance checklist completed?

## Monthly Alarm Status Log

Personnel need to be alerted immediately in the event of an alarm. Once an alarm condition exists, documented action must be taken to resolve the issue. The monitor should be inspected per monthly monitoring requirements listed below at least monthly if no alarm conditions exist. These inspections need to be documented. Keep copies of all logs on-site for five years.

**Declared primary monthly monitoring method for tanks:**

ATG - View/Print passing .2 tank test at least Monthly

**Declared primary monthly monitoring method for lines:**

Annual Line Test - Retain Passing Line Test Data for 5 Years

**Monitor make/model:** V-RTLS 300

**Serial #:** 70743697405001

**Date of last tank monitor certification:** 03/29/2023

**Next Due: 03/29/2024**

[illegible]



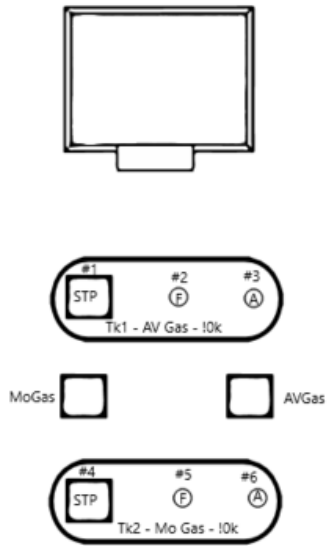
## Site Map

**Customer Name:** AJ Eisenberg Airport    **Site Name:** Oak Harbor Airport

**Site Address:** 1140 Monroe Landing, Oak Harbor

**Job Number:** 114989

**UST Site ID:**2270



## Automatic Line Leak Detector Test Results

Company Name: AJ Eisenberg Airport  
Site Name: Oak Harbor Airport  
Address: 1140 Monroe Landing Oak Harbor, WA 98277-8232  
UST Site ID: 2270  
Test Date/Time: 03/29/2023 11:07:49 am

Job ID Number: 114989  
Technician Name: Scott Pike  
License Number: 5053249-U3  
Expiration Date: 08/03/2023

Product: Avgas	Make: Red Jacket	Operating Pressure: 25	Result: Pass
Tank ID: 1	Model: FX1V	Holding Pressure: 25	
LD Type: Mechanical	Serial#: 8936	Bleedback (ml): 400	
Additional Data For Mechanical Leak Detectors Only			
Metering Pressure: 10			
Step Through Time: 3			

Leak detector testing conducted in accordance with the procedures and limitations of the LDT 890 leak detector tester. A leak is simulated at the highest point in the line using the LDT 890 calibrated to 3 gph at a metering pressure of 10 psi. The owner or operator of the UST system is required to ensure any failed leak detector is replaced before placing the line back in service.

The results of any sampling, testing, or monitoring shall be maintained for at least five years, or for another reasonable period of time determined by the department or delegated agency, except that the results of tank tightness testing conducted in accordance with CFR 40 Part 280.44 shall be retained until the next test is conducted.

### Comments:

Technician Name: Scott Pike  
Signature:



Date: 03/29/2023



# WA LEAK TESTING CHECKLIST FOR UNDERGROUND STORAGE TANKS (USTS)

UST ID #: 2270  
County: Island

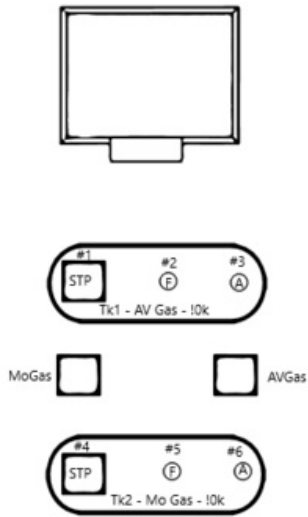
*This checklist certifies testing activities conducted in accordance with Chapter 173-360A WAC. Read instructions on pages 4-7.*

<input checked="" type="checkbox"/> <b>PASS</b> - All Section VI services performed have passing results. <input type="checkbox"/> <b>FAIL</b> - One or more components tested in Section VI require repair and re-testing.		<b>DATE TESTS CONDUCTED:</b> 03/29/2023	
<b>I. UST FACILITY</b>		<b>II. CERTIFIED SERVICE PROVIDER</b>	
Facility Compliance Tag #: A1278 , A8562		Service Provider Name: Scott Pike	
UST ID #: 2270		Company Name: Northwest Tank & Environmental Services, Inc.	
Site Name: Oak Harbor Airport		Address: 21120 Hwy 9 SE	
Site Address: 1140 Monroe Landing		City: Woodinville	State: WA Zip: 98072
City: Oak Harbor		Phone: (800) 742-9620 Email: info@nwtank.com	
County: Island		ICC Certification Type: Tightness Testing ICBO- U3	
Site Phone: 206-722-3333		ICC Cert. #: 5053249-U3 Exp. Date: 08/03/2023	
<b>III. UST OWNER/OPERATOR</b>			
Name: AJ Eisenberg Airport		Phone: 206-479-2260 Email: leslie.beach@gmail.com	
<b>IV. UST SYSTEM INFORMATION</b>			
Observations on test day.			
1. Tank ID #, as registered with Ecology or identified on ATG	1	2	
2. Tank Status. OP (Operational); TC (Temporary Closure)	OP	OP	
3. Product stored, including % of alternative fuels	Avgas	Regular	
4. Tank or compartment capacity (gallons)	10000	10000	
5. Product pumping/flow method. Note as: P (Pressurized); NS (Non-safe Suction); SS (Safe Suction); Si (Siphon); GR (Gravity Fed)	Pressure	Pressure	
Abbreviations for lines 5 and 6 below: Steel (ST); Fiberglass (FRP); Clad Steel (CLAD); Flexible (FLEX); Double Wall (DW); Single Wall (SW); Not Visible (NV)			
6. Tank material and construction observed	SWS	SWS	
7. Pipe material and construction observed	SWS	SWS	
<b>V. REASON FOR SERVICES PERFORMED</b>			
(Check all that apply)			
<input checked="" type="checkbox"/> Annual testing <input type="checkbox"/> 3-year testing	<input type="checkbox"/> Test after install/repair <input type="checkbox"/> Return UST system to operation	<input type="checkbox"/> Other (explain):	

VI. SERVICES PERFORMED			
Required: Include verification for each test performed.			
	#PASS	#FAIL	# REPAIRED& PASSING
<b>SERVICES:</b>	<b>DESCRIPTIONS REQUIRED: (SEE INSTRUCTIONS P. 4-7)</b>		
ALLD Test ( <b>attach data</b> ) Test method used: <b>LDT 890</b> Test method cert.exp.date: <b>7/6/2024</b>	1		
Line Tightness Test ( <b>attach data</b> ) Test method used: <b>Acurite</b> Test method cert.exp.date: <b>7/9/2024</b>	1		
Electronic Monitoring System Tests Controller.mfr/model: <b>V-RTLS 300</b> Controller cert.exp.date: <b>8/3/2023</b> Monitor/controller 1 Probe 1 Sump Sensor Functionality Tank Annular Sensor Functionality			Tested Per RP1200. Tested Per RP1200
OverfillEquipment Test <input type="checkbox"/> Auto shutoff <input type="checkbox"/> Ball float valve <input type="checkbox"/> Overfill alarm			
Fill/Spill Bucket Test ( <b>attach data</b> )			
Tank-Top or Transition Sump Test ( <b>attach data</b> )			
UDC Sump Test ( <b>attach data</b> )			
Tank Tightness Test ( <b>attach data</b> ) 3rd-party certified test: Test method used: <b>N/A</b> Test method cert.exp.date:			
Other			
VII. EXPLANATIONS/PROBLEMS ENCOUNTERED:			
Provide additional test information. Explain irregularities. Describe problems encountered and how addressed..			
<p>Tank Monitor: --Tank_monitors-- #1: Tested Back Up Battery</p> <p>WA Leak Testing Checklist: Comments - Tank #2 closed</p>			

### VIII. UST SITE AND SYSTEM DIAGRAM

Diagram required. Include North arrow.



**PERSONS SUBMITTING FALSE INFORMATION ARE SUBJECT TO FORMAL ENFORCEMENT  
AND/OR PENALTIES UNDER CHAPTER 173-360A WAC.**

### IX. FINAL CHECK

Mark the following:

YES NO N/A

1. All checked services tested per recommended practices, code and/or manufacturer's requirements, and in accordance with state regulations.

☒ ☐ ☐

2. Owner/operator provided with copy of the checklist and testing results.

☒ ☐ ☐

3. Any faulty equipment or necessary repairs explained to owner/operator or site contact.

☐ ☐ ☒

### X. REQUIRED SIGNATURES

03/29/2023

Scott Pike - Tech

Date

Signature of Certified Service Provider

Print or Type Name

03/29/2023

Chris -

Date

Signature of Tank Owner or Authorized Representative

Print or Type Name

## Line Tightness Test Results

Company Name: AJ Eisenberg Airport  
Site Name: Oak Harbor Airport  
Address: 1140 Monroe Landing Oak Harbor, WA 98277-8232  
UST Site ID: 2270  
Test Date: 03/29/2023

Job ID Number: 114989  
Technician Name: Scott Pike  
License Number: 5053249-U3  
Expiration Date: 08/03/2023

### Line Tightness Test Data

Product:	Avgas	Tank ID:	1	Start Time:	
Approx Length:	25	STP MFG:	Red Jacket 3/4 HP	End Time:	
Size:	2	Operating Pressure:		Total Test Time:	
Line Material:	SWS	Test Pressure:		Final Leak Rate:	
Wall Type:	Single	Isolation Dispenser:		Impact Valves Operational:	
Boot Back:	N/A	Isolation Pump:		Check Valve Location:	N/A
Line Type:	Pressure	Initial Cylinder Level:		<b>Result:</b>	N/A
		Final Cylinder Level:			

Product:	Regular	Tank ID:	2	Start Time:	11:45
Approx Length:	25	STP MFG:	Red Jacket 3/4 HP	End Time:	12:15
Size:	2	Operating Pressure:	25	Total Test Time:	30mins
Line Material:	SWS	Test Pressure:	37.5	Final Leak Rate:	.00000
Wall Type:	Single	Isolation Dispenser:	Impact Valve	Impact Valves Operational:	Yes
Boot Back:	N/A	Isolation Pump:	Check Valve	Check Valve Location:	N/A
Line Type:	Pressure	Initial Cylinder Level:	0.080	<b>Result:</b>	Pass
		Final Cylinder Level:	0.080		

Line tightness testing conducted in accordance with the procedures and limitations of the Acurite pipeline tester. A consistent leak rate of .01 gph or higher at 150% of normal operating pressure is considered a failure. The owner or operator of the UST system is required to report all failures to the appropriate agency within 24 hours.

The results of any sampling, testing, or monitoring shall be maintained for at least five years, or for another reasonable period of time determined by the department or delegated agency, except that the results of tank tightness testing conducted in accordance with CFR 40 Part 280.44 shall be retained until the next test is conducted.

### Comments:

Technician Name: Scott Pike


Signature:



Date: 03/29/2023

## Permit to work for Petroleum/Convenience Sites

Worker Signatures: I have reviewed and understand the conditions of this permit and its attachments. I will report hazardous conditions or acts identified on this jobs ite to my supervisor or customer representative.

1:   
2:  
3:

Person In Charge: Scott Pike

Location: Oak Harbor Airport, 1140 Monroe Landing Oak Harbor, WA

Date: 03/29/2023

Time Issued: 03/29/2023 11:54 am

Work Order#: 114989

Time Expires: 03/30/2023 11:54 am

Nearest Hospital: (see hospital map)

Emergency Phone#: 911

### REQUIRED PERMITS AND/OR PROCEDURES

- ☐ Hot Work
- ☐ Excavation Checklist
- ☒ Lock-Out Tag-Out
- ☐ Pre Entry Checklist
- ☐ Confined Space
- ☐ One Call
- ☐ Hoisting/Rigging
- ☐ Management Of Change
- ☐ Work Notification
- ☐ Other

### HAZARDOUS ENERGY LOCK-OUT TAG-OUT (LOTO)- API 1646 Section 12

Has piece of equipment or system been properly isolated? Yes

Has energy isolation been reviewed by all affected workers? Yes

List All Affected Workers: Scott Pike

### CONFINED SPACE PRE-ENTRY CHECKLIST / RECLASSIFICATION - API 1646 Section 11

Surrounding areas free of hazards? Yes

Are you trained in the operation of the air monitor used? Yes

Proper notifications made? Yes

Has the monitor been calibrated before use? Yes

Does your knowledge indicate that the area will remain free from all atmoshperic hazards? Yes

Did you test the atmoshpere in the space before entry? Yes

Are you trained in confined space entry? Yes

Did the atmosphere check as acceptable? Yes

Will the atmosphere be continuously monitored? Yes

Sump	Time	Isolation	LeI	Oxygen	Toxicity	Atmosphere	Electrical Loto	Lines Disconnected	Pumps Off	Valves Shut
------	------	-----------	-----	--------	----------	------------	-----------------	--------------------	-----------	-------------

I ensure this permit has been filled out completely and in conjunction with all applicable OSHA requirements to provide a safe workplace for all workers and myself. I will take action to eliminate hazardous conditions or acts identified on this job site.

Person in Charge Signature:



## Job Clearance Form

Contractor instructions prior to start of work. 1. Review form, check appropriate boxes, read and sign at the bottom of this form. 2. Inform dealer, manager or representative of the job to be performed and potential safety concerns and obtain signature.

Station #: Oak Harbor Airport	Station Address: 1140 Monroe Landing, Oak Harbor	Work Order Number: 114989	UST Site ID: 2270	Date: 03/29/2023
----------------------------------	---	------------------------------	----------------------	---------------------

Contractor Company Name: Northwest Tank & Environmental Services, Inc.	Contact Person in Charge: Scott Pike	Number of Workers:	JFA Reference Number (if required):	Start Time:	End Time: 3/29/2023 12:33:18 PM	Laborer: 0.25	Travel Time: 0.00	Travel Distance: 0
---	---	--------------------	-------------------------------------	-------------	------------------------------------	------------------	----------------------	-----------------------

Problem / Work Description	Return Call: Damage Claim:
----------------------------	-------------------------------

PPE REQUIRED (CHECK ALL THAT APPLY AND/OR FILL IN "OTHER" BLANK SPACE)

Safety Vest: Yes	Hard Hat:	Shoes/Boots: Yes	Hearing Protection: N/A	Respirator: N/A
Protective Clothing: Yes	Gloves: Yes	Safety glasses/goggles: Yes	Fire Resist Clothing/Welding PPE: N/A	Other:

Contractor to complete section below if circumstances on site or specific to this job may generate additional hazards not described in the JSA.

Task Step	Hazards not covered by JSA	How to reduce or eliminate risk - include extra PPE to be worn
Line Test Site Info Work Permit WA Leak Testing Checklist Leak Detector Tank Monitor		



Work documentation requirements: Lower Risk - This form may be used as JSA Medium Risk/Higher Risk - JSA Required Higher Risk - JSA Required and other customer requirements may apply

Examples of higher/medium Risk Tasks:

Hot Work  
Excavation Checklist  
Lock-Out Tag-Out  
Pre Entry Checklist  
Confined Space  
One Call  
Hoisting/Rigging  
Management Of Change  
Work Notification  
Other

This form must be completed for each job and updated and re-signed if circumstances change or additional hazards are identified.



SIGN IN		SIGN OUT AND OPERATOR VERIFICATION OF WORK	
Operating sites: to be signed by the site representative. Non-Operating sites: to be signed by contractor representative only. Contractor responsibility to inform site of:  Hazards of the job, Effects on the site or operation, Any affect to gasoline deliveries, Energy isolation needed, Areas to be barricaded for worker/public safety.	Contractor Representative Name	Signature	General safety checks by contractor
	Scott Pike		Has the work area been left tidy and safe?
	Site Representative Name	Signature	Is the site operator aware of status of work including any remaining isolation
	Contractor has discussed Job Clearance Form with me.		Are changes to equipment documented and communicated?
	Chris		All incidents, near misses, unsafe situations reported?
			Site Representative Comments
			None

Please refer to work acknowledgement form for a complete list of parts installed.

## Permit to Work

Date: 03/29/2023  
 Job ID: 114989  
 UST Site ID: 2270  
 Company: AJ Eisenberg Airport  
 Site: Oak Harbor Airport  
 Technician: Scott Pike

Scope of Work:  
 Line Test Annual (1-3 lines)  
 Tank Monitor Certification and ATG Probe Inspection  
 Annual Walk Through Inspection  
 Leak Detector Test Annual (when tested without lines)

Hazard Analysis:  
 Hot Work

Site Evaluation	
E-Stop switch located	Yes
Storm drain(s) located	Yes
Hand/Eyewash facility located	Yes
Identify other contractors	N/A
Identify traffic ingress/egress	Yes
Identify evacuation routes	Yes
Assembly Area:	Field

Excavation Checklist  
 Lock-Out Tag-Out  
 Pre Entry Checklist  
 Confined Space  
 One Call  
 Hoisting/Rigging  
 Management Of Change  
 Work Notification  
 Other

Personal Protective Equipment	
First Aid Kit stocked	
Note Depleted Stock:	
Nitrile Gloves	Yes
Safety Vest	Yes
Safety Glasses	Yes
Hard Hat	
Hearing Protection	N/A
Knee Pads	Yes
Back Brace	N/A
Harness / Lanyard	N/A

Pre-Operation Checks	
Ladder Inspection **	N/A
Extension Cord Inspection	N/A
Oxygen / Vapor Sensor Calibrated	Yes
Tools / Equipment in Good Repair	Yes
Equipment Grounding	N/A
Hazard Communication	Yes
** Work cannot be performed on ladder above 6'.	

Safety Equipment	
Lockout / Tagout	Yes
Oxygen / Vapor Sensor	Yes
Ventilator	N/A
Retrieval Equipment	N/A
Delineators / Perimeter Fencing	Yes
Ground Fault Circuit Interruptor	N/A
20# Fire Extinguisher	Yes
Static Grounds	N/A
Explosion-Proof Pump	N/A
Absorbant Rags	N/A
Communication Equipment (cell phone)	Yes
Scissor Lift**	N/A

Pre-Entry Checklist for Confined Space	
Is the sump greater than 5' deep?	No
Is there hazardous liquid/vapor present?	No
Is there a lack of oxygen within the space?	No
IF ANY OF THESE ARE ANSWERED YES A PERMIT MUST BE ISSUED!	

\*\* For work above 6', an elevated work permit is required.

Refer to your Company Safety manual for standard operating procedures and equipment standards. Please contact your immediate supervisor to clarify procedures not covered in your safety manual.

Job Completion Checklist	
Have all isolation mechanisms been removed	Yes
Have you pumped from each product?	N/A
Are all dispensers out of "stand-alone"	N/A
Have you walked the site for tools or hazards?	N/A



STATE OF WASHINGTON

DEPARTMENT OF ECOLOGY

Northwest Regional Office • 3190 160th Avenue SE • Bellevue, Washington 98008-5452 • (425) 649-7000

October 30, 2001

**CERTIFIED MAIL**  
**7000 0520 0021 6763 8735**

Rick Boehlke  
1302 26th Ave NW  
Gig Harbor, WA 98335-7841

Dear Mr. Boehlke:

Re: **EARLY NOTICE LETTER** Site #39633333  
Harbor Airlines  
1140 Monroe Landing Rd  
Oak Harbor, WA 98277-0160

This letter is sent to you concerning information that the Department of Ecology (Ecology) has gathered regarding the above referenced property. As part of the process under the Model Toxics Control Act (MTCA), Ecology maintains a list of known or suspected contaminated sites. Based on available information in the department's files, it is Ecology's decision to add this property to the list as a site known to be contaminated by hazardous substances.

Enclosed is a data summary report containing information we believe reflects the current site status. A legend is also enclosed to help interpret codes used in this report.

Please note that inclusion on the list **does not** mean that Ecology has determined you to be a potentially liable person responsible for cleanup under the MTCA. However, this letter is a notification that an area(s) of contamination may exist on this property. Further investigation or cleanup action will need to be done to comply with Washington State laws and regulations.

Because of considerable potential liability, please be advised to carefully consider any investigation or cleanup actions and to carefully document steps taken independent of Ecology's involvement. Guidance documents to help conduct an independent cleanup are available if you are interested in this option. In proceeding with an independent cleanup, please be aware there are requirements in State law which must be met. Some



of these requirements are addressed in WAC 173-340-120(8)(B) and -300(4). Ecology will use the appropriate requirements contained throughout this chapter in its evaluation of the adequacy of any independent remedial (cleanup) actions performed.

Ecology has a strong commitment to work cooperatively with individuals to accomplish prompt and effective investigations and site cleanups. However, due to limited resources and requirements in State law, we are not able to provide all the assistance requested. Your cooperation in planning or conducting a cleanup action is not an admission of guilt or liability.

If an independent cleanup action is undertaken, and a formal review of the work is desired, a report may be submitted to Ecology through the Voluntary Cleanup Program. This program was established in response to the public's need for Ecology to more rapidly review cleanup actions. A fee has been established to support this review process. Guidance documents to help conduct an independent cleanup are available if you are interested in this option.

If a cleanup action is undertaken and a formal review of the work is not desired at this time, then the information should be submitted to Ecology in order to document any assessment or cleanup activities. If no report is available, but work is in progress or anticipated, a letter describing these plans would be helpful in updating the site record.

If an independent cleanup action does not occur on this property, Ecology will conduct a more detailed inspection at a future time that may include testing for contamination. After that, Ecology will assess what action is needed and establish a priority for that work under the formal MTCA cleanup process. At that time, the potentially liable person(s) would be determined and would be responsible for cleanup costs, including State oversight.

Should you have any questions regarding this letter or if you would like a copy of Chapter 70.105D RCW (The Model Toxics Control Act), the implementing regulations, Chapter 173-340 WAC, that detail these requirements, or a guidance document, please contact me at (425) 649-7136. Thank you in advance for your cooperation.

Sincerely,



Steve W. Bremer  
Initial Investigator  
Toxics Cleanup Program

SWB:njw  
Enclosures: 2

DEPARTMENT OF ECOLOGY -- TOXICS CLEANUP PROGRAM  
INTEGRATED SITE INFORMATION SYSTEM  
SITE DATA SUMMARY  
AS OF 10/30/2001

FACILITY SITE ID: 39633333 SITE NAME: HARBOR AIRLINES INC

TCP ID:

**SITE LOCATION INFORMATION**

ADDRESS: 1140 MONROE LANDING RD

DEGREES MINUTES SECONDS

TOWNSHIP RANGE SECTION

LATITUDE: 48 15 21.42

0 0 0

CITY: OAK HARBOR

LONGITUDE: 122 40 54.26

ZIP CODE: 98277-0160

LEGISLATIVE DISTRICT #: 10

COUNTY: ISLAND

TAX PARCEL #:

CONGRESSIONAL DISTRICT #: 2

**SITE STATUS INFORMATION**

ECOLOGY STATUS: 1 Awaiting SHA

WARM BIN #:

INDEPENDENT STATUS:

ERTS ID: 519042

PROGRAM PLAN:

LUST ID:

STATUTE: 2 MTCA only

PROJECT CODE:

VCP ID(S):

RESPONSIBLE UNIT: NORTHWEST

SITE MANAGER: NORTHWEST REGION

ENTERED DATE: 10/12/2001

NFA CODE:

SITE UPDATE DATE: 10/12/2001

NFA DATE:

**SITE COMMENTS**

**AFFECTED MEDIA AND CONTAMINANTS INFORMATION**

MEDIA	STATUS	#1	#2	#3	#4	#5	#6	#7	#8	#9	#10	#11	#12	#13	#14	#15	#16	#17	#18	#19	DW TYPE:
6 Drinking Water	S		S	S						S											
4 Soil	C		C	C				S		C											
2 Surface Water	S		S	S				S		S											
1 Groundwater	S		S	S						S											

**AFFECTED MEDIA AND CONTAMINANTS LEGEND**

#1=Base/Neutral Organics  
#2=Halogenated Organic Compounds  
#3=Metals-Priority Pollutants  
#4=Metals-Other  
#5=PCB

#6=Pesticides  
#7=Petroleum Products  
#8=Phenolic Compounds  
#9=Non-Halogenated Solvents  
#10=Dioxins

#11=PAH  
#12=Reactive Wastes  
#13=Corrosive Wastes  
#14=Radioactive Wastes  
#15=Conventional Contaminants, Organic

#16=Conventional Contaminants, Inorganic  
#17=Asbestos  
#18=Arsenic  
#19=MTBE

NUMBERS 1 - 17 CORRESPOND TO THE CONTAMINANT NUMBER IN THE ATTACHED REPORT

**B = Confirmed below MTCA**

**C = Confirmed above MTCA**

**S = Suspected above MTCA**

1. **Base/Neutral/Acid Organics:** Hazardous substances typically included in the Base/Neutral/Acid fraction of EPA's priority pollutant compound list. Examples are: Acenaphthene; Hexachlorobenzene; Fluoranthene; 2,4-dinitro-toluene; Isophorone.
2. **Halogenated Organic Compounds:** Organic compounds, typically solvents, with one or more of the halogens (e.g., Chlorine, Bromine, Fluorine) incorporated into their structure. Examples are: Carbon Tetrachloride; Chloroform; Vinyl Acetate; 1,1,2,2-tetrachloroethane; freons.
3. **EPA Priority Pollutants – Metals and Cyanide:** Metals included in EPA's priority pollutant compounds list. Examples are: Antimony, Arsenic, Beryllium, Cadmium, Chromium, Copper, Cyanide, Lead, Mercury, Nickel, Selenium, Silver, Thallium, and Zinc.
4. **Metals – Other:** Other non-priority pollutant metals. Examples are: Aluminum, Barium, Cobalt, Iron, Manganese, and Tin.
5. **Polychlorinated biPhenyls (PCBs):** A specific "family" of aromatic chlorinated organic compounds often referred to as "AROCOLOR." Common types are: AROCLOR-1016, AROCLOR-1221, AROCLOR-1260.
6. **Pesticides:** Chemical agents used to control pests such as: fungicides, herbicides and insecticides. Examples are: Aldrin, Chlordane, Endrin, Diazinon, Folex, Malathion.
7. **Petroleum Products:** Crude oil and any fraction thereof. Each of these materials may consist of many specific chemical compounds. Examples are: Gasoline, diesel fuel, mineral oil.
8. **Phenolic Compounds:** Hazardous substances typically included in the acid extractable fraction of EPA's priority pollutant compound list. Examples are: 2,4,6-trichloro-phenol; Phenol; Cresols; Pentachlorophenol; Benzoic Acid.
9. **Non-Halogenated Solvents:** Organic solvents, typically volatile or semi-volatile, not containing any halogens. Examples are: Acrolein; Benzene; Toluene, Acetone; 4-Methyl-2-pentanone.
10. **Dioxin:** A family of more than 70 compounds of chlorinated dioxins. Examples: 2,3,7,8-tetrachlorodibenzo-p-dioxin (TCDD); P-dioxin; Hexachlorodibenzo-p-dioxin; Polychlorinated dibenzo-para-dioxin (PCDD).
11. **Polynuclear Aromatic Hydrocarbons (PAH):** Hydrocarbons composed of two or more benzene rings. Examples are: Benzo-Fluoranthene; Chrysene; Anthracene; Acenaphthene.
12. **Reactive Wastes:** Wastes that react violently upon contact with other substances (especially air or water) as defined by the Dangerous Waste Regulation (WAC 173-303-090(7)). They explode easily or are otherwise unstable. Examples: Peroxides; Metallic Sodium.
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15. **Conventional Contaminants, Organic:** Unspecified organic matter that imposes an oxygen demand during its decomposition. This is reflected by elevated Biochemical Oxygen Demand (BOD), Chemical Oxygen Demand (COD) and/or Total Organic Carbon (TOC). Typically a component of municipal solid waste leachates, septage, food wastes, wood waste leachate and similar organic wastes.
16. **Conventional Contaminants, Inorganic:** Non-metallic inorganic substances or indicator parameters that may indicate the existence of contamination if present at unusual levels. Examples are: Chloride, Sulfur compounds, Nitrogen compounds, pH, conductivity, hardness, and alkalinity.
17. **Asbestos:** All forms of Asbestos.



STATE OF WASHINGTON  
DEPARTMENT OF ECOLOGY

Northwest Regional Office, 3190 - 160th Ave S.E. • Bellevue, Washington 98008-5452 • (206) 649-7000

October 12, 2001

**CERTIFIED MAIL**  
7001 0320 0001 1823 8370

Matthew Davis  
Air International, LLC  
5224 Wilson Ave S, Suite 200  
Seattle, WA 98118-2564

Dear Mr. Davis:

Re: **EARLY NOTICE LETTER** Site #39633333  
Harbor Airlines  
1140 Monroe Landing Rd  
Oak Harbor, WA 98277-0160

This letter is sent to you concerning information that the Department of Ecology (Ecology) has gathered regarding the above referenced property. As part of the process under the Model Toxics Control Act (MTCA), Ecology maintains a list of known or suspected contaminated sites. Based on available information in the department's files, it is Ecology's decision to add this property to the list as a site known to be contaminated by hazardous substances.

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Sincerely,



Steve W. Bremer  
Initial Investigator  
Toxics Cleanup Program

SWB:njw  
Enclosures: 2



**DEPARTMENT OF ECOLOGY -- TOXICS CLEANUP PROGRAM  
INTEGRATED SITE INFORMATION SYSTEM  
SITE DATA SUMMARY  
AS OF 10/12/2001**

**FACILITY SITE ID: 39633333 SITE NAME: HARBOR AIRLINES INC**

**TCP ID:**

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**ADDRESS: 1140 MONROE LANDING RD**

**DEGREES MINUTES SECONDS**

**TOWNSHIP RANGE SECTION**

**LATITUDE: 48 15 21.42**

**0 0 0**

**CITY: OAK HARBOR**

**LONGITUDE: 122 40 54.26**

**ZIP CODE: 98277-0160**

**LEGISLATIVE DISTRICT #: 10**

**COUNTY: ISLAND**

**TAX PARCEL #:**

**CONGRESSIONAL DISTRICT #: 2**

**SITE STATUS INFORMATION**

**ECOLOGY STATUS: 1 Awaiting SHA**

**WARM BIN #:**

**INDEPENDENT STATUS: 0**

**ERTS ID: 519042**

**PROGRAM PLAN:**

**LUST ID:**

**STATUTE: 2 MTCA only**

**PROJECT CODE:**

**VCP ID(S):**

**RESPONSIBLE UNIT: NORTHWEST**

**SITE MANAGER: NORTHWEST REGION**

**ENTERED DATE: 10/12/2001**

**NFA CODE:**

**SITE UPDATE DATE: 10/12/2001**

**NFA DATE:**

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06/25/2001  
8:30 AM  
INCIDENT ID: N519042

DEPARTMENT OF ECOLOGY  
ENVIRONMENTAL REPORT TRACKING SYSTEM  
REFERRAL

PAGE 1

PROGRAM/ORGANIZATION: WATER QUALITY

CONTACT: BOB WRIGHT  
REFERRAL DATE: 06/25/2001

URGENT RESPONSE?: Y PRIMARY?: Y

OTHER PROGRAM/ORGANIZATIONS REFERRED TO:

ADDITIONAL INFO:

COORDINATOR: MUSA, DONNA

REPORT 1 OF 1

DATE/TIME REC'D: 06/25/2001 8:13 AM  
ACTUAL DATE: 06/24/2001

REPORT TYPE: INITIAL

CALLER NAME:

ANONYMOUS?: Y

ADDRESS:

CONTACT 1:  
PHONE:

COUNTY: ISLAND

CITY: OAK HARBOR

WEATHER:

TIDE:

WATERWAY: PENN COVE

TYPE: MARINE

LATITUDE:

LONGITUDE:

TOWNSHIP:

RANGE:

E/W:

SECTION:

LOCATION INFO: OAK HARBOR AIRPORT  
BEHIND THE TERMINAL BUILDING

MEDIUM: SOIL  
SURFACE WATER-FRESH

MATERIAL: OTHER HAZARDOUS

QTY: 0

UNIT:

HAZARDOUS: Y

OTHER: PAINT WASTEWATER

*Bob Wright*

06/25/2001

8:30 AM

INCIDENT ID: N519042

DEPARTMENT OF ECOLOGY  
ENVIRONMENTAL REPORT TRACKING SYSTEM  
REFERRAL

PAGE 2

CAUSE: HUMAN FACTOR

HUMAN FACTOR: INTENTIONAL

IMPACT: WATER POLLUTION

SOURCE: OTHER

ACTIVITY: OTHER

ALLEGED VIOLATOR 1: JIM MARTIN OWNS AIRCRAFT  
MARTINOFF  
ADDRESS:

ADDITIONAL INFO: MARTIN AVIATION, LLC

ADDITIONAL INFORMATION ON INCIDENT:

THERE ARE 2 MEN STRIPPING THE PAINT OFF OF AN AIRPLANE AT THE OAK HARBOR AIRPORT WITH A PRESSURE WASHER, STARTING A DAY OR TWO AGO. THE PAINT WASH WATER IS GOING TO THE SOIL AND THEN WASHING INTO DRAINAGE THAT GOES TO PENN COVE. CALLER URGES ECOLOGY TO INVESTIGATE QUICKLY, SINCE THE WORKERS WILL TRY TO COVER UP WHAT THEY HAVE DONE. AIRPORT IS CURRENTLY UNDER CHAPTER 7, SO THERE IS NO ONE THERE MANAGING THE FACILITY, ALTHOUGH IT IS STILL OPEN TO THE PUBLIC. TO GET MORE INFO ON PLANE OWNER, CONTACT CHRIS GARDEN, WITH ISLAND COUNTY SHERIFF.

*Island County Health Dept. -  
Jason Gentry (360) 679-7350*



06/25/2001

8:30 AM

INCIDENT ID: N519042

DEPARTMENT OF ECOLOGY  
ENVIRONMENTAL REPORT TRACKING SYSTEM  
REFERRAL

PAGE 3

=====

INVESTIGATOR: \_\_\_\_\_

DATE STARTED: 6/27/01

DATE COMPLETED:    /   /   

ACTION: referral

ACTION DATE: 6/27/01

NARRATIVE:

Referred to Jason Gentry at Island Co. HD (via fax) for II

Reviewed data from Island County HD, concurs with recommendation  
to list the site as confirmed soil contamination of HOCs,  
priority metals, + non-halogenated solvents; suspected petroleum prods.

Suspected for above contaminants in groundwater, surface water,  
and drinking water, SIS-listed 10-12-01

N Wood 10-12-01



# .. FACILITY SITE INFORMATION (TL.. ,

Shaded fields are required

Site Name: Harbor Airlines FS ID: 39633337

Location Description: \_\_\_\_\_

Geographic Position: \_\_\_\_\_

01 = Centroid of STR Unit  
02 = Centroid of STR Qtr. Section  
03 = Centroid of STR QTR QTR Section  
04 = Centroid of STR QTR QTR QTR Section  
05 = Facility/Site Centroid  
06 = NE Corner of Land Parcel

07 = NW Corner of Land Parcel  
08 = Plant Entrance  
09 = SE Corner of Land Parcel  
11 = SW Corner of Land Parcel  
99 = Unknown

Site Address: 1140 Monroe Landing Rd

City: Oak Harbor

Zip: 98277-0160

County: Island

WRIA ID: \_\_\_\_\_

Indian Land: ☐

Collection Source: \_\_\_\_\_

01 = Not Applicable 07 = "1:62,500 13 = "1:10,000 19 = "1:10,000-1:15,000  
02 = "1:500,000 08 = "1:50,000 14 = "1:12,000 20 = "1:5,001-1:10,000  
03 = "1:250,000 09 = "1:25,000 15 = "1:25,001-1:50,000 21 = "1:501-1:5,000  
04 = "1:125,000 10 = "1:24,000 16 = "1:50,001-1:100,000 22 = <=1:500  
05 = "1:100,000 11 = "1:20,000 17 = "1:20,001-1:125,000 23 = <1:500  
06 = "1:63,360 12 = "1:15,840 18 = "1:15,001-1:20,000 99 = Unknown

Collection Method: \_\_\_\_\_

01 = Address Matching—Block Face 16 = GPS (Code/Geodetic)  
02 = Address Matching—House Number 17 = GPS (Kinematic)  
03 = Address Matching—Street Centerline 18 = GPS (Unknown)  
04 = Address Matching—Unknown 19 = Hand Measured—paper map  
05 = Aerial Photography—Rectified 20 = LORAN-C  
06 = Aerial Photography—Unknown 21 = Orthophotography—digital  
07 = Aerial Photography—Unrectified 22 = Orthophotography—paper  
08 = Cadastral Survey 23 = Satellite Imagery—Landsat MSS  
09 = Census Block 1990 Centroid 24 = Satellite Imagery—Landsat TM  
10 = Census Block Group 1990 Centroid 25 = Satellite Imagery—Other  
11 = Conversion from STR 26 = Satellite Imagery—SPOT Panchromatic  
12 = Digital or manual raw photo extraction 27 = Satellite Imagery—SPOT Multi Spectral  
13 = Digitized of CTR screen/digital data 28 = Zip Code Centroid  
14 = Digitized—paper map 99 = Unknown  
15 = GPS (Carrier/Geodetic)

Horizontal Datum: \_\_\_\_\_

01 = North American Datum 1927-NAD27  
02 = North American Datum 1983 ('91 adj.) = NAD83  
03 = HARN  
04 = WGS84 (GPS NAVD88)  
99 = Unknown

2 (usual default)

Areal Extent Code: \_\_\_\_\_

01 = Large Facility/Complex or area > 10 Acre  
02 = Small Facility/Complex or area > 1 Acre < 10 Acre  
03 = Large Building or area > 5,000 sq. ft.  
04 = Small Building or area < 5,000 sq. ft.  
05 = Crossing or Intersection of two features; e.g., bridge stream  
06 = Small object or area < 10 sq. ft.; e.g., well  
99 = Unknown

Accuracy Level: \_\_\_\_\_

01 = > 1/100 meter 06 = +/- 40 feet (12 meter) 11 = +/- 1000 feet  
02 = < 1/10 meter and > 1/100 meter 07 = +/- 100 feet (35 meter) 12 = +/- 2000 feet  
03 = < 1 meter and > 1/10 meter 08 = +/- 180 feet (55 meter) 13 = > 2000 feet  
04 = +/- 10 feet (3 meter) 09 = +/- 250 feet 99 = Unknown

JP 10/8/01



± 20 feet (6 meter)				10 = ± 50L				
	Degree	Minute	Seconds		Number	Direction	Quarter	Circle
Latitude:	48	15	01	Section:	22		Sec 1	NW NE SW SE
Longitude:	122	40	38	Township:	32	N	Sec 2	NW NE SW SE
If you don't have LAT/LONG, please provide map of site!				Range:	1	E	Sec 3	NW NE SW SE

Ecology Interaction (check all that apply):	System (check all that apply):
<input type="checkbox"/> FCS Federal (Superfund Cleanup Site) <input type="checkbox"/> LUST LUST Facility <input type="checkbox"/> UST Underground Storage Tank <input checked="" type="checkbox"/> SCS State Cleanup Site <input type="checkbox"/> VOLCLNST Voluntary Cleanup	<input checked="" type="checkbox"/> ISIS <input type="checkbox"/> UST/LUST  EPA ID: _____

Active Status: \_\_\_\_\_ Date: \_\_\_\_\_ Inactive Status: X Date: 10/8/01

Sic/NAIC Code:	Description:
1.	airport
2.	airplane paint, etc.

If this site is a sub-site or operable unit of a larger site, include the name and FS ID# of the parent site:  
 FS ID#: \_\_\_\_\_ Site Name: \_\_\_\_\_

Company Name: Air International, LLC Title: MR MS DR  
 Last Name Davis First Name: Matthew Middle Initial: F  
 Address: 5224 Wilson Ave S Suite 200 PO Box: \_\_\_\_\_  
 City: Seattle State: WA Zip: 98118-2564 Country: USA  
 Tax ID#: \_\_\_\_\_ UBI#: \_\_\_\_\_ Phone#: \_\_\_\_\_ Ext: \_\_\_\_\_  
 Fax#: \_\_\_\_\_ Alt Phone#: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

<b>Affiliation Type:</b>  <u>SO</u> _____ _____	AC = Application Contact AP = Affected Party APPL = Applicant ATT = Attorney BC = Billing Contact BO = Business Owner CA = Co Applicant CNTR = Contractor CRP = Cost Recovery Party DBA = Doing Business As	FOPER = Former Operator FOWNR = Former Owner IC = Inspection Contact LAO = Land Owner LEO = Legal Owner MH = Mortgage Holder OP = Operator PE = Project Engineer PI = Public Involvement Person PLP = Potentially Liable Person	PM = Project Manager PRMT = Permittee PRP = Potentially Responsible Party SA = Site Attorney SC = Site Contact SO = Site Owner TSC = Toxics Site Contact UNK = Unknown
---	--	--	---

Relationship Start Date: \_\_\_\_\_ Relationship End Date: \_\_\_\_\_

**Alternate Site Names**

1.
2.
3.



# ISIS INFORMATION

Shaded fields are required

<b>Site Name:</b>	<u>Oak Harbor Airport</u>	<b>FS ID:</b>	
<b>TCP ID:</b>	<b>Tax Parcel #:</b>	<b>UBAT:</b> <input type="checkbox"/>	<b>Warm Bin #:</b>

<b>Ecology Status:</b>	<div style="display: flex; justify-content: space-between;"> <div> 1 = Awaiting SHA  2 = Ranked, Awaiting RA  3 = RA In progress  4 = Independent RA </div> <div> 5 = Construction Completed, O &amp; M Underway  6 = RA Completed, Confirmation Monitoring Underway  7 = RA Conducted, residual contamination left on site; on-going institutional controls required  8 = RA and other activities completed </div> </div> <p>(Independent Status field required if Ecology Status is code 4)</p>
------------------------	---

<b>Statute:</b>	1 = CERCLA 2 = MTCA Only 3 = RCW 70.105B 4 = RCW 90.48 5 = RCRA-C 6 = RCRA-D 7 = MTCA (SED)	<b>Independent Status:</b>	1 = Release report received, awaiting assessment by PLP 2 = Independent Site Assessment or Interim RA Report received 3 = Independent Final RA Report received  (This field is only used and required if Ecology Status is 4)
-----------------	---	----------------------------	---

<b>Program Plan:</b>	1 = Prepayment 2 = Program Plan 3 = IRAP 4 = VCP	<b>Owner Type:</b>	1 = Private 2 = Municipal 3 = County 4 = Federal	5 = State 6 = Tribal 7 = Mixed 8 = Other	9 = Unknown 10 = Publicly-Owned (Bankrupt) 11 = Financial Institution Owned (Bankrupt)
----------------------	---	--------------------	---	---	--

<b>ERTS ID:</b> <u>519042</u>	<b>UST/LUST SITE ID:</b>	<b>AFRS Code:</b>
-------------------------------	--------------------------	-------------------

<b>Site Manager:</b> <u>NWFO</u>	<b>Responsible Unit:</b> <u>NWFO</u>
----------------------------------	--------------------------------------

<b>NFA Code:</b>	1 = NFA after assessment, IRAP, or VCP 2 = Removed from Hazardous Sites List (HSL) 3 = Referred (transferred to another Ecology Prog. 4 = Referred to another agency 5 = Referred to local governmental entity	6 = Cleaned up under prior authority 7 = Cleanup completed, not on HSL 8 = Restrictive Covenant, Institutional Controls 9 = Removed from HSL, Restrictive Cov. Inst. Contr.	<b>NFA Date:</b>
------------------	--	--	------------------

<b>Site Comments:</b>
-----------------------



Activity Code	Activity Status	Start Date	End Date	Activity Lead	Action By	Neg. Start Date	Legal Mech.
SD	C	6/24/01	6/24/01	Anonymous	5		
II	C	8/13/01	8/13/01	Island County HQ	4		
ENL	C	10/9/01	10/19/01	Brewer	1		

#### Activity Codes

SD = Site Discovery/Report Received  
II = Initial Investigation  
ENL = Early Notice Letter  
SHA = Site Hazard Assessment  
HSL = Hazardous Sites Listing

EA = Emergency Action  
IA = Interim Action  
RC = Routine Cleanup Action  
CAP = Cleanup Action Plan  
CED = Cleanup Engineering Design

CC = Cleanup Construction  
COM = Cleanup Operation & Maintenance  
PR = Periodic Review (5 year)  
RHSL = Removal from Hazardous Site List  
RI/FS = Remedial Investigation/Feasibility Study

#### Activity Status Codes

C = Completed  
I = In Process  
P = Planned  
X = Canceled

#### Action By Codes

1 = Ecology  
2 = Ecology w/Contractor  
3 = EPA  
4 = Local Government  
5 = Other  
6 = PLP  
7 = PLP w/Contractor

#### Legal Mechanism

1 = Enforcement Order  
2 = Agreed Order  
3 = Consent Decree  
4 = Governmental Action  
5 = Other  
6 = Not Applicable  
7 = Independent

Activity Comments:

Media	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1 Groundwater		S	S						S								
2 Surface Water		S	S				S		S								D W
3 Air																	
4 Soil		C	C				S		C								T Y P E
5 Sediment																	
6 Drinking Water		S	S						S								

#### Status Codes:

B = Below Cleanup Levels  
R = Remediated

C = Confirmed (above cleanup levels)  
S = Suspected

#### Drinking Water Types:

1 = Single Family  
2 = Community

#### Contaminant Codes:

1 = Base/Neutral Organics  
2 = Halogenated Organic Compounds  
3 = Metals—Priority Pollutants  
4 = Metals—Other  
5 = PCB  
6 = Pesticides

7 = Petroleum Products  
8 = Phenolic Compounds  
9 = Non-Halogenated Solvents  
10 = Dioxins  
11 = PAH  
12 = Reactive Wastes

13 = Corrosive Wastes  
14 = Radioactive Wastes  
15 = Conventional Contaminants, Organic  
16 = Conventional Contaminants, Inorganic  
17 = Asbestos  
(for examples of specifics within contaminant groups please check an ISIS manual)

Check all that apply

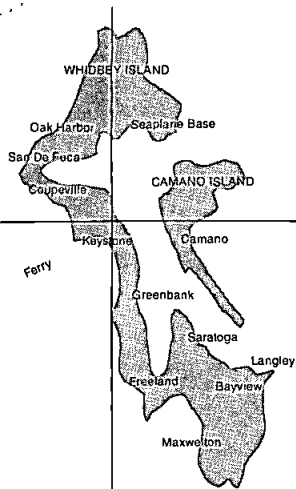
- ☐ 1. Drug Lab  
☐ 2. Drum  
☐ 3. Impoundment  
☒ 4. Improper Handling

- ☐ 5. Landfill  
☐ 6. Land Application  
☐ 7. Pesticide Application  
☐ 8. Pesticide Disposal

- ☐ 9. Spill  
☐ 10. Storm Drain  
☐ 11. Tank  
☐ 12. Unknown

# Island County Health Department

P.O. BOX 5000 • COUPEVILLE, WA 98239-5000



N. WHIDBEY: 360/679-7350 • S. WHIDBEY: 360/321-5111 • CAMANO: 360/629-4522

September 6, 2001

Steve Bremer  
Washington State Department of Ecology  
Northwest Regional Office  
3190 – 160<sup>th</sup> Avenue SE  
Bellevue, WA 98008-5452

***RE: Initial Investigation Harbor Airlines, Oak Harbor, WA ERTS #N519042***

Dear Mr. Bremer:

Please find enclosed information compiled for the above-referenced site investigation. As noted on the enclosed "Initial Investigation Field Report", a site hazard assessment is recommended based on observed/reported past practices, and soil analysis of samples taken during the investigation. Enclosed you will also find the lab analysis for the sampling conducted during this investigation.

Please contact me at (360) 679-7350, extension 7414 if you have any questions or require further information. Thank you for allowing our department to assist you with the investigation of this site. We look forward to working with you again in the near future.

Sincerely,

Jason Gentry, R.S.  
Environmental Health Specialist

enclosure

**RECEIVED**  
SEP 10 2001  
DEPT OF ECOLOGY



# INITIAL INVESTIGATION FIELD REPORT

ERTS NUMBER  
N519042

SITE NAME  
HARBOR AIRLINES

## SITE LOCATION INFORMATION

Contact Person Name Island County Health/Jason Gentry	Title Env. Health Specialist	Phone No. (360) 679-7350
Mailing Address PO Box 5000	City Coupeville	Zip + 4 98239-5000
Site Location 1140 Monroe Landing Rd	Closest City Oak Harbor	County Island
Quarter-Quarter: <u>NW 1/4</u>	Section: <u>22</u>	Township: <u>32N</u>
Longitude: _____	Degree: <u>122</u>	Minute: <u>40</u>
Latitude: _____	Degree: <u>48</u>	Minute: <u>15</u>
		Range: <u>1E</u>
		Second: <u>38</u>
		Second: <u>01</u>

## INSPECTION INFORMATION

Inspection Date <u>8-13-01</u>	Inspection Time <u>1500</u>	Type of Entry Notice <u>Written / Certified</u>
Photographs Yes	Weather: Clear <input checked="" type="checkbox"/> Partly Cloudy <input type="checkbox"/> Overcast <input type="checkbox"/> Rain <input type="checkbox"/>	
Videotape No	Precipitation: _____	Temperature: <u>58 F</u>
Samples Yes	Wind Direction: _____	Wind Speed: _____

## RECOMMENDATION

No Further Action:	
<input type="checkbox"/> Release or threatened release does not pose a threat	<input checked="" type="checkbox"/> Site Hazard Assessment
<input type="checkbox"/> No release or threatened release	<input type="checkbox"/> Interim Action
<input type="checkbox"/> Refer to another program/agency	<input type="checkbox"/> Emergency Action
<input type="checkbox"/> Educational mailing	Independent Cleanup Action: <input type="checkbox"/> In progress <input type="checkbox"/> Completed
Name: <u>Jason Gentry, R.S.</u>	
Comments: <u>A Site Hazard Assessment is recommended based on the observations noted during the initial complaint investigation, and the results from the soil sampling conducted during the Initial Investigation.</u>	

## DEPARTMENT REVIEW

Investigator: _____	Date: _____
Approved by: Unit Supervisor: _____	Date: _____
Section Manager: _____	Date: _____

**OBSERVATIONS**

Description of observations: Soil samples were taken during this Initial Investigation. During sampling historic evidence of release was noted by different color paint throughout the six inch sampling depth.

Description of past practices likely to be responsible for contamination: Historic practice of stripping paint from aircraft on concrete slab with no containment of runoff or stripped paint.

Activities or practices responsible for contamination:

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Spill              | <input type="checkbox"/> LUST                         | <input type="checkbox"/> Other (describe): |
| <input type="checkbox"/> Pesticide disposal | <input type="checkbox"/> Tank                         |  |
| <input type="checkbox"/> Landfill           | <input checked="" type="checkbox"/> Improper handling |  |
| <input type="checkbox"/> Drums              | <input checked="" type="checkbox"/> Improper disposal |  |

Are discharges permitted: No  
If yes, describe:

Standard Industrial Code(s):

**CONTAMINANT(S)**

See contaminants key (#1-16). Enter letter designating status of contaminants.

AFFECTED MEDIA      **C= Confirmed; S= Suspected; P= Potential; R= Remediated; U= Unknown**

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Ground Water		P	P						P							
Surface Water		P	P				P		P							
Drinking Water		P	P						P							
Soil		C	C				S		C							
Sediment																
Air																

- |                                    |                            |   |
|------------------------------------|----------------------------|---|
| 1 Base/Neutral/Acid Organics       | 7 Petroleum Products       | 13 Corrosive Wastes                     |
| 2 Halogenated Organic Compounds    | 8 Phenolic Compounds       | 14 Radioactive Wastes                   |
| 3 EPA Priority (Metals & Cyanide)  | 9 Non-Halogenated Solvents | 15 Conventional Contaminants, Organic   |
| 4 Metals – Other                   | 10 Dioxin                  | 16 Conventional Contaminants, Inorganic |
| 5 Polychlorinated biPhenyls (PCBs) | 11 PAHs                    | 17 Asbestos                             |
| 6 Pesticides                       | 12 Reactive Wastes         |   |

Soil Type <u>Sandy Loam</u>	Slope <u>0</u>												
Site vegetation/cover present: <table style="width: 100%; margin-top: 5px;"> <tr> <td><input type="checkbox"/> Forest</td> <td><input checked="" type="checkbox"/> Pasture/Open field</td> <td><input type="checkbox"/> Surface Water</td> </tr> <tr> <td><input type="checkbox"/> Bare Soil</td> <td><input type="checkbox"/> Wetlands</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Brush</td> <td><input checked="" type="checkbox"/> Pavement</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Landscaped</td> <td><input type="checkbox"/> Other (describe):</td> <td></td> </tr> </table>		<input type="checkbox"/> Forest	<input checked="" type="checkbox"/> Pasture/Open field	<input type="checkbox"/> Surface Water	<input type="checkbox"/> Bare Soil	<input type="checkbox"/> Wetlands		<input type="checkbox"/> Brush	<input checked="" type="checkbox"/> Pavement		<input type="checkbox"/> Landscaped	<input type="checkbox"/> Other (describe):	
<input type="checkbox"/> Forest	<input checked="" type="checkbox"/> Pasture/Open field	<input type="checkbox"/> Surface Water											
<input type="checkbox"/> Bare Soil	<input type="checkbox"/> Wetlands												
<input type="checkbox"/> Brush	<input checked="" type="checkbox"/> Pavement												
<input type="checkbox"/> Landscaped	<input type="checkbox"/> Other (describe):												
Are there any drinking water systems affected? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, what type? (Choose one): <input type="checkbox"/> Municipal <input checked="" type="checkbox"/> Private <input type="checkbox"/> Both How many people are estimated to be affected?													
Is there a potential for a release or threatened release to affect a drinking water source? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Are there monitoring wells in the vicinity? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Are there dry wells in the vicinity? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No													

### CONTAMINANT PATHWAYS AND TARGETS

	Ingestion	Inhalation	Contact
Ground Water	X		
Surface Water	X		
Drinking Water	X		
Soil	X		
Sediment			
Air			

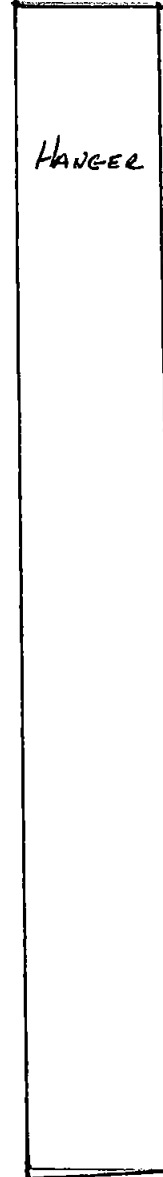
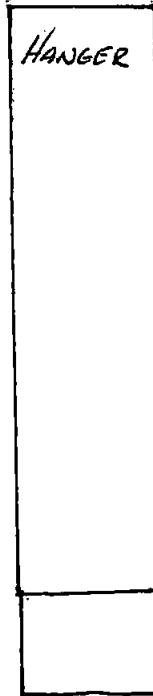
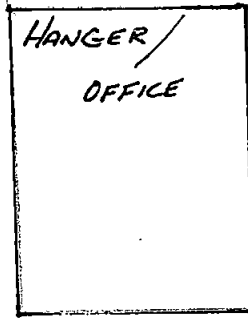
Targets possible: <table style="width: 100%; margin-top: 5px;"> <tr> <td><input checked="" type="checkbox"/> Human, adult</td> <td><input type="checkbox"/> Residential</td> <td><input type="checkbox"/> Commercial</td> </tr> <tr> <td><input checked="" type="checkbox"/> Human, children</td> <td><input type="checkbox"/> Industrial</td> <td></td> </tr> </table>			<input checked="" type="checkbox"/> Human, adult	<input type="checkbox"/> Residential	<input type="checkbox"/> Commercial	<input checked="" type="checkbox"/> Human, children	<input type="checkbox"/> Industrial	
<input checked="" type="checkbox"/> Human, adult	<input type="checkbox"/> Residential	<input type="checkbox"/> Commercial						
<input checked="" type="checkbox"/> Human, children	<input type="checkbox"/> Industrial							
Sensitive environments (See WARM Scoring Manual for definition): <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No								
If yes, describe: <u>Surface water drainage to wetland/marine environment</u>								
General comments:								

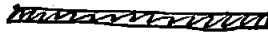
# SITE MAP/DIAGRAM

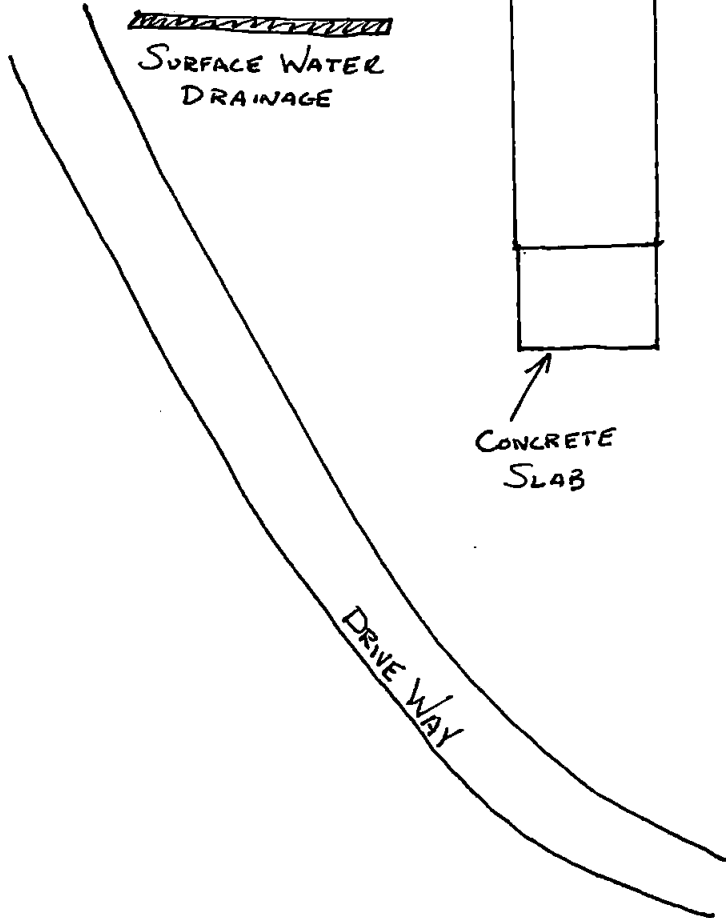
Site Name

HARBOR AIRLINES

MONROE  
LANDING RD  
200 FT  
←



  
SURFACE WATER  
DRAINAGE



NORTH

Approximate Scale: 1 inch = 50 feet

ERTS Number  
N519042

County  
Island

Inspector

Date

9-6-01

SITE INFORMATION



11525 Knudson Rd.  
Burlington, WA 98233  
(800) 755-9295  
(360) 757-1400 - FAX (360) 757-1402

RECEIVED  
SEP - 4 2001  
ISL CITY LABORATORY


Page 1 of 2

## Data Report

Client Name: Island County Health Dept.  
P O Box 5000  
Coupeville, WA 98239

Report Date: 8/30/01  
Reference Number: 01-4219  
Project: Harbor Airlines

Collected By:  
Lab Number: 7372  
Sample Description: HA-1

Date Sampled: 8/13/01  
Date Received: 8/15/01  
Supervisor: 

Analyte	Result	PQL	Units	Method	Analyzed	Analyst	Batch	Comments
ANTIMONY	ND	0.998	mg/Kg	6010B	8/30/01	JN	6010_010829	
ARSENIC	ND	0.998	mg/Kg	6010B	8/30/01	JN	6010_010829	
BERYLLIUM	ND	0.499	mg/Kg	6010B	8/30/01	JN	6010_010829	
CADMIUM	ND	0.499	mg/Kg	6010B	8/30/01	JN	6010_010829	
CHROMIUM	29.6	0.499	mg/Kg	6010B	8/30/01	JN	6010_010829	
COPPER	11.5	0.499	mg/Kg	6010B	8/30/01	JN	6010_010829	
LEAD	ND	0.998	mg/Kg	6010B	8/30/01	JN	6010_010829	
MERCURY	0.0200	0.0005	mg/Kg	7471A	8/24/01	SV	HG-010824	
NICKEL	23.8	0.499	mg/Kg	6010B	8/30/01	JN	6010_010829	
SELENIUM	ND	0.998	mg/Kg	6010B	8/30/01	JN	6010_010829	
SILVER	ND	0.249	mg/Kg	6010B	8/30/01	JN	6010_010829	
THALLIUM	ND	0.499	mg/Kg	6010B	8/30/01	JN	6010_010829	
ZINC	46.1	0.499	mg/Kg	6010B	8/30/01	JN	6010_010829	

PQL = Practical Quantitation Limit is the lowest level that can be achieved within specified limits of precision and accuracy during routine laboratory operating conditions.

ND = Not detected above the listed practical quantitation limit (PQL)

WSDOE Lab C057  
WSDOH Lab 046



RECEIVED  
SEP - 4 2001  
DEPT. OF HEALTH

Page 2 of 2  
Reference Number: 01-4219  
Report Date: 8/30/01

## Data Report

Collected By:  
Lab Number: 7373  
Sample Description: HA-2

Date Sampled: 8/13/01  
Date Received: 8/15/01

Analyte	Result	PQL	Units	Method	Analyzed	Analyst	Batch	Comments
ANTIMONY	ND	1.11	mg/Kg	6010B	8/30/01	JN	6010_010829	
ARSENIC	6.10	1.11	mg/Kg	6010B	8/30/01	JN	6010_010829	
BERYLLIUM	ND	0.557	mg/Kg	6010B	8/30/01	JN	6010_010829	
CADMIUM	29.6	0.557	mg/Kg	6010B	8/30/01	JN	6010_010829	
CHROMIUM ?	120	0.557	mg/Kg	6010B	8/30/01	JN	6010_010829	
COPPER	81.3	0.557	mg/Kg	6010B	8/30/01	JN	6010_010829	
LEAD	541	1.11	mg/Kg	6010B	8/30/01	JN	6010_010829	
MERCURY	0.3300	0.0005	mg/Kg	7471A	8/24/01	SV	HG-010824	
NICKEL	30.8	0.557	mg/Kg	6010B	8/30/01	JN	6010_010829	
SELENIUM	ND	1.11	mg/Kg	6010B	8/30/01	JN	6010_010829	
SILVER	ND	0.248	mg/Kg	6010B	8/30/01	JN	6010_010829	
THALLIUM	ND	0.557	mg/Kg	6010B	8/30/01	JN	6010_010829	
ZINC	305	0.557	mg/Kg	6010B	8/30/01	JN	6010_010829	

PQL = Practical Quantitation Limit is the lowest level that can be achieved within specified limits of precision and accuracy during routine laboratory operating conditions.

ND = Not detected above the listed practical quantitation limit (PQL)

WSDOE Lab C057  
WSDOH Lab 046





Knudson Rd.  
Burlington, WA 98233  
(800) 755-9295  
(360) 757-1400 - FAX (360) 757-1402

DI-051177  
SEP - 8 2001

WSDOE Lab C057

Page 1 of 3

## DATA REPORT

Client Name: Island County Health Dept.  
P O Box 5000  
Coupeville, WA 98239

Reference Number: 01-4219  
Project: Harbor Airlines

Lab Number: 7373

Field ID: HA-2

Sample Description:

Matrix: Soil

Collect Date: 8/13/01

Extraction Date:

Extraction Method: 5030A

Report Date: 8/29/01

Date Analyzed: 8/27/01

Analyst: TW

Review: [Signature]

Analytical Method: 8260B

### Volatile Organic Compounds GC/MS

CAS ID#	COMPOUNDS	RESULT*	Units	EQL**	COMMENT
75-34-3	1,1 - DICHLOROETHANE	ND	mg/Kg	0.10	
75-35-4	1,1 - DICHLOROETHYLENE	ND	mg/Kg	0.10	
563-58-6	1,1 - DICHLOROPROPENE	ND	mg/Kg	0.10	
71-55-6	1,1,1 - TRICHLOROETHANE	0.44	mg/Kg	0.10	
630-20-6	1,1,1,2 - TETRACHLOROETHANE	ND	mg/Kg	0.10	
79-00-5	1,1,2 - TRICHLOROETHANE	ND	mg/Kg	0.10	
79-34-5	1,1,2,2 - TETRACHLOROETHANE	ND	mg/Kg	0.10	
106-93-4	1,2 - DIBROMOETHANE	ND	mg/Kg	0.10	
95-50-1	1,2 - DICHLOROBENZENE (ortho)	ND	mg/Kg	0.10	
107-06-2	1,2 - DICHLOROETHANE	ND	mg/Kg	0.10	
78-87-5	1,2 - DICHLOROPROPANE	ND	mg/Kg	0.10	
87-61-6	1,2,3 - TRICHLOROBENZENE	ND	mg/Kg	0.10	
96-18-4	1,2,3 - TRICHLOROPROPANE	ND	mg/Kg	0.10	
120-82-1	1,2,4 - TRICHLOROBENZENE	ND	mg/Kg	0.10	
95-63-6	1,2,4 - TRIMETHYLBENZENE	ND	mg/Kg	0.10	
96-12-8	1,2-DIBROMO-3-CHLOROPROPANE	ND	mg/Kg	0.10	
541-73-1	1,3 - DICHLOROBENZENE (meta)	ND	mg/Kg	0.10	
142-28-9	1,3 - DICHLOROPROPANE	ND	mg/Kg	0.10	
108-67-8	1,3,5 - TRIMETHYLBENZENE	ND	mg/Kg	0.10	
110-57-6	1,4 - DICHLORO-2-BUTENE	ND	mg/Kg	10	
106-46-7	1,4 - DICHLOROBENZENE (para)	ND	mg/Kg	0.10	
109-69-3	1-CHLOROBUTANE	ND	mg/Kg	0.10	
594-20-7	2,2 - DICHLOROPROPANE	ND	mg/Kg	0.10	
78-93-3	2-BUTANONE (MEK)	ND	mg/Kg	5.0	
591-78-6	2-HEXANONE	ND	mg/Kg	5.0	
79-46-9	2-NITROPROPANE	ND	mg/Kg	10	

\*Result of: NA - indicates the compound was not analyzed.  
J - indicates the compound was detected below the Method EQL and that the result is an estimate.  
ND - indicates the compound was not detected above the EQL or MDL.

< - less than symbol indicates that the value is less than the laboratory method detection limit. (MDL). The MDL is usually less than the EQL.

\*\*EQLs (Estimated Quantitation Limits). Specific quantitation limits are highly matrix dependent. The quantitation units listed are provided for guidance and may not always be achievable.

Samples with EQLs greater due to matrix interference, dilution or other reason will be identified in comment.

### Volatile Organic Compounds GC/MS

CAS ID#	COMPOUNDS	RESULT*	Units	EQL**	COMMENT
108-10-1	4-METHYL-2-PENTANONE	ND	mg/Kg	10	
67-64-1	ACETONE	ND	mg/Kg	50	
107-13-1	ACRYLONITRILE	ND	mg/Kg	0.10	
107-05-1	ALLYL CHLORIDE	ND	mg/Kg	0.10	
71-43-2	BENZENE	ND	mg/Kg	0.10	
108-86-1	BROMOBENZENE	ND	mg/Kg	0.10	
74-97-5	BROMOCHLOROMETHANE	ND	mg/Kg	0.10	
75-27-4	BROMODICHLOROMETHANE	ND	mg/Kg	0.10	
75-25-2	BROMOFORM	ND	mg/Kg	0.10	
74-83-9	BROMOMETHANE	ND	mg/Kg	0.50	
75-15-0	CARBON DISULFIDE	ND	mg/Kg	0.10	
56-23-5	CARBON TETRACHLORIDE	ND	mg/Kg	0.10	
108-90-7	CHLOROBENZENE	ND	mg/Kg	0.10	
124-48-1	CHLORODIBROMOMETHANE	ND	mg/Kg	0.10	
75-00-3	CHLOROETHANE	ND	mg/Kg	0.10	
67-66-3	CHLOROFORM	ND	mg/Kg	0.10	
74-87-3	CHLOROMETHANE	ND	mg/Kg	0.50	
156-59-2	CIS - 1,2 - DICHLOROETHYLENE	ND	mg/Kg	0.10	
10061-01-5	CIS - 1,3 - DICHLOROPROPENE	ND	mg/Kg	0.10	
74-95-3	DIBROMOMETHANE	ND	mg/Kg	0.10	
75-71-8	DICHLORODIFLUOROMETHANE	ND	mg/Kg	0.10	
60-29-7	DIETHYL ETHER	ND	mg/Kg	0.20	
141-78-6	ETHYL ACETATE	ND	mg/Kg	0.10	
97-63-2	ETHYL METHACRYLATE	ND	mg/Kg	0.10	
100-41-4	ETHYLBENZENE	ND	mg/Kg	0.10	
106-93-4	ETHYLENE DIBROMIDE (EDB)	ND	mg/Kg	0.10	
87-68-3	HEXACHLOROBUTADIENE	ND	mg/Kg	0.10	
67-72-1	HEXACHLOROETHANE	ND	mg/Kg	0.10	
98-82-8	ISOPROPYLBENZENE	ND	mg/Kg	0.10	
126-98-7	METHACRYLONITRILE	ND	mg/Kg	0.10	
96-33-3	METHYL ACRYLATE	ND	mg/Kg	0.10	
74-88-4	METHYL IODIDE	ND	mg/Kg	0.10	
80-62-6	METHYL METHACRYLATE	ND	mg/Kg	1.0	
1634-04-4	METHYL TERT-BUTYL ETHER	1.4	mg/Kg	1.0	Common lab contaminate, resample for confirmation
75-09-2	METHYLENE CHLORIDE	ND	mg/Kg	0.10	
104-51-8	N - BUTYLBENZENE	ND	mg/Kg	0.10	
103-65-1	N - PROPYLBENZENE	ND	mg/Kg	0.10	
91-20-3	NAPHTHALENE	ND	mg/Kg	0.10	

\*Result of: NA - indicates the compound was not analyzed.

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ND - indicates the compound was not detected above the EQL or MDL.

< - less than symbol indicates that the value is less than the laboratory method detection limit. (MDL). The MDL is usually less than the EQL.

\*\*EQLs (Estimated Quantitation Limits). Specific quantitation limits are highly matrix dependent. The quantitation units listed are provided for guidance and may not always be achievable.

Samples with EQLs greater due to matrix interference, dilution or other reason will be identified in comment.

### Volatile Organic Compounds GC/MS

CAS ID#	COMPOUNDS	RESULT*	Units	EQL**	COMMENT
98-95-3	NITROBENZENE	ND	mg/Kg	10	
99-87-6	P - ISOPROPYLTOLUENE	ND	mg/Kg	0.10	
76-01-7	PENTACHLOROETHANE	ND	mg/Kg	0.10	
135-98-8	SEC - BUTYLBENZENE	ND	mg/Kg	0.10	
100-42-5	STYRENE	ND	mg/Kg	0.10	
156-60-5	T - 1,2 - DICHLOROETHYLENE	ND	mg/Kg	0.10	
98-06-6	TERT - BUTYLBENZENE	ND	mg/Kg	0.10	
127-18-4	TETRACHLOROETHYLENE	ND	mg/Kg	0.10	
109-99-9	TETRAHYDROFURAN	ND	mg/Kg	2.0	
108-88-3	TOLUENE	ND	mg/Kg	0.10	
10061-02-6	TRANS- 1,3 - DICHLOROPROPENE	ND	mg/Kg	0.10	
79-01-6	TRICHLOROETHYLENE	ND	mg/Kg	0.10	
75-69-4	TRICHLOROFLUOROMETHANE	ND	mg/Kg	0.10	
75-01-4	VINYL CHLORIDE	ND	mg/Kg	0.10	
	XYLENES	0.15	mg/Kg	0.10	

\*Result of: NA - indicates the compound was not analyzed.

J - indicates the compound was detected below the Method EQL and that the result is an estimate.

ND - indicates the compound was not detected above the EQL or MDL.

< - less than symbol indicates that the value is less than the laboratory method detection limit. (MDL). The MDL is usually less than the EQL.

\*\*EQLs (Estimated Quantitation Limits). Specific quantitation limits are highly matrix dependent. The quantitation units listed are provided for guidance and may not always be achievable.

Samples with EQLs greater due to matrix interference, dilution or other reason will be identified in comment.











## Bremer, Steve

---

**From:** Jason Gentry [JasonG@co.island.wa.us]  
**Sent:** Thursday, September 27, 2001 3:34 PM  
**To:** Bremer, Steve  
**Subject:** ERTS # N519042 Update

Steve,

I hope that you have received our department's recommendation for a SHA at the site referenced above. I believe I omitted the property owner's name: Harbor Airlines INC  
1302 26th Ave NW  
Gig Harbor, WA 98335

This was the property owner at the time of the initial investigation.  
According to a local paper, the property has been recently purchased by:

Matthew F Davis  
Air International, LLC  
5224 Wilson Ave S Ste 200  
Seattle, WA 98118

Please contact me if you need any further information

Sincerely,

Jason Gentry, R.S.  
Environmental Health Specialist  
Island County Health Department  
(360) 679-7350 ext. 7414

## Bremer, Steve

---

**From:** Jason Gentry [JasonG@co.island.wa.us]  
**Sent:** Tuesday, August 14, 2001 8:28 AM  
**To:** Bremer, Steve  
**Subject:** RE: ERTS #519042 progress

Steve,

Thanks for the email. Michael Spencer and I performed an initial investigation at the airport yesterday 8-13. During the course of the investigation we took two soil samples to aid in our determination of whether or not an SHA is required. One of the soil samples had visual evidence of paint chips four inches below the ground surface. Different colors of paint were noted at different levels indicating a historic use of the site with respect to paint removal. The results of the soil analysis will help determine the recommendation of the I.I.

I will be sure to keep you up to date on this investigation.

Sincerely,

> -----

> From: Bremer, Steve[SMTP:STBR461@ECY.WA.GOV]  
> Sent: Tuesday, August 14, 2001 8:09 AM  
> To: 'Jasong@co.island.wa.us'  
> Subject: ERTS #519042 progress  
>  
> Jason-  
>  
> Can you update me on progress/outcome on the ERTS #519042 (Oak Harbor  
> Airport)? Thanks.  
>  
> Steve  
> 425-649-7136  
> stbr461@ecy.wa.gov  
>





## **NORTHWEST REGIONAL OFFICE**

### **Facsimile Cover Sheet**

**DATE:** June 27, 2001

**TIME:** 1055

**Number of Pages:** 4 Plus Cover Sheet

**TO:** Jason Gentry, Island County HD

**FAX #** 360-679-7390

**FROM:** Steve Bremer

**PHONE:** 425-649-7136 **SECTION:** TCP

Department of Ecology  
Northwest Regional Office  
3190 - 160th Avenue S.E.  
Bellevue, WA 98008-5452  
Phone: (425) 649-7000  
Fax: (425) 649-7098

**COMMENTS:** Here is the ERTS report we discussed this AM, # 519042.



STATE OF WASHINGTON  
DEPARTMENT OF ECOLOGY  
Bellingham Field Office • 913 Squalicum Way, Unit 101 • Bellingham, WA 98225  
(360) 255-4400 • FAX (360) 715-5225

July 14, 2021

Leslie Beach  
Air International, LLC  
200 West Mercer, Suite 202  
Seattle, WA 98119

Re: Violations of the Underground Storage Tank Regulations (Chapter 173-360A WAC)  
Site Name: Air International  
Site Address: 1140 Monroe Landing Road, Oak Harbor  
UST ID No.: 2270  
Facility Site ID No.: 39633333

Dear Leslie Beach:

On July 12, 2021, the Department of Ecology conducted an underground storage tank (UST) compliance inspection. Enclosed with this letter are copies of the Notices of Non-Compliance and Field Penalty emailed to you today.

Please review the information and contact me if you have any questions.

Sincerely,

Krystal Rodriguez  
Underground Storage Tank Inspector  
Toxics Cleanup Program

Enclosure(s): Notice of Non-Compliance  
Notice of Penalty No. 5666 (Docket No. 20331)

cc: Chris Taylor, Air International operator

By Certified Mail 91 7199 9991 7036 8728 7565





Washington State Department of Ecology  
Underground Storage Tank (UST) Program  
**NOTICE OF FIELD PENALTY**

UST ID # 2270 F/S ID # 39633333 Penalty ID # 5666 Agency Docket # 20381

Responsible Party: An International LLC Site Contact: Leslie Beach

Site Name: An International Mailing Address: 200 W Mercer #202  
(if different)

Site Address: 1140 Monroe Landing Rd City, State: Seattle, WA 98119

City: Oak Harbor Zip: 98119

			PENALTY AMOUNT	
WAC 173-360A		Region: <u>NWRO</u>	Unit Assessment	TOTAL
WAC -0200, -0210, -0220	Failure to comply with registration, licensing, fees and/or compliance tag requirements	\$200		
WAC -0230, -0240, -0410	Failure to comply with reporting and recordkeeping requirements	\$200		
WAC -0350	Failure to comply with fuel compatibility requirements	\$200		
WAC -0300, -0310, -0320, -0330, -0340	Failure to comply with installation, performance standards and/or upgrading requirements	\$200		
WAC -0310(3), -0320(2), -0330(2), -0340(1)(b), 0430, -0440	Failure to comply with corrosion protection and/or internal lining requirements	\$200		
WAC -0400, 0405	Failure to comply with regulated substance transfer requirements	\$200		
WAC -0420	Failure to comply with walkthrough inspection requirements	\$200		
WAC -0450	Failure to comply with 3-year operation and maintenance testing of containment sumps	\$200		
WAC -0460	Failure to comply with 3-year operation and maintenance testing requirement of spill prevention equipment	\$200		
WAC -0470	Failure to comply with 3-year operation and maintenance testing of overfill prevention equipment	\$200		
WAC -0490	Failure to comply with UST component repair requirements	\$200		
WAC -0500 through -0560	Failure to comply with operator training, O&M Plan and/or signage requirements	\$200	1	\$200
WAC -0600 through -0675, <u>-0800</u>	Failure to comply with release detection requirements	\$200	1	\$200
WAC -0700 through -0750	Failure to report, investigate, and/or cleanup a release of regulated substances	\$500		
WAC -0800 through -0830	Failure to comply with closure requirements	\$500		
WAC -0900 through -0940	Failure to comply with service provider certification requirements by the owner and/or service provider	\$500	per site	
WAC -1000 through -1073	Failure to comply with financial responsibility requirements	\$500	per site	\$500
WAC -0280	Failure to comply with delivery prohibition (i.e. red tag) requirements	\$500	per tank	
		TOTAL FOR ABOVE PENALTY(S)		\$900

I personally investigated or observed the violation(s) noted above.

Signature of UST Inspector

Date Issued

Printed Name of UST Inspector

I acknowledge receipt of this action. A signature does not imply agreement.

Signature of Responsible Party or Site Contact

Date

Printed Name of Responsible Party or Site Contact

Observations/Comments:

no A/B operator trained (repeat violation), temp closed tank w/ fuel not monitored for releases, & no FR for > 8 mo.

This action does not limit the Department from other enforcement actions as deemed necessary. You have a right to appeal this penalty. Refer to the back of this penalty for detailed instructions. Immediately contact the inspector that issued this penalty if you do not understand the appeal process.

Authority to Issue Penalties for these Violations is found in RCW 90.76.080.



**OPTIONS FOR RESPONDING – Pay the Penalty or Appeal to the PCHB within 30 days**

Choose one of the two options below.

1. **Pay the penalty within 30 days of receipt of this Notice of Field Penalty.** Submit a check or money order payable to the Department of Ecology (electronic checks cannot be accepted). Include the Penalty ID # (in red) and the UST ID # on your payment and enclose it with a copy of the Notice of Field Penalty.

Mail payment to: Department of Ecology  
Cashiering Unit  
PO Box 47611  
Olympia, WA 98504-7611

Ecology may take legal action to collect the penalty if payment is not made within 30 days of receipt of this Notice of Field Penalty and Option 2 has not been satisfied.

2. **Appeal this Notice of Field Penalty to the Pollution Control Hearings Board (PCHB)** within 30 days after the date of receipt. The appeal process is governed by Chapter 43.21B RCW and Chapter 371-08 WAC. "Date of receipt" is defined in RCW 43.21B.001(2).

Within 30 days after the date of receipt of this Notice of Field Penalty:

- File your appeal and a copy of this Notice of Field Penalty with the PCHB (see addresses below). Filing means actual receipt by the PCHB during regular business hours.
- Submit a copy of your appeal with a copy of this Notice of Field Penalty to the Department in paper form - by mail or in-person delivery (see addresses below). E-mailed appeals will not be accepted.

You must also comply with other applicable requirements in Chapter 43.21B RCW and Chapter 371-08 WAC. (<http://apps.leg.wa.gov/WAC/default.aspx?cite=371-08>)

**POLLUTION CONTROL HEARINGS BOARD**

*Mailing address:*

Pollution Control Hearings Board  
PO Box 40903  
Olympia, WA 98504-0903

*Physical address:*

Pollution Control Hearings Board  
1111 Israel Rd. SW, Suite 301  
Tumwater, WA 98501

**DEPARTMENT OF ECOLOGY**

*Mailing address:*

Department of Ecology  
Appeals Processing Desk  
PO Box 47608  
Olympia, WA 98504-7608

*Physical address:*

Department of Ecology  
Appeals Processing Desk  
300 Desmond Dr. SE  
• Lacey, WA 98503

- Pollution Control Hearings Board: [www.eho.wa.gov/Boards\\_PCHB.aspx](http://www.eho.wa.gov/Boards_PCHB.aspx)
- RCW 90.76 – Underground Storage Tank Law: <http://apps.leg.wa.gov/RCW/default.aspx?cite=90.76>
- WAC 173-360A – Underground Storage Tank Regulation: [www.ecology.wa.gov/biblio/wac173360A.html](http://www.ecology.wa.gov/biblio/wac173360A.html)

**ELIGIBILITY FOR PAPERWORK VIOLATION WAIVER AND OPPORTUNITY TO CORRECT**

Under RCW 34.05.110, small businesses are eligible for a waiver of a first-time paperwork violation and an opportunity to correct other violations. We have made no determination as to whether you meet the definition of a "small business" under this section. However, we have determined that the requirements of RCW 34.05.110 do not apply to the violation(s) due to a conflict with federal law or program requirements, including federal requirements that are a prescribed condition to the allocation of federal funds to the state.

*If you need this document in an alternative format call the Toxics Cleanup Program at (360) 407-7170. Persons with hearing loss, call 711 for Washington Relay Service. Persons with a speech disability, call 877-833-6341.*



STATE OF WASHINGTON  
**DEPARTMENT OF ECOLOGY**  
Bellingham Field Office • 913 Squalicum Way, Unit 101 • Bellingham, WA 98225  
(360) 255-4400 • FAX (360) 715-5225

January 5, 2022

Leslie Beach  
Air International, LLC  
200 West Mercer, Suite 202  
Seattle, WA 98119

Re: Penalty and Notice of Delivery Prohibition for violations of the Underground Storage Tank Regulations (Chapter 173-360A WAC)

Site Name: Air International  
Site Address: 1140 Monroe Landing Road, Oak Harbor  
UST ID No.: 2270  
Facility Site ID No.: 39633333

Dear Leslie Beach:

The Department of Ecology (Ecology) has not received proof that the underground storage tanks (UST) at Air International comply with UST regulations. As a result, Air International is receiving a \$700 penalty and notice that both tanks are subject to delivery prohibition.

On July 14, 2021, Ecology issued a Notice of Non-Compliance (NONC) for 11 UST regulation violations. Ecology has not received proof the following two violations have been resolved:

**1. Failure to verify functionality of overfill prevention device(s) – WAC 173-360A-0470**

*During the July 14, 2021 inspection, Ecology documented overfill prevention device testing was overdue. The NONC required completion of testing by August 25, 2021 that proved the devices were functioning properly on both tanks (T1 100LL and T2 MoGas). NW Tank tested overfill devices on the deadline date and failed both because they were installed at the incorrect height. Overfill prevention devices must be functional on operational tanks to resolve this violation.*

**2. Failure to meet temporary closure requirements for UST systems – WAC 173-360A-0800**

*During the July 14, 2021 inspection, Ecology documented that the T2 MoGas tank had been out of use for at least one year and up to 5 years. The product remaining in the tank was too low for monitoring by the automatic tank gauge. The NONC required Air International to remove product from the MoGas tank and submit a Temporary Closure*





Leslie Beach  
International Air, LLC  
January 5, 2022  
Page 2 of 2

*Notice. On August 25, 2021, NW Tank measured four inches of product in the MoGas tank. Ecology has not received a Temporary Closure Notice nor proof the MoGas tank has been pumped of product.*

I emailed you September 29, October 4, and December 27, 2021 requesting records and status updates. On September 30, 2021, you notified me of plans for Marine Vacuum to remove product from the MoGas tank and Pacific Environmental Services to repair or replace the overfill prevention device(s). Since then, I have not received responses to my requests for information.

As a result of unresolved violations, Ecology is issuing a penalty and Notice of Delivery Prohibition (NDP). On the back of these enclosed documents, you will find instructions on the appeal process and how to pay the penalty. Responses to both are required within 30 days after receipt. I have also enclosed a publication with information about delivery prohibition.

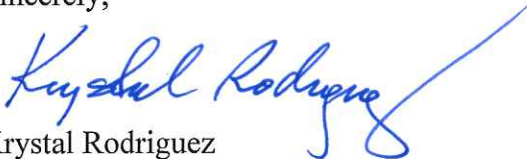
To prove compliance and prevent stopped fuel deliveries to T1 100LL and T2 MoGas, send proof you completed the actions listed above.

Mail: Department of Ecology  
Attn: Krystal Rodriguez  
913 Squalicum Way #101  
Bellingham, WA 98225

Email: [krystal.rodriguez@ecy.wa.gov](mailto:krystal.rodriguez@ecy.wa.gov)  
Fax: (360) 715-5225

Please contact me at (360) 306-7658 or by email if you have any questions.

Sincerely,



Krystal Rodriguez  
Underground Storage Tank Inspector  
Toxics Cleanup Program

Enclosure(s): Notice of Penalty No. 5671 (Docket No. 20949)  
Notice of Delivery Prohibition No. 0553 (Docket No. 20948)  
Focus on Delivery Prohibition or "Red Tagging"

By Certified Mail 91 7199 9991 7036 8728 7848



Washington State Department of Ecology  
Underground Storage Tank (UST) Program  
**NOTICE OF DELIVERY PROHIBITION**

UST ID #:	2270	Delivery Prohibition ID #:	0553	Agency Docket #:	20948
Responsible Party:	Air International LLC	Site Contact:	Leslie Beach		
Site Name:	Air International	Mailing Address: (if different)	200W Mercer, Suite 202		
Site Address:	1140 Monroe Landing Rd	City, State:	Seattle, WA		
City:	Dak Harbor	Zip:	98119		

Date Issued:		Time:		Region:	NWRO
--------------	--	-------	--	---------	------

Under WAC 173-360-165, the Department of Ecology may prohibit the delivery, deposit, or acceptance of a regulated substance to an UST system or the entire UST facility if the Department determines an owner or operator is in violation of the UST regulations. This Notice of Delivery Prohibition (NDP) identifies the violations of the UST regulations at the facility/site listed above. Failure to resolve the violations of the UST regulations by the compliance deadline(s) outlined in the Notice of Non-Compliance will result in the Department affixing a red tag to the fill port(s) of the non-compliant tank(s) listed below.

NO PERSON MAY REMOVE OR ALTER A RED TAG WITHOUT THE PRIOR WRITTEN AUTHORIZATION OF THE DEPARTMENT.  
THE UNAUTHORIZED REMOVAL OR ALTERATION OF A RED TAG CONSTITUTES A VIOLATION OF WAC 173-360-165.

WAC 173-360 RCW 90.76	VIOLATION(s)	APPLIES TO TANK(s)
	Regulated UST without a displayed facility compliance tag and/or UST endorsement(s) on Business License	
	Failure to comply with spill prevention requirements	
-0470	Failure to comply with overfill protection requirements	T1 100LL & T2 MoGas
	Failure to comply with corrosion protection requirements	
	Failure to comply with release detection requirements	
	Failure to comply with secondary containment, including interstitial monitoring for tanks and piping	
	Failure to comply with under dispenser containment requirements	
-0800	Failure to comply with temporary closure requirements	<del>T1 100LL</del> & T2 MoGas
	Failure to comply with corrective action requirements	
	Failure to comply with financial responsibility requirements	

I personally investigated or observed the violation(s) noted above.		I acknowledge receipt of this document. My signature does not imply agreement.	
Signature of UST Inspector	Date	Signature of Responsible Party or Site Contact	Date
Krystal Rodriguez		91 7199 9991 7036 8128 7848	
Printed Name of UST Inspector		Printed Name of Responsible Party or Site Contact	

**Observations/Comments:**  
Both tanks: overfill devices not functioning, as required  
T2 MoGas: no Temp Closure Notice & tank contains product (unmonitored)

You have a right to appeal this Notice of Delivery Prohibition (NDP) to the Pollution Control Hearings Board. Refer to the back of this NDP for detailed instructions. If you do not understand the appeal process, you should contact the inspector who issued this NDP immediately.



## OPTIONS AND INSTRUCTIONS FOR RESPONDING TO THE NOTICE OF DELIVERY PROHIBITION

1. **Avoiding Red Tags.** In order to prevent delivery prohibition/Red Tag of the tank(s) listed on this NDP, you must resolve the violations of the UST regulations as described and according to the compliance schedule in the Notice of Non-Compliance. This includes providing all necessary documentation to Ecology.
2. **Appeal this Notice of Delivery Prohibition to the Pollution Control Hearings Board (PCHB)** within 30 days after the date of receipt. The appeal process is governed by Chapter 43.21B RCW and Chapter 371-08 WAC. "Date of receipt" is defined in RCW 43.21B.001(2).
  - File your appeal and a copy of this Notice of Delivery Prohibition with the PCHB (see addresses below). Filing means actual receipt by the PCHB during regular business hours.
  - Submit a copy of your appeal with a copy of this NDP to the Department in paper form – by mail or in- person delivery (see addresses below). **E-mail will not be accepted.**

You must also comply with all applicable PCHB requirements of Chapter 43.21B RCW and Chapter 371-08 WAC. (<http://apps.let.wa.gov/WAC/default.aspx?c=371-08>)

If you do not appeal this NDP or if, after appeal, the PCHB determines that delivery should be prohibited and you have failed to resolve the UST violations by the compliance deadline, the Department will affix a red tag to the fill port of the UST(s) listed on this Notice.

### POLLUTION CONTROL HEARINGS BOARD

#### *Mailing Address:*

Pollution Control Hearings Board  
PO Box 40903  
Olympia, WA 98504-0903

#### *Physical Address:*

Pollution Control Hearings Board  
1111 Israel Rd. SW, Suite 301  
Tumwater, WA 98501

### DEPARTMENT OF ECOLOGY

#### *Mailing Address:*

Department of Ecology  
Appeals Processing Desk  
PO Box 47608  
Olympia, WA 98504-7608

#### *Physical Address:*

Department of Ecology  
Appeals Processing Desk  
300 Desmond Drive SE  
Lacey, WA 98503

- Pollution Control Hearings Board: [www.eho.wa.gov/Boards\\_PCHB.aspx](http://www.eho.wa.gov/Boards_PCHB.aspx)
- RCW 90.76 – Underground Storage Tank Law: <http://apps.leg.wa.gov/RCW/default.aspx?cite=90.76>
- WAC 173-360 – Underground Storage Tank Regulation: <http://apps.leg.wa.gov/WAC/default.aspx?cite=173-360>

### ELIGIBILITY FOR PAPERWORK VIOLATION WAIVER AND OPPORTUNITY TO CORRECT

Under RCW 34.05.110, small businesses are eligible for a waiver of a first-time paperwork violation and an opportunity to correct other violations. Ecology has made no determination regarding whether you meet the definition of a "small business" under this section. However, Ecology has determined that the requirements of RCW 34.05.110 do not apply to these violation(s) due to conflict with federal law or program requirements, including federal requirements that are a prescribed condition to the allocation of federal funds to the state.

*If you need this document in an alternative format call the Toxics Cleanup Program at (360) 407-7170. Persons with hearing loss, call 711 for Washington Relay Service. Persons with a speech disability, call 877-833-6341.*



**Washington State Department of Ecology  
Underground Storage Tank (UST) Program  
NOTICE OF NON-COMPLIANCE**

**UST ID: 2270  
Issue Date: 7/14/2021**

This action does not limit the Department from other enforcement actions as deemed necessary.

<b>Site Name:</b> AIR INTERNATIONAL <b>Site Address:</b> 1140 MONROE LANDING RD <b>City:</b> Oak Harbor <b>Responsible Party:</b> A.J. Eisenberg Airport, LLC	<b>Contact Name:</b> Leslie Beach <b>Contact Phone:</b> 206-915-7691 <b>Contact Cell:</b> <b>Contact Email:</b> leslieb@itltd.net
--	--

Violations Descriptions, Observations, and Actions Required	Due Date
173-360A-0200(1) - Operating regulated UST without a valid license  Observations & Actions Required: <b>The business license was renewed 9.5 mo late in 2021. It must be renewed annually. Renew by 6/15/2022.</b>	<b>7/14/2021</b>
173-360A-1010 - Failure to meet financial responsibility requirements, including Site Assessment, while in temporary closure  Observations & Actions Required: <b>The pollution liability insurance policy was renewed 8.5 months late in 2021. There was no coverage between 8/19/2020 and 4/29/2021. UST operators must maintain proof of financial responsibility at all times, until the system is permanently closed.</b>	<b>7/14/2021</b>
173-360A-0420(1)(a) - Failure to conduct periodic (30 day) walkthrough inspections of spill bucket(s) and release detection equipment  Observations & Actions Required: <b>No monthly walkthrough inspections have been conducted, as required by Oct 2019. Begin documenting inspections of spill buckets, fill pipes, fill caps, ATG alarm checks, and maintaining leak test records on the form provided during the inspection. Maintain the record for three years.</b>	<b>7/14/2021</b>
173-360A-0430(2) - Failure to test cathodic protection (CP) system with required frequency  Observations & Actions Required: <b>CP tests are required every three years. The last test was conducted on 5/11/2018. At the time of the inspection, it did not appear CP testing had yet been scheduled. By this deadline, submit the results of CP testing to Ecology.</b>	<b>8/25/2021</b>
173-360A-0430(3) - Failure to inspect impressed current cathodic protection system at least every 60 days  Observations & Actions Required: <b>The CP system requires the amps and volts readings be logged at least every 60 days. The inspections are important to know if the system is operating properly. No rectifier log maintained or rectifier inspections conducted. Begin logging rectifier readings on the form provided to you by email or your service provider. Take note that amps and volts recommended ranges may change following the upcoming CP test.</b>	<b>7/14/2021</b>
173-360A-0600(9) - Failure to maintain release detection records demonstrating compliance  Observations & Actions Required: <b>Tank leak test records were not maintained for Nov and Dec 2020. Begin keeping leak test records that demonstrate Tank 1 (avgas) is passing the 0.2 gph leak test at least every 30 days. This requirement also applies to Tank 2 (mogas) as long as the tank contains greater than one inch of fuel.</b>	<b>7/14/2021</b>
173-360A-0460 - Failure to conduct periodic testing on spill prevention equipment  Observations & Actions Required: <b>The deadline to test spill buckets for tightness passed on 10/1/2020. By this deadline, submit a Leak Testing Checklist as proof a qualified UST service provider tested spill buckets for tightness. If T1 (mogas) remains temporarily closed, its spill bucket doesn't require testing until the tank is brought back into operation.</b>	<b>8/25/2021</b>
173-360A-0470 - Failure to conduct periodic inspection of overfill equipment  Observations & Actions Required: <b>The deadline to test automatic shutoff devices passed on 10/1/2020. By this deadline, submit a Leak Testing Checklist as proof a qualified UST service provider tested the overfill devices for functionality and correct level. If T1 (mogas) remains temporarily closed, its overfill device doesn't require testing until the tank is brought back into operation.</b>	<b>8/25/2021</b>
173-360A-0550(2) - Failure to comply with emergency signage requirements  Observations & Actions Required: <b>The emergency response sign contains outdated contact information. Submit a photo showing that a new sign has been installed with new contact information. The sign must contain the minimum language described on the handout provided by email.</b>	<b>8/11/2021</b>
173-360A-0800 - Failure to meet temporary closure requirements for UST systems  Observations & Actions Required: <b>T2 (mogas) has been out of use for at least one year, and possibly up to five (based on ATG reports). Ecology was not notified of its temporarily closed status and the tank contains product that cannot be monitored by the ATG. By this deadline: 1) submit a Temporary Closure Notice to Ecology and 2) empty the tank and piping so that no more than one inch of product remains in the tank OR monitor the tank by SIR. Additional information about these steps provided by email.</b>	<b>8/25/2021</b>
173-360A-0520 - Failure to comply with dates and/or deadlines of operator training  Observations & Actions Required: <b>No Class A/B operator has been trained at this facility since the previous operator left. By this deadline, submit proof a Class A/B operator has completed an Ecology-approved training. Ecology provided a list of vendors by email.</b>	<b>8/11/2021</b>

**Instructions**

**Request Extension By: N/A**

1. You must complete the actions identified above by the due date to resolve the UST violations listed.
2. To request an extension, submit a written request to the Ecology inspector by the request extension date. The request must include:
  - Reason extension is requested.
  - Steps already taken and a description of the work that remains to be completed.

- Anticipated completion date of remaining work.

- A Notice of Non-Compliance (NONC) is not an appealable enforcement action.
- If a Field Penalty or Notice of Delivery Prohibition accompanies a NONC, **the Field Penalty and/or Notice of Delivery Prohibition are appealable.**
- Failure to comply with requirements set forth in an NONC may result in further enforcement actions.

Submit required documentation via mail, fax, or email.

**Regional Office:** Northwest  
**Address:** 3190 160th Ave SE Bellevue, WA 98008  
**Phone/Fax:** 425-649-7000 / 425-649-7161

**Inspector Name:** Rodriguez, Krystal  
**Inspector Email:** krystal.rodriguez@ecy.wa.gov  
**Inspector Phone:** 360-255-4373

I personally investigated or observed the violation(s) noted above.

Signature of UST Inspector

*Krystal Rodriguez*

Date **7/14/2021**

I acknowledge receipt of this action. My signature does not imply agreement.

Printed Name of Responsible Party or Site Contact **Leslie Beach**

Signature of Responsible Party or Site Contact

*mailed to Leslie Beach ;  
 emailed to Leslie Beach & Chris Taylor*

Date **7/14/2021**

If you need this document in an alternative format call the Toxics Cleanup Program at (360)407-7170. Persons with hearing loss, call 711 for the Washington Relay Service. Persons with a speech disability, call 877-833-6341.

RECEIVED

MAY 23 2018

DEPT OF ECOLOGY  
TCP - NWROENTERED  
5/18/18

# IMPRESSED CURRENT CATHODIC PROTECTION EVALUATION CHECKLIST

FOR Underground Storage Tanks

UST ID #: 2270

County : Island

RECEIVED

MAY 17 2018

This checklist certifies that cathodic protection testing activities were performed and conducted in accordance with Chapter 173-360 WAC.

 Department of Ecology  
Toxics Cleanup Program

I. UST FACILITY		II. CERTIFIED CATHODIC PROTECTION TESTER				
Facility Compliance Tag #: A1278, A8562		Service Provider Name: Jeremy Short				
UST ID #: 2270		Company Name: Northwest Tank & Environmental Services, Inc.				
Site Name: Oak Harbor Airport		Address: 17407 59th Ave SE				
Site Address: 1140 Monroe Landing		City: Snohomish	State: WA	Zipcode: 98296		
City: Oak Harbor		Phone: (800) 742-9620	Email: info@nwtank.com			
Site Phone: 206-722-3333		Certification Type: STI Cathodic Protection ICBO U4				
County: Island		Cert. #: 5208982-U4		Exp. Date: 07-27-2019		
III. RESULTS OF EVALUATION (which include results of both continuity system surveys)						
<input checked="" type="checkbox"/> <b>PASS</b> The criteria, used to evaluate whether cathodic protection is adequate, were in accordance with a code of practice developed by a nationally recognized association (e.g. NACE), as required by <input type="checkbox"/> <b>FAIL</b> the Washington State Underground Storage Tank Regulations.						
Date CP Evaluation Performed: 05/11/2018						
IV. CRITERIA APPLICABLE TO EVALUATION						
Continuity Survey:		<input checked="" type="checkbox"/> <b>PASS</b> <input type="checkbox"/> <b>FAIL</b> USTs must show continuity using an approved testing method.				
System Survey		#TANKS	#PIPE RUNS	#STP SFCs <sup>1</sup>	#DISP SFCs <sup>2</sup>	
Neg. 850 mV Instant Off	<input checked="" type="checkbox"/> <b>PASS</b>	2				A negative polarized potential of at least 850 mV relative to a saturated copper-copper sulfate reference electrode ("Instant Off" Potential).
	<input type="checkbox"/> <b>FAIL</b>					
100 mV Polarization	<input type="checkbox"/> <b>PASS</b>					A minimum of 100 mV of cathodic polarization between the structure surface and a stable reference electrode contacting the electrolyte.
	<input type="checkbox"/> <b>FAIL</b>					
V. ACTION REQUIRED AS A RESULT OF THIS EVALUATION (check one box and explain further in comment box below).						
<input checked="" type="checkbox"/> <b>NONE</b>		The cathodic protection system is adequately providing protection. No further action is necessary at this time. System must be tested in three years unless more immediate attention is required.				
<input type="checkbox"/> <b>RETEST</b>		The cathodic protection system may not be adequately protecting steel from corrosion. Retesting is necessary.				
<input type="checkbox"/> <b>RETROFIT/REPAIR</b>		The cathodic protection system is not adequately providing protection. Retrofitting or repairing is necessary.				
<input type="checkbox"/> <b>RETEST AFTER RETROFIT/REPAIR</b>		The cathodic protection system has been retrofitted or repaired and tested at time of the retrofit/repair. A re-test is required within one to six months of retrofit or repair.				
Comments (include type of testing gear used, steel components tested, etc.):						

1. If no submersible turbine pump (STP) is present, these steel flex connectors (SFC) are on the tank end of piping.

2. If no dispenser is installed, these SFCs are on the non-tank end of piping.

VI. IMPRESSED CURRENT RECTIFIER DATA			
Rectifier Manufacturer: Universal		Rectifier Serial Number: 082006	
Rectifier Model Number: ES-2		Rated DC Output: 40 Volts 5 Amps	
Rectifier "As Found" Data			
AC Input Voltage: Volts		DC Voltage on Panel Meter: 32 Volts	
AC Step-Down Voltage: Volts		DC Voltage on Rectifier Output Terminal: 32.57	
Tap Settings: Coarse: 3 Fine: 1		DC Amps on Panel Meter: 4 Amps	
Cycles	Secondary Taps UNK Hz	Shunt Rating: 1mv=.2a	
	DC Output UNK Hz	Shunt Measurement: 18.3mV	
		DC Amps from Shunt Reading: 3.66	
Rectifier "As Left" Data			
AC Input Voltage: Volts		DC Voltage on Panel Meter: 32 Volts	
AC Step-Down Voltage: Volts		DC Voltage on Rectifier Output Terminal: 32.57 <	
Tap Settings: Coarse: 3 Fine: 1		DC Amps on Panel Meter: 4 Amps	
Cycles	Secondary Taps UNK Hz	Shunt Rating: 1mv=.2a	
	DC Output Hz	Shunt Measurement: 18.3mV	
		DC Amps from Shunt Reading: 3.66	
VIII. REMARKS (describe any modifications made to the CP system)			

IX. CONTINUITY SURVEY								
Structure "A"	Structure "B"	Point "A" to Point "B" or Fixed Cell Location >30'	Structure "A" Fixed Voltage >30'	Structure "B" Fixed Voltage >30'	Point-to-Point or Fixed Voltage Difference	Continuous	Isolated	Method and Standards Used (e.g. RP-0285, R051)
Negative lead	1 (Tank) Fill Riser	Point A to Point B			0.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pt to Pt RP-0285
Negative lead	1 (Tank) ATG Riser	Point A to Point B			0.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pt to Pt RP-0285
Negative lead	1 (Tank) STP Riser	Point A to Point B			0.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pt to Pt RP-0285
Negative lead	2 (Tank) Fill Riser	Point A to Point B			0.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pt to Pt RP-0285
Negative lead	2 (Tank) ATG Riser	Point A to Point B			0.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pt to Pt RP-0285
Negative lead	2 (Tank) STP Riser	Point A to Point B			0.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pt to Pt RP-0285

X SYSTEM SURVEY									
Structure	Contact Point	Half Cell Location	Local Voltage "ON"	Local Voltage "Instant Off"	Local Voltage (Depolarized)	Voltage Change	PASS	FAIL	Method and Standards Used
1 (Tank)	Inside of Tank	#1	-2010	-1398			<input checked="" type="checkbox"/>	<input type="checkbox"/>	-850 I/O RP-0285
1 (Tank)	Inside of Tank	#2	-2416	-1224			<input checked="" type="checkbox"/>	<input type="checkbox"/>	-850 I/O RP-0285
1 (Tank)	Inside of Tank	#3	-1680	-1199			<input checked="" type="checkbox"/>	<input type="checkbox"/>	-850 I/O RP-0285
2 (Tank)	Inside of Tank	#4	-2800	-1687			<input checked="" type="checkbox"/>	<input type="checkbox"/>	-850 I/O RP-0285
2 (Tank)	Inside of Tank	#5	-2882	-1424			<input checked="" type="checkbox"/>	<input type="checkbox"/>	-850 I/O RP-0285
2 (Tank)	Inside of Tank	#6	-1770	-955			<input checked="" type="checkbox"/>	<input type="checkbox"/>	-850 I/O RP-0285

# XI. UST SITE PLAN

**Customer Name:** AJ Eisenberg Airport **Site Name:** Oak Harbor Airport

**Site Address:** 1140 Monroe Landing, Oak Harbor

**Job Number:** 74793

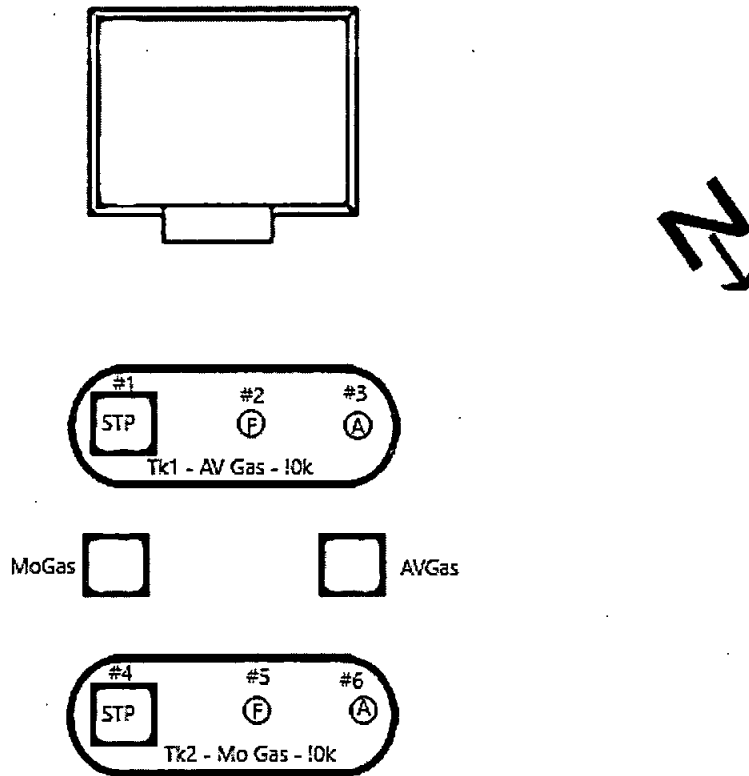


Diagram the UST System, including tanks, piping, and dispenser locations, approximate scale, and any other notable structures/physical features. Indicate north with arrow. On the map below, include the half cell locations used during testing. All test points must be easily identifiable, so that testing can be reproduced and your results verified.

[illegible]



**XIII - RETROFIT OR REPAIR DESIGN (if applicable)**

All retrofitting or repairs to CP systems shall be designed by a Corrosion Expert. I certify that I am a Corrosion Expert qualified to engage in the practice of corrosion control on buried or submerged metal piping systems and metal tanks. I have attached copies of the retrofit/repair design and of the Underground Storage Tank Retrofit and Repair Checklist

Corrosion Expert's Name

National Recognized Organization:

Corrosion Expert's Name:

Certification Number:

Corrosion Expert's Signature:

Date:

**XIII - REQUIRED SIGNATURES**

The service provider certifies the criteria used to evaluate whether cathodic protection is adequate were in accordance with a code of practice developed by a nationally recognized association (e.g. NACE), as required by the Washington State Underground Storage Tank Regulations

05/11/2018



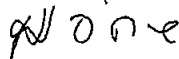
Jeremy Short - Tech

Date

Signature of Certified Cathodic Protection Tester

Print or Type Name

05/11/2018



Date

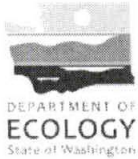
Signature of Tank Owner or Authorized Representative

Print or Type Name

ENTERED  
2/28/2018

RECEIVED

FEB 28 2018



WA Leak Testing Checklist

Washington State Department of Ecology  
Toxics Cleanup Program

UST ID #: 2270

County: Island

FOR Underground Storage Tanks

This checklist certifies testing activities were conducted in accordance with Chapter 173-360 WAC. Instructions are found on pages 4 and 5.

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MAR 06 2018

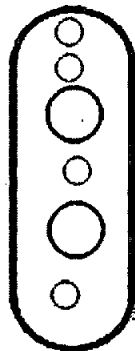
DATE TEST CONDUCTED: 02/16/2018

I. UST FACILITY		II. CERTIFIED SERVICE PROVIDER			
Facility Compliance Tag #A1278, A8562		Service Provider Name: Scott Pike			
UST ID #: 2270		Company Name: Northwest Tank & Environmental Services, Inc.			
Site Name: Oak Harbor Airport		Address: 17407 59th Ave SE			
Site Address: 1140 Monroe Landing		City: Snohomish	State: WA	Zipcode: 98296	
City: Oak Harbor		Phone: (800) 742-9620	Email: info@nwtank.com		
Site Phone: 206-722-3333		ICC Certification Type: Tightness Testing ICBO- U3			
		ICC Cert. #: 5053249-U3		Exp. Date: 07/13/2019	
III. UST OWNER/OPERATOR					
Name: AJ Eisenberg Airport		Phone: 206-479-2219	Email: leslieb@itltd.net		
Mailing Address: 417 2nd Ave West		City: Seattle	State: WA	Zipcode: 98119-4012	
IV. UST SYSTEM INFORMATION based on observations, not Ecology database					
-- use bolded acronyms, where applicable --					
	Tank ID:	Tank ID:	Tank ID:	Tank ID:	
1. Tank ID # (tank name registered with Ecology)	1	2			
2. Date installed (if known)	1/7/1971	1/7/1971			
3. Tank capacity (gallons)	10000	10000			
4. Tank material (select <b>NV</b> if not <u>visually</u> verified): Steel ( <b>ST</b> ); Steel Clad w/ Corrosion Resist ( <b>CLAD</b> ); Fiberglass Reinforced Plastic ( <b>FRP</b> ); <b>ST Ip3</b> ; Not Visible ( <b>NV</b> )	SWS	SWS			
5. Tank construction (select <b>NV</b> if not <u>visually</u> verified): Single Wall ( <b>SW</b> ); Double Wall ( <b>DW</b> ); Compartment ( <b>COMP</b> ); Not Visible ( <b>NV</b> )	SW	SW			
6. Piping material (select <b>NV</b> if not <u>visually</u> verified): Steel ( <b>ST</b> ); Fiberglass reinforced Plastic ( <b>FRP</b> ); Flexible Plastic ( <b>FLEX</b> ); Not Visible ( <b>NV</b> ); Other(specify)	SWS	SWS			
7. Piping construction (select <b>NV</b> if not visually verified): Single Wall ( <b>SW</b> ); Double Wall ( <b>DW</b> ); Not Visible ( <b>NV</b> )	Single	Single			
8. Pumping system: Pressurized ( <b>PR</b> ); Safe Suction ( <b>SS</b> ); Non-Safe Suction ( <b>NSS</b> ); Siphon ( <b>S</b> )	Pressure	Pressure			

ECY 070-69 (Rev. Jan. 2016)

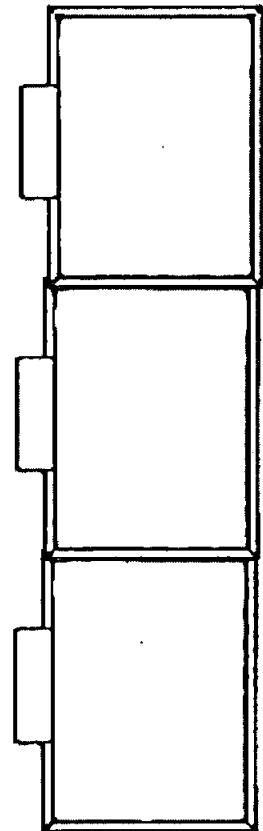
V. SERVICES PERFORMED (CHECK ALL THAT APPLY)				
Supporting test data and/or documentation must be attached or this checklist is considered incomplete.				
	PASS	FAIL	# tested	Describe: dispenser # used for testing lines and ALLD and other information required to duplicate test results.
Lines	<input checked="" type="checkbox"/> ALLD Test	<input checked="" type="checkbox"/>	<input type="checkbox"/> 2	Passed
	Method Used: <u>LDT 890</u> Mfr. Cert. exp. date: _____			
	<b>Manufacturer and model numbers must be provided for each ALLD on the supporting documentation.</b>			
Lines	<input checked="" type="checkbox"/> Line Tightness Test	<input checked="" type="checkbox"/>	<input type="checkbox"/> 2	Passed
	Method Used: <u>Acurite</u> Mfr. Cert. exp. date: <u>02-02-2018</u>			
	<input type="checkbox"/> Line Interstitial (or Sump Sensor) Test <input type="checkbox"/>			
Tanks	<input type="checkbox"/> Tank Tightness Test (i.e. 3rd-party certified test up to overfill prevention level)	<input type="checkbox"/>	<input type="checkbox"/> —	
	Method Used: _____ Mfr. Cert. exp. date: _____			
	<input type="checkbox"/> Tank Interstitial (or Tank Sensor) Test <input type="checkbox"/>			
UST Equipment	<input checked="" type="checkbox"/> Monitor Equipment Check	<input checked="" type="checkbox"/>	<input type="checkbox"/> 1	TLS 300
	<input type="checkbox"/> Overfill Equipment Check (check all that apply)	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/> Auto shutoff device	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/> Ball float valve	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/> Overfill Alarm	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/> Spill Bucket Test	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/> Tank Sump Test	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/> Other (describe briefly)	<input type="checkbox"/>	<input type="checkbox"/>	
VII. COMMENTS include descriptions to problems encountered and how they were addressed.				
WA Leak Testing Checklist: Comments - Sit map is to spec				
VIII. CHECKLIST				
The following items shall be initialed by the Certified Service Provider.		YES	NO	N/A
1. Have all checked items been tested per recommended practices, code and/or manufacturer's requirements and in accordance with federal and/or state regulations?		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Has the owner/operator been provided with written documentation of the testing results?		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Has the owner/operator been made aware of any faulty equipment or necessary repairs?*		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Date work was completed:		02/16/2018		

VII. SITE DIAGRAM -- Include description and/or locations of equipment tested --



stp

annular



PERSONS SUBMITTING FALSE INFORMATION ARE SUBJECT TO FORMAL ENFORCEMENT  
AND/OR PENALTIES UNDER CHAPTER 173-360 WAC. .

IX. REQUIRED SIGNATURES

02/16/2018

Date

Signature of Certified Service Provider

Scott Pike - Tech

Print or Type Name

02/16/2018

Date

Signature of Tank Owner or Authorized Representative

Print or Type Name

## Automatic Line Leak Detector Test Results

Company Name: AJ Eisenberg Airport  
Site Name: Oak Harbor Airport  
Address: 1140 Monroe Landing Oak Harbor, WA 98277-8232  
UST Site ID: 2270  
Test Date/Time: 02/16/2018 10:29:08 am

Job ID Number: 73415  
Technician Name: Scott Pike  
License Number: 5053249-U3  
Expiration Date: 07/13/2019

Product: Regular Tank ID: 2 LD Type: Mechanical	Make: VMI Model: LD2000 Serial#: 08101360	Operating Pressure: 28 Holding Pressure: 28 Bleedback (ml): 350	<b>Result: Pass</b>
<b>Additional Data For Mechanical Leak Detectors Only</b> Metering Pressure: 15 Step Through Time: 3			
Product: Avgas Tank ID: 1 LD Type: Mechanical	Make: Red Jacket Model: FX1V Serial#: 8936	Operating Pressure: 25 Holding Pressure: 25 Bleedback (ml): 400	<b>Result: Pass</b>
<b>Additional Data For Mechanical Leak Detectors Only</b> Metering Pressure: 9 Step Through Time: 2			

Leak detector testing conducted in accordance with the procedures and limitations of the LDT 890 leak detector tester. A leak is simulated at the highest point in the line using the LDT 890 calibrated to 3 gph at a metering pressure of 10 psi. The owner or operator of the UST system is required to ensure any failed leak detector is replaced before placing the line back in service.

The results of any sampling, testing, or monitoring shall be maintained for at least five years, or for another reasonable period of time determined by the department or delegated agency, except that the results of tank tightness testing conducted in accordance with CFR 40 Part 280.44 shall be retained until the next test is conducted.

### Comments:

Technician Name: Scott Pike  
Signature:



Date: 02/16/2018

## Line Tightness Test Results

Company Name: AJ Eisenberg Airport  
Site Name: Oak Harbor Airport  
Address: 1140 Monroe Landing Oak Harbor, WA 98277-8232  
UST Site ID: 2270  
Test Date: 02/16/2018

Job ID Number: 73415  
Technician Name: Scott Pike  
License Number: 5053249-U3  
Expiration Date: 07/13/2019

### Line Tightness Test Data

Product:	Avgas	Tank ID:	1	Start Time:	11:45
Approx Length:	25	STP MFG:	Red Jacket 3/4 HP	End Time:	12:15
Size:	2	Operating Pressure:	28	Total Test Time:	30mins
Line Material:	SWS	Test Pressure:	42	Final Leak Rate:	.00000
Wall Type:	Single	Isolation Dispenser:	Impact Valve	Impact Valves Operational:	Yes
Boot Back:	N/A	Isolation Pump:	Check Valve	Check Valve Location:	N/A
Line Type:	Pressure	Initial Cylinder Level:	0.080	Result:	Pass
		Final Cylinder Level:	0.080		


Product:	Regular	Tank ID:	2	Start Time:	11:45
Approx Length:	25	STP MFG:	Red Jacket 3/4 HP	End Time:	12:15
Size:	2	Operating Pressure:	25	Total Test Time:	30mins
Line Material:	SWS	Test Pressure:	37.5	Final Leak Rate:	.00000
Wall Type:	Single	Isolation Dispenser:	Impact Valve	Impact Valves Operational:	Yes
Boot Back:	N/A	Isolation Pump:	Ball Valve	Check Valve Location:	N/A
Line Type:	Pressure	Initial Cylinder Level:	0.080	Result:	Pass
		Final Cylinder Level:	0.080		

Line tightness testing conducted in accordance with the procedures and limitations of the Acurite pipeline tester. A consistent leak rate of .01 gph or higher at 150% of normal operating pressure is considered a failure. The owner or operator of the UST system is required to report all failures to the appropriate agency within 24 hours.

The results of any sampling, testing, or monitoring shall be maintained for at least five years, or for another reasonable period of time determined by the department or delegated agency, except that the results of tank tightness testing conducted in accordance with CFR 40 Part 280.44 shall be retained until the next test is conducted.

### Comments:

Technician Name: Scott Pike  
Signature:



Date: 02/16/2018



## Monitoring System Certification

This form must be used to document testing and servicing of monitoring equipment. A separate certification or report must be prepared for each monitoring system control panel by the technician who performs the work. A copy of this form must be provided to the tank system owner/operator. The owner/operator must submit a copy of this form to the local agency regulating UST systems within 30 days of test date.

### A. General Information

**Facility Contact Person:** Leslie Beach

**Make / Model Monitoring System:** V-RTLS 300

**Company Name:** AJ Eisenberg Airport

**Site Address:** 1140 Monroe Landing

**UST Site ID:** 2270

**Date Of Testing:** 02/16/2018

**Site Name:** Oak Harbor Airport

**City, State, ZIP:** Oak Harbor, WA 98277-8232

**Facility Phone Number:** 206-722-3333

**Serial #:** 70743697405001

### B. Inventory of Equipment Tested/Certified

Tank #: 1 Avgas		Tank #: 2 Regular	
In-Tank Gauging Probe	Mag Probe plus	In-Tank Gauging Probe	Mag Probe plus
Annular Space or Vault Sensor:	N/A	Annular Space or Vault Sensor:	N/A
Piping Sump / Trench Sensor:	N/A	Piping Sump / Trench Sensor:	N/A
Fill Sump Sensor:	N/A	Fill Sump Sensor:	N/A
Mechanical Line Leak Detector:	FX1V	Mechanical Line Leak Detector:	LD2000
Electronic Line Leak Detector:	N/A	Electronic Line Leak Detector:	N/A
Tank Overfill / High Level Sensor:	OPW 61SOP	Tank Overfill / High Level Sensor:	OPW 61SOP
Other:		Other:	

Dispenser ID:	1/2	Dispenser ID:	3/4
Dispenser Containment Sensors Model:	N/A	Dispenser Containment Sensors Model:	N/A
Shear Valves: Yes	Floats & Chains: N/A	Shear Valves: Yes	Floats & Chains: N/A

### 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 information (e.g. manufacturers' checklists) necessary to verify that this information is correct and 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):

**Technician Name:** Scott Pike

**Certification Number:** B35674

**Expiration Date:** 10/23/2017

**Signature:**



**Testing Company Name:** Northwest Tank & Environmental Services, Inc.

**Address:** 17407 59th Ave SE Snohomish, WA 98296

**Date of Testing:** 02/16/2018

**D. Results of Testing/Service**

Yes	Is the audible alarm operational?
Yes	Is the visual alarm operational?
N/A	Were all sensors visually inspected, functionally tested, and confirmed operational?
N/A	If alarms are relayed to a remote monitoring station, is all communications equipment operational?
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?
N/A	If yes: which sensors initiate positive shut-down?
N/A	Did you confirm positive shut-down due to leaks and sensor failure/disconnection?
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?
N/A	If so, at what percent of tank capacity does the alarm trigger?
Yes	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.
No	Was liquid found in any secondary containment systems designed as dry systems?
N/A	If yes, what type of liquid?
Yes	Was monitoring system set-up reviewed to ensure proper settings? Attach setup reports, if applicable.
Yes	Is all monitoring equipment operational per manufacturers specifications?

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

**E. Comments**

State Tank ID	Product	Manual Stick Readings(inches)	Gauge Readings(inches)	Difference
1	Avgas	27.5	27.38	.12
2	Regular	8	7.91	.09

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

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

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

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

Yes	For equipment startup or annual equipment certification, was leak simulated to verify LLD performance?
3 GPH	Leak Rate
Yes	Were all LLDs confirmed operational and accurate within regulatory requirements?
Yes	Was the testing apparatus properly calibrated?
Yes	For mechanical LLDs, does the LLD restrict product flow if it detects a leak?
N/A	For electronic LLDs, does the turbine automatically shut off if the LLD detects a leak?
N/A	For electronic LLDs, does the turbine automatically shut off if any portion of the monitoring system is disabled or disconnected?
N/A	For electronic LLDs, does the turbine automatically shut off if any portion of the monitoring system malfunctions or fails a test?
N/A	For electronic LLDs, have all accessible wiring connections been visually inspected?
Yes	Were all items on the equipment manufacturer's maintenance checklist completed?

# COMMUNICATIONS SETUP

## SYSTEM SETUP

FEB 16, 2018 1:27 PM

## SYSTEM UNITS

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

AIR INTL.  
CG MONROE LANDING  
OAK HARBOR WA 98277  
70743697405001

SHIFT TIME 1 : DISABLED  
SHIFT TIME 2 : DISABLED  
SHIFT TIME 3 : DISABLED  
SHIFT TIME 4 : DISABLED

PERIODIC TEST WARNINGS  
DISABLED  
ANNUAL TEST WARNINGS  
DISABLED

PRINT TO VOLUMES  
ENABLED

TEMP COMPENSATION  
VALUE (DEG F) : 60.0

H-PROTOCOL DATA FORMAT  
HEIGHT  
RE-DIRECT LOCAL PRINTOUT  
DISABLED

SYSTEM SECURITY  
CODE : 000000

## PORT SETTINGS:

COMM BOARD : 2 (RS-232)  
BAUD RATE : 1200  
PARITY : ODD  
STOP BIT : 1 STOP  
DATA LENGTH: 7 DATA

## AUTO TRANSMIT SETTINGS:

AUTO LEAK ALARM LIMIT  
DISABLED  
AUTO HIGH WATER LIMIT  
DISABLED  
AUTO OVERFILL LIMIT  
DISABLED  
AUTO LOW PRODUCT  
DISABLED  
AUTO THEFT LIMIT  
DISABLED  
AUTO DELIVERY START  
DISABLED  
AUTO DELIVERY END  
DISABLED  
AUTO EXTERNAL INPUT ON  
DISABLED  
AUTO EXTERNAL INPUT OFF  
DISABLED  
AUTO SENSOR FUEL ALARM  
DISABLED  
AUTO SENSOR WATER ALARM  
DISABLED  
AUTO SENSOR OIL ALARM  
DISABLED

RS-232 SECURITY  
CODE : \*\*\*\*\*

RS-232 END OF MESSAGE  
DISABLED

## IN-TANK SETUP

T 1:100LL  
PRODUCT CODE : 1  
THERMAL COEFF : 0.000750  
TANK DIAMETER : 35.00  
TANK PROFILE : 1 FT  
FULL VOL : 10126

FLOAT SIZE: 4.0 IN. 8496

WATER WARNING : 1.0  
HIGH WATER LIMIT: 2.0

MAX OR LABEL VOL: 10126  
OVERFILL LIMIT : 90%  
HIGH PRODUCT : 9113  
DELIVERY LIMIT : 95%  
DELIVERY LIMIT : 9619  
DELIVERY LIMIT : 15%  
DELIVERY LIMIT : 1518

LOW PRODUCT : 1553  
LEAK ALARM LIMIT: 5  
SUDDEN LOSS LIMIT: 50  
TANK TILT : 0.00

MANIFOLDED TANKS  
T#: NONE

LEAK MIN PERIODIC: 0%  
LEAK MIN PERIODIC: 0

LEAK MIN ANNUAL : 0%  
LEAK MIN ANNUAL : 0

PERIODIC TEST TYPE  
STANDARD

ANNUAL TEST FAIL  
ALARM DISABLED

PERIODIC TEST FAIL  
ALARM DISABLED

GROSS TEST FAIL  
ALARM DISABLED

ANN TEST AVERAGING: OFF  
PER TEST AVERAGING: OFF

TANK TEST NOTIFY: OFF

TNK TST SIPHON BREAK:OFF

DELIVERY DELAY : 5 MIN

T 2:MOGAS : 2  
PRODUCT CODE : .000750  
THERMAL COEFF : 95.00  
TANK DIAMETER : 1 PT  
TANK PROFILE : 10126  
FULL VOL :

FLOAT SIZE: 4.0 IN. 8496

WATER WARNING : 1.0  
HIGH WATER LIMIT: 2.0

MAX OR LABEL VOL: 10126  
OVERFILL LIMIT : 90%

HIGH PRODUCT : 95%

DELIVERY LIMIT : 9619  
5%

LOW PRODUCT : 1553  
LEAK ALARM LIMIT: 99

SUDDEN LOSS LIMIT: 99

TANK TILT : 0.00

MANIFOLDED TANKS  
T#: NONE

LEAK MIN PERIODIC: 0%  
0

LEAK MIN ANNUAL : 0%  
0

PERIODIC TEST TYPE  
STANDARD

ANNUAL TEST FAIL  
ALARM DISABLED

PERIODIC TEST FAIL  
ALARM DISABLED

GROSS TEST FAIL  
ALARM DISABLED

AMN TEST AVERAGING: OFF  
PER TEST AVERAGING: OFF

TANK TEST NOTIFY: OFF

TNK IST SIPHON BREAK:OFF

DELIVERY DELAY : 1 MIN

# LEAK TEST METHOD

TEST WEEKLY : ALL TANK

MON

START TIME : 11:00 PM

TEST RATE : 0.20 GAL/HR

DURATION : 4 HOURS

LEAK TEST REPORT FORMAT  
NORMAL

# LIQUID SENSOR SETUP

NONE

## TANK LEAK TEST HISTORY

T 1:100LL

LAST GROSS TEST PASSED:  
FEB 12. 2018 11:00 PM  
STARTING VOLUME= 2441  
PERCENT VOLUME = 24.1  
TEST TYPE = STANDARD

LAST ANNUAL TEST PASSED:  
JAN 15. 2018 11:00 PM  
TEST LENGTH 4 HOURS  
STARTING VOLUME= 2816  
PERCENT VOLUME = 27.8  
TEST TYPE = STANDARD

FULLEST ANNUAL TEST PASS  
JAN 1. 2018 11:00 PM  
TEST LENGTH 4 HOURS  
STARTING VOLUME= 2971  
PERCENT VOLUME = 29.3  
TEST TYPE = STANDARD

LAST PERIODIC TEST PASS:  
JAN 15. 2018 11:00 PM  
TEST LENGTH 4 HOURS  
STARTING VOLUME= 2816  
PERCENT VOLUME = 27.8  
TEST TYPE = STANDARD

FULLEST PERIODIC TEST  
PASSED EACH MONTH:

JAN 1. 2018 11:00 PM  
TEST LENGTH 4 HOURS  
STARTING VOLUME= 2971  
PERCENT VOLUME = 29.3  
TEST TYPE = STANDARD

FEB 6. 2017 11:00 PM  
TEST LENGTH 4 HOURS  
STARTING VOLUME= 6300  
PERCENT VOLUME = 62.2  
TEST TYPE = STANDARD

MAR 6. 2017 11:00 PM  
TEST LENGTH 4 HOURS  
STARTING VOLUME= 5828  
PERCENT VOLUME = 57.6  
TEST TYPE = STANDARD

APR 3. 2017 11:00 PM  
TEST LENGTH 4 HOURS  
STARTING VOLUME= 5041  
PERCENT VOLUME = 50.4  
TEST TYPE = STANDARD

JUN 1. 2017 11:00 PM  
TEST LENGTH 4 HOURS  
STARTING VOLUME= 3141  
PERCENT VOLUME = 30.9  
TEST TYPE = STANDARD

JUN 5. 2016 11:00 PM  
TEST LENGTH 4 HOURS  
STARTING VOLUME= 4234  
PERCENT VOLUME = 41.8  
TEST TYPE = STANDARD

JUL 4. 2016 11:00 PM  
TEST LENGTH 4 HOURS  
STARTING VOLUME= 3315  
PERCENT VOLUME = 32.8  
TEST TYPE = STANDARD

AUG 21. 2017 11:00 PM  
TEST LENGTH 4 HOURS  
STARTING VOLUME= 7918  
PERCENT VOLUME = 78.2  
TEST TYPE = STANDARD

SEP 4. 2017 11:00 PM  
TEST LENGTH 4 HOURS  
STARTING VOLUME= 6808  
PERCENT VOLUME = 67.2  
TEST TYPE = STANDARD

OCT 2. 2017 11:00 PM  
TEST LENGTH 4 HOURS  
STARTING VOLUME= 5599  
PERCENT VOLUME = 55.3  
TEST TYPE = STANDARD

NOV 5. 2017 11:00 PM  
TEST LENGTH 4 HOURS  
STARTING VOLUME= 4105  
PERCENT VOLUME = 40.5  
TEST TYPE = STANDARD

DEC 4. 2017 11:00 PM  
TEST LENGTH 4 HOURS  
STARTING VOLUME= 3700  
PERCENT VOLUME = 35.5  
TEST TYPE = STANDARD

#### TEST HISTORY

T 2:100CAS

LAST CROSS TEST PASSED:  
JUL 31. 2017 11:00 PM  
STARTING VOLUME= 779  
PERCENT VOLUME = 7.7  
TEST TYPE = STANDARD

LAST ANNUAL TEST PASSED:  
JUN 8. 2015 11:00 PM  
TEST LENGTH 4 HOURS  
STARTING VOLUME= 2859  
PERCENT VOLUME = 28.2  
TEST TYPE = STANDARD

FULLEST ANNUAL TEST PASS  
MAR 16. 2015 11:00 PM  
TEST LENGTH 4 HOURS  
STARTING VOLUME= 3786  
PERCENT VOLUME = 37.4  
TEST TYPE = STANDARD

LAST PERIODIC TEST PASS:  
JUN 8. 2015 11:00 PM  
TEST LENGTH 4 HOURS  
STARTING VOLUME= 2959  
PERCENT VOLUME = 28.2  
TEST TYPE = STANDARD

FULLEST PERIODIC TEST  
PASSED EACH MONTH:

JAN 6. 2014 11:00 PM  
TEST LENGTH 4 HOURS  
STARTING VOLUME= 5572  
PERCENT VOLUME = 55.0  
TEST TYPE = STANDARD

FEB 3. 2014 11:00 PM  
TEST LENGTH 4 HOURS  
STARTING VOLUME= 5418  
PERCENT VOLUME = 53.5  
TEST TYPE = STANDARD

MAR 16. 2015 11:00 PM  
TEST LENGTH 4 HOURS  
STARTING VOLUME= 3786  
PERCENT VOLUME = 37.4  
TEST TYPE = STANDARD

APR 6. 2015 11:00 PM  
TEST LENGTH 4 HOURS  
STARTING VOLUME= 3727  
PERCENT VOLUME = 36.8  
TEST TYPE = STANDARD

MAY 4. 2015 11:00 PM  
TEST LENGTH 4 HOURS  
STARTING VOLUME= 3431  
PERCENT VOLUME = 33.9  
TEST TYPE = STANDARD

JUN 1. 2017 11:00 PM  
TEST LENGTH 4 HOURS  
STARTING VOLUME= 3141  
PERCENT VOLUME = 30.9  
TEST TYPE = STANDARD

JUL 31. 2017 11:00 PM  
TEST LENGTH 4 HOURS  
STARTING VOLUME= 2922  
PERCENT VOLUME = 29.4  
TEST TYPE = STANDARD

JUL 7. 2014 11:00 PM  
TEST LENGTH 4 HOURS  
STARTING VOLUME= 2999  
PERCENT VOLUME = 29.6  
TEST TYPE = STANDARD

AUG 19. 2013 11:00 PM  
TEST LENGTH 4 HOURS  
STARTING VOLUME= 6358  
PERCENT VOLUME = 63.8  
TEST TYPE = STANDARD

SEP 2. 2013 11:00 PM  
TEST LENGTH 4 HOURS  
STARTING VOLUME= 6208  
PERCENT VOLUME = 61.3  
TEST TYPE = STANDARD

OCT 7. 2013 11:00 PM  
TEST LENGTH 4 HOURS  
STARTING VOLUME= 6052  
PERCENT VOLUME = 59.8  
TEST TYPE = STANDARD

NOV 4. 2013 11:00 PM  
TEST LENGTH 4 HOURS  
STARTING VOLUME= 5964  
PERCENT VOLUME = 58.9  
TEST TYPE = STANDARD

DEC 2. 2013 11:00 PM  
TEST LENGTH 4 HOURS  
STARTING VOLUME= 5784  
PERCENT VOLUME = 57.1  
TEST TYPE = STANDARD

COCKPIT LANDING  
OAK HARBOR CA 98272  
70749697405001

FEB 18. 2018 11:29 PM

#### SYSTEM STATUS REPORT

T 2:100 PRODUCT ALARM

T 2:INVALID FUEL LEVEL

T 2:DELIVERY NEEDED

#### INVENTORY REPORT

T 1:100LL  
VOLUME = 2416 GALS  
ULLAGE = 7710 GALS  
90% ULLAGE = 6697 GALS  
TC VOLUME = 2431 GALS  
HEIGHT = 27.38 INCHES  
WATER VOL = 0 GALS  
WATER = 0.00 INCHES  
TEMP = 51.6 DEG F

T 2:100CAS  
T 2:INVALID FUEL LEVEL  
VOL INVALID = 402 GALS  
ULLAGE = 9724 GALS  
90% ULLAGE = 8711 GALS  
TC VOLUME = 405 GALS  
HGT INVALID = 7.91 INCHES  
WATER VOL = 0 GALS  
WATER = 0.00 INCHES  
TEMP = 50.1 DEG F

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

AIR INTL  
20 PM



# WA Leak Testing Checklist

FOR Underground Storage Tanks

UST ID #: 2270

RECEIVED  
County : Island

FEB 01 2017

RECEIVED

FEB 07 2017

This checklist certifies testing activities were conducted in accordance with Chapter 173-360 WAC. Instructions are found on pages 4 and 5.

Department of Ecology  
Toxics Cleanup Program

DEPT OF ECOLOGY  
TCP - NWRO

DATE TEST CONDUCTED: 12/22/2016

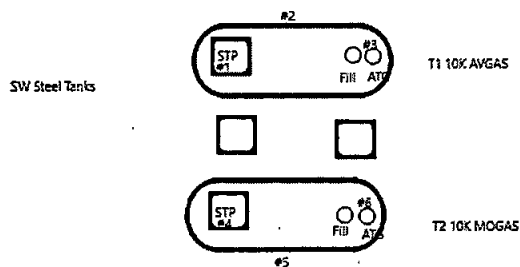
I. UST FACILITY		II. CERTIFIED SERVICE PROVIDER			
Facility Compliance Tag #:		Service Provider Name: Scott Pike			
UST ID #: 2270		Company Name: Northwest Tank & Environmental Services, Inc.			
Site Name: Oak Harbor Airport		Address: 17407 59th Ave SE			
Site Address: 1140 Monroe Landing		City: Snohomish	State: WA	Zipcode: 98296	
City: Oak Harbor		Phone: (800) 742-9620	Email: info@nwtank.com		
Site Phone: 206-722-3333		ICC Certification Type: Tightness Testing ICBO- U3			
		ICC Cert. #: 5053249-U3		Exp. Date: 10/23/2017	
III. UST OWNER/OPERATOR					
Name: AJ Eisenberg Airport		Phone: 206-479-2219	Email: leslieb@itltd.net		
Mailing Address: 417 2nd Ave West		City: Seattle	State: WA	Zipcode: 98119-4012	
IV. UST SYSTEM INFORMATION based on observations, not Ecology database					
-- use bolded acronyms, where applicable --					
	Tank ID:	Tank ID:	Tank ID:	Tank ID:	
1. Tank ID # (tank name registered with Ecology)	1	2			
2. Date installed (if known)	1/7/1971	1/7/1971			
3. Tank capacity (gallons)	10000	10000			
4. Tank material (select <b>NV</b> if not <u>visually</u> verified): Steel ( <b>ST</b> ); Steel Clad w/ Corrosion Resist ( <b>CLAD</b> ); Fiberglass Reinforced Plastic ( <b>FRP</b> ); <b>ST</b> <b>IP3</b> ; Not Visible ( <b>NV</b> )	SWS	SWS			
5. Tank construction (select <b>NV</b> if not <u>visually</u> verified): Single Wall ( <b>SW</b> ); Double Wall ( <b>DW</b> ); Compartment ( <b>COMP</b> ); Not Visible ( <b>NV</b> )	SW	SW			
6. Piping material (select <b>NV</b> if not <u>visually</u> verified): Steel ( <b>ST</b> ); Fiberglass reinforced Plastic ( <b>FRP</b> ); Flexible Plastic ( <b>FLEX</b> ); Not Visible ( <b>NV</b> ); Other(specify)	SWS	SWS			
7. Piping construction (select <b>NV</b> if not visually verified): Single Wall ( <b>SW</b> ); Double Wall ( <b>DW</b> ); Not Visible ( <b>NV</b> )	Single	Single			
8. Pumping system: Pressurized ( <b>PR</b> ); Safe Suction ( <b>SS</b> ); Non-Safe Suction ( <b>NSS</b> ); Siphon ( <b>S</b> )	Pressure	Pressure			

ECY 070-69 (Rev. Jan. 2016)



V. SERVICES PERFORMED (CHECK ALL THAT APPLY)						
Supporting test data and/or documentation must be attached or this checklist is considered incomplete.						
	PASS	FAIL	# tested	Describe: dispenser # used for testing lines and ALLD and other information required to duplicate test results.		
Lines	<input checked="" type="checkbox"/> ALLD Test	<input checked="" type="checkbox"/>	<input type="checkbox"/>	2	Only one dispenser each	
	Method Used: <u>LDT 890</u> Mfr. Cert. exp. date: <u>02-28-2018</u>					
	<b>Manufacturer and model numbers must be provided for each ALLD on the supporting documentation.</b>					
Lines	<input checked="" type="checkbox"/> Line Tightness Test	<input checked="" type="checkbox"/>	<input type="checkbox"/>	2	Same	
	Method Used: <u>Acurite</u> Mfr. Cert. exp. date: <u>02-02-2018</u>					
	<input type="checkbox"/> Line Interstitial (or Sump Sensor) Test	<input type="checkbox"/>	<input type="checkbox"/>	—		
Tanks	<input type="checkbox"/> Tank Tightness Test (i.e. 3rd-party certified test up to overfill prevention level)	<input type="checkbox"/>	<input type="checkbox"/>	—		
	Method Used: _____ Mfr. Cert. exp. date: _____					
UST Equipment	<input checked="" type="checkbox"/> Monitor Equipment Check	<input checked="" type="checkbox"/>	<input type="checkbox"/>	1	TLS 300C	
	<input checked="" type="checkbox"/> Overfill Equipment Check (check all that apply)	<input checked="" type="checkbox"/> Auto shutoff device	<input checked="" type="checkbox"/>	<input type="checkbox"/>	2	Coaxial overfill
		<input type="checkbox"/> Ball float valve	<input type="checkbox"/>	<input type="checkbox"/>	—	
		<input type="checkbox"/> Overfill Alarm	<input type="checkbox"/>	<input type="checkbox"/>	—	
	<input type="checkbox"/> Spill Bucket Test	<input type="checkbox"/>	<input type="checkbox"/>	—		
	<input type="checkbox"/> Tank Sump Test	<input type="checkbox"/>	<input type="checkbox"/>	—		
	<input type="checkbox"/> Other (describe briefly)	<input type="checkbox"/>	<input type="checkbox"/>	—		
VI. COMMENTS <i>include descriptions to problems encountered and how they were addressed.</i>						
VII. CHECKLIST						
The following items shall be initialed by the Certified Service Provider.		YES	NO	N/A		
1. Have all checked items been tested per recommended practices, code and/or manufacturer's requirements and in accordance with federal and/or state regulations?		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
2. Has the owner/operator been provided with written documentation of the testing results?		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
3. Has the owner/operator been made aware of any faulty equipment or necessary repairs?*		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Date work was completed:		12/22/2016				

VIII. SITE DIAGRAM -- include description and/or locations of equipment tested --



**PERSONS SUBMITTING FALSE INFORMATION ARE SUBJECT TO FORMAL ENFORCEMENT  
AND/OR PENALTIES UNDER CHAPTER 173-360 WAC. .**

IX. REQUIRED SIGNATURES

12/22/2016

Date

Signature of Certified Service Provider

Scott Pike - Tech

Print or Type Name

12/22/2016

Date

Signature of Tank Owner or Authorized Representative

Robert - Site Rep

Print or Type Name

## Automatic Line Leak Detector Test Results

Company Name: AJ Eisenberg Airport  
Site Name: Oak Harbor Airport  
Address: 1140 Monroe Landing Oak Harbor, WA 98277-8232  
UST Site ID: 2270  
Test Date/Time: 12/22/2016 09:48:56 am

Job ID Number: 58269  
Technician Name:  
License Number:  
Expiration Date: 12/31/1969

Product: Regular Tank ID: 2 LD Type: Mechanical	Make: VMI Model: LD2000 Serial#: 08101360	Operating Pressure: 28 Holding Pressure: 26 Bleedback (ml): 200	Result: Pass
<b>Additional Data For Mechanical Leak Detectors Only</b> Metering Pressure: 11 Step Through Time: 2			
Product: Avgas Tank ID: 1 LD Type: Mechanical	Make: Red Jacket Model: FX1V Serial#: 8936	Operating Pressure: 26 Holding Pressure: 26 Bleedback (ml): 450	Result: Pass
<b>Additional Data For Mechanical Leak Detectors Only</b> Metering Pressure: 9 Step Through Time: 2			

Leak detector testing conducted in accordance with the procedures and limitations of the LDT 890 leak detector tester. A leak is simulated at the highest point in the line using the LDT 890 calibrated to 3 gph at a metering pressure of 10 psi. The owner or operator of the UST system is required to ensure any failed leak detector is replaced before placing the line back in service.

The results of any sampling, testing, or monitoring shall be maintained for at least five years, or for another reasonable period of time determined by the department or delegated agency, except that the results of tank tightness testing conducted in accordance with CFR 40 Part 280.44 shall be retained until the next test is conducted.

### Comments:

Technician Name:  
Signature:  
Date: 12/22/2016

## Line Tightness Test Results

Company Name: AJ Eisenberg Airport  
Site Name: Oak Harbor Airport  
Address: 1140 Monroe Landing Oak Harbor, WA 98277-8232  
UST Site ID: 2270  
Test Date: 12/22/2016

Job ID Number: 58269  
Technician Name:  
License Number:  
Expiration Date: 12/31/1969

### Line Tightness Test Data

Product:	Avgas	Tank ID:	1	Start Time:	10:15
Approx Length:	25	STP MFG:	Red Jacket 3/4 HP	End Time:	10:45
Size:	2	Operating Pressure:	26	Total Test Time:	30mins
Line Material:	SWS	Test Pressure:	39	Final Leak Rate:	.00000
Wall Type:	Single	Isolation Dispenser:	Impact Valve	Impact Valves Operational:	Yes
Boot Back:	N/A	Isolation Pump:	Check Valve	Check Valve Location:	N/A
Line Type:	Pressure	Initial Cylinder Level:	.085	Result:	Pass
		Final Cylinder Level:	.085		

Product:	Regular	Tank ID:	2	Start Time:	10:15
Approx Length:	25	STP MFG:	Red Jacket 3/4 HP	End Time:	10:45
Size:	2	Operating Pressure:	28	Total Test Time:	30mins
Line Material:	SWS	Test Pressure:	42	Final Leak Rate:	.00000
Wall Type:	Single	Isolation Dispenser:	Impact Valve	Impact Valves Operational:	Yes
Boot Back:	N/A	Isolation Pump:	Ball Valve	Check Valve Location:	N/A
Line Type:	Pressure	Initial Cylinder Level:	.085	Result:	Pass
		Final Cylinder Level:	.085		

Line tightness testing conducted in accordance with the procedures and limitations of the Acurite pipeline tester. A consistent leak rate of .01 gph or higher at 150% of normal operating pressure is considered a failure. The owner or operator of the UST system is required to report all failures to the appropriate agency within 24 hours.

The results of any sampling, testing, or monitoring shall be maintained for at least five years, or for another reasonable period of time determined by the department or delegated agency, except that the results of tank tightness testing conducted in accordance with CFR 40 Part 280.44 shall be retained until the next test is conducted.

### Comments:

Technician Name:  
Signature:

Date: 12/22/2016

## Monitoring System Certification

This form must be used to document testing and servicing of monitoring equipment. A separate certification or report must be prepared for each monitoring system control panel by the technician who performs the work. A copy of this form must be provided to the tank system owner/operator. The owner/operator must submit a copy of this form to the local agency regulating UST systems within 30 days of test date.

### A. General Information

**Facility Contact Person:** Joel Eisenberg  
**Make / Model Monitoring System:** V-RTLS 300

**Company Name:** AJ Eisenberg Airport  
**Site Address:** 1140 Monroe Landing  
**UST Site ID:** 2270  
**Date Of Testing:** 12/22/2016  
**Site Name:** Oak Harbor Airport  
**City, State, ZIP:** Oak Harbor, WA 98277-8232  
**Facility Phone Number:** 206-722-3333  
**Serial #:** 70743697405001

### B. Inventory of Equipment Tested/Certified

Tank #: 1 Avgas		Tank #: 2 Regular	
In-Tank Gauging Probe	Mag Probe plus	In-Tank Gauging Probe	Mag Probe plus
Annular Space or Vault Sensor:	N/A	Annular Space or Vault Sensor:	N/A
Piping Sump / Trench Sensor:	N/A	Piping Sump / Trench Sensor:	N/A
Fill Sump Sensor:	N/A	Fill Sump Sensor:	N/A
Mechanical Line Leak Detector:	FX1V	Mechanical Line Leak Detector:	LD2000
Electronic Line Leak Detector:	N/A	Electronic Line Leak Detector:	N/A
Tank Overfill / High Level Sensor:	OPW 61SOP	Tank Overfill / High Level Sensor:	OPW 61SOP
Other:		Other:	

Dispenser ID:	1/2	Dispenser ID:	3/4
Dispenser Containment Sensors Model:	N/A	Dispenser Containment Sensors Model:	N/A
Shear Valves: Yes	Floats & Chains: N/A	Shear Valves: Yes	Floats & Chains: N/A

### 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 information (e.g. manufacturers' checklists) necessary to verify that this information is correct and 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):

Technician Name:                      Testing Company Name: Northwest Tank & Environmental Services, Inc.  
 Certification Number:              Address: 17407 59th Ave SE Snohomish, WA 98296  
 Expiration Date:                      Date of Testing: 12/22/2016  
 Signature:

**D. Results of Testing/Service**

Yes	Is the audible alarm operational?
Yes	Is the visual alarm operational?
N/A	Were all sensors visually inspected, functionally tested, and confirmed operational?
N/A	If alarms are relayed to a remote monitoring station, is all communications equipment operational?
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?
N/A	If yes: which sensors initiate positive shut-down?
N/A	Did you confirm positive shut-down due to leaks and sensor failure/disconnection?
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?
N/A	If so, at what percent of tank capacity does the alarm trigger?
Yes	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.
No	Was liquid found in any secondary containment systems designed as dry systems?
N/A	If yes, what type of liquid?
Yes	Was monitoring system set-up reviewed to ensure proper settings? Attach setup reports, if applicable.
Yes	Is all monitoring equipment operational per manufacturers specifications?

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

**E. Comments**

Replaced all bulbs on tIs

State Tank ID	Product	Manual Stick Readings(inches)	Gauge Readings(inches)	Difference
1	Avgas	61	61.20	-.20
2	Regular	18	18.31	-.31

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

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

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

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

Yes	For equipment startup or annual equipment certification, was leak simulated to verify LLD performance?
3 GPH	Leak Rate
Yes	Were all LLDs confirmed operational and accurate within regulatory requirements?
Yes	Was the testing apparatus properly calibrated?
Yes	For mechanical LLDs, does the LLD restrict product flow if it detects a leak?
N/A	For electronic LLDs, does the turbine automatically shut off if the LLD detects a leak?
N/A	For electronic LLDs, does the turbine automatically shut off if any portion of the monitoring system is disabled or disconnected?
N/A	For electronic LLDs, does the turbine automatically shut off if any portion of the monitoring system malfunctions or fails a test?
N/A	For electronic LLDs, have all accessible wiring connections been visually inspected?
Yes	Were all items on the equipment manufacturer's maintenance checklist completed?



ENTERED  
ES



B2

## Underground Storage Tank Tightness Testing Checklist

NW 2270  
Island  
RECEIVED

JAN 08 2016

## 1. UST SYSTEM LOCATION AND OWNER

UBI Number: 602 141 844

Site / Business Name

Site Address

Telephone

UST Owner/Operator

Mailing Address

Telephone

Site ID Number: 2270

AJ Eisenberg Airport Oak Harbor Airport

1140 Monroe Landing Island

Oak Harbor, WA 98277-8232

206-722-3333

AJ Eisenberg Airport

417 2nd Ave West

Seattle, WA 98119-4012

206-479-2219

Department of Ecology  
Toxics Cleanup Program

RECEIVED

JAN 12 2016

## 2. FIRM PERFORMING WORK

Service Company

Service Co Address

IFCI Certification Number: 5053249-U3

Telephone

Northwest Tank &amp; Environmental Services, Inc.

17407 59th Ave SE

Shoemish, WA 98296

Certification Issue Date (Month/Year): 2013-11-22 00:00:00

(800) 742-9620

DEPT OF ECOLOGY  
TCP - NWRO

## I. TIGHTNESS TESTING METHOD

Date Of Test: 12/09/2015

1. Tightness testing method(s) used (indicate if more than one method was used):

Test method name/version/Manufacturer:

ATG

Note: A tank must be tested up to the product level limited by the overfill prevention device. If an overfill prevention device is not installed, a tank must be tested up to the 95% full level. When underfill volumetric testing methods are used, the tank must be: 1) filled with product to the 95% full level or 2) the portion of the tank above the product level must be tested using a non volumetric method which meets performance standards, for tightness testing.

2. Indicate the method used to determine if groundwater was present above the bottom of the tank during the test (required for single wall tanks): N/A

3. Method used for release detection:

ATG

4. Reason for conducting tightness test:

Required Release Detection Method

5. Type of test conducted:

Line and Leak Detectors

6. Test method type:

Volumetric

## II. TEST METHOD CHECKLIST

The following items shall be initialed by the Certified Supervisor whose signature appears on this form:

Yes/No/NA

Initials

1. Has the tightness testing method used been demonstrated to meet the performance standard specified in the UST rules for the conditions under which the test was conducted? (e.g. detecting a 0.10 gallon per hour leak rate with probability of detection of at least 95% and a probability of false alarm no more than 5%) Yes
2. Have all written testing procedures developed by the manufacturer of the testing equipment and method been followed while the test was being setup. Yes
3. Was the product level in the tank during the test within the limitations of the test methods performance standards? N/A
4. If groundwater was present above the bottom of the tank, have the testing procedures accounted for its presence? (required for single wall tanks) N/A
5. If the tightness test is considered a failed test, has the owner/operator been notified of the test results? (Note: Tank owner must report a failed tightness test as a suspected release within 24 hours to UST staff at the appropriate Ecology office. N/A

*LWP*

*LWP*

*LWP*

*LWP*

*LWP*

## III. TANK INFORMATION CHECKLIST

1. Tank ID Number (tank name registered with Ecology)	1	2				
2. Date Installed	1/7/1971	1/7/1971				
3. Tank capacity in gallons	10000	10000				
4. Last substance stored	Avgas	Regular				
5. Number of tank compartments	1	1				
6. Tank type (S) Single Wall; (D) Double Wall; (P) Partitioned	SW	SW				
7. Is overfill device present? (Yes/No)	DTFV = Drop Tube Flapper Valve	DTFV = Drop Tube Flapper Valve				
Tank ID associated to each tank	1	2				
8. Percentage of product in tank during test? (Volume % must comply with test method certification requirements)						
9. The test method used can detect a leak of how many GPH?	.05	.05	.05	.05	.05	.05
10. The numerical tank test results are? (In gallons per hour)						
11. Based on evaluating test results and conducting any retesting as necessary as per test protocol to obtain conclusive test results; the test results are?						

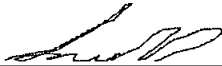
**IV. LINE AND LEAK DETECTOR INFORMATION**

Tank ID associated to each line	1	2				
1. Piping Type: (S) Single Wall; (D) Double Wall	Single	Single				
2. Pump Type: (T) Turbine; (S) Suction	Pressure	Pressure				
3. (a) If turbine is leak detector present (Yes/No)	Yes	Yes				
If present, was lead seal intact (Yes/No)	No	No				
(b) If suction, check valve located at: (T) tank; (P) pump	N/A	N/A				
4. The numerical line test results are? (gallons per hour)	.00000	.00000				
5. Line tightness test results? (Pass/Fail)	Pass	Pass				
Tank ID associated to each leak detector	2	1				
Leak Detector Test Results (Pass/Fail)	Pass	Pass				

**V. REQUIRED SIGNATURES**

I hereby attest, that I have been the Certified Supervisor present during the above listed testing activities, and to the best of my knowledge they have been conducted in compliance with all applicable state and federal laws, regulations and procedures, pertaining to underground storage tanks.

12/09/2015



Scott Pike

Date

Signature of Certified Supervisor

Printed Name

Date

Signature of Tank Owner/Authorized Representative

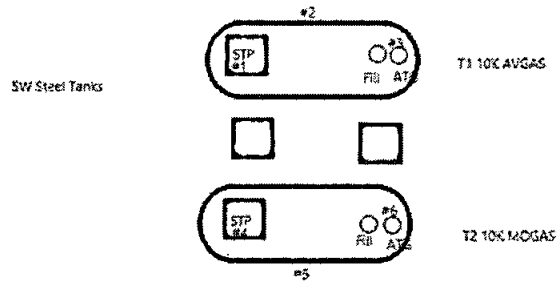
Printed Name

## Site Map

**Customer Name:** AJ Eisenberg Airport    **Site Name:** Oak Harbor Airport

**Site Address:** 1140 Monroe Landing, Oak Harbor

**Job Number:** 50814



START IN-TANK LEAK TEST  
TEST BY PROGRAMMED TIME  
AUG 17, 2015 11:00 PM

TEST LENGTH 4 HOURS

T 1:100LL  
VOLUME = 3721 GALS  
ULLAGE = 6405 GALS  
90% ULLAGE = 5392 GALS  
TC VOLUME = 3693 GALS  
HEIGHT = 37.54 INCHES  
→ WATER VOL = 0 GALS  
→ WATER = 0.00 INCHES  
TEMP = 70.0 DEG F

32 V  
39 A

START IN-TANK LEAK TEST  
TEST BY PROGRAMMED TIME  
AUG 17, 2015 11:00 PM

TEST LENGTH 4 HOURS

T 2:MOGAS  
VOLUME = 1221 GALS  
ULLAGE = 8905 GALS  
90% ULLAGE = 7892 GALS  
TC VOLUME = 1213 GALS  
HEIGHT = 16.92 INCHES  
→ WATER VOL = 0 GALS  
→ WATER = 0.00 INCHES  
TEMP = 68.4 DEG F

STOP IN-TANK LEAK TEST  
T 1:100LL  
AUG 18, 2015 3:00 AM

AIR INTL  
2G MONROE LANDING  
OAK HARBOR WA 98277  
70743697405001

AUG 18, 2015 3:00 AM

LEAK TEST REPORT

T 1:100LL  
PROBE SERIAL NUM 183106

TEST STARTING TIME:  
AUG 17, 2015 11:00 PM

TEST LENGTH = 4.0 HRS  
STRT VOLUME = 3692.1 GAL

LEAK TEST RESULTS  
0.720 GAL/HR TEST PASS



## Baughner, Brittany (ECY)

---

**From:** Leslie Beach [leslieb@itltd.net]  
**Sent:** Tuesday, August 04, 2015 2:31 PM  
**To:** Baughner, Brittany (ECY)  
**Subject:** RE: UST #2270 Inspection

Hi Brittany,

That's odd, Alan may be speaking only about one of the tanks, the one we keep Mogas in (92 octane ethanol free, some planes can use that), that doesn't sell as quickly, and Alan does take care of ordering that fuel. The Avfuel however, I always order a full load for the tank we keep Avfuel in, and we go through that rather quickly- there isn't enough time for that fuel to go stale – so that doesn't make sense, but I will make sure enough fuel is maintained in the tanks for the printouts.

Thank you for the information, I appreciate it ☺

Sincerely,

Leslie Beach  
AJ Eisenberg Airport  
417 2nd Avenue West  
Seattle, WA 98119  
(206) 479-2260  
(206) 600-7803 FAX  
leslieb@itltd.net

---

**From:** Baughner, Brittany (ECY) [mailto:bbau461@ECY.WA.GOV]  
**Sent:** Tuesday, August 04, 2015 2:06 PM  
**To:** Leslie Beach  
**Subject:** RE: UST #2270 Inspection

Good afternoon Leslie,

- 1) No I will not be visiting that location on the 15<sup>th</sup> so photos would be great.
- 2) The site needs a designated A/B operator. From what I understand Allen is fully responsible for anything fuel related so he seems to be the one to be certified(primary responsibility for the operation and maintenance of UST systems). However, if he does not plan on staying very long I would recommend that someone else gets A/B certified and then they can C train any new hires. As of now, the certification does not have an expiration date.

- 3) Alan told me that he rarely fills the tanks because he doesn't want fuel to be sitting in there for a long period of time and "go stale" so to speak he wants "fresh" fuel for the airplanes. The Veeder Root system you are using needs a minimum amount of fuel in the tank to pass the tests because now you are receiving "low level test error" results on your printouts. You either need to maintain enough fuel in the tanks for passing results, install a CSLD chip that can run continuous tests with low levels of fuel, or switch to statistical inventory reconciliation method. I supplied Allen with information on the statistical method.

Please call me if you have any more questions.

Brittany Baugher  
Underground Storage Tank Inspector  
Dept. of Ecology-NWRO: TCP/UST  
Work (425) 649-7149  
Cell (425) 749-9738  
Fax (425) 649-7161  
[brittany.baugher@ecy.wa.gov](mailto:brittany.baugher@ecy.wa.gov)

---

**From:** Leslie Beach [<mailto:leslieb@itltd.net>]  
**Sent:** Tuesday, August 04, 2015 11:51 AM  
**To:** Baugher, Brittany (ECY)  
**Subject:** FW: UST #2270 Inspection

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**From:** Leslie Beach  
**Sent:** Tuesday, July 21, 2015 10:05 AM  
**To:** 'Baugher, Brittany (ECY)'  
**Subject:** RE: UST #2270 Inspection

Hi Brittany,

We are working on these items, I have a few questions:

- 1) Are you going to visit the location on 8/15 or should we submit proof via email with doc/pictures
- 2) Who is required to take the training certification?
- 3) Viol# 12 - I know we always maintain plenty of fuel in our tanks, and Alan does regular readings. I think I need more information on this.

That's all I can think of at the moment, I'm sure I will have more questions.

You can email me back or call.  
Thank you for your help!

Sincerely,

Leslie Beach  
AJ Eisenberg Airport  
417 2nd Avenue West  
Seattle, WA 98119  
(206) 479-2260  
(206) 600-7803 FAX  
[Leslieb@itltd.net](mailto:Leslieb@itltd.net)

STATE OF WASHINGTON  
DEPARTMENT OF ECOLOGY  
Northwest Regional Office • 3190 160th Ave SE • Bellevue, WA 98008-5452 • 425-649-7000  
711 for Washington Relay Service • Persons with a speech disability can call 877-833-6341



From: Baugher, Brittany (ECY) [<mailto:bbau461@ECY.WA.GOV>]  
Sent: Friday, July 10, 2015 1:59 PM  
To: Leslie Beach  
Subject: Re: UST #2270 Inspection

Thanks Leslie attached is a copy of the NONC I left for Allen. Hopefully you and I can work together to resolve these items. If you have one next week maybe we can go over these items over the phone.

Brittany Baugher



Sent from my iPhone

On Jul 6, 2015, at 4:25 PM, Leslie Beach <[leslieb@itltd.net](mailto:leslieb@itltd.net)> wrote:

Hi Brittany,  
I've attached several items: our current tank inspection report and insurance policy information; both Airport Liability and Tank (Pollution) liability. Also our legal entity information and business license specifying the tanks.  
Please let me know if you need any further information from me.



Sincerely,

Leslie Beach  
AJ Eisenberg Airport  
417 2nd Avenue West  
Seattle, WA 98119  
(206) 479-2260  
(206) 600-7803 FAX  
[Leslieb@itltd.net](mailto:Leslieb@itltd.net)

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**From:** Baugher, Brittany (ECY) [<mailto:bbau461@ECY.WA.GOV>]  
**Sent:** Monday, July 06, 2015 3:20 PM  
**To:** AJE  
**Subject:** UST #2270 Inspection  
**Importance:** High

Good afternoon Leslie,

Thank you for leaving me a voicemail providing your email address. Attached is a focus sheet on Preparing for an UST Inspection, a focus sheet on Operator Training, a Class C Operating Training Log, and a Focus sheet on Emergency Signage regarding the UST inspection tomorrow. Based on the tank registration information the owner provided to the Department of Ecology, I have highlighted key paperwork in the Preparing for an UST Inspection Sheet.

Thank you, and please feel free to call me if you have any questions

Brittany Baugher  
Underground Storage Tank Inspector  
Dept. of Ecology-NWRO: TCP/UST  
Work (425) 649-7149  
Fax (425) 649-7161  
[brittany.baugher@ecy.wa.gov](mailto:brittany.baugher@ecy.wa.gov)





# Underground Storage Tank Notice of Non-Compliance (NONC)

UST # 2270

Ecology Inspector(s): <u>Buchan</u>		Inspection Date: <u>7/25/06</u>	
Inspector Phone: <u>(425) 649-7449</u>	FAX: <u>(425) 649-7161</u>	Email: <u>abuc @ecy.wa.gov</u>	
Inspection Type: <input checked="" type="checkbox"/> UST Compliance <input type="checkbox"/> Technical Assistance <input type="checkbox"/> Follow-up <input type="checkbox"/> Other			
Photos Taken <input checked="" type="checkbox"/>	Notice of Penalty Issued <input type="checkbox"/>	Field Citation # _____	
Technical Assistance Materials Provided: <u>WAC's, O3m, Fin. R., ATG'S, Site C/Site A, Temp Chlor</u>			

Site Name: <u>Was Lupien Field</u>	UST ID #: <u>2270</u>
Site Address: <u>1140 Monroe Landing Rd</u>	Mailing Address: _____
Site City: <u>Oak Harbor 98277</u>	Mailing City/State/Zip: _____
Site Contact: <u>Bob Savage</u>	Phone: <u>(360) 929-7379</u>

The Department of Ecology is responsible for overseeing environmental laws that protect human health and the environment in Washington State. During this visit, Ecology observed violations of Chapter 173-360 of the Washington Administrative Code, the Underground Storage Tanks Regulations, which are listed below.

Violation No.	WAC 173-360	Violation
<input type="checkbox"/> 1	130(1)	Operating regulated UST without a valid permit
<input type="checkbox"/> 2	210(2)	Failure of owner/operator to keep and maintain necessary records and/or documentation
<input type="checkbox"/> 3	210(3)	Failure of owner/operator to have necessary records and/or documentation available at the time of inspection
<input type="checkbox"/> 4	305(3)	Failure to provide spill and/or overfill prevention equipment on a new UST system
<input type="checkbox"/> 5	310(4)	Failure to provide spill and/or overfill prevention equipment as an upgrading requirement
<input type="checkbox"/> 6	320(1)	Failure to operate and maintain corrosion protection system to provide continuous protection
<input type="checkbox"/> 7	320(2)(a)	Failure to test cathodic protection system with required frequency
<input type="checkbox"/> 8	320(3)	Failure to inspect impressed current cathodic protection system every 60 days
<input type="checkbox"/> 9	335(1)(b)	Failure to install, calibrate, operate, or maintain release detection method in accordance with manufacturer's instruction
<input checked="" type="checkbox"/> 10	335(2)	Failure to properly monitor tanks and/or piping for releases (monthly monitoring or allowed exceptions)
<input type="checkbox"/> 11	345(6)	Failure to conduct tank release detection in accordance with the particular method used
<input type="checkbox"/> 12	350(2)(a)(i)	Failure to equip pressurized piping with automatic line leak detectors
<input type="checkbox"/> 13	350(2)(a)(ii)	Failure to conduct annual line tightness test or monthly monitoring on pressurized piping
<input type="checkbox"/> 14	350(3)(a)	Failure to meet automatic line leak detector requirements including annual testing
<input type="checkbox"/> 15	350(3)(b)	Failure to conduct line tightness testing in accordance with the requirements
<input type="checkbox"/> 16	350(3)(c)	Failure to meet one of the applicable tank methods for piping release detection
<input checked="" type="checkbox"/> 17	400	Failure of owner/operator to comply with the financial responsibility requirement
<input checked="" type="checkbox"/> 18	<u>130(2)</u>	<u>MBL Compliant</u>
<input checked="" type="checkbox"/> 19	<u>310(2a)</u>	<u>Int. Lining meets 5 : 10 yr insp. Freq</u>
<input type="checkbox"/> 20		



<input type="checkbox"/> 21		
-----------------------------	--	--

UST Site ID# 2270

Violation No.	What Was Observed and Action(s) Required to Achieve Compliance	Submit to Ecology by
10	Failure to monitor tanks for monthly release Detection	
	Check for .2 gph pass on 2 tanks and Save one	
	pass per month for 5 yrs	
17	Insurance - (Have insurance on <sup>(2)</sup> tanks before	
	next product delivery) or 1/25/07	1/25/07
18	MBL Compliant (Before next product Delivery or	1/25/07
	1/25/07)	
19	Interior Lining lining (inspected by 1/25/07 or	1/25/07
	Before next product Delivery)	

**Instructions:** The actions identified in this NONC are necessary in order to be in compliance with Washington Underground Storage Tank Regulations (Chapter 173-360 WAC). If you have questions about this NONC, please call the Ecology Inspector. If you cannot complete the required actions by the above date(s), please submit a written request for an extension to the Ecology Inspector for your site by 1/25/07. To be considered for an extension please include the following information: reason the extension is needed, any steps already taken, and a description of the work remaining to be completed and anticipated completion date. You will be notified if an extension can be granted.

Before next product Delivery

Upon completion of the required actions, submit required documentation to the Ecology Inspector at the office indicated below.

- ☐ Central Regional Office, 15 W Yakima Ave, Suite 200, Yakima WA 98902, (509) 575-2490, FAX (509) 575-2809
- ☐ Eastern Regional Office, N 4601 Monroe, Spokane WA 99205-1295, (509) 329-3400, FAX (509) 329-3572
- ☒ Northwest Regional Office, 3190 160th Ave SE, Bellevue WA 98008-5452, (425) 649-7000, FAX (425) 649-7098 7161
- ☐ Southwest Regional Office, PO Box 47775, Olympia WA 98504-7775, (360) 407-6300, FAX (360) 407-6305
- ☐ Headquarters Office, PO Box 47600, Olympia, WA 98504-7600, (360) 407-7170, FAX (360) 407-7154

This document is a notice of non-compliance (NONC). Ecology is not required to issue you a NONC before issuing a penalty or enforcement order. However, by issuing this NONC, Ecology hopes to work with you to achieve compliance. This NONC is not an enforcement order and is not appealable. If a penalty accompanies this NONC, the penalty is appealable. Appeal directions are found on the back of the penalty.

Failure to comply with this NONC may result in further enforcement action.

Ecology Inspector Signature: [Signature] Date: 7/25/06

Owner/Operator Signature: [Signature] Date: 7/25/06

Owner/Operator Print Name: Robert L. Savage, Receiver for the Oak Harbor Airport





Washington State Department of Ecology  
Underground Storage Tank (UST) Program  
**NOTICE OF NON-COMPLIANCE**

This action does not limit the Department from other enforcement actions as deemed necessary.

UST ID #: 2270 Date of Inspection: 7/7/15 Region: NWRO  
Responsible Party: Allen Hudgins  
Site Name: Air International Contact Name: Allen Hudgins/Leslie Beach  
Site Address: 1140 Monrovia Landing Rd Contact Phone: 360-672-5677  
City: Oak Harbor WA 98271 Contact E-mail: leslieb@itctd.net

☐ Notice of Penalty Issued #

☐ Notice of Delivery Prohibition Issued #

Viol. #	WAC 173-360	VIOLATION(S)
1	<input type="checkbox"/> 130(2)(d), 190	Regulated UST without a displayed facility compliance tag and/or tank endorsement on Business License
2	<input type="checkbox"/> 165	Failure to comply with delivery prohibition/red tag requirements
3	<input type="checkbox"/> 200(6)	Failure to report changes to UST system within 30 days, including temporary closure
4	<input type="checkbox"/> 210(2)	Failure of owner/operator to keep and maintain necessary records and/or documentation
5	<input type="checkbox"/> 210(3)	Failure of owner/operator to have necessary records and/or documentation available at time of inspection
6	<input type="checkbox"/> 305(2), 310(3)	Failure to protect steel tanks and/or piping from corrosion (i.e. steel in contact with soil)
7	<input type="checkbox"/> 305(3), 310(4)	Failure to provide and/or maintain spill and/or overfill prevention equipment
8	<input type="checkbox"/> 320(1)	Failure to operate and maintain corrosion protection system
9	<input checked="" type="checkbox"/> 320(2)(a)	Failure to test cathodic protection (CP) system with required frequency
10	<input type="checkbox"/> 320(3)	Failure to inspect impressed current (CP) system every 60 days and ensure equipment is running properly
11	<input type="checkbox"/> 335(1)(b)	Failure to install, calibrate, operate, or maintain release detection method per manufacturer's instructions
12	<input checked="" type="checkbox"/> 335(2), 345(6)	Failure to properly monitor tanks and/or piping for releases
13	<input type="checkbox"/> 350(2)(a)(i)	Failure to equip pressurized piping with automatic line leak detectors
14	<input type="checkbox"/> 350(2)(a)(ii)	Failure to conduct annual line tightness test or monthly monitoring on pressurized piping
15	<input type="checkbox"/> 350(3)(a)	Failure to meet automatic line leak detector requirements, including annual testing
16	<input type="checkbox"/> 350(2)(b)	Failure to conduct line tightness test or monthly monitoring on suction piping
17	<input type="checkbox"/> 380	Failure to meet temporary closure requirements for UST systems
18	<input type="checkbox"/> 400	Failure to comply with financial responsibility requirements
19	<input checked="" type="checkbox"/> 700-760	Failure to comply with operator training requirements
20	<input type="checkbox"/> 800-820	Failure to comply with secondary containment, including interstitial monitoring for tanks and lines
21	<input type="checkbox"/> 830	Failure to comply with under dispenser containment requirements
22	<input type="checkbox"/>	
23	<input type="checkbox"/>	
24	<input type="checkbox"/>	



VIOL. #	OBSERVATIONS & ACTIONS REQUIRED TO RESOLVE UST VIOLATIONS	DUE DATE
19	Submit proof of operator AIB training certification	15 Aug
9	Submit copy of 2011 CPL (corrosion protection) test	2015
12	If you are <del>now</del> using the 0.2 gph ATG test method for tank monthly monitoring, you must keep one passing result per tank per month. With low level test error results, either maintain enough fuel in your tanks for passing results, install a CSLD chip, or switch to SIR (statistical inventory reconciliation). Submit proof of passing results for July & August 2015 for 2 tanks.	
19	Submit proof emergency sign is posted	

**INSTRUCTIONS:**

1. You must complete the actions identified to resolve the UST violations listed on page 1.
2. To request an extension, **submit a written request** to the Ecology inspector by \_\_\_\_\_.

You must include:

- Reason extension is needed.
- Steps already taken and a description of the work that remains to be completed.
- Anticipated completion date of remaining work.

- A notice of Non-Compliance (NONC) is not an enforcement order and, therefore, **not appealable**.
- If a Field Penalty or Notice of Delivery Prohibition accompanies a NONC, the **Field Penalty and/or Notice of Delivery Prohibition are appealable**.
- Failure to comply with requirements set forth in a NONC may result in enforcement action.

**SUBMIT REQUIRED DOCUMENTATION TO THE REGIONAL OFFICE INDICATED.**

Central Regional Office  
15 W Yakima Ave, Ste 200  
Yakima, WA 98902  
Phone: (509) 575-2490  
Fax: (509) 575-2809

Eastern Regional Office  
4601 N Monroe St  
Spokane, WA 98205  
Phone: (509) 329-3400  
Fax: (509) 329-3572

NW Regional Office  
3190 160 Ave SE  
Bellevue, WA 98008  
Phone: (425) 649-7000  
Fax: (425) 649-7161

SW Regional Office  
PO Box 47775  
Olympia, WA 98504  
Phone: (360) 407-6300  
Fax: (360) 407-6305

Headquarters  
PO Box 47600  
Olympia, WA 98504  
Phone: (360) 407-7170  
Fax: (360) 407-7154

Inspector:

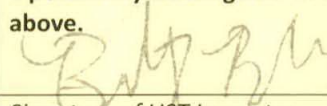
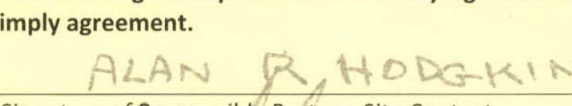
Brittany Baugher

Phone:

425-649-7149

Email:

bbau461@ecy.wa.gov

I personally investigated or observed the violation(s) noted above.		I acknowledge receipt of this action. My signature does not imply agreement.	
 Signature of UST Inspector		 Signature of Responsible Party or Site Contact	
Date 7/15/15		Date 7/15/15	
Printed Name of UST Inspector Brittany Baugher		Printed Name of Responsible Party or Site Contact Alan R. Hodgkins	

If you need this document in an alternative format call the Toxics Cleanup Program at (360) 407-7170. Persons with hearing loss, call 711 for Washington Relay Service. Persons with a speech disability, call 877-833-6341.





Washington State Department of Ecology  
Underground Storage Tank (UST) Program  
**NOTICE OF NON-COMPLIANCE**

This action does not limit the Department from other enforcement actions as deemed necessary.

UST ID #: 2270 Date of Inspection: Oct. 1, 2013 Region: NWRO  
Responsible Party: Joel Eisenberg  
Site Name: Air International Contact Name: Pete Morgan  
Site Address: 1140 Monroe Landing Rd Contact Phone: (360) 929-6802  
City: Oak Harbor, WA 98277 Contact E-mail: \_\_\_\_\_

☒ Notice of Penalty Issued # 4477 bucket # 10314 ☐ Notice of Delivery Prohibition Issued # \_\_\_\_\_

Viol. #	WAC 173-360	VIOLATION(S)
1	<input type="checkbox"/> 130(2)(d), 190	Regulated UST without a displayed facility compliance tag and/or tank endorsement on Business License
2	<input type="checkbox"/> 165	Failure to comply with delivery prohibition/red tag requirements
3	<input type="checkbox"/> 200(6)	Failure to report changes to UST system within 30 days, including temporary closure
4	<input checked="" type="checkbox"/> 210(2)	Failure of owner/operator to keep and maintain necessary records and/or documentation
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18	<input checked="" type="checkbox"/> 400	Failure to comply with financial responsibility requirements
19	<input type="checkbox"/> 700-760	Failure to comply with operator training requirements
20	<input type="checkbox"/> 800-820	Failure to comply with secondary containment, including interstitial monitoring for tanks and lines
21	<input type="checkbox"/> 830	Failure to comply with under dispenser containment requirements
22	<input type="checkbox"/>	
23	<input type="checkbox"/>	
24	<input type="checkbox"/>	



[illegible]

**INSTRUCTIONS:**

1. You must complete the actions identified to resolve the UST violations listed on page 1.
2. To request an extension, **submit a written request** to the Ecology inspector by 11-15-2013.

**You must include:**

- Reason extension is needed.
- Steps already taken and a description of the work that remains to be completed.
- Anticipated completion date of remaining work.

- A notice of Non-Compliance (NONC) is not an enforcement order and, therefore, **not appealable**.
- If a Field Penalty or Notice of Delivery Prohibition accompanies an NONC, **the Field Penalty and/or Notice of Delivery Prohibition are appealable**.
- Failure to comply with requirements set forth in an NONC may result in enforcement action.

**SUBMIT REQUIRED DOCUMENTATION TO THE REGIONAL OFFICE INDICATED.**

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Spokane, WA 98205  
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Fax: (509) 329-3572



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Bellevue, WA 98008  
Phone: (425) 649-7000  
Fax: (425) 649-7161

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PO Box 47775  
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Phone: (360) 407-6300  
Fax: (360) 407-6305

**Headquarters**  
PO Box 47600  
Olympia, WA 98504  
Phone: (360) 407-7170  
Fax: (360) 407-7154

**Inspector:**

**Phone:****Email:**

<p>I personally investigated or observed the violation(s) noted above.</p> <p> 10-8-2013</p> <p>Signature of UST Inspector Date</p> <p>Brenda Yager</p> <p>Printed Name of UST Inspector</p>	<p>I acknowledge receipt of this action. My signature does not imply agreement.</p> <p> 10-8-2013</p> <p>Signature of Responsible Party or Site Contact Date</p> <p>mailed to Owner</p> <p>Printed Name of Responsible Party or Site Contact</p>
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*If you need this document in an alternative format call the Toxics Cleanup Program at (360) 407-7170. Persons with hearing loss, call 711 for Washington Relay Service. Persons with a speech disability, call 877-833-6341.*



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UST 2270



State of Washington  
Department of Revenue  
Compliance Procedures & Admin.  
PO Box 47473  
Olympia, WA 98504-7473

REGISTRATION NO. 600 037 706

1-2

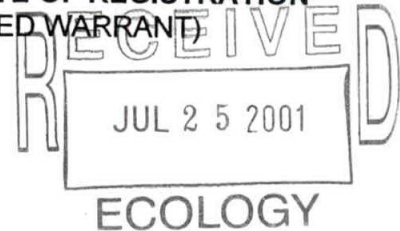
## BEFORE THE DEPARTMENT OF REVENUE OF THE STATE OF WASHINGTON

IN THE MATTER OF THE REVOCATION OF  
THE CERTIFICATE OF REGISTRATION OF

HARBOR AIRLINES INC  
1302 26<sup>TH</sup> AVE NW  
GIG HARBOR WA 98335-7841

}

ORDER REVOKING  
CERTIFICATE OF REGISTRATION  
(FILED WARRANT)



Taxpayer

WHEREAS, IT APPEARS UPON THE RECORDS OF THE DEPARTMENT OF REVENUE OF THE STATE OF WASHINGTON THAT TAX WARRANT NO. 019248A WAS ISSUED AGAINST THE ABOVE TAXPAYER ON NOVEMBER 29, 2000, FOR UNPAID TAX, INCREASE AND/OR PENALTIES UNDER AUTHORITY OF RCW 82.32.210 IN THE AMOUNT OF \$65,921.63; THAT SAID WARRANT WAS FILED MORE THAN THIRTY DAYS PRIOR HERETO WITH THE CLERK OF THE SUPERIOR COURT OF PIERCE COUNTY, CAUSE NO.00-9-92651-1, AND THAT SAID WARRANT REMAINS UNPAID;

NOW THEREFORE, BE IT ORDERED BY THE DEPARTMENT OF REVENUE OF THE STATE OF WASHINGTON, PURSUANT TO THE POWERS CONFERRED UPON IT UNDER RCW 82.32.215, THAT THE CERTIFICATE OF REGISTRATION OF THE ABOVE TAXPAYER BE AND THE SAME IS HEREBY REVOKED.

IT IS FURTHER ORDERED, THAT A COPY OF THIS ORDER BE POSTED IN A CONSPICUOUS PLACE AT THE MAIN ENTRANCE TO SAID TAXPAYER'S PLACE OF BUSINESS AND REMAIN POSTED UNTIL SUCH TIME AS SAID WARRANT HAS BEEN PAID.

WITNESS, THE DEPARTMENT OF REVENUE OF THE STATE OF WASHINGTON AND THE SEAL OF SAID DEPARTMENT, DATED MAY 29, 2001.



BY

*Mark Lewis*

Authorized Representative  
MARK LEWIS  
REGIONAL COMPLIANCE MANAGER

NOTICE: Section 82.32.290 of the Revised Code of Washington provides that it shall be unlawful for any person to engage in business after revocation of a Certificate of Registration. Persons violating this provision shall be guilty of a Class C felony. All cases will be immediately referred to the Prosecuting Attorney.