# Arkansas Department of Environmental Quality
# UST Compliance Inspection Checklist

## A. Ownership of Tank(s)

Owner Name (Corporation, individual, Public Agency, or other entity): Big Jims/ Big Red LLC
Street Address: P.O. Box 21177
County: Jefferson
City: White Hall State: Arkansas Zip Code: 71602
Area Code: 870 Phone Number: 247-1607
Contact Person At UST Location: Buddy Phone #

## B. Location of Tank(s)

(If Same as Section 1, check here ☐)
Facility Name or Company Site identifier, as applicable: Big Jim's Big Red
Street Address or State Road, as applicable: 8006 Dollarway Road
City (nearest): White Hall State: Arkansas Zip Code: 71602
County: Jefferson
Number of Tanks at This Location: 3
Facility ID#: 35000034

## C. Tank Information

| (1) Tank(s) presently in use | Tank# 1 | Tank# 2 | Tank# 3 | Tank# |
|---|---|---|---|---|
| (2) If not in use, date last used | | | | |
| (3) If emptied, verify 1" or less of product in tank | | | | |
| (4) Month and Year Tank Installed (E-estimate or K-known) | 1974 | 1974 | 1978 | |
| (5) Material of Construction (E-estimate or K-known) | STEEL | STEEL | STEEL | |
| (6) Capacity of Tank (in gallons)(E-estimate or K-known) | 8,000 | 8,000 | 3,000 | |
| (7) Substance Stored (E-estimate or K-known) | Gasoline | Gasoline | Gasoline | |

## D. Release Detection For Tanks

**Check the release detection method(s) used for each tank or N/A if none required.**

| | | | | |
|---|---|---|---|---|
| (1) Manual Tank Gauging (only for tanks under 1,000 gal.) | ☐ | ☐ | ☐ | ☐ |
| (2) Manual Tank Gauging and Tank Tightness Testing (only for tanks under 2,000 gal.) | ☐ | ☐ | ☐ | ☐ |
| (3) Tank Tightness Testing and Inventory Control | ☐ | ☐ | ☐ | ☐ |
| (4) Automatic Tank Gauging | ☐ | ☐ | ☐ | ☐ |
| (5) Vapor Monitoring | ☐ | ☐ | ☐ | ☐ |
| (6) Groundwater Monitoring | ✔ | ✔ | ✔ | ☐ |
| (7) Interstitial Monitoring | ☐ | ☐ | ☐ | ☐ |
| (8) Other approved method (write in name of method) | ☐ | ☐ | ☐ | ☐ |

## E. Release Detection For Piping

Check the release detection method(s) used for piping.

| | | | | | |
|---|---|---|---|---|---|
| (1) Check Type of Piping for each Tank | Pressure Pipe | ✔ | ✔ | ✔ | ☐ |
| | Suction Pipe | ☐ | ☐ | ☐ | ☐ |
| (2) FOR PRESSURE PIPING: Automatic Line Leak Detectors, and (check one) | | ✔ | ✔ | ✔ | ☐ |
| (a) Vapor Monitoring | | ☐ | ☐ | ☐ | ☐ |
| (b) Groundwater Monitoring | | ✔ | ✔ | ✔ | ☐ |
| (c) Secondary Containment With Monitoring | | ☐ | ☐ | ☐ | ☐ |
| (d) Line Tightness Testing | | ☐ | ☐ | ☐ | ☐ |

## F. Financial Assurance

(1) Petroleum Storage Tank Trust Fund (PSTTF)? (circle one) Yes ✔ No ☐ N/A ☐

(2) Can PSTTF deductible be satisfied? Yes ✔ No ☐ N/A ☐

If No or N/A for PSTTF, mechanism for meeting financial responsibility?

## G. Site Information

General site observations and comments (vicinity observations, ground water level, etc.)

I, Randy Fowler (Print Name), certify that I have inspected the above named facility on Jul 10, 2007 (Date/Time)

Inspector's Signature: R Fowler Date: Jul 10, 2007