

N60200.AR.002434
NAS CECIL FIELD, FL
5090.3a

LIMITED CLOSURE SUMMARY REPORT FOR BUILDING 334 UNDERGROUND OIL-WATER
SEPARATOR 334OWS NAS CECIL FIELD FL
5/18/2000
NAVAL FACILITIES ENGINEERING COMMAND SOUTHERN DIVISION



Department of Environmental Protection

Twin Towers Office Building • 2600 Blair Stone Road • Tallahassee, Florida 32399-2400

DEP Form 62-761.900(8)
Form Title: Limited Closure
Summary Report
Effective Date: July 13, 1998

Limited Closure Summary Report

This form is required for facilities that have sites with documented contamination requiring a site assessment in accordance with Chapter 62-770, F.A.C. This includes those facilities that are eligible for the Early Detection Incentive Program (EDI), the Florida Petroleum Liability and Restoration Insurance Program (FPLRIP), and the Petroleum Cleanup Participation Program (PCPP), pursuant to Sections 376.3071 and 376.3072, F.S. Documentation of procedures followed, and results obtained during closure shall be reported in this form, along with any attachments. This form shall be submitted to the County within 60 days of completion of the closure in accordance with Section A of the "Storage Tank System Closure Assessment Requirements."

Complete All Applicable Blanks. Please Print or Type

General Information

(Tank # 334 OWS)

Date <u>5/18/00</u>	FDEP Facility ID Number <u>N/A</u>	County <u>Duval</u>
Facility Name <u>Naval Air Station Cecil Field</u>		Facility Telephone #: ()
Facility Address: <u>13200 Normandy Blvd., Building 334</u>		
Owner or Operator Name: <u>U.S. Government/U.S. Navy</u>		Owner/Operator phone #: <u>(904) 778-5440</u>
Mailing Address: <u>Caretaker Site Office, South Div NAVFACENGCOM P.O. Box 150853 Jacksonville, FL 32215-0853</u>		

Storage Tank System Closure Information

1. Were the storage tanks(s): (Check one or both)

<input type="checkbox"/> Aboveground	<input checked="" type="checkbox"/> Underground <u>500-gal oil-wtr separator</u>
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2. General System Information

Types of Products Stored: <u>Waste Oil</u>	Number of Tanks Closed <u>1</u>	Age(s) of Tanks <u>unk.</u>
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3. Was the Limited Closure Summary Report Performed as a Result of: (check one or more)

<input checked="" type="checkbox"/> Tank Systems Removal?	<input type="checkbox"/> Spill Containment Installation?	<input type="checkbox"/> Change in Storage to a Non-Regulated Substance?
<input type="checkbox"/> Tank Systems Closed in Place?	<input type="checkbox"/> Dispenser Liners Installation?	<input type="checkbox"/> Release Prevention Barrier Installation?
<input type="checkbox"/> Piping Sump Installation?	<input type="checkbox"/> Secondary Containment Installation?	<input type="checkbox"/> Other? (please explain)

4. Please Check Yes or No to the following:

a. Was there previously reported contamination discovered on site? If yes, was	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
1. A Discharge Report Form submitted to the County?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2. An investigation performed in accordance with Rule 62-761.820, F.A.C.?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
b. Is the depth to groundwater less than 20 feet?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
c. Are there monitoring wells on site? If yes, were they	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
1. Groundwater monitoring wells?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
2. Vapor monitoring wells?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
3. Used for closure assessment sampling?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
4. Properly closed?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
5. Retained for site assessment purposes?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
d. If tanks were replaced, were contaminated soils returned to the tank excavation?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Sam M. R.

Signature of owner or operator

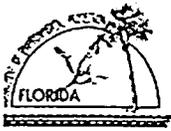
Signature of person performing Limited Closure Assessment

Name of person performing Limited Closure Assessment

(date) _____ (date) _____

5/18/00

Affiliation Navy RAC



Underground Storage System Installation and Removal Form for Certified Contractors

Pollutant Storage Systems Contractor as defined in Section 489.113, Florida Statutes (certified contractors as defined in Section 62-761.200, Florida Administrative Code) shall use this form to certify that the installation, replacement or removal of the underground storage tank system(s) located at the address listed below was performed in accordance with Department Reference Standards. This includes system components such as dispenser liners, piping sumps, and overfill protection devices.

General Facility Information

(Tank # 3340WS)

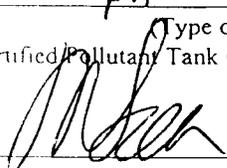
Facility Name: <u>Naval Air Station Cecil Field</u>	DEP Facility Identification No.: <u>N/A</u>
Street Address (physical location): <u>13200 Normandy Blvd., Building 334</u>	
County: <u>Duval</u>	Telephone #: () <u>N/A</u>
Owner Name: <u>U.S. Government / U.S. Navy</u>	Telephone #: (904) <u>778-5440</u>
Owner Address: <u>Caretaker Site Office, South Div NAVFACENGCOCM, P.O. Box 150853 Jacksonville, FL 32215-0853</u>	

Storage Tank System Information

Number of Tanks Installed: <u>N/A</u>	Number of Tanks Removed: <u>one (1)</u>
Date Work Initiated: <u>9/22/99</u>	Date Work Completed: <u>10/1/99</u>
Tank(s) Manufactured by: <u>N/A</u>	
Description of work Completed: <u>Removal of one (1) 500-gal U/G oil-water separator and associated piping</u>	

Certification

I hereby certify and attest that I am familiar with the facility that is registered with the Florida Department of Environmental Protection; that to the best of my knowledge and belief, the storage tank system installation, replacement or removal at this facility was conducted in accordance with Chapter 489, Florida Statutes, Section 376.303, Florida Statutes, and Chapter 62-761, Florida Administrative Code, and its adopted reference standards and documents for underground storage tank systems.

Joseph Scech
(Type or Print)
 Certified/Pollutant Tank Contractor Name

 Certified Tank Contractor Signature

PC-COS6763
 PSSC Number
 Pollutant Storage Systems
 Contractor License Number
5/12/00
 Date

Alle J. [Signature]
 Field Supervisor Name

5-12-00
 Date

The owner or operator of the facility must register the tanks with the Department upon completion of the installation. The installer must submit this form to the County no more than 30 days after the completion of installation, replacement, or removal of a storage tank