



OREGON DEPARTMENT OF ENVIRONMENTAL QUALITY
Underground Storage Tank Program

HEATING OIL TANK SERVICES
SERVICE PROVIDER REPORT CERTIFICATION

GENERIC REMEDY HEATING OIL CLEANUP REPORT FORM

Complete this report and submit it to the DEQ NWR Eastside Office (1550 NW Eastman Parkway, Suite 290, Gresham, Oregon, 97030) within sixty (60) days from the date the release from a residential heating oil tank is cleaned up.

General Information

Property Owner Name: DEQ Cleanup File No.:

Property Address:

City/State/Zip Code: County:

Owner Phone Number:

Owner Mailing Address (if different):

Name of Person Reporting Release:

Phone Number (if different from Owner):

Date the release was originally suspected confirmed (sight, smell, test). (check one)

Date the release was reported to DEQ. Name of DEQ person contacted: Note: Confirmed releases must be reported within 72-hours by the service provider or the tank owner who performed the work..

Date the tank was removed or decommissioned in-place (check one).

Approximate size of tank: gallons

If the tank was filled in-place, what type of inert fill material was used? How much? gallons lbs. (check one)

Date cleanup started.

Date cleanup completed.

Approximate square footage of home on property where the release has occurred.

Initial Abatement Information (check or the appropriate answer)

- 1. Yes No A visual inspection of the release has been made and immediate actions taken to prevent any further release or migration of heating oil into surrounding soils or groundwater.
2. Yes No Any fire, explosion, and/or vapor hazards in soil or groundwater have been identified and mitigated.
Yes No NA Monitoring for hazards has continued beyond initial identification.(check one)

**Initial Abatement Information** (check  the appropriate answer)

3.  Yes  No  NA As much heating oil and sludge as possible has been removed from the tank.  
Gallons removed: \_\_\_\_\_  
Name of oil  **recycling** or  **disposal** company (check  one): \_\_\_\_\_
4.  Yes  No Hazards posed by contaminated soil that has been excavated or exposed have been remedied.  
Note: Contaminated soil cannot be stored on-site for more than 30 days without a permit from DEQ.
5.  Yes  No Free product has been observed in the  **tank pit** and/or  **groundwater** (Check  any that apply).  
Note: Any free product observed must be removed and properly treated/disposed. **Use of the Generic Remedy for Heating Oil Tank Releases is not appropriate if free product is present.**
6.  Yes  No Groundwater has been encountered during tank decommissioning or cleanup actions taken to-date.  
Note: DEQ must be notified immediately when groundwater is encountered at any time.  
 Yes  No Water in the tank excavation was encountered and pumped out, but did not recharge after 24 hours.  
**Use of the Generic Remedy for Heating Oil Tank Releases is not appropriate if water recharges into the excavation 24-hours after initial pumping.**
7. How was the release initially discovered? (Check  any boxes that are correct)  
 During tank decommissioning  
 During a site assessment not associated with tank decommissioning (e.g. for property transaction, etc.)  
Other. Describe: \_\_\_\_\_
8. What observations were made about the tank condition when it was removed from the excavation or decommissioned in-place? Describe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
9. How much contaminated soil was removed? \_\_\_\_\_ cubic yards What was done with the contaminated soil?  
(Check  any boxes that apply)  
Disposed of at: \_\_\_\_\_ (name of disposal company)  
Treated off-site at: \_\_\_\_\_ (name of treatment company)  
Treated on-site. ATTACH copy of Solid Waste Letter of Authorization permit approved by DEQ.  
 Yes  No On-site treatment of contaminated soil is complete. (check  one)
10. How was the cleanup conducted? Describe actions taken during cleanup and note any unusual circumstances:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
11. Note **highest** TPH soil sample result prior to any excavation of soil: \_\_\_\_\_ mg/kg TPH-Dx
12. The following information must be ATTACHED as part of this report (clearly label each attachment as listed below):

Attachment  
Label ID

- A Site map, drawn roughly to scale, showing the location of all buildings on the property and on adjacent properties and the location of the heating oil tank. Include distances in feet between objects.
- B Sketch of the property that clearly shows the sample locations and depths of all soil samples collected and identifies each location and sample with a unique sample identification code. An additional cross-section diagram may be necessary to clearly show sample locations at-depth.
- C Copies of chain-of-custody forms for all soil samples collected.  
Note: Chain-of-custody forms should include the date, time, and location of each sample collected; the name and company of the person collecting the samples; a description of how the samples were collected, stored, and shipped to the laboratory; and note any problems encountered during the cleanup or sampling process that may have affected sample integrity. Forms should clearly state the address of where samples were collected as a unique identifier.
- D Copies of all laboratory data reports. Test methods used, **including method reporting limits**, must be included. Include data for all samples, even if data is not used in summary (question #13).

- E Copies of all receipts or permits related to the disposal of any \_\_\_\_\_ **oil / sludge**, \_\_\_\_\_ **free product**, \_\_\_\_\_ **water** pumped from the excavation, \_\_\_\_\_ **contaminated soil**, and/or decommissioned \_\_\_\_\_ **tank** and \_\_\_\_\_ **pipng** (check  all that apply).
- F Any photographs taken at the time of the heating oil tank decommissioning and cleanup that depict major activities (e.g. tank as it is removed to note presence or absence of pits or holes, contaminated soil handling, excavation, tank/excavation in relation to home, unusual circumstances, etc.)

13. Provide a summary of the concentrations measured in the FINAL round of soil samples from each sample location that clearly show the extent and magnitude of the contamination.  
 Note: Write in the specific unit of measurement for each contaminant if different. Write in "N/A" if sample not analyzed for TPH-Dx constituents. Use additional pages as necessary to report final summary results.

Sample ID	Location ID	TPH-Dx Conc.	Benzene Conc.	Ethylbenzene Conc.	Naphthalene Conc.
_____	_____	_____ mg/kg	_____ ppm	_____ ppm	_____ ppm
_____	_____	_____ mg/kg	_____ ppm	_____ ppm	_____ ppm
_____	_____	_____ mg/kg	_____ ppm	_____ ppm	_____ ppm
_____	_____	_____ mg/kg	_____ ppm	_____ ppm	_____ ppm
_____	_____	_____ mg/kg	_____ ppm	_____ ppm	_____ ppm
_____	_____	_____ mg/kg	_____ ppm	_____ ppm	_____ ppm

**Final Report Checklist and Signature**

All of the following boxes must be checked indicating that the action has been taken and/or procedures followed correctly.  
**Completing this information does not substitute for service provider checklist certification requirements in OAR Chapter 340, Division 163.** The person signing this report must ensure that this information is correct. "Guidance" refers to the Heating Oil Tank Generic Remedy Guidance Document.

- The cleanup project is for a release from a residential underground heating oil tank (a tank used primarily for single-family dwelling purposes); OR
- The cleanup project is for a commercial underground heating oil tank. On a separate attachment, describe why use of the generic remedy for residential tanks is appropriate to use for the commercial tank.
- A verbal report of the discovery of contamination from a leaking heating oil tank was made to the appropriate DEQ regional office.
- The underground tank was decommissioned following the procedures in Appendix 2 of the Guidance.
- A site assessment was conducted and the magnitude and extent of the contamination was determined in accordance with the procedures outlined in Appendix 3 of the Guidance.
- All samples were collected in accordance with methods described in OAR 340-122-0345.
- This project meets all of the Qualifying Criteria set forth in Section 2 of the Guidance.
- This project meets Remedial Action Alternative 1 of the Guidance; OR
- This project meets Remedial Action Alternative 2 of the Guidance.

“By my signature below, I state that the information contained in this report is true and complete to the best of my knowledge.”

Name of person preparing report: \_\_\_\_\_ Licensed Cleanup Supervisor?  
(please print) (if yes, check  box)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor License No.: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Licensed Heating Oil Tank  
 Service Provider Company: \_\_\_\_\_

Company License Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Yes  No Additional information is included. If yes, write in attachment label(s): \_\_\_\_\_  
(check  one)

**NOTE: If cleanup work and report documentation was conducted by the homeowner, on a separate sheet of paper, describe how you learned how to perform the cleanup work.**