

UST-61

24-Hour Release and UST Leak Reporting Form.

For Releases in NC

This form should be completed and submitted to the UST Section's regional office following a known or suspected release from an underground storage tank (UST) system. This form is required to be submitted within 24 hours of discovery of a known or suspected release

(DWM USE ONLY)
 Incident # _____ Risk (H,I,L,U) _____
 Received On _____ Received By _____
 Reported by (circle one): Phone, Fax or Report
 Region _____

Suspected Contamination? (Y/N) _____
 Confirmed GW Contamination? (Y/N) _____
 Confirmed Soil Contamination ?(Y/N) _____
 Samples Taken?(Y/N) _____
 Free Product? (Y/N) _____ If Yes, State Greatest
 Thickness _____

Facility ID Number _____
 Date Leak Discovered _____
 Comm/Non-Commercial? _____
 Reg/Non-regulated? _____

INCIDENT DESCRIPTION

Incident Name:

Address:

County:

City/Town:

Zip Code:

Regional Office (circle one): Asheville, Mooresville, Fayetteville, Raleigh, Washington, Wilmington, Winston-Salem

Latitude (decimal degrees):

Longitude (decimal degrees) :

Briefly describe suspected or confirmed release: (including but not limited to: nature of release, date of release, amount of release, amount of free product present and recovery efforts, initial responses conducted, impacts to receptors)

Obtained by:

- GPS
- Topographic map
- GIS Address matching
- Other
- Unknown

Describe location:

HOW RELEASE WAS DISCOVERED (Release Code)

(Check one)

- | | | |
|---|--|--|
| <input type="checkbox"/> Release Detection Equipment or Methods | <input type="checkbox"/> Visual/Odor | <input type="checkbox"/> Groundwater Contamination |
| <input type="checkbox"/> During UST Closure/Removal | <input type="checkbox"/> Water in Tank | <input type="checkbox"/> Surface Water Contamination |
| <input type="checkbox"/> Property Transfer | <input type="checkbox"/> Water Supply Well Contamination | <input type="checkbox"/> Other (specify) _____ |

SOURCE OF CONTAMINATION

Source of Release

(Check primary source)

- Tank
- Piping
- Dispenser
- Submersible Turbine Pump
- Delivery Problem
- Spill Bucket
- Other
- Unknown

Cause of Release

(Check primary cause)

- Spill
- Overfill
- Corrosion
- Physical/Mechanical Damage
- Install Problem
- Other
- Unknown

Definitions presented on reverse

Type of Release

(Check one)

- Petroleum
- Non-Petroleum
- Both

Location

(Check one)

- Facility
- Residence
- Other

Product Type Released

(Check primary product type released)

- | | |
|---|--|
| <input type="checkbox"/> Gasoline/ Diesel/ Kerosene | <input type="checkbox"/> Diesel/Veg. Oil Blend |
| <input type="checkbox"/> Heating Oil | <input type="checkbox"/> Vegetable Oil 100% |
| <input type="checkbox"/> Other Petroleum Products | <input type="checkbox"/> E10 – E20 |
| <input type="checkbox"/> Metals | <input type="checkbox"/> E21 – E84 |
| <input type="checkbox"/> Other Inorganics | <input type="checkbox"/> E85 – E99 |
| <input type="checkbox"/> Other Organics | <input type="checkbox"/> Ethanol 100% |
| | <input type="checkbox"/> E01 – E09 |

Definitions presented on reverse

Ownership

1. Municipal 2. Military 3. Unknown 4. Private 5. Federal 6. County 7. State

Operation Type

1. Public Service 2. Agricultural 3. Residential 4. Education/Relig. 5. Industrial 6. Commercial 7. Mining

IMPACT ON DRINKING WATER SUPPLIES

Water Supply Wells Affected? 1. Yes 2. No 3. Unknown

Number of Water Supply Wells Affected _____

Water Supply Wells Contaminated: *(Include Users Names, Addresses and Phone Numbers. Attach additional sheet if necessary)*

- 1.
- 2.
- 3.

UST SYSTEM OWNER

UST Owner/Company _____

Point of Contact		Address	
City	State	Zip Code	Telephone Number

UST SYSTEM OPERATOR

UST Operator/Company _____		Address _____	
City	State	Zip Code	Telephone Number

LANDOWNER AT LOCATION OF UST INCIDENT

Landowner _____		Address _____	
City	State	Zip Code	Telephone Number

Draw Sketch of Area (showing two major road intersections) or Attach Map

Person Reporting Incident	Company	Telephone Number
Title	Address	Date

Definitions of Sources

- Tank: means the tank that stores the product and is part of the underground storage tank system
- Piping: means the piping and connectors running from the tank or submersible turbine pump to the dispenser or other end-use equipment (Vent, vapor recovery, or fill lines are excluded.)
- Dispenser: includes the dispenser and the equipment used to connect the dispenser to the piping (e.g., a release from a suction pump or from components located above the shear valve)
- Submersible Turbine Pump (STP) Area includes the submersible turbine pump head (typically located in the tank sump), the line leak detector, and the piping that connects the submersible turbine pump to the tank
- Delivery Problem: identifies releases that occurred during product delivery to the tank. (Typical causes associated with this source are spills and overfills.)
- Other: serves as the option to use when the release source is known but does not fit into one of the preceding categories (e.g., for releases from vent lines, vapor recovery lines, and fill lines)
- Unknown: identifies releases for which the source has not been determined

Definitions of Causes

- Spill: use this cause when a spill occurs (e.g., when the delivery hose is disconnected from the tank fill pipe or when the nozzle is removed from the dispenser)
- Overfill: use when an overfill occurs (e.g., overfills may occur from the fill pipe at the tank or when the nozzle fails to shut off at the dispenser)
- Physical or Mechanical Damage: use for all types of physical or mechanical damage, except corrosion (e.g., puncture of tank or piping, loose fittings, broken components, and components that have changed dimension)
- Corrosion: use when a metal tank, piping, or other component has a release due to corrosion (e.g., for steel, corrosion takes the form of rust)
- Installation Problem: use when the problem is determined to have occurred specifically because the UST system was not installed properly
- Other: use this option when the cause is known but does not fit into one of the preceding categories (e.g., putting regulated substances into monitoring wells)
- Unknown: use when the cause has not been determined