Stage I

Yearly



Maintenance Inspections of Vapor Recovery System for AST/UST Gasoline Dispensing Facilities

The owner or operator of a gasoline storage tank at a gasoline dispensing facility or a bulk gasoline plant subject to Env-Or 504.01 shall perform a yearly maintenance inspection:

- 1. No later than September 30 of each calendar year, and
- 2. At least 10 months between each inspection.

Facility Name: SINGH MAKT Insp. Date: 2/11/21 AST/UST Facility ID Number: 01/00 79 Name of person conducting inspection: MIKE COMMITM	7 cr	3 neck who	en comp Tk3	oleted Tk4	Tk5
(1) Perform all items specified in Stage I Monthly Maintenance Inspection.	/	/	NA	NA	N/A
(2) Replace or permanently plug each drain valve located in each spill bucket.	N/A	N/A			
(3) Verify that adaptor caps and dust covers are not in contact with overlying access covers.	1	/			
(4) Measure the distance between the tank bottom and the submerged fill tube end to insure a clearance of no more than 6 inches. If necessary, modify the submerged fill tube.	V	1			

The owner or operator must document each monthly maintenance inspection, including all findings and repairs made. Please keep this form with your records.

Please contact the New Hampshire Department of Environmental Services at (603) 271-3899 with any questions.

List of Class C Operators

Name of Trainer	Insight CSS Müle Grat			
Training Program	insight CSS			
Exp. Date	2/11/23			
Date of Training	2/11/21 2/11/23			
C Operator Name	MIKE COOMIER	0		

Operator's Checklist

Visual Monthly Inspections Underground Storage Tank Systems



RSA 146-C:19 and Env-Or 406.18 require monthly and annual visual inspections by or under the direction of the Class A or B operator at an Underground Storage Tank facility.

		The second			
Date of Inspection: 2 1 2 UST Facility ID Number:	011	007	9		
Facility Name: SINGH MART					
Name of Class B operator directing the inspection: MIKE CORMISE					
Name of person conducting inspection: MILO COLMISTR	1	Insid	aht	CCC	
Signature of person conducting the inspection: MIKO CURMIDA	5		1		
Signature of person conducting the inspection.					
☑ if true; ☑ if false; Y to indicate corrective work was completed; N/A if not applicable					
Tank # (See OneStop for correct tank numbers):	2	3			
(1) Each vent riser shows no visible damage.	V	V			
Repaired?					
(2) Each pressure/vacuum vent cap and/or rain cap shows no visible damage.	V	V			
Replaced?	1				
(3) Each spill bucket shows no presence of oil, water, or debris.	V	V			
Removed and disposed of content in accordance with all applicable federal, state, and local requirements?					
(4) For double-walled spill buckets, including single-walled buckets installed within single-walled sumps, gauge indicates no oil or water, or electronic sensor is not in alarm. **Must be conducted for triennial tightness testing exemption, per Env-Or 406.12(e)**	NA	NA			
Removed and disposed of content in accordance with all applicable federal, state, and local requirements? Repaired?					
(5) Each fill adaptor cap, whether coaxial, two-point fill adaptor cap, and/or dry break adaptor cap is not loose, and shows presence of a gasket and tightness of fit.	V	/			
(circle one) Tightened, repaired or replaced?					
(6) Each fill adaptor, whether coaxial, two-point fill adaptor, and/or dry break adaptor shows tightness of fit,	/	V			
(circle one) Tightened or replaced?		,			
(7) Each fill pipe was free of any obstruction.	V	V			
Obstruction Removed?		,			
(8) Each dry break poppet valve shows a continuous seal, that depresses evenly across the valve seat, and reseats properly.	V	V			
(circle one) Repaired or replaced?					

9)	Each motor fuel dispenser hose shows no tears, leaks, holes, kinks, crimps or defects of any		1			
9)	kind.	V				
	(circle one) Repaired or Replaced?			/_		
(10)	Each motor fuel dispenser nozzle shows no leak or defects of any kind.	V	V			
	(circle one) Repaired or Replaced?					
(11)	**Annually for All Dispenser Sumps and Cabinets** Each motor fuel dispenser cabinet interior and sump shows no evidence of leaking components and shows no oil, water, or debris present. Last date completed:	V	V			
	Repair and disposed of content in accordance with all applicable federal, state, and local requirements?			+		
(12)	Each oil transfer and dispensing area shows no presence of oil spills.	V	V			
	Reported and remediate any spill in accordance with all applicable federal, state, and local requirements?			,		
(13)	Each oil transfer and dispensing pad area shows no conditions such as open joints, cracking, spalling, nozzles extending beyond the pad, or other defects	V	V	1		
	(circle one) Repaired or Replaced?					
(14)	Each leak, interstitial and product monitoring system enunciation panel is operating properly, including monitoring systems also associated with day tanks	X	()	(
	(circle one) Repaired or replaced?					
(15)	**Annually for All Containment Sumps** Each containment sump is free of leaking components and the presence of oil, water, or debris. Last date completed:	V	V			
	Removed and disposed of content in accordance with all applicable federal, state, and local requirements? Repaired?					
(16	**Annually for Double-Walled Sumps Only** any oil or water. Last date completed:	NA	'a NI	A		
	Removed and disposed of content in accordance with all applicable federal, state, and local requirements? Repaired?					
(17)	**Annually for Double-Walled Sumps and Spill Buckets Only** Remove and inspect each sensor/gauge for proper length and functionality. Last date completed:	M	AN	A		
	(circle one) Repaired or replaced	2				

with your records for a period of no less than 3 years.

Please attached any repair or maintenance notes to this monthly inspection form.

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multiple issues that our being goldressed see sites recent
Failing Reports for details/ Mills John August 15, 2019
Multiple issues that one being addressed see sites recent Failing Reports for details/ Mill Ont Augusi 15. 2019 Insight = Notified owner/operator.



Underground Storage Tank (UST) Facilities A/B Operator Statement of Training Record



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Oil Remediation and Compliance Bureau

RSA 146-C:17 - C:21

Facility ID# 0110079 NH
Facility Name: SINGH MART
Facility Location: 175 West PU

ATTENTION: This form is a document used to facilitate the submission of information required under Env-Or 400. Nothing in this form is required to be submitted to the Department unless such a requirement is expressly stated in the rules. If there is any inconsistency between this document and the adopted rules, only those requirements specified in the rules are applicable and enforceable. Use of this form to submit information required under the rules is OPTIONAL.

Facility Town/City:	centerbury		
Name of Approved	Training Program:	Insight	155
2. The owner/operat	or must submit a cop LAW, by signing this d		t the information submitted is accurate and t
Training Date	IKO CORW	19 1	Expiration Date:
Training Date	IKO COPILI	19	Expiration Date: 4/17/71 Date: 2/11/21
		leum LLC 522 Miller 180 Asts	ton NY Date: X 2 11 2