



OREGON DEPARTMENT OF ENVIRONMENTAL QUALITY
Underground Storage Tank Program

HEATING OIL TANK SERVICES
SERVICE PROVIDER REPORT CERTIFICATION

INITIAL HEATING OIL CLEANUP REPORT FORM

If required by OAR 340-177-0055(5), complete this INITIAL report and submit it to the DEQ NWR office as soon as possible, but at least within 45 days from the date the release from a heating oil tank is confirmed.

Property Owner Name: _____ DEQ Cleanup File No.: _____

Property Address: _____

City/State/Zip Code: _____

County: _____

Owner Phone Number: _____

Owner Mailing Address (if different): _____

_____ Date the release was originally suspected (e.g. water in tank) or confirmed (sight, smell, test).

_____ Date the release was reported to DEQ. Name of DEQ person contacted: _____

Note: Releases must be reported within 72-hours by owner or service provider.

Check One

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.

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.

Yes No NA As much heating oil/sludge as possible has been removed from the tank.

Gallons removed: _____

Name of oil recycling or disposal company (check one):

Provide Name Here: _____

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.

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.

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 Measurements for the presence of a release where contamination is most likely to be encountered have been made at the time of this report. If yes, note highest TPH sample result: _____ mg/kg TPH-Dx.

Yes No Cleanup actions have been initiated at the time of this report. If no, include proposed schedule for cleanup and state reason for delayed cleanup on back of this form: Proposed cleanup date (mo/yr) _____

"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 (please print): _____

Signature: _____ Date: _____

Supervisor License No.: _____

Expiration Date: _____

Licensed Heating Oil Tank Service Provider Company: _____

Company License Number: _____

Expiration Date: _____