

BULLET CONSTRUCTION, L.L.C.
 4905 VOGES ROAD
 MADISON, WI 53718
 UNITED STATES

Invoice

Invoice Number:

0401

Invoice Date:

Dec 7, 2005

Voice: 608-516-7119

Fax: 608-838-0404

Page:

1

Sold To:

AL COLE
 2479 CHARMANY WAY
 MC FARLAND, WI 53558

Ship to:

Customer ID		Customer PO		Payment Terms	
COLEAL				Net 15 Days	
Sales Rep ID		Shipping Method		Ship Date	Due Date
		Airborne			12/22/05
Quantity	Item	Description		Unit Price	Extension
		INVOICING FOR TANK REMOVAL AT			
		JAMES SHAPRIO 405 S. PARK ST			
		MADISON COMPLETED 12/7/05.			
		TANK REMOVAL			1,675.00
15.00		REMOVAL AND DISPOSAL OF 15 GAL		1.50	22.50
		FREE PRODUCT			
15.00		REMOVAL AND DISPOSAL OF 15 GAL		15.15	227.25
		SLUDGE			

Subtotal 1,924.75

Sales Tax

Total Invoice Amount 1,924.75

Payment Received

TOTAL 1,924.75

Check No:

Bullet Construction

Specializing in Lead Water Pipe Replacement, Tank Removals and Soil Remediation

Formerly JEPA Construction

OWNER'S PACKET &
BILLING TO:

AL COLE

2479 CHARMANY WAY
McFARLAND, WI.
53528

PH# 235-6510

Emergency Information

Job Name & Location:

JAME'S SHAPIRO
405 S. PARK ST.
MADISON, WI. 53715

Bullet Construction Job Supervisor:

Phone #'s:

JEFF HEMP
(608) 516-7119

If Job Supervisor is unavailable, contact:

Phone #'s:

CHRIS MARKS
(608) 516-7314

Nearest Medical Facility:

Name: MERITER HOSPITAL
Address: 202 S. PARK ST.
Phone #: (608) 267-6000

Nearest Hospital:

Name: MERITER HOSPITAL
Address: 202 S. PARK ST.
Phone #: (608) 267-6000

Fire Department:

Name: MADISON FIRE DEPT
Phone #: (608) 266-4484

Environment Emergency Agent (DNR):

Name: WENDAL WOLNER
Phone #: (608) 275-32-97

I have read the above information and understand this information is to be used in the event that an emergency occurs while working on the above stated job site.

Signature:

Date:

Signature:

Date:

Signature:

Date:

Signature:

Date:

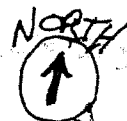
Signature:

Date:

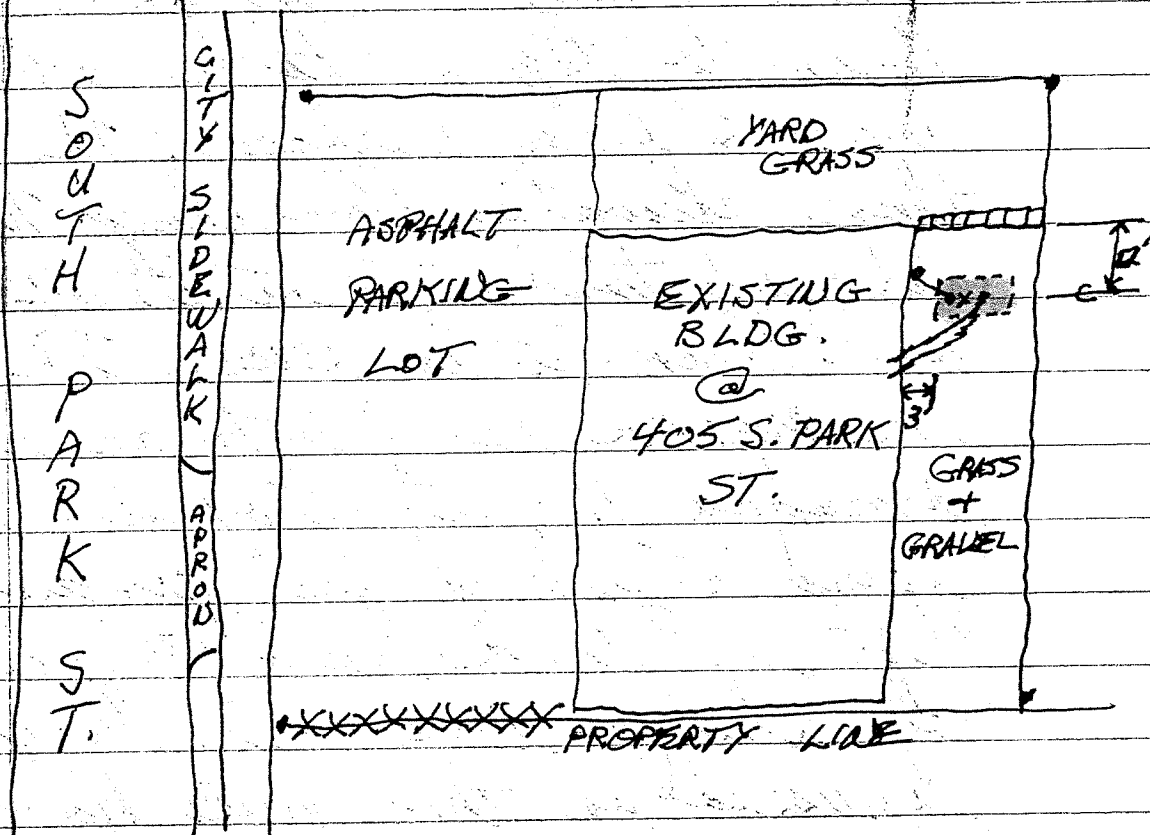
Signature:

Date:

JAMES SHAPIRO
405 S. PARK ST.
MADISON, WIS. 53715



FIELD
NOTES
PAGE I



LEGEND

--- TANK REMOVED - 1,000 GAL. FUEL OIL - 5'4" X 6'

X - FILL PIPE

•• - REMOTE FILL

--- COPPER TUBING - (FILL + RETURN)

||||| - BLOCK RETAINING WALL

XXXXXXXXXX - WOODEN FENCE

12-7-05

PAGE II

After arriving on job we dug down to top of tank which was 2' from surface. We then excavated down along North side of tank to cut it open and clean it in place. The LEL METER read 0% as we proceeded to cut it open. We found 15 gal. of free product left in tank and 15 gal. of sludge which is very unusual as they must have burned a heavier fuel oil in tank sometime over the years. Tank was in great shape for (40 YEARS OLD-) estimated. No pitting or holes were found in tank. Soils around tank to not have any odors or discoloration. Symmer Environmental will check soils under tank for any contaminations.

- * Weather $\approx 15^{\circ}\text{F}$ - COLD + CLEAR.
- * Pictures were taken of site, tank and excavation.
- * Tank was in great shape for 40+ YRS. old estimated.
- * Soils around and under tank were read with gas tech meter and read 0-PPM or (No DETECT). A clean site.
- * Excavation was filled with clean sand hauled in from Mandt sand + gravel.
- * Groundwater depth estimate $> 9'$.
- * Maline Fire Dept. Inspector: CHERYL PETERSEN - Was on site during removal procedures.
- * Tank had 15 gal. of free product and 15 gal. of sludge left in it and removed during cleaning.

Bullet Construction

Specializing in Lead Water Pipe Replacement, Tank Removals and Soil Remediation

Formerly JEPA Construction

4905 Voges Road
Madison, WI 53718
Phone: (608) 516-7119
Fax: (608) 838-0404

Tank Removal Report

Job Name & Location:

JAMES SHAPIRO
405 S. PARK ST.
MADISON, WI. 53715

Date:

12-7-05

Estimate Age:

40 YRS. OLD

Capacity:

1,000 GAL. Size: 54" X 6'

Serial #

Removal Notice Date: 12-7-05

Type: STEEL

Anodes: NONE

Given To:

MADISON FIRE DEPT. / JER
CHERYL PETERSEN

Product:

FUEL OIL

Removed By:

BULLET CONSTRUCTION

Soil Condition:

SALO AROUND TANK

Lab:

N/A

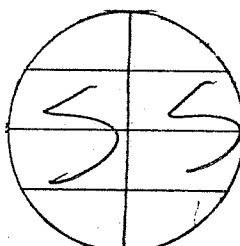
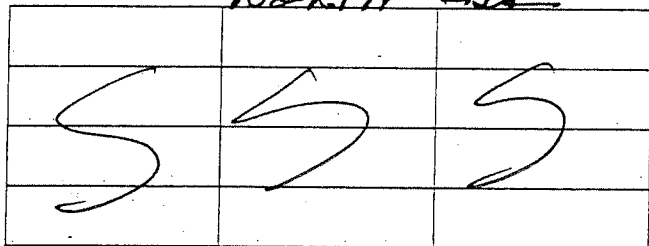
X = Hole

O = Deep Pits

F = Fair Condition

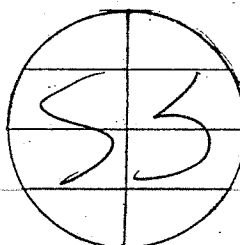
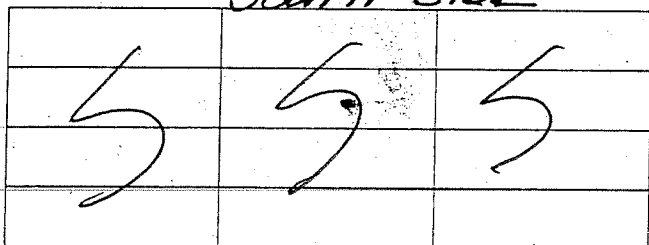
S = Good Condition

NORTH SIDE



EAST END

SOUTH SIDE



WEST END

TANK COMMENTS
GREAT SHAPE

Was soil contaminated?

No

If yes, was the DNR notified?

No

Environmental Agent:

JEFF HEMPEL - BULLET CONST.

How and where was tank disposed?

TANK WAS CLEANED IN PLACE - RE-MOVED AND DISPOSED OF AT COMMERCIAL REPT. APPROVED SALVAGE

How and where was soil disposed (if any)?

PUT BACK IN EX-YARD - CAUTION.

Report By:

JEFF HEMPEL - BULLET CONST.

12-7-05

Witnessed By:

[Signature]

[Signature]

12/7/05

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Formerly JEPA Construction

4905 Voges Road
Madison, WI 53718
Phone: (608) 516-7119
Fax: (608) 838-0404

Acceptance and Liability Agreement

This agreement is between:

Bullet Construction

4905 Voges Road

Madison, WI 53718

and

JAMES SHAPIRO
5384 COLONY CT.
CAPE CORAL, FL. 33904

On this 7th day of DECEMBER, 2005 at 12:10 PM, we received from Bullet Construction the following underground storage tank:

Serial #

1

Contents:

FUEL OIL

Gallons:

1,000 GAL.

Size:

5'4" X 6'

Location of receipt:

JAMES SHAPIRO

405 S. PARK ST.

MADISON, WI. 53715

We accept all liability for the handling of this tank from this time forth, and agree that this tank will be disposed of in accordance to the Federal EPA Guidelines and the State of Wisconsin Department of Industry, Labor, and Human Relations – Safety and Building Division.

Company Name:

BULLET CONSTRUCTION

Employee/Agent Signature:

Jeff Hensel

Print Employee/Agent Name:

JEFF HENSEL

Witness:

John Moran

File #: _____

Reg Obj #: _____

UNDERGROUND FLAMMABLE/COMBUSTIBLE/HAZARDOUS LIQUID STORAGE TANK REGISTRATION

Information Required By Section 101.142, Wis. Stats.

Send Completed Form To:
Department of Commerce
Bureau of Storage Tank Regulation
P.O. Box 7837
Madison, WI 53707-7837

Underground tanks in Wisconsin that have stored or currently store petroleum or regulated substances must be registered. A separate form is needed for each tank. Send each completed form to the agency designated in the top right corner. Have you previously registered this tank by submitting a form? ☐ Yes ☒ No If yes, are you correcting/updating information only? ☐ Yes ☒ No Personal information you provide may be used for secondary purposes [Privacy Law, s. 15.04 (1)(m)].

This registration applies to a tank status that is (check one):

☐ In Use ☒ Closed - Tank Removed ☐ Ownership Change (Indicate new owner name in block 2)

☐ Newly Installed ☐ Closed - Filled with Inert Materials

☐ Abandoned with Product ☐ Abandon with Water

☐ Abandoned without Product (empty) ☐ Temporarily Out of Service - Provide Date: _____

Fire Department providing fire coverage where tank is located: ☒ City ☐ Village ☐ Town of: MADISON 1301

A. IDENTIFICATION (Please Print)

1. Tank Site Name JAMES SHAPIRO Site Street Address 405 S. PARK ST. Site Telephone Number (608) 798-1140

☒ City ☐ Village ☐ Town of: MADISON State WISCONSIN Zip Code 53713 County DANE

2. Tank Owner Name JAMES SHAPIRO Mailing Address 5384 COLONY CT. Telephone Number (608) 798-1140

☒ City ☐ Village ☐ Town of: CAPE CORAL State FL. Zip Code 33904 County N/A

3. Previous Site Name _____ Previous site address if different than #1 _____

B. Site ID #: _____ Facility ID #: _____ Customer ID #: _____

C. Tank Capacity (gallons): 1,000 GAL. Tank Age (age or date installed): 40 YEARS (ESTIMATE)

D. LAND OWNER TYPE (check one) Refer to back

☐ County ☐ State ☐ Federal Leased ☐ Federal Owned ☐ Tribal Nation ☐ Municipal ☐ Other Government ☒ Private

E. OCCUPANCY TYPE (check one) Refer to back

☐ Retail Fuel Sales ☐ Bulk Storage ☐ Terminal Storage ☒ Mercantile/Commercial ☐ Industrial ☐ Residential ☐ School

☐ Agricultural (crop or livestock production) ☐ Backup or Emergency Generator ☐ Gov't Fleet ☐ Utility ☐ Other (specify): _____

F. Tank Construction:

☒ Bare Steel ☐ Coated Steel ☐ Stainless steel ☐ Steel - Fiberglass Reinforced Plastic Composite

☐ Fiberglass ☐ Unknown ☐ Other (specify): _____ Lined (date): _____

Overfill Protection? ☐ Yes ☐ No

Spill Containment? ☐ Yes ☐ No

G. Tank Cathodic Protection: ☐ Sacrificial Anodes ☐ Impressed Current ☐ N/A Tank Double Walled? ☐ Yes ☐ No

H. Primary Tank Leak Detection Method:

☐ Automatic tank gauging ☐ Interstitial monitoring ☐ Inventory control and tightness testing ☐ Groundwater monitoring ☐ Vapor monitoring

☐ Manual tank gauging (only for tanks of 1,000 gallons or less) ☐ Statistical Inventory Reconciliation (SIR) ☐ Unknown

I. Piping Construction:

☒ Bare Steel ☐ Coated Steel ☐ Stainless Steel ☐ Fiberglass ☐ Flexible ☐ Copper ☐ Unknown ☐ N/A ☒ Other COPPER

J. Piping Cathodic Protection: ☐ Sacrificial Anodes ☐ Impressed Current ☐ N/A Pipe Double Walled? ☐ Yes ☐ No

K. Primary Piping System Type: ☐ Pressurized piping with ☐ A. ☐ auto shutoff; B. ☐ alarm, or C. ☐ flow restrictor ☐ Unknown

☐ Suction piping with check valve at tank ☐ Suction piping with check valve at pump and inspectable ☐ Not needed if waste oil

L. Piping Leak Detection Method: (used if pressurized or check valve at tank): ☐ SIR ☐ Tightness testing ☐ Electronic line leak monitor

☐ Groundwater monitoring ☐ Vapor monitoring ☐ Interstitial monitoring ☐ Not required ☐ Unknown

M. Vapor Recovery/Stage II ☐ Fiberglass ☐ Flexible ☐ Other (specify): _____

☐ Operational - Provide Date (mo/day/yr.): _____ CARB #: _____

N. TANK CONTENTS (Current, or previous product if tank now empty)

☐ Diesel ☐ Leaded ☐ Unleaded ☐ Gasohol ☐ Aviation ☐ Premix ☒ Fuel Oil ☐ Kerosene

☐ Empty* ☐ Sand/Gravel/Slurry* ☐ Waste/Used Motor Oil ☐ Hazardous Waste* ☐ Unknown*

☐ Chemical* Name _____ CAS #: _____ Other (specify): _____

* If chosen, this tank is NOT PECFA eligible.

Geo Latitude: _____ Geo Longitude: _____

O. If Tank Closed, Abandoned or Out of Service Give date (mo/day/yr): 12-7-05 Has a site assessment been completed? (see reverse side for details) ☒ Yes ☐ No

Owner or Operator Name (please print): JAMES SHAPIRO Indicate if you are: ☒ Owner or ☐ Operator

Owner or Operator Signature (Note: By signing, signer is accepting legal and financial responsibility for the storage tank system.) JAMES SHAPIRO Date 12-7-05



MADISON FIRE DEPARTMENT
325 W. Johnson St., Madison, WI 53703
City of Madison
TANK CLOSURE APPLICATION



Application is made to the Madison Fire Department to:

- ☐ place tank system temporarily out of service ☐ close tank system in place
☒ close tank system by removal (approval required prior to submittal of application)
☐ use a UST system to store a non-regulated substance (change-in-service)

ANTICIPATED DATE OF CLOSURE

12-7-05

APPROVAL REQUIRED: Approval is required for the closure of any tank system. "Tank system" includes aboveground and underground storage tanks in excess of 60 gallons and system components to include but not limited to piping, vents, leak detection, cathodic protection and spill/over fill protection systems. Approval of the closure plan is required at least 15 days in advance of the closure date.

DIRECTIONS: Submit this form, three copies of the site plot plan and the required fee to the address in the upper right corner of this page. The check is to be made payable to: City of Madison, Treasurer.

Each submittal must include a plot plan drawn to scale and showing: 1) property lines, 2) buildings, 3) tanks, 4) piping, 5) streets, 6) overhead and underground utilities, 7) limits of the excavation, 8) temporary location of excavated dirt and backfill.

FEES: Plan review \$50.00
Site inspection first tank \$75.00 (Fees will be doubled upon failure to initiate approval prior to closure.)
Each additional tank \$50.00
TOTAL \$125.00

NOTICE OF APPROVAL: Two copies of the plans and a letter of approval or conditional approval will be returned to the closure company after review.

GENERAL REQUIREMENTS: Individual holding remover certification must be on-site. Portable fire extinguishers with a rating of 2A-40B:C must be on-site. Closure company is required to have a calibrated flammable vapor indicator or equivalent instrumentation to determine the percentage of the lower explosive limit, and/or the percentage of oxygen.

(Please Print)

1. INSTALLATION NAME JAMIE'S SHAPIRO		2. OWNER NAME AL COLE	
<input checked="" type="checkbox"/> CITY <input type="checkbox"/> VILLAGE <input type="checkbox"/> TOWN OF: MADISON		OWNER STREET ADDRESS 2479 CHARMAY WAY	
INSTALLATION STREET ADDRESS 405 S. PARK ST.		<input checked="" type="checkbox"/> CITY <input type="checkbox"/> VILLAGE <input type="checkbox"/> TOWN OF: McFARLAND	STATE WI.
STATE WI.	ZIP CODE 53715	COUNTY DANE	ZIP CODE 53558
3. CLOSURE COMPANY NAME BULLET CONSTRUCTION		CLOSURE COMPANY STREET ADDRESS, CITY, STATE, ZIP CODE 4905 VOGES RD. MADISON WI. 53718	
COMPANY TELEPHONE NO. (Include Area Code) (608) 838-7004		CERTIFIED REMOVER NAME JEFF HEMPEL	REMOVER CERTIFICATION NO. 223305
4. NAME OF COMPANY PERFORMING CLOSURE ASSESSMENT SEYMOUR ENVIRONMENTAL		ASSESSMENT COMPANY STREET ADDRESS, CITY, STATE, ZIP CODE 2531 DYERSON RD. McFARLAND WI. 53558	
COMPANY TELEPHONE NO. (Include Area Code) (608) 838-9120		CERTIFIED ASSESSOR NAME ROBYN SEYMOUR	ASSESSOR CERTIFICATION NO. 41580

TANK I.D. #	CLOSURE	TEMPORARY CLOSURE	CLOSURE IN PLACE	TANK CAPACITY	CONTENTS*	CLOSURE ASSESSMENT
1. #1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1,000 GAL.	FUEL OIL	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/> Yes <input type="checkbox"/> No
3.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/> Yes <input type="checkbox"/> No
4.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/> Yes <input type="checkbox"/> No
5.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/> Yes <input type="checkbox"/> No
6.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/> Yes <input type="checkbox"/> No

*Indicate which product by numeric code: 01-Diesel; 02-Leaded; 03-Unleaded; 04-Fuel Oil; 05-Gasohol; 06-Other; 09-Unknown; 10-Premix; 11-Waste Oil; 13-Chemical (indicate the chemical name(s) or number(s) _____); 14-Kerosene; 15-Aviation

Is right of way encroachment required? ☐ Yes ☒ No
Is site contamination suspected? ☐ Yes ☒ No

Was Diggers Hotline contacted? ☒ Yes ☐ No
Has a site safety plan been prepared? ☒ Yes ☐ No

SIGNATURE OF CERTIFIED REMOVER 	DATE 12-1-05
CLOSURE APPLICATION APPROVED BY: 	DATE 12-5-05
MADISON FIRE PROTECTION ENGINEERING UNIT	

APPROVED Tank Closure

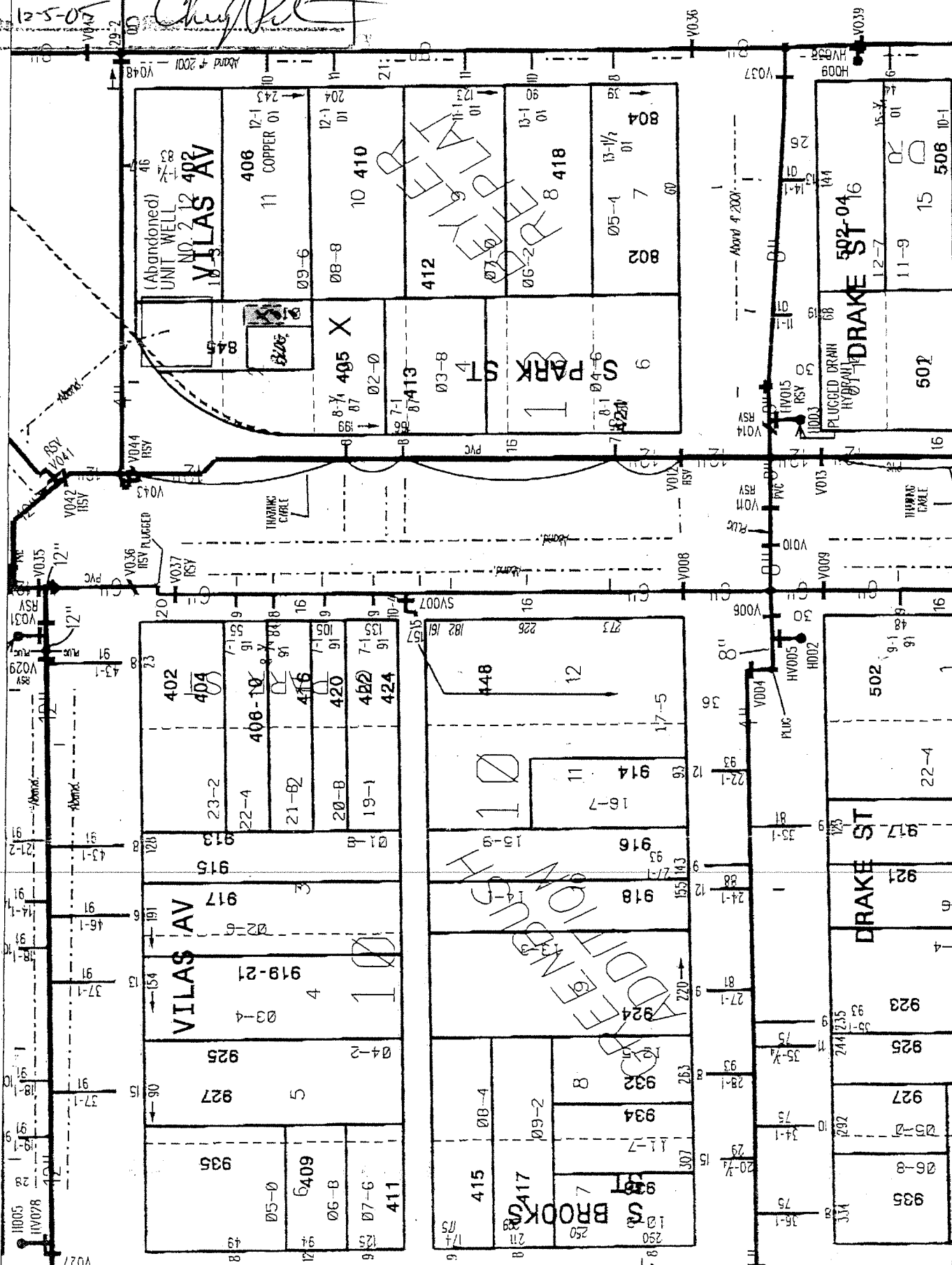
Madison Fire Dept.

Fire Prevention Div.

Date: 12-5-05

Cheryl Rie

1000 GAL. FUEL OIL TANK Pull - BULLET CONSTRUCTION



Scale: 1 in = 77.2 Ft

Date: 11/30/2005

Time: 08:57:35 AM

Field View X - BLDG. BUSINESS @ 405 S. PARK ST.

1277-1000 GAL. FUEL OIL TANK - 5'4" X 6' X-FILL PIPE • VENT PIPE