Case Closure Summary

UNDERGROUND STORAGE TANK (UST) PROGRAM

I. CASE INFORMATION	DATE:		
Site Name:			
Site Address:			
Responsible Party Name:	RP Phone Number:		
Responsible Party Address:			
Current Land Use:			
RWQCB File Number:	Local Case Number:	RWQCB Staff:	
Basin Number:	Basin Uses:	<u> </u>	
II. RELEASE AND SITE CHARACTER	IZATION INFORMATION		
Description of the unauthorized release (ca	use, release date, source[s]):		
· ·	,,		
 Contaminant[s] identified and amount leak	zod•		
Comuminani[s] memijica ana amouni icak	reu.		
Description of the soil/geology:			
Is soil contamination completely delineated	l (to what levels)?		
Areal extent?			
Vertical extent?			
Est. Volume of contaminated soil left on si	te and concentration:		
Is groundwater contamination completely o	delineated (to what levels)?		
Monitoring wells installed, properly permit	ted? Number of mon	nitoring wells:	
	1		
Depth to groundwater:	Seasonal or tida	al fluctuation:	
Groundwater flow direction:	Gradient:	v	
Is groundwater or surface water impacted?	ļ		
25 groundmuct of surjuce water impacted:			
Is groundwater contamination contained o	n sito?		
Nearest receptor (Inland Surface Water, Bo	uy, Drinking water wells, etc.):		
II			

III. MAXIMUM DOCUMENTED CONTAMINANT CONCENTRATION

San Diego Regio	nal Water Q	uality Control l	3oard	Site M	itigation and Clean	up Unit
Contaminant Soil		Soil (mg/kg initial			/l) Water (ug/l) current	
TRPH				•		
TPH (diesel)						
Benzene						
Toluene						
Ethylbenzene						
Total Xylenes						
V. TREATMEN	T AND DIS	SPOSAL OF AI	FFECTED MATERIAL			
Material	Amount	(include units)	Action (treatment or disposal)		Concentration	Dat
Soil						
Groundwater						
Free Product						
Barrel(s)						
Tank(s)						
Piping						
• 0						
V. CLOSURE						
Does completed	corrective of	action protect b	peneficial uses per the R	WQCB Basin P	lan?	
Should correcti	ve action be	reviewed if lar	nd use changes?			
Monitoring wells decommissioned?		Number decommissioned:		Number retained:		
Enforcement ac	tions taken	•			<u> </u>	
Enforcement ac	tions rescin	ded:				
/I. Signature o	f Reviewer					
			Date			
Staff Name)			Date			
VII. Signature	of Senior St	atf				

(Senior Staff Name)

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