



Oregon

Tina Kotek, Governor

Department of Environmental Quality

Northwest Region

700 NE Multnomah Street, Suite 600

Portland, OR 97232

(503) 229-5696

FAX (503) 229-6124

TTY 711

April 10, 2024

Citizens Telecommunications Company
Ziply Fiber
Attn: Lee Varnam
2610 W Casino Rd
Everett, WA 98024

RE: UST Compliance Inspection
DEQ UST #5666 2018 College Way
DEQ UST #5664 19555 SW Kinnaman Rd
DEQ UST #5662 4155 SW Cedar Hills Rd

Dear Citizens Telecommunications Company,

The Oregon Department of Environmental Quality (DEQ) is conducting underground storage tank (UST) inspections throughout Oregon. The purpose of this letter is to inform you that your facility, among others, has been selected for inspection. A thorough inspection of your facility will be conducted to determine compliance with state and federal UST requirements. **The date you receive this letter is the date that the inspection starts.** If you have work done after that date, you will need to have the previous set of records available for evaluation in addition to the most recent records.

If I do not hear from you, the inspection for these facilities is scheduled for May 14, 2024, starting at approximately 9 am at the DEQ UST # listed below.

- DEQ UST #5666 2018 College Way, Forest Grove at 9 am
- DEQ UST #5664 19555 SW Kinnaman Rd, Aloha - following Forest Grove site
- DEQ UST #5662 4155 SW Cedar Hills Rd, Beaverton – following Aloha site

Please note that the inspection will require uninterrupted participation and attendance by you or a knowledgeable assistant. For the inspection you need to provide access to tank sumps, under dispenser areas, cathodic protection rectifiers, and leak monitoring equipment. DEQ will not touch the equipment or enter the facility, if you are unable to assist with equipment access, please have your UST Service Provider there. This inspection may also include review of Stage I Vapor Recovery.

DEQ staff will not assist with operating tank gauges.

The DEQ requests the following documentation be submitted electronically prior to the inspection:

- Line and leak detector testing results for the past three years,
- Monthly tank leak detection records, one year
- Class A, B, and C training documentation,
- Financial responsibility mechanism,
- Annual tank gauge certification,
- Spill prevention testing records, was due by October 2020
- Monthly walkthroughs,
- Overfill Prevention Equipment testing, was due by October 2020
- Cathodic protection testing (if applicable).

Please submit these records to ingrid.gaffney@deq.oregon.gov for review. If these records cannot be submitted prior to the inspection, please have them available for review at the facility.

Owners must also be able to operate the tank gauge and print out applicable reports such as the tank setup and in-tank alarm reports. Owners also must be able to sound high fill over alarm from the tank gauge, if applicable.

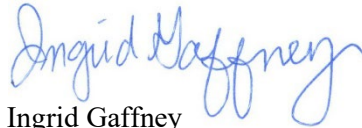
DEQ will not touch any equipment, if you are unable to assist with equipment access, please have your UST Service Provider there. DEQ will need to observe what equipment is in the tank top sumps and under the dispensers. If ball floats are the primary overfill protection device, these will need to be verified during the inspection, please be able to locate and remove the ball floats.

If violations are found at the time of the inspection without prior notification, DEQ is required to initiate enforcement action. For UST violations, enforcement usually begins with a field citation option, which is much like paying a traffic ticket and making corrections.

Some enforcement situations including repeat violations will go through a longer and more formal process including civil penalties.

Thank you for your cooperation. I can be reached at 503-229-5048 ingrid.gaffney@deq.oregon.gov to answer any questions you may have and assist you in the preparation for your inspection.

Sincerely,



Ingrid Gaffney
UST Compliance Specialist
Northwest Region

Oregon Department of Environmental Quality - Underground Storage Tank Program
Technical Compliance Inspection - UST Inspection Report

Inspector: Ingrid Gaffney

Date: 5/14/2024

Time: 11:15 AM

Facility: 5662

I. Site Information

Facility Name: 21ply Beaverton Central Office #15320
Site Address: 4155 SW Cedar Hills Blvd
City: Beaverton, OR 97005
Permittee: Citizens telecomm
Organization: same
Phone: —
Contact: Lee Varman
Phone: 206-947-7581
Jason Rosen

II. Tank Information

DEQ Permit #	BAHFE				
Estimated Gallons	6,000				
Substance	Diesel				
Tank Material	DN fiberglass xerxes				
Tank Install Date	9/4/1990				
Pipe Material	Dark steel not contact w/ soil				
Pipe Type	safesuction				
Pipe Install Date	9/4/1990				
Overfill Device	Alarm				

Notes and Comments from the UST database:

☒ Check file before conducting inspection

* safe suction
* eger

If tanks are manifolded, which tanks:

III. Operating Certificate

☒ Current ☒ Accurate ☐ Posted for delivery drive to observe

Compliance

☒ Yes ☐ No

IV. Operator Training

Class A/B Operator ☒ Yes ☐ No Name: John Mayer Date: 5/2024
Class C Operator ☐ Yes ☐ No ☒ Cardlock
API ? not a full time trainer

Compliance

☒ Yes ☐ No

V. Financial Responsibility

Type of coverage: Insurance
Coverage amount correct: \$1,000,000
Begin Date: 5/1/2024 End Date: 5/1/2025
Number of tanks covered:

Compliance

☒ Yes ☐ No

Financial responsibility could also be in the form of self insurance, bonds, local government, trust fund, and or guarantee

VI. Walkthrough Requirements

Spill prevention and release detection equipment checked monthly?
Tank top sumps checked annually?

Compliance

☒ Yes ☐ No

☒ Yes ☐ No

☒ Yes ☐ No

#5662

VII. Release Detection

Compliance

☐ Yes ☒ No

a) Annual Release Detection Operability Testing (Sometimes referred to as Tank Gauge Certification)

Date of last testing: 6/13/2023 6/23/2022 Last three tests available? ☒ Yes ☐ No

b) Piping Release Detection (Check all that apply)

☒ Pressurized Piping

☒ Mechanical Leak Detector (MLLD) ☐ Electronic Leak Detector (ELLD) - check for swiftcheck requirement

Date of last testing: _____ Last three tests available? ☐ Yes ☐ No

Number of lines tested: _____ Number of LD tested: _____

Leak detector manufacturer make and model: _____

Tank gauge manufacturer make and model: Vander Root TLS 350 - Broken

MLLD on turbine manifold? ☐ Yes ☐ No

MLLD product appropriate? (Example, diesel Red Jacket FX series on diesel system?) ☐ Yes ☐ No

If ELLD and no line testing: Annual 0.1 gph results from tank gauge? ☐ Yes ☐ No

☒ Interstitial Monitoring

[Monthly records must include, date system was checked, observations made, initials of person checking. Electronic records must include power status (on or off), alarm indication status (yes or no) and sensor malfunction notes (yes or no).]

Date of last sump testing: _____ Last two tests available? ☐ Yes ☐ No

Date of last sensor testing: _____ Last three tests available? ☐ Yes ☐ No

Float sensors installed correctly? ☐ Yes ☐ No

Interstitial space opened to sump? ☐ Yes ☐ No

Presence of water in sumps? ☐ Yes ☐ No

☒ Safe Suction

Check valve directly below suction pump? ☒ Yes ☐ No

c) Monthly Tank Release Detection (Check all that apply)

☒ Tank Gauge ☐ CSLD ☐ SCALD ☐ Static

Are correct tank sizes programmed at tank gauge? ☐ Yes ☒ No

Tank diameter/length seem appropriate? ☐ Yes ☒ No

Are tanks manifolded? ☐ Yes ☒ No

If so, tank gauge testing setup for manifolded tanks? ☐ Yes ☒ No

If Vander Root tank gauge leak detection
CSLD set at 99%

Thermal coefficient set correctly?

(Gasoline 0.00070; Diesel 0.00045)

If Incon/Franklin tank gauge leak detection

☐ If SCALD is Vol Qual set to 14% (or 99% confidence)

☐ Is API gravity set correctly?

(Regular 63.5; Plus 62.8; Super 51.3; Diesel 32.8)

For all tank gauges doing static tests

(Static tests require tank to be 50% full for a valid test)

ATG not working

☒ Interstitial Monitoring [Monthly records must include, date system was checked, observations made, initials of person checking.

Electronic records must include power status (on or off), alarm indication status (yes or no) and sensor malfunction notes (yes or no).]

☐ SIR Ensure pass or fail results within 30-day period. Inconclusive result means release detection requirement not met

Tank release detection records available during inspection

Months are printing but the ATG is not functioning correctly

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
T1:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
T2:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
T3:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
T4:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
T5:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector: _____	Date: _____	Time: _____	Facility: <u>5662</u>
------------------	-------------	-------------	-----------------------

VIII. Spill Prevention Compliance ☒ Yes ☐ No

Date(s) of testing: 6/23/2022 12/3/2020 Number of spill buckets tested? 2

Did spill bucket pass most recent testing? ☒ Yes ☐ No If no, was spill bucket replaced/repaired? ☐ Yes ☐ No

During inspection, visual damage to spill bucket? ☐ Yes ☒ No

☐ Hydrostatic testing (test takes one hour to complete)

☒ Vacuum test (test takes 1 minute, ending vacuum must be 26 inches water column or greater)

IX. Overfill Prevention Compliance ☒ Yes ☐ No

Date(s) of testing: 6/13/2023 6/11/2020

Overfill device pass most recent testing? ☒ Yes ☐ No If no, overfill device replaced? ☐ Yes ☐ No

Overfill method that was tested: ☒ Alarm ☐ Flapper ☐ Ball Float

Overfill Alarm

Alarm sounds when tank is 90% full ☒ Yes ☐ No

Driver can see or hear alarm at point of transfer? ☒ Yes ☐ No

Sound alarm from tank gauge during inspection? ☒ Yes ☐ No

Flapper Valve

Testing verified the valve automatically restricts flow at 95% ☐ Yes ☐ No

Visual observation of flapper on day of inspection? ☐ Yes ☐ No

Ball Float

Testing verified the ball float automatically restricts flow at 90% ☐ Yes ☐ No

Visual observation of ball float during inspection? ☐ Yes ☐ No

X. Corrosion Protection Compliance ☐ Yes ☐ No

☐ Cathodic ☐ Galvanic ☐ Impressed Current

Steel tank with cathodic? ☐ Yes ☐ No

Steel pipes with cathodic? ☐ Yes ☐ No

Steel flex-lines with cathodic? ☐ Yes ☐ No

Date of cathodic test: _____

Last two tests available? ☐ Yes ☐ No

Did last test pass? ☐ Yes ☐ No

If not:

Was failed test reported to DEQ? ☐ Yes ☐ No

Was system repaired? ☐ Yes ☐ No

Date of repair? _____

Cathodic retested within 6 mos. of repair? ☐ Yes ☐ No

Date of retesting? _____

If impressed current system:

Rectifier Operational? ☐ Yes ☐ No

Rectifier log maintained? ☐ Yes ☐ No

Rectifier been operating continuously ☐ Yes ☐ No

☐ Tank Lining

Date of last test? _____

Pressure test conducted after tank lining inspection? ☐ Yes ☐ No

Representative onsite:

Peter Kelly

email:

peter.kelly@ziply.com
john.mayer@ziply.com

- * issued the ATG missing months
- * ATG Alarm module card and CPU board.
- * The ATG is in alarm and won't print reports properly.

Compliance Determination:

☐ No Violations Observed

☒ Observed violations resulting in enforcement

Inspector Signature:

Ingrid Goffney

Date:

5/23/2024



**OREGON DEPARTMENT OF ENVIRONMENTAL QUALITY
INSPECTION PHOTOLOG**

FACILITY NAME: Ziplly Beaverton Central Office#5330/#5662 **Page 1**
INSPECTION DATE: May 23, 2024



1: 4155 SW Cedar Hills Blvd, Beaverton, OR 97005 -tank nest



2: Fill

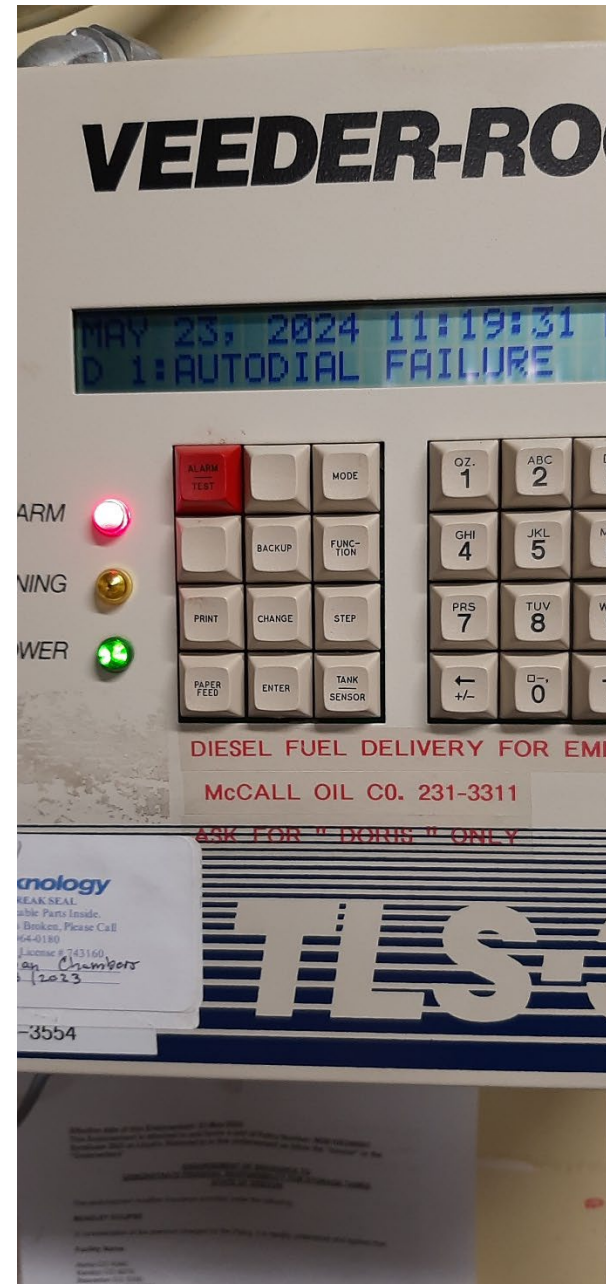


OREGON DEPARTMENT OF ENVIRONMENTAL QUALITY
INSPECTION PHOTOLOG

FACILITY NAME: Zipty Beaverton Central Office#5330/#5662 Page 1
INSPECTION DATE: May 23, 2024



3: Sump

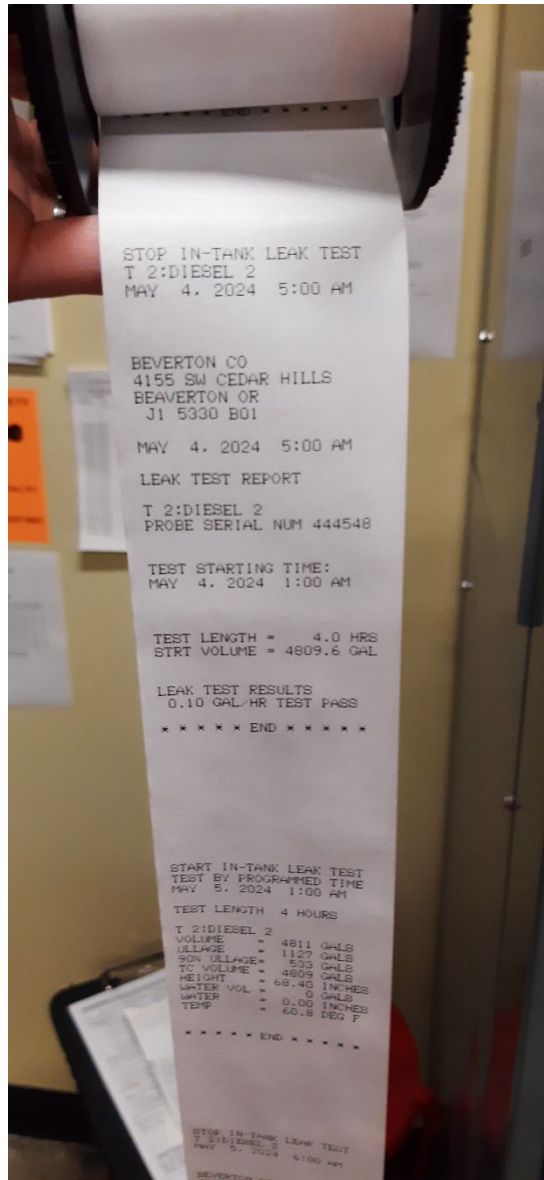


4: Veeder Root TLS350 in alarm since December 2023

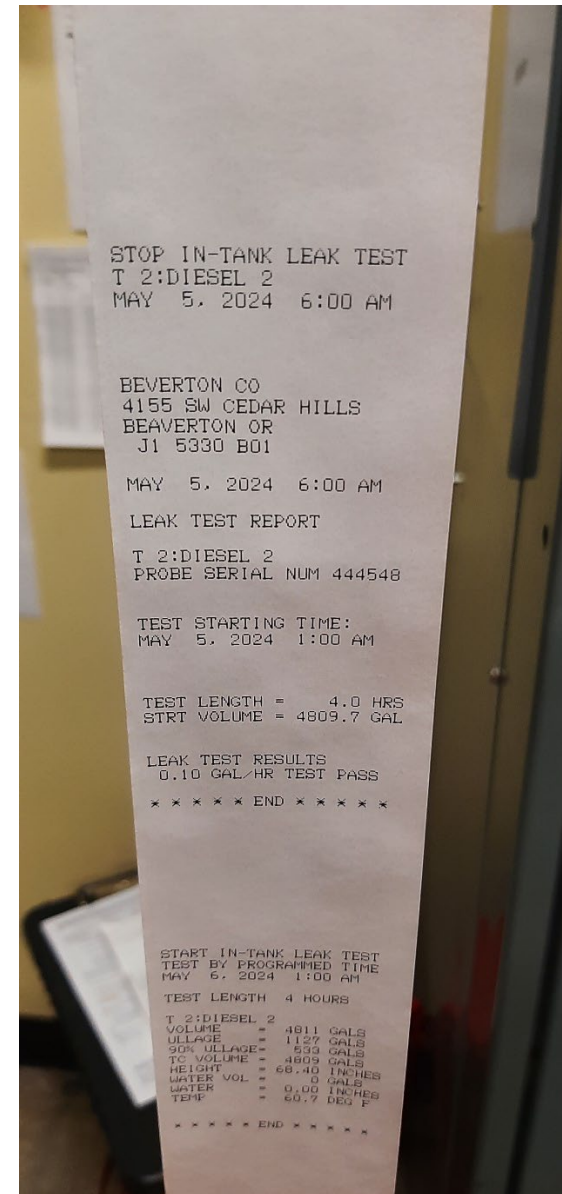


OREGON DEPARTMENT OF ENVIRONMENTAL QUALITY
INSPECTION PHOTOLOG

FACILITY NAME: Ziplly Beaverton Central Office#5330/#5662 Page 1
INSPECTION DATE: May 23, 2024



5: Leak report printout from Veeder Root



6: Leak Report from Veeder Root



State of Oregon
Department of
Environmental
Quality

Program Enforcement No. 2024-FC-9317

Department of Environmental Quality Underground Storage Tank Program

Field Citation For UST Violations

This section for
DEQ use only

Page 1 of 3

DEQ Information		UST Facility Information	
Inspection Date:	05/23/2024	Facility ID#:	5662
Inspector:	Ingrid Gaffney	Facility Name:	Ziply Beaverton Central Office #5330
DEQ Office:	700 NE Multnomah St, Ste 600 Portland, OR 97232	Facility Address:	4155 SW Cedar Hills Blvd Beaverton, OR 97005
Phone #:	503-875-1246	County:	Washington

Oregon DEQ inspected the facility listed above and identified the UST violations listed on page 3 of this Field Citation.

Field Citation Issued:	<input type="radio"/> In Person <input checked="" type="radio"/> By Mail <input type="radio"/> Both	Date Issued:	05/28/2024
Facility Representative Present During Inspection:	Peter Kelly	<input type="radio"/> Permittee <input type="radio"/> Owner <input checked="" type="radio"/> Other	
Name of Permittee or Owner:	Citizens Telecommunications Company Attn: Lee Varnman		
Mailing Address:	2610 W Casino Rd, Everett, WA 98024		

Field Citation Penalty – See Page 3 for detailed listing of each violation.	\$ 300	.00
---	--------	-----

This Field Citation is issued in accordance with the requirements for the expedited enforcement of underground storage tank (UST) violations, OAR 340-150-0250.

Owner or Permittee should select Option 1 or Option 2 below and return a signed copy of this form to DEQ by the following date: 06/28/2024

DEQ Revenue Section
700 NE Multnomah St. #600
Portland, Oregon 97232

Check one option

- ☐ **Option 1** - I acknowledge that the listed violation(s) have occurred and I am remitting the listed field citation penalty.
- ☐ **Option 2** - I do not want to participate in the expedited enforcement process and understand that my file will be referred to the Department's Office of Compliance and Enforcement for formal enforcement action.

Name:	Owner / Permittee
Signature:	Date:

Important

Read pages 2 and 3 for more information about your options and a detailed listing of violations and compliance requirements.

Field Citation Requirements

The permittee or owner should select Option 1 or Option 2 and return a signed copy of Page 1 of the Field Citation form within thirty (30) days of issuance of the Field Citation. If the permittee or owner fails to sign and send Page 1 of the Field Citation form back or pay the penalty within thirty days, Option 1 expires, the Field Citation will serve as a Pre-Enforcement Notice (PEN) and the permittee and owner will be subject to formal enforcement including the imposition of civil penalties in accordance with OAR Chapter 340, Division 12.

The permittee or owner must complete the actions required to correct the violations listed on the Field Citation by the date specified to prevent further enforcement action by DEQ.

Option 1:

By checking Option 1 the permittee or owner acknowledges that the violations listed on Page 3 of this Field Citation have occurred and agrees to pay the established penalty.

By submitting payment of the penalty amount, the responding permittee or owner agrees to accept the field citation as a final order of the Environmental Quality Commission (commission) and waives any and all rights and objections to the form, content, manner of service and timeliness of the Field Citation; to a contested case hearing and judicial review of the Field Citation [OAR 340-150-0250(6)]; and to service of a copy of this Final Order (*i.e.*, no other copy will be provided).

Upon the Department's receipt of payment of the penalty amount set forth in the Field Citation, the Field Citation becomes a Final Order of the Commission that:

1. Imposes upon the permittee or owner a civil penalty in the amount listed on Page 1 of this Field Citation; and
2. Requires the permittee or owner to satisfactorily complete the requirements and actions necessary to correct the violations documented by the dates set forth on Page 3 of this Field Citation.

Failure by the permittee or owner to complete the actions set forth on Page 3 of the Field Citation by the specified date violates the Commission Order and subjects the permittee and owner to a formal enforcement action including the imposition of additional civil penalties.

Option 2:

The permittee or owner may deny that the violations as listed on Page 3 of this Field Citation have occurred or contest the Field Citation process by checking Option 2 and submitting to the Department a signed copy of Page 1 of the Field Citation. In that event, the Field Citation will serve as a Pre-Enforcement Notice (PEN) and the permittee and owner will be subject to formal enforcement for those violations set forth in the Field Citation, including the imposition of civil penalties in accordance with OAR Chapter 340, Division 12. Civil penalties that will be imposed by the formal enforcement process will exceed the Field Citation penalties for the same violation(s).

The Department appreciates your cooperation and efforts to comply with the regulations for underground storage tank systems.

UST FIELD CITATION

DATE ISSUED: 05/28/2024

PROGRAM ENFORCEMENT No.: 2024-FC-9317

FACILITY ID: 5662

Page 3 of 3

Violation #1: *TCR: <input checked="" type="radio"/> Y <input type="radio"/> N	Failure to maintain adequate records of ATG monitoring and testing results.		
Corrective Action:	Submit results of most recent month's reports by 7/28/2024		
Rule Citation: OAR 340-150- 0450(5)	Penalty Amount: \$ 150 .00	Correct Violation by: 7/28/2024	Date Violation Corrected:
Violation #2: *TCR: <input checked="" type="radio"/> Y <input type="radio"/> N	Failure to install, operate, maintain or calibrate the Automatic Tank Gauge per manufacturer's instructions, including service checks for operability or running condition.		
Corrective Action:	Begin using an ATG that is installed, operated, maintained or calibrated per manufacturer's instructions within 60 days. Send install and work order to DEQ.		
Rule Citation: OAR 340-150- 400(1)(c)	Penalty Amount: \$ 150 .00	Correct Violation by: 7/28/2024	Date Violation Corrected:
Violation #3: *TCR: <input type="radio"/> Y <input type="radio"/> N			
Corrective Action:			
Rule Citation: OAR 340-150-	Penalty Amount: \$.00	Correct Violation by:	Date Violation Corrected:
Violation #4: *TCR: <input type="radio"/> Y <input type="radio"/> N			
Corrective Action:			
Rule Citation: OAR 340-150-	Penalty Amount: \$.00	Correct Violation by:	Date Violation Corrected:
Violation #5: *TCR: <input type="radio"/> Y <input type="radio"/> N			
Corrective Action:			
Rule Citation: OAR 340-150-	Penalty Amount: \$.00	Correct Violation by:	Date Violation Corrected:
Violation #6: *TCR: <input type="radio"/> Y <input type="radio"/> N			
Corrective Action:			
Rule Citation: OAR 340-150-	Penalty Amount: \$.00	Correct Violation by:	Date Violation Corrected:
	Total Penalty Amount (This Page): \$ 300 .00	Total Penalty Amount (All Pages): \$ 300 .00	

YOU MUST CORRECT THE VIOLATIONS AS REQUIRED, ENTER THE DATES CORRECTED, SIGN THE STATEMENT BELOW AND RETURN THIS FORM TO THE DEQ INSPECTOR LISTED ON PAGE 1 ON OR BEFORE: 06/28/2024

Retain a copy of this form and all documentation of corrective actions for your records.

I hereby certify that the UST violations noted above have been corrected: _____ / _____
Permittee/Owner Signature
Date

*TCR: Technical Compliance Rate

INFORM SENSOR REPORT

printed on 6/27/2024 8:57:15AM

Site: Beaverton CO

TYPE	SENSOR	
	NUMBER	LABEL
Liquid Sensor	1	SUMP SENSOR

DATE	TIME	STATUS
5/30/2024	3:52:00PM	Sensor Normal
5/30/2024	3:53:00PM	Sensor Normal
5/30/2024	3:54:00PM	Sensor Normal
5/30/2024	3:55:00PM	Sensor Normal
5/30/2024	6:05:00PM	Sensor Normal
6/1/2024	7:05:00PM	Sensor Normal
6/2/2024	8:06:00PM	Sensor Normal
6/3/2024	4:00:00PM	Sensor Normal
6/3/2024	9:06:00PM	Sensor Normal
6/4/2024	9:06:00PM	Sensor Normal
6/6/2024	10:06:00PM	Sensor Normal
6/8/2024	11:06:00PM	Sensor Normal
6/9/2024	11:06:00PM	Sensor Normal
6/10/2024	11:33:00AM	Sensor Normal
6/11/2024	12:07:00AM	Sensor Normal
6/12/2024	12:07:00AM	Sensor Normal
6/14/2024	6:07:00PM	Sensor Normal
6/15/2024	7:08:00PM	Sensor Normal
6/17/2024	8:09:00PM	Sensor Normal
6/19/2024	6:07:00PM	Sensor Normal
6/20/2024	7:07:00PM	Sensor Normal
6/21/2024	8:07:00PM	Sensor Normal
6/22/2024	8:07:00PM	Sensor Normal
6/23/2024	8:07:00PM	Sensor Normal
6/25/2024	5:06:00PM	Sensor Normal
6/26/2024	5:06:00PM	Sensor Normal

TYPE	SENSOR	
	NUMBER	LABEL
Liquid Sensor	2	INTERSTITIAL SPACE
DATE	TIME	STATUS
5/30/2024	3:52:00PM	Sensor Normal
5/30/2024	3:53:00PM	Sensor Normal

INFORM SENSOR REPORT

printed on 6/27/2024 8:57:15AM

SENSOR		
TYPE	NUMBER	LABEL
Liquid Sensor	2	INTERSTITIAL SPACE
DATE	TIME	STATUS
5/30/2024	3:54:00PM	Sensor Normal
5/30/2024	3:55:00PM	Sensor Normal
5/30/2024	6:05:00PM	Sensor Normal
6/1/2024	7:05:00PM	Sensor Normal
6/2/2024	8:06:00PM	Sensor Normal
6/3/2024	4:00:00PM	Sensor Normal
6/3/2024	9:06:00PM	Sensor Normal
6/4/2024	9:06:00PM	Sensor Normal
6/6/2024	10:06:00PM	Sensor Normal
6/8/2024	11:06:00PM	Sensor Normal
6/9/2024	11:06:00PM	Sensor Normal
6/10/2024	11:33:00AM	Sensor Normal
6/11/2024	12:07:00AM	Sensor Normal
6/12/2024	12:07:00AM	Sensor Normal
6/14/2024	6:07:00PM	Sensor Normal
6/15/2024	7:08:00PM	Sensor Normal
6/17/2024	8:09:00PM	Sensor Normal
6/19/2024	6:07:00PM	Sensor Normal
6/20/2024	7:07:00PM	Sensor Normal
6/21/2024	8:07:00PM	Sensor Normal
6/22/2024	8:07:00PM	Sensor Normal
6/23/2024	8:07:00PM	Sensor Normal
6/25/2024	5:06:00PM	Sensor Normal
6/26/2024	5:06:00PM	Sensor Normal

INFORM SENSOR REPORT

printed on 6/27/2024 8:20:42AM

Site: Beaverton CO

		SENSOR	
TYPE		NUMBER	LABEL
Liquid Sensor		1	SUMP SENSOR
DATE	TIME	STATUS	
7/8/2023	2:37:00AM	Sensor Normal	
7/15/2023	2:37:00AM	Sensor Normal	
7/22/2023	1:49:00AM	Sensor Normal	
7/29/2023	12:41:00AM	Sensor Normal	
8/5/2023	12:48:00AM	Sensor Normal	
8/12/2023	12:36:00AM	Sensor Normal	
8/19/2023	12:34:00AM	Sensor Normal	
8/26/2023	12:53:00AM	Sensor Normal	
8/28/2023	7:17:00AM	Sensor Normal	
9/2/2023	12:48:00AM	Sensor Normal	
9/16/2023	12:35:00AM	Sensor Normal	
9/23/2023	12:45:00AM	Sensor Normal	
9/25/2023	8:23:00AM	Sensor Normal	
9/30/2023	12:46:00AM	Sensor Normal	
9/30/2023	12:47:00AM	Sensor Normal	
10/7/2023	1:37:00AM	Sensor Normal	
10/14/2023	12:39:00AM	Sensor Normal	
10/21/2023	12:46:00AM	Sensor Normal	
11/4/2023	12:36:00AM	Sensor Normal	
11/14/2023	11:34:00AM	Sensor Normal	
11/14/2023	11:41:00AM	Sensor Normal	
11/14/2023	11:42:00AM	Sensor Normal	
11/18/2023	12:51:00AM	Sensor Normal	
11/25/2023	1:49:00AM	Sensor Normal	
11/25/2023	1:50:00AM	Sensor Normal	
5/30/2024	3:52:00PM	Sensor Normal	
5/30/2024	3:53:00PM	Sensor Normal	
5/30/2024	3:54:00PM	Sensor Normal	
5/30/2024	3:55:00PM	Sensor Normal	
5/30/2024	6:05:00PM	Sensor Normal	
6/1/2024	7:05:00PM	Sensor Normal	
6/2/2024	8:06:00PM	Sensor Normal	
6/3/2024	4:00:00PM	Sensor Normal	

INFORM SENSOR REPORT

printed on 6/27/2024 8:20:42AM

SENSOR		
TYPE	NUMBER	LABEL
Liquid Sensor	1	SUMP SENSOR
DATE	TIME	STATUS
6/3/2024	9:06:00PM	Sensor Normal
6/4/2024	9:06:00PM	Sensor Normal
6/6/2024	10:06:00PM	Sensor Normal
6/8/2024	11:06:00PM	Sensor Normal
6/9/2024	11:06:00PM	Sensor Normal
6/10/2024	11:33:00AM	Sensor Normal
6/11/2024	12:07:00AM	Sensor Normal
6/12/2024	12:07:00AM	Sensor Normal
6/14/2024	6:07:00PM	Sensor Normal
6/15/2024	7:08:00PM	Sensor Normal
6/17/2024	8:09:00PM	Sensor Normal
6/19/2024	6:07:00PM	Sensor Normal
6/20/2024	7:07:00PM	Sensor Normal
6/21/2024	8:07:00PM	Sensor Normal
6/22/2024	8:07:00PM	Sensor Normal
6/23/2024	8:07:00PM	Sensor Normal
6/25/2024	5:06:00PM	Sensor Normal
6/26/2024	5:06:00PM	Sensor Normal
SENSOR		
TYPE	NUMBER	LABEL
Liquid Sensor	2	INTERSTITIAL SPACE
DATE	TIME	STATUS
7/8/2023	2:37:00AM	Sensor Normal
7/15/2023	2:37:00AM	Sensor Normal
7/22/2023	1:49:00AM	Sensor Normal
7/29/2023	12:41:00AM	Sensor Normal
8/5/2023	12:48:00AM	Sensor Normal
8/12/2023	12:36:00AM	Sensor Normal
8/19/2023	12:34:00AM	Sensor Normal
8/26/2023	12:53:00AM	Sensor Normal
8/28/2023	7:17:00AM	Sensor Normal
9/2/2023	12:48:00AM	Sensor Normal
9/16/2023	12:35:00AM	Sensor Normal

INFORM SENSOR REPORT

printed on 6/27/2024 8:20:42AM

		SENSOR	
TYPE		NUMBER	LABEL
Liquid Sensor		2	INTERSTITIAL SPACE
DATE	TIME	STATUS	
9/23/2023	12:45:00AM	Sensor Normal	
9/25/2023	8:23:00AM	Sensor Normal	
9/30/2023	12:46:00AM	Sensor Normal	
9/30/2023	12:47:00AM	Sensor Normal	
10/7/2023	1:37:00AM	Sensor Normal	
10/14/2023	12:39:00AM	Sensor Normal	
10/21/2023	12:46:00AM	Sensor Normal	
11/4/2023	12:36:00AM	Sensor Normal	
11/14/2023	11:34:00AM	Sensor Normal	
11/14/2023	11:41:00AM	Sensor Normal	
11/14/2023	11:42:00AM	Sensor Normal	
11/18/2023	12:51:00AM	Sensor Normal	
11/25/2023	1:49:00AM	Sensor Normal	
11/25/2023	1:50:00AM	Sensor Normal	
5/30/2024	3:52:00PM	Sensor Normal	
5/30/2024	3:53:00PM	Sensor Normal	
5/30/2024	3:54:00PM	Sensor Normal	
5/30/2024	3:55:00PM	Sensor Normal	
5/30/2024	6:05:00PM	Sensor Normal	
6/1/2024	7:05:00PM	Sensor Normal	
6/2/2024	8:06:00PM	Sensor Normal	
6/3/2024	4:00:00PM	Sensor Normal	
6/3/2024	9:06:00PM	Sensor Normal	
6/4/2024	9:06:00PM	Sensor Normal	
6/6/2024	10:06:00PM	Sensor Normal	
6/8/2024	11:06:00PM	Sensor Normal	
6/9/2024	11:06:00PM	Sensor Normal	
6/10/2024	11:33:00AM	Sensor Normal	
6/11/2024	12:07:00AM	Sensor Normal	
6/12/2024	12:07:00AM	Sensor Normal	
6/14/2024	6:07:00PM	Sensor Normal	
6/15/2024	7:08:00PM	Sensor Normal	
6/17/2024	8:09:00PM	Sensor Normal	
6/19/2024	6:07:00PM	Sensor Normal	

INFORM SENSOR REPORT

printed on 6/27/2024 8:20:42AM

SENSOR		
TYPE	NUMBER	LABEL
Liquid Sensor	2	INTERSTITIAL SPACE

DATE	TIME	STATUS
6/20/2024	7:07:00PM	Sensor Normal
6/21/2024	8:07:00PM	Sensor Normal
6/22/2024	8:07:00PM	Sensor Normal
6/23/2024	8:07:00PM	Sensor Normal
6/25/2024	5:06:00PM	Sensor Normal
6/26/2024	5:06:00PM	Sensor Normal

INFORM TANK PASSED TEST REPORT

printed on 6/27/2024 8:20:43AM

Site: Beaverton CO

TANK					
NUMBER	LABEL				
2	DIESEL 2				
		REPORT			
DATE	TIME	TYPE	VOLUME Gal	DURATION Hours	%FULL VOL
6/26/2024	1:00:00AM	3.0 gal / hr	4,808.17	0.00	80.97
6/26/2024	1:00:00AM	0.2 gal / hr	4,808.17	4.00	80.97
6/26/2024	1:00:00AM	0.1 gal / hr	4,808.17	4.00	80.97
6/25/2024	1:00:00AM	0.2 gal / hr	4,808.14	4.00	80.97
6/25/2024	1:00:00AM	0.1 gal / hr	4,808.14	4.00	80.97
6/25/2024	1:00:00AM	3.0 gal / hr	4,808.14	0.00	80.97
6/23/2024	1:00:00AM	0.2 gal / hr	4,808.08	4.00	80.97
6/23/2024	1:00:00AM	0.1 gal / hr	4,808.08	4.00	80.97
6/23/2024	1:00:00AM	3.0 gal / hr	4,808.08	0.00	80.97
6/22/2024	1:00:00AM	0.1 gal / hr	4,808.06	4.00	80.97
6/22/2024	1:00:00AM	3.0 gal / hr	4,808.06	0.00	80.97
6/22/2024	1:00:00AM	0.2 gal / hr	4,808.06	4.00	80.97
6/21/2024	1:00:00AM	0.1 gal / hr	4,808.06	4.00	80.97
6/21/2024	1:00:00AM	0.2 gal / hr	4,808.06	4.00	80.97
6/21/2024	1:00:00AM	3.0 gal / hr	4,808.06	0.00	80.97
6/20/2024	1:00:00AM	0.2 gal / hr	4,808.01	4.00	80.97
6/20/2024	1:00:00AM	0.1 gal / hr	4,808.01	4.00	80.97
6/20/2024	1:00:00AM	3.0 gal / hr	4,808.01	0.00	80.97
6/19/2024	1:00:00AM	0.2 gal / hr	4,807.94	4.00	80.97
6/19/2024	1:00:00AM	3.0 gal / hr	4,807.94	0.00	80.97
6/19/2024	1:00:00AM	0.1 gal / hr	4,807.94	4.00	80.97
6/17/2024	1:00:00AM	3.0 gal / hr	4,807.95	0.00	80.97
6/16/2024	1:00:00AM	3.0 gal / hr	4,808.03	0.00	80.97
6/16/2024	1:00:00AM	0.1 gal / hr	4,808.03	4.00	80.97
6/16/2024	1:00:00AM	0.2 gal / hr	4,808.03	4.00	80.97
6/15/2024	1:00:00AM	3.0 gal / hr	4,808.06	0.00	80.97
6/15/2024	1:00:00AM	0.1 gal / hr	4,808.06	4.00	80.97
6/15/2024	1:00:00AM	0.2 gal / hr	4,808.06	4.00	80.97
6/14/2024	1:00:00AM	3.0 gal / hr	4,808.09	0.00	80.97
6/14/2024	1:00:00AM	0.1 gal / hr	4,808.09	4.00	80.97
6/14/2024	1:00:00AM	0.2 gal / hr	4,808.09	4.00	80.97
6/11/2024	1:00:00AM	3.0 gal / hr	4,808.21	0.00	80.97
6/11/2024	1:00:00AM	0.1 gal / hr	4,808.21	4.00	80.97
6/11/2024	1:00:00AM	0.2 gal / hr	4,808.21	4.00	80.97
6/10/2024	1:00:00AM	0.1 gal / hr	4,808.20	4.00	80.97
6/10/2024	1:00:00AM	0.2 gal / hr	4,808.20	4.00	80.97
6/10/2024	1:00:00AM	3.0 gal / hr	4,808.20	0.00	80.97
6/9/2024	1:00:00AM	0.2 gal / hr	4,808.23	4.00	80.97
6/9/2024	1:00:00AM	3.0 gal / hr	4,808.23	0.00	80.97
6/9/2024	1:00:00AM	0.1 gal / hr	4,808.23	4.00	80.97
6/8/2024	1:00:00AM	0.2 gal / hr	4,808.22	4.00	80.97
6/8/2024	1:00:00AM	0.1 gal / hr	4,808.22	4.00	80.97
6/8/2024	1:00:00AM	3.0 gal / hr	4,808.22	0.00	80.97
6/6/2024	1:00:00AM	0.1 gal / hr	4,808.21	4.00	80.97
6/6/2024	1:00:00AM	3.0 gal / hr	4,808.21	0.00	80.97
6/6/2024	1:00:00AM	0.2 gal / hr	4,808.21	4.00	80.97
6/4/2024	1:00:00AM	0.2 gal / hr	4,808.27	4.00	80.97
6/4/2024	1:00:00AM	3.0 gal / hr	4,808.27	0.00	80.97
6/4/2024	1:00:00AM	0.1 gal / hr	4,808.27	4.00	80.97

INFORM TANK PASSED TEST REPORT

printed on 6/27/2024 8:20:43AM

Site: Beaverton CO

TANK					
NUMBER	LABEL				
2	DIESEL 2				
		REPORT			
DATE	TIME	TYPE	VOLUME Gal	DURATION Hours	%FULL VOL
6/3/2024	1:00:00AM	0.2 gal / hr	4,808.30	4.00	80.97
6/3/2024	1:00:00AM	0.1 gal / hr	4,808.30	4.00	80.97
6/3/2024	1:00:00AM	Fullest Monthly 0.2 gal / hr	4,808.30	4.00	80.97
6/3/2024	1:00:00AM	3.0 gal / hr	4,808.30	0.00	80.97
6/2/2024	1:00:00AM	0.1 gal / hr	4,808.27	4.00	80.97
6/2/2024	1:00:00AM	3.0 gal / hr	4,808.27	0.00	80.97
6/2/2024	1:00:00AM	0.2 gal / hr	4,808.27	4.00	80.97
6/2/2024	1:00:00AM	Fullest Monthly 0.2 gal / hr	4,808.27	4.00	80.97
6/1/2024	1:00:00AM	3.0 gal / hr	4,808.26	0.00	80.97
6/1/2024	1:00:00AM	0.2 gal / hr	4,808.26	4.00	80.97
6/1/2024	1:00:00AM	0.1 gal / hr	4,808.26	4.00	80.97
6/1/2024	1:00:00AM	Fullest Monthly 0.2 gal / hr	4,808.26	4.00	80.97
5/30/2024	1:00:00AM	0.1 gal / hr	4,809.55	4.00	81.00
5/30/2024	1:00:00AM	0.2 gal / hr	4,809.55	4.00	81.00
5/30/2024	1:00:00AM	3.0 gal / hr	4,809.55	0.00	81.00
5/3/2024	1:00:00AM	Fullest Monthly 0.2 gal / hr	4,811.32	4.00	81.03
4/13/2024	1:00:00AM	Fullest Monthly 0.2 gal / hr	4,811.28	4.00	81.03
3/30/2024	1:00:00AM	Fullest Monthly 0.2 gal / hr	4,811.26	4.00	81.02
2/1/2024	1:00:00AM	Fullest Monthly 0.2 gal / hr	4,834.07	4.00	81.41
1/19/2024	1:00:00AM	Fullest Monthly 0.2 gal / hr	4,838.74	4.00	81.49
1/19/2024	1:00:00AM	Fullest Last 0.1 gal / hr	4,838.74	4.00	81.49
12/4/2023	1:00:00AM	Fullest Monthly 0.2 gal / hr	4,895.74	4.00	82.45
11/30/2023	1:00:00AM	Fullest Monthly 0.2 gal / hr	4,895.61	4.00	82.45
11/24/2023	1:00:00AM	0.2 gal / hr	4,895.59	2.00	82.45
11/24/2023	1:00:00AM	3.0 gal / hr	4,895.59	0.00	82.45
11/17/2023	1:00:00AM	0.2 gal / hr	4,895.60	2.00	82.45
11/17/2023	1:00:00AM	3.0 gal / hr	4,895.60	0.00	82.45
11/14/2023	11:33:00AM	0.1 gal / hr	4,895.67	13.00	82.45
11/14/2023	7:51:00AM	0.2 gal / hr	4,895.63	3.00	82.45
11/14/2023	7:51:00AM	0.1 gal / hr	4,895.63	3.00	82.45
11/14/2023	7:51:00AM	3.0 gal / hr	4,895.63	0.00	82.45
11/8/2023	1:00:00AM	Fullest Monthly 0.2 gal / hr	4,895.70	4.00	82.45
11/3/2023	1:00:00AM	0.2 gal / hr	4,895.65	4.00	82.45
11/3/2023	1:00:00AM	0.1 gal / hr	4,895.65	4.00	82.45
11/3/2023	1:00:00AM	3.0 gal / hr	4,895.65	0.00	82.45
11/3/2023	1:00:00AM	Fullest Monthly 0.2 gal / hr	4,895.65	4.00	82.45
10/20/2023	1:00:00AM	3.0 gal / hr	4,895.63	0.00	82.45
10/20/2023	1:00:00AM	0.1 gal / hr	4,895.63	4.00	82.45
10/20/2023	1:00:00AM	0.2 gal / hr	4,895.63	4.00	82.45
10/13/2023	1:00:00AM	3.0 gal / hr	4,895.65	0.00	82.45
10/13/2023	1:00:00AM	0.1 gal / hr	4,895.65	4.00	82.45
10/13/2023	1:00:00AM	0.2 gal / hr	4,895.65	4.00	82.45
10/6/2023	1:00:00AM	0.1 gal / hr	4,895.66	4.00	82.45
10/6/2023	1:00:00AM	0.2 gal / hr	4,895.66	4.00	82.45
10/6/2023	1:00:00AM	3.0 gal / hr	4,895.66	0.00	82.45
10/2/2023	1:00:00AM	Fullest Monthly 0.2 gal / hr	4,895.70	4.00	82.45
9/29/2023	1:00:00AM	0.2 gal / hr	4,895.75	4.00	82.45
9/29/2023	1:00:00AM	3.0 gal / hr	4,895.75	0.00	82.45
9/29/2023	1:00:00AM	0.1 gal / hr	4,895.75	4.00	82.45

INFORM TANK PASSED TEST REPORT

printed on 6/27/2024 8:20:43AM

Site: Beaverton CO

TANK					
NUMBER	LABEL				
2	DIESEL 2				
		REPORT			
DATE	TIME	TYPE	VOLUME Gal	DURATION Hours	%FULL VOL
9/25/2023	1:00:00AM	3.0 gal / hr	4,895.64	0.00	82.45
9/25/2023	1:00:00AM	0.1 gal / hr	4,895.64	4.00	82.45
9/25/2023	1:00:00AM	0.2 gal / hr	4,895.64	4.00	82.45
9/22/2023	1:00:00AM	3.0 gal / hr	4,895.67	0.00	82.45
9/22/2023	1:00:00AM	0.2 gal / hr	4,895.67	4.00	82.45
9/22/2023	1:00:00AM	0.1 gal / hr	4,895.67	4.00	82.45
9/15/2023	1:00:00AM	3.0 gal / hr	4,895.83	0.00	82.45
9/15/2023	1:00:00AM	0.1 gal / hr	4,895.83	4.00	82.45
9/15/2023	1:00:00AM	0.2 gal / hr	4,895.83	4.00	82.45
9/1/2023	1:00:00AM	Fullest Monthly 0.2 gal / hr	4,896.04	4.00	82.45
9/1/2023	1:00:00AM	0.2 gal / hr	4,896.04	4.00	82.45
9/1/2023	1:00:00AM	3.0 gal / hr	4,896.04	0.00	82.45
9/1/2023	1:00:00AM	0.1 gal / hr	4,896.04	4.00	82.45
8/28/2023	1:00:00AM	0.1 gal / hr	4,896.13	4.00	82.45
8/28/2023	1:00:00AM	0.2 gal / hr	4,896.13	4.00	82.45
8/28/2023	1:00:00AM	3.0 gal / hr	4,896.13	0.00	82.45
8/25/2023	1:00:00AM	0.1 gal / hr	4,896.19	4.00	82.46
8/25/2023	1:00:00AM	0.2 gal / hr	4,896.19	4.00	82.46
8/25/2023	1:00:00AM	3.0 gal / hr	4,896.19	0.00	82.46
8/18/2023	1:00:00AM	Fullest Monthly 0.2 gal / hr	4,896.44	4.00	82.46
8/18/2023	1:00:00AM	0.2 gal / hr	4,896.44	4.00	82.46
8/18/2023	1:00:00AM	Fullest Last 0.1 gal / hr	4,896.44	4.00	82.46
8/18/2023	1:00:00AM	0.1 gal / hr	4,896.44	4.00	82.46
8/18/2023	1:00:00AM	3.0 gal / hr	4,896.44	0.00	82.46
8/11/2023	1:00:00AM	3.0 gal / hr	4,896.24	0.00	82.46
8/11/2023	1:00:00AM	0.2 gal / hr	4,896.24	4.00	82.46
8/11/2023	1:00:00AM	0.1 gal / hr	4,896.24	4.00	82.46
8/5/2023	1:00:00AM	Fullest Monthly 0.2 gal / hr	4,896.30	4.00	82.46
8/4/2023	1:00:00AM	3.0 gal / hr	4,896.29	0.00	82.46
8/4/2023	1:00:00AM	0.1 gal / hr	4,896.29	4.00	82.46
8/4/2023	1:00:00AM	0.2 gal / hr	4,896.29	4.00	82.46
8/4/2023	1:00:00AM	Fullest Monthly 0.2 gal / hr	4,896.29	4.00	82.46
7/28/2023	1:00:00AM	0.2 gal / hr	4,896.30	4.00	82.46
7/28/2023	1:00:00AM	0.1 gal / hr	4,896.30	4.00	82.46
7/28/2023	1:00:00AM	3.0 gal / hr	4,896.30	0.00	82.46
7/22/2023	1:00:00AM	Fullest Monthly 0.2 gal / hr	4,896.40	4.00	82.46
7/22/2023	1:00:00AM	Fullest Last 0.1 gal / hr	4,896.40	4.00	82.46
7/21/2023	1:00:00AM	Fullest Monthly 0.2 gal / hr	4,896.40	4.00	82.46
7/21/2023	1:00:00AM	0.1 gal / hr	4,896.40	4.00	82.46
7/21/2023	1:00:00AM	Fullest Last 0.1 gal / hr	4,896.40	4.00	82.46
7/21/2023	1:00:00AM	0.2 gal / hr	4,896.40	4.00	82.46
7/21/2023	1:00:00AM	3.0 gal / hr	4,896.40	0.00	82.46
7/15/2023	1:00:00AM	3.0 gal / hr	4,896.23	0.00	82.46
7/14/2023	1:00:00AM	Fullest Last 0.1 gal / hr	4,896.18	4.00	82.45
7/14/2023	1:00:00AM	0.2 gal / hr	4,896.18	4.00	82.45
7/14/2023	1:00:00AM	0.1 gal / hr	4,896.18	4.00	82.45
7/14/2023	1:00:00AM	Fullest Monthly 0.2 gal / hr	4,896.18	4.00	82.45
7/8/2023	1:00:00AM	3.0 gal / hr	4,896.11	0.00	82.45

INFORM TANK PASSED TEST REPORT

printed on 6/27/2024 8:20:43AM

Site: Beaverton CO

TANK	
NUMBER	LABEL
2	DIESEL 2

DATE	TIME	TYPE	REPORT		
			VOLUME Gal	DURATION Hours	%FULL VOL
7/7/2023	1:00:00AM	Fullest Last 0.1 gal / hr	4,896.12	4.00	82.45
7/7/2023	1:00:00AM	0.2 gal / hr	4,896.12	4.00	82.45
7/7/2023	1:00:00AM	Fullest Monthly 0.2 gal / hr	4,896.12	4.00	82.45
7/7/2023	1:00:00AM	0.1 gal / hr	4,896.12	4.00	82.45

INFORM TANK PASSED TEST REPORT

printed on 6/10/2024 11:32:13AM

Site: Beaverton CO

TANK	
NUMBER	LABEL
2	DIESEL 2

DATE	TIME	TYPE	REPORT		
			VOLUME Gal	DURATION Hours	%FULL VOL
6/10/2024	1:00:00AM	3.0 gal / hr	4,808.20	0.00	80.97
6/10/2024	1:00:00AM	0.2 gal / hr	4,808.20	4.00	80.97
6/10/2024	1:00:00AM	0.1 gal / hr	4,808.20	4.00	80.97
6/9/2024	1:00:00AM	0.2 gal / hr	4,808.23	4.00	80.97
6/9/2024	1:00:00AM	0.1 gal / hr	4,808.23	4.00	80.97
6/9/2024	1:00:00AM	3.0 gal / hr	4,808.23	0.00	80.97
6/8/2024	1:00:00AM	0.1 gal / hr	4,808.22	4.00	80.97
6/8/2024	1:00:00AM	3.0 gal / hr	4,808.22	0.00	80.97
6/8/2024	1:00:00AM	0.2 gal / hr	4,808.22	4.00	80.97
6/6/2024	1:00:00AM	0.1 gal / hr	4,808.21	4.00	80.97
6/6/2024	1:00:00AM	3.0 gal / hr	4,808.21	0.00	80.97
6/6/2024	1:00:00AM	0.2 gal / hr	4,808.21	4.00	80.97
6/4/2024	1:00:00AM	3.0 gal / hr	4,808.27	0.00	80.97
6/4/2024	1:00:00AM	0.1 gal / hr	4,808.27	4.00	80.97
6/4/2024	1:00:00AM	0.2 gal / hr	4,808.27	4.00	80.97
6/3/2024	1:00:00AM	0.1 gal / hr	4,808.30	4.00	80.97
6/3/2024	1:00:00AM	3.0 gal / hr	4,808.30	0.00	80.97
6/3/2024	1:00:00AM	Fullest Monthly 0.2 gal / hr	4,808.30	4.00	80.97
6/3/2024	1:00:00AM	0.2 gal / hr	4,808.30	4.00	80.97
6/2/2024	1:00:00AM	Fullest Monthly 0.2 gal / hr	4,808.27	4.00	80.97
6/2/2024	1:00:00AM	0.2 gal / hr	4,808.27	4.00	80.97
6/2/2024	1:00:00AM	0.1 gal / hr	4,808.27	4.00	80.97
6/2/2024	1:00:00AM	3.0 gal / hr	4,808.27	0.00	80.97
6/1/2024	1:00:00AM	3.0 gal / hr	4,808.26	0.00	80.97
6/1/2024	1:00:00AM	Fullest Monthly 0.2 gal / hr	4,808.26	4.00	80.97
6/1/2024	1:00:00AM	0.2 gal / hr	4,808.26	4.00	80.97
6/1/2024	1:00:00AM	0.1 gal / hr	4,808.26	4.00	80.97
5/30/2024	1:00:00AM	3.0 gal / hr	4,809.55	0.00	81.00
5/30/2024	1:00:00AM	0.2 gal / hr	4,809.55	4.00	81.00
5/30/2024	1:00:00AM	0.1 gal / hr	4,809.55	4.00	81.00

INFORM TANK PASSED TEST REPORT

printed on 6/27/2024 8:57:15AM

Site: Beaverton CO

TANK	
NUMBER	LABEL
2	DIESEL 2

DATE	TIME	TYPE	REPORT		
			VOLUME Gal	DURATION Hours	%FULL VOL
6/26/2024	1:00:00AM	3.0 gal / hr	4,808.17	0.00	80.97
6/26/2024	1:00:00AM	0.1 gal / hr	4,808.17	4.00	80.97
6/26/2024	1:00:00AM	0.2 gal / hr	4,808.17	4.00	80.97
6/25/2024	1:00:00AM	3.0 gal / hr	4,808.14	0.00	80.97
6/25/2024	1:00:00AM	0.1 gal / hr	4,808.14	4.00	80.97
6/25/2024	1:00:00AM	0.2 gal / hr	4,808.14	4.00	80.97
6/23/2024	1:00:00AM	0.2 gal / hr	4,808.08	4.00	80.97
6/23/2024	1:00:00AM	3.0 gal / hr	4,808.08	0.00	80.97
6/23/2024	1:00:00AM	0.1 gal / hr	4,808.08	4.00	80.97
6/22/2024	1:00:00AM	0.1 gal / hr	4,808.06	4.00	80.97
6/22/2024	1:00:00AM	0.2 gal / hr	4,808.06	4.00	80.97
6/22/2024	1:00:00AM	3.0 gal / hr	4,808.06	0.00	80.97
6/21/2024	1:00:00AM	0.2 gal / hr	4,808.06	4.00	80.97
6/21/2024	1:00:00AM	0.1 gal / hr	4,808.06	4.00	80.97
6/21/2024	1:00:00AM	3.0 gal / hr	4,808.06	0.00	80.97
6/20/2024	1:00:00AM	0.2 gal / hr	4,808.01	4.00	80.97
6/20/2024	1:00:00AM	3.0 gal / hr	4,808.01	0.00	80.97
6/20/2024	1:00:00AM	0.1 gal / hr	4,808.01	4.00	80.97
6/19/2024	1:00:00AM	3.0 gal / hr	4,807.94	0.00	80.97
6/19/2024	1:00:00AM	0.2 gal / hr	4,807.94	4.00	80.97
6/19/2024	1:00:00AM	0.1 gal / hr	4,807.94	4.00	80.97
6/17/2024	1:00:00AM	3.0 gal / hr	4,807.95	0.00	80.97
6/16/2024	1:00:00AM	3.0 gal / hr	4,808.03	0.00	80.97
6/16/2024	1:00:00AM	0.1 gal / hr	4,808.03	4.00	80.97
6/16/2024	1:00:00AM	0.2 gal / hr	4,808.03	4.00	80.97
6/15/2024	1:00:00AM	3.0 gal / hr	4,808.06	0.00	80.97
6/15/2024	1:00:00AM	0.1 gal / hr	4,808.06	4.00	80.97
6/15/2024	1:00:00AM	0.2 gal / hr	4,808.06	4.00	80.97
6/14/2024	1:00:00AM	3.0 gal / hr	4,808.09	0.00	80.97
6/14/2024	1:00:00AM	0.1 gal / hr	4,808.09	4.00	80.97
6/14/2024	1:00:00AM	0.2 gal / hr	4,808.09	4.00	80.97
6/11/2024	1:00:00AM	0.2 gal / hr	4,808.21	4.00	80.97
6/11/2024	1:00:00AM	0.1 gal / hr	4,808.21	4.00	80.97
6/11/2024	1:00:00AM	3.0 gal / hr	4,808.21	0.00	80.97
6/10/2024	1:00:00AM	3.0 gal / hr	4,808.20	0.00	80.97
6/10/2024	1:00:00AM	0.2 gal / hr	4,808.20	4.00	80.97
6/10/2024	1:00:00AM	0.1 gal / hr	4,808.20	4.00	80.97
6/9/2024	1:00:00AM	0.1 gal / hr	4,808.23	4.00	80.97
6/9/2024	1:00:00AM	0.2 gal / hr	4,808.23	4.00	80.97
6/9/2024	1:00:00AM	3.0 gal / hr	4,808.23	0.00	80.97
6/8/2024	1:00:00AM	3.0 gal / hr	4,808.22	0.00	80.97
6/8/2024	1:00:00AM	0.2 gal / hr	4,808.22	4.00	80.97
6/8/2024	1:00:00AM	0.1 gal / hr	4,808.22	4.00	80.97
6/6/2024	1:00:00AM	0.2 gal / hr	4,808.21	4.00	80.97
6/6/2024	1:00:00AM	0.1 gal / hr	4,808.21	4.00	80.97
6/6/2024	1:00:00AM	3.0 gal / hr	4,808.21	0.00	80.97
6/4/2024	1:00:00AM	3.0 gal / hr	4,808.27	0.00	80.97
6/4/2024	1:00:00AM	0.2 gal / hr	4,808.27	4.00	80.97
6/4/2024	1:00:00AM	0.1 gal / hr	4,808.27	4.00	80.97

INFORM TANK PASSED TEST REPORT

printed on 6/27/2024 8:57:15AM

Site: Beaverton CO

TANK	
NUMBER	LABEL
2	DIESEL 2

DATE	TIME	TYPE	REPORT		
			VOLUME Gal	DURATION Hours	%FULL VOL
6/3/2024	1:00:00AM	0.2 gal / hr	4,808.30	4.00	80.97
6/3/2024	1:00:00AM	0.1 gal / hr	4,808.30	4.00	80.97
6/3/2024	1:00:00AM	3.0 gal / hr	4,808.30	0.00	80.97
6/3/2024	1:00:00AM	Fullest Monthly 0.2 gal / hr	4,808.30	4.00	80.97
6/2/2024	1:00:00AM	Fullest Monthly 0.2 gal / hr	4,808.27	4.00	80.97
6/2/2024	1:00:00AM	0.2 gal / hr	4,808.27	4.00	80.97
6/2/2024	1:00:00AM	3.0 gal / hr	4,808.27	0.00	80.97
6/2/2024	1:00:00AM	0.1 gal / hr	4,808.27	4.00	80.97
6/1/2024	1:00:00AM	Fullest Monthly 0.2 gal / hr	4,808.26	4.00	80.97
6/1/2024	1:00:00AM	0.2 gal / hr	4,808.26	4.00	80.97
6/1/2024	1:00:00AM	0.1 gal / hr	4,808.26	4.00	80.97
6/1/2024	1:00:00AM	3.0 gal / hr	4,808.26	0.00	80.97
5/30/2024	1:00:00AM	3.0 gal / hr	4,809.55	0.00	81.00
5/30/2024	1:00:00AM	0.2 gal / hr	4,809.55	4.00	81.00
5/30/2024	1:00:00AM	0.1 gal / hr	4,809.55	4.00	81.00
5/3/2024	1:00:00AM	Fullest Monthly 0.2 gal / hr	4,811.32	4.00	81.03

Technician: David Chambers
Technician Certification: (See forms)

MONITORING SYSTEM CERTIFICATION

This form is used to document testing and servicing of tank and piping leak monitoring equipment. If required by applicable law, a copy of the completed form must be provided by the Testing Contractor or owner to the governing UST agency as required by regulation.

A. General Information

Facility Name: ZIPLY FIBER CO 5330 Bldg. No.: _____
Site Address: 4155 SW Cedar Hills Blvd City: Beaverton State: OR Zip: 97005
Facility Contact Person: _____ Contact Phone No.: 503-626-0028
Make/Model of Monitoring System: Veeder Root TLS-350 Date of Testing/Servicing: 5/30/2024


B. Inventory of Equipment Tested/Certified

 Check the appropriate boxes to indicate specific equipment inspected/serviced:

Tank ID: <u>T1 - Diesel</u> <input checked="" type="checkbox"/> In-Tank Gauging Probe. Model: <u>847390-107</u> <input checked="" type="checkbox"/> Annular Space or Vault Sensor. Model: <u>794380-303</u> <input checked="" type="checkbox"/> Piping Sump / Trench Sensor(s). Model: <u>794380-205</u> <input checked="" type="checkbox"/> Fill Sump Sensor(s). Model: <u>NO SENSOR</u> <input type="checkbox"/> Mechanical Line Leak Detector. Model: _____ <input type="checkbox"/> Electronic Line Leak Detector. Model: _____ <input checked="" type="checkbox"/> Tank Overfill / High-Level Sensor. Model: <u>VR-HLA-001</u> <input type="checkbox"/> Other (specify equipment type and model in Section E on Page 2).	Tank ID: _____ <input type="checkbox"/> In-Tank Gauging Probe. Model: _____ <input type="checkbox"/> Annular Space or Vault Sensor. Model: _____ <input type="checkbox"/> Piping Sump / Trench Sensor(s). Model: _____ <input type="checkbox"/> Fill Sump Sensor(s). Model: _____ <input type="checkbox"/> Mechanical Line Leak Detector. Model: _____ <input type="checkbox"/> Electronic Line Leak Detector. Model: _____ <input type="checkbox"/> Tank Overfill / High-Level Sensor. Model: _____ <input type="checkbox"/> Other (specify equipment type and model in Section E on Page 2).
Tank ID: _____ <input type="checkbox"/> In-Tank Gauging Probe. Model: _____ <input type="checkbox"/> Annular Space or Vault Sensor. Model: _____ <input type="checkbox"/> Piping Sump / Trench Sensor(s). Model: _____ <input type="checkbox"/> Fill Sump Sensor(s). Model: _____ <input type="checkbox"/> Mechanical Line Leak Detector. Model: _____ <input type="checkbox"/> Electronic Line Leak Detector. Model: _____ <input type="checkbox"/> Tank Overfill / High-Level Sensor. Model: _____ <input type="checkbox"/> Other (specify equipment type and model in Section E on Page 2).	Tank ID: _____ <input type="checkbox"/> In-Tank Gauging Probe. Model: _____ <input type="checkbox"/> Annular Space or Vault Sensor. Model: _____ <input type="checkbox"/> Piping Sump / Trench Sensor(s). Model: _____ <input type="checkbox"/> Fill Sump Sensor(s). Model: _____ <input type="checkbox"/> Mechanical Line Leak Detector. Model: _____ <input type="checkbox"/> Electronic Line Leak Detector. Model: _____ <input type="checkbox"/> Tank Overfill / High-Level Sensor. Model: _____ <input type="checkbox"/> Other (specify equipment type and model in Section E on Page 2).
Dispenser ID: _____ <input type="checkbox"/> Dispenser Containment Sensor(s). Model: _____ <input type="checkbox"/> Shear Valve(s). <input type="checkbox"/> Dispenser Containment Float(s) and Chain(s).	Dispenser ID: _____ <input type="checkbox"/> Dispenser Containment Sensor(s). Model: _____ <input type="checkbox"/> Shear Valve(s). <input type="checkbox"/> Dispenser Containment Float(s) and Chain(s).
Dispenser ID: _____ <input type="checkbox"/> Dispenser Containment Sensor(s). Model: _____ <input type="checkbox"/> Shear Valve(s). <input type="checkbox"/> Dispenser Containment Float(s) and Chain(s).	Dispenser ID: _____ <input type="checkbox"/> Dispenser Containment Sensor(s). Model: _____ <input type="checkbox"/> Shear Valve(s). <input type="checkbox"/> Dispenser Containment Float(s) and Chain(s).
Dispenser ID: _____ <input type="checkbox"/> Dispenser Containment Sensor(s). Model: _____ <input type="checkbox"/> Shear Valve(s). <input type="checkbox"/> Dispenser Containment Float(s) and Chain(s).	Dispenser ID: _____ <input type="checkbox"/> Dispenser Containment Sensor(s). Model: _____ <input type="checkbox"/> Shear Valve(s). <input type="checkbox"/> Dispenser Containment Float(s) and Chain(s).

*If the facility contains more tanks or dispensers, copy this form. Include information for every tank and dispenser at the facility.

C. Certification - I certify that the equipment identified in this document was inspected/serviced in accordance with the manufacturers' guidelines. Attached to this Certification is a Plot Plan showing the layout of monitoring equipment. For any equipment capable of generating such reports, I have also attached a copy of the report; (check all that apply): ☒ System set-up ☒ Alarm history report

Technician Name (print): David Chambers Signature: 
Certification No.: C23292 License No.: _____
Testing Company Name: Tanknology Phone No.: (800) 800-4633
Testing Company Address: 11000 N. MoPac Expressway Suite 500 Date of Testing/Servicing: 5/30/2024

D. Results of Testing/Servicing

Software Version Installed: 18.01

Complete the following checklist:

<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No* <input type="checkbox"/> N/A	Is the visual alarm on the console operational?
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No* <input type="checkbox"/> N/A	Is the audible alarm on the console operational?
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Is the external visual overfill alarm (light unit) present?
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No* <input type="checkbox"/> N/A	Is the external visual overfill alarm operating properly?
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Is the external audible overfill alarm present?
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No* <input type="checkbox"/> N/A	Is the external audible overfill alarm operating properly?
90 %	<input type="checkbox"/> N/A	At what percent of tank(s) capacity is the external alarm programmed to trigger? <i>If different % between tanks, clarify in section E.</i>
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No* <input type="checkbox"/> N/A	Were all sensors visually inspected, functionally tested, and confirmed operational?
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No* <input type="checkbox"/> N/A	Were all sensors installed at lowest point of secondary containment and positioned so that other equipment will not interfere with their proper operation?
<input type="checkbox"/> Yes	<input type="checkbox"/> No* <input checked="" type="checkbox"/> N/A	For pressurized piping systems, does the turbine automatically shut down if the piping secondary containment monitoring system detects a leak, fails to operate, or is electrically disconnected? If yes: which sensors initiate positive shut-down? <i>(Check all that apply)</i> <input type="checkbox"/> Sump/Trench Sensors; <input type="checkbox"/> Dispenser Containment Sensors. Did you confirm positive shut-down due to leaks <u>and</u> sensor failure/disconnection? <input type="checkbox"/> Yes; <input type="checkbox"/> No
<input type="checkbox"/> Yes*	<input checked="" type="checkbox"/> No	Was any monitoring equipment replaced? If yes, identify specific sensors, probes, or other equipment replaced and list the manufacturer name and model for all replacement parts in Section E, below.
<input type="checkbox"/> Yes*	<input checked="" type="checkbox"/> No	Was liquid found inside any secondary containment systems designed as dry systems? <i>(Check all that apply)</i> <input type="checkbox"/> Product; <input type="checkbox"/> Water. If yes, describe causes in Section E, below.
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No*	Was monitoring system set-up reviewed to ensure proper settings? Attach set up reports, if applicable
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No*	Is all monitoring equipment operational per manufacturer's specifications?

* In Section E below, describe how and when these deficiencies were or will be corrected.

E. Comments:

Backup Battery reading, if applicable (Required for VR TLS 300/350): Backup Battery Reading @ *3.68 Vdc.

All sensors passed testing.

F. In-Tank Gauging / SIR Equipment:

- ☐ Check this box if tank gauging is used only for inventory control.
☐ Check this box if no tank gauging or SIR equipment is installed.

This section must be completed if in-tank gauging equipment is used to perform leak detection monitoring.

Complete the following checklist:

<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No*	Were all tank gauging probes visually inspected for damage and residue buildup?
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No*	Was accuracy of system product level readings tested?
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No*	Was accuracy of system water level readings tested?
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No*	Were all probes reinstalled properly?
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No*	Were all items on the equipment manufacturer's maintenance checklist completed?

* In the Section G, below, describe how and when these deficiencies were or will be corrected.

G. Comments:

probe: passed testing.

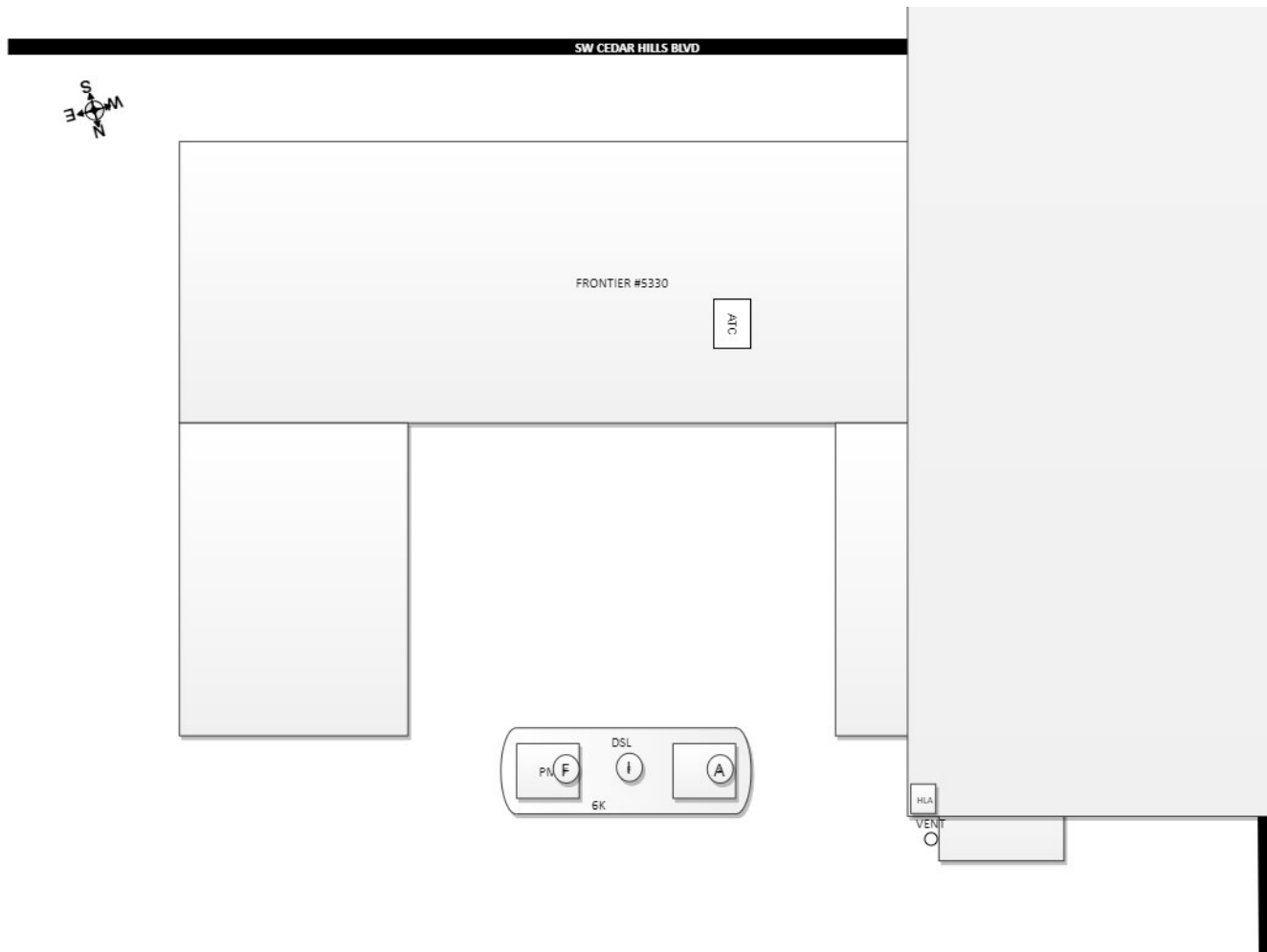
DID OVERALL MONITOR SYSTEM TESTING PASS (Check One)? YES ☒ NO ☐
INCONCLUSIVE ☐




Site Diagram

(This site diagram is for reference only and is not drawn to scale)

Work Order: 2371258
Site ID / Name: 5330 / ZIPLY FIBER CO 5330
Address: 4155 SW Cedar Hills Blvd
City: Beaverton State: OR Zip: 97005



 Tanknology Inc. 11000 N. MoPac Expressway, Suite 500 Austin, TX 78759 (800) 964-0010 JOB CLEARANCE FORM & SITE SAFETY CHECKLIST - OVF		Policy 100-29-A Rev: G Revised: 2/11/2019	
Site Name#: <u>Ziply fiber #5330</u>		Street Address: <u>4155 SW Cedar Hill Rd W.O.# NW1-2371258</u> <u>Beaverton, OR 97005</u>	
Arrival Time: <u>0925</u>	Departure Time: <u>1000</u>	Travel Time: <u>N/A</u>	Others on site: <u>N/A</u>
Date: <u>05-30-24</u>		Scope of Work and Tasks Performed (JSA's must be available for all tasks): <u>ATG, Corl.</u>	
Repairs to Equipment or Parts Provided: <u>NA</u>			
Follow-up actions required, equipment isolated, comments: <u>All testing PASSED.</u>			
PPE - PERSONAL PROTECTIVE EQUIPMENT REQUIRED (Check <input checked="" type="checkbox"/> items used or mark ~ if not applicable)			
<input checked="" type="checkbox"/> Safety Vest <input checked="" type="checkbox"/> Steel Toe Boots	<input checked="" type="checkbox"/> Safety Glasses <input type="checkbox"/> Splash Goggles	<input type="checkbox"/> Gloves <input type="checkbox"/> Hard Hat	<input type="checkbox"/> Hearing Protection <input type="checkbox"/> Other
PRE-TEST PROCEDURES (Check <input checked="" type="checkbox"/> each item completed or mark ~ if not applicable)			
1. <input checked="" type="checkbox"/> Discuss safety procedures with site personnel. Nearest hospital: <u>911</u> 2. <input checked="" type="checkbox"/> Prior to fuel deliveries the UST system must be placed back into working order. 3. <input checked="" type="checkbox"/> Secure entire work area with barricades (cones, flags, and extension bars, caution tape, pennant flags, or other perimeter guard). 4. <input checked="" type="checkbox"/> Place fire extinguishers and "No Smoking" signs in the work area. 5. <input type="checkbox"/> Confined Space Entry - If required complete separate CSE Checklist. If NO CSE REQUIRED check the following reason: <input type="checkbox"/> No CS's <input type="checkbox"/> CS's not opened <input type="checkbox"/> No entry only visual <input type="checkbox"/> No entry - used tools <input checked="" type="checkbox"/> Work from prone position w/o risk of falling in 6. <input type="checkbox"/> Implement Lockout/Tagout per API 1646 (when accessing product piping during tasks) <input type="checkbox"/> Secure nozzles with "Out of Service" bags and nylon ties. <input type="checkbox"/> Secure the circuit breaker(s) with lockout devices and tags. <input type="checkbox"/> Close ball valves or check valves on product piping. <input type="checkbox"/> Disconnect electrical "bayonet" connector from the STP(s). <input type="checkbox"/> All applicable equipment disabled during test(s). <input type="checkbox"/> Verify LOTO is complete by trying to operate pumps.			
SIGN IN		Lead Technician Name: <u>Daniel C</u> Site Representative Name: <u>No Site</u>	
General Safety Checks: All site personnel have been informed. <u>NO</u> Is a fuel delivery due today? <u>NO</u> LOTO procedures have been discussed. Work areas barricaded to protect workers, staff & public.		Lead Technician Signature: <u>[Signature]</u> Site Representative Signature: <u>Personal</u>	
POST-TEST PROCEDURES (Check <input checked="" type="checkbox"/> each item completed or mark ~ if not applicable)			
1. <input type="checkbox"/> Remove all "Lockout/Tagout" devices and nozzle bags/ties. 2. <input type="checkbox"/> Run all pumps and verify there are no leaks: <input type="checkbox"/> Leak Detector Threads on STP's <input type="checkbox"/> Impact Valve Test Ports under dispensers <input type="checkbox"/> Functional Elements & Relief Screws 3. <input type="checkbox"/> Install lead wire seal on all test plugs & leak detectors that were serviced. Count LD threads: L1 ____ L2 ____ L3 ____ L4 ____ L5 ____ L6 ____ 4. <input checked="" type="checkbox"/> Check following components operational: <input type="checkbox"/> Ball floats, dry breaks & caps <input checked="" type="checkbox"/> ATG probes, sensors, & caps <input type="checkbox"/> Containment sumps are dry <input type="checkbox"/> Cathodic protection operational <input type="checkbox"/> Dispenser panels are replaced <input type="checkbox"/> Dispensers & POS operational <input type="checkbox"/> Leak detectors & vent tubes <input checked="" type="checkbox"/> Drop tubes, flapper valves, fill adapters & caps <input checked="" type="checkbox"/> Monitoring system is operational <input checked="" type="checkbox"/> Manhole covers and sump lids <input type="checkbox"/> Siphon lines and manifold valves open <input type="checkbox"/> Shear valves are open <input type="checkbox"/> STP fittings and bayonet connectors <input type="checkbox"/> Spill containers & drain valves <input type="checkbox"/> Vents & Extractors (not capped, plugged or isolated) 5. <input checked="" type="checkbox"/> Remove barricades.			
SIGN OUT & Operator Verification of Work (OVF)		Lead Technician Name: <u>Daniel C</u> Site Representative Name: <u>No Site</u>	
General Safety Checks: Work area has been left clean & safe. Site staff aware of work status including any remaining isolation. Changes to equipment are documented and communicated. All incidents, near incidents, and unsafe situations reported.		Lead Technician Signature: <u>[Signature]</u> Site Representative Signature: <u>Personal</u>	
Site Representative Comments:			

COMPANY CONFIDENTIAL

© Tanknology Inc., 2019. All Rights Reserved.

Printed copies of this document are uncontrolled. The current version is available in the Tanknology On-Line Document Control System.

21814 5330

BEVERTON CO
4155 SW CEDAR HILLS
BEAVERTON OR
J1 5330 B01

MAY 30, 2024 10:00 AM

BEVERTON CO
4155 SW CEDAR HILLS
BEAVERTON OR
J1 5330 B01

MAY 30, 2024 9:34 AM

SYSTEM STATUS REPORT

D 1:AUTODIAL FAILURE

INVENTORY REPORT

T 2:DIESEL 2

VOLUME = 4815 GALS
ULLAGE = 1123 GALS
90% ULLAGE = 529 GALS
TC VOLUME = 4812 GALS
HEIGHT = 68.45 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 61.2 DEG F

***** END *****

SYSTEM STATUS REPORT

D 1:AUTODIAL FAILURE

INVENTORY REPORT

T 2:DIESEL 2

VOLUME = 4816 GALS
ULLAGE = 1122 GALS
90% ULLAGE = 528 GALS
TC VOLUME = 4810 GALS
HEIGHT = 68.47 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 62.7 DEG F

***** END *****

BEVERTON CO
4155 SW CEDAR HILLS
BEAVERTON OR
J1 5330 B01

MAY 30, 2024 10:00 AM

LIQUID STATUS

MAY 30, 2024 10:00 AM

L 1:SUMP SENSOR
SENSOR NORMAL

L 2:INTERSTITIAL SPACE
SENSOR NORMAL

***** END *****

BEVERTON CO
4155 SW CEDAR HILLS
BEAVERTON OR
J1 5330 B01

MAY 30, 2024 9:34 AM

LIQUID STATUS

MAY 30, 2024 9:34 AM

L 1:SUMP SENSOR
SENSOR NORMAL

L 2:INTERSTITIAL SPACE
SENSOR NORMAL

RS-232 END OF MESSAGE
DISABLED

AUTO DIAL ALARM SETUP

D 1:BUILDING TECH

IN-TANK ALARMS

ALL:LEAK ALARM
ALL:HIGH WATER ALARM
ALL:OVERFILL ALARM
ALL:LOW PRODUCT ALARM
ALL:SUDDEN LOSS ALARM
ALL:HIGH PRODUCT ALARM
ALL:INVALID FUEL LEVEL
ALL:PROBE OUT
ALL:HIGH WATER WARNING
ALL:DELIVERY NEEDED
ALL:MAX PRODUCT ALARM
ALL:GROSS TEST FAIL
ALL:PERIODIC TEST FAIL
ALL:ANNUAL TEST FAIL
ALL:PERIODIC TEST WARN
ALL:ANNUAL TEST WARNING
ALL:PERIODIC TEST ALARM
ALL:ANNUAL TEST ALARM
ALL:TANK TEST ACTIVE
ALL:NO CSLD IDLE TIME
ALL:TANK SIPHON BREAK
ALL:CSLD INCR RATE WARN
ALL:ACCU_CHART CAL WARN
ALL:RECON WARNING
ALL:RECON ALARM
ALL:LOW TEMP WARNING
ALL:MISSING TICKET WARN

LIQUID SENSOR ALMS
ALL:FUEL ALARM

ALL:SENSOR OUT ALARM
ALL:SHORT ALARM
ALL:WATER ALARM
ALL:WATER OUT ALARM
ALL:HIGH LIQUID ALARM
ALL:LOW LIQUID ALARM
ALL:LIQUID WARNING

SOFTWARE REVISION LEVEL
VERSION 18.01
SOFTWARE# 346018-100-B
CREATED - 99.07.23.19.14

NO SOFTWARE MODULE
SYSTEM FEATURES:
PERIODIC IN-TANK TESTS
ANNUAL IN-TANK TESTS

LEAK TEST METHOD

TEST DAILY : ALL TANK

START TIME : 1:00 AM
TEST RATE : 0.10 GAL/HR
DURATION : 4 HOURS

LEAK TEST REPORT FORMAT
NORMAL

LIQUID SENSOR SETUP

L 1:SUMP SENSOR
TRI-STATE (SINGLE FLOAT)
CATEGORY : STP SUMP

L 2:INTERSTITIAL SPACE
DUAL FLOAT HYDROSTATIC
CATEGORY : ANNULAR SPACE

OUTPUT RELAY SETUP

R 1:OVERFILL ALARM
TYPE:
STANDARD
NORMALLY OPEN

IN-TANK ALARMS
ALL:OVERFILL ALARM

R 2:LOW FUEL ALARM
TYPE:
STANDARD
NORMALLY OPEN

IN-TANK ALARMS
ALL:LOW PRODUCT ALARM

R 3:FUEL LEAK ALARM
TYPE:
STANDARD
NORMALLY OPEN

IN-TANK ALARMS
ALL:LEAK ALARM
ALL:SUDDEN LOSS ALARM

IN-TANK SETUP

T 2:DIESEL 2
PRODUCT CODE : 2
THERMAL COEFF : .000450
TANK DIAMETER : 92.00
TANK PROFILE : 4 PTS
FULL VOL : 5938
69.0 INCH VOL : 4854
46.0 INCH VOL : 2965
23.0 INCH VOL : 1076

FLOAT SIZE: 4.0 IN. 8496

WATER WARNING : 1.5
HIGH WATER LIMIT: 2.0

MAX OR LABEL VOL: 5938
OVERFILL LIMIT : 90%

HIGH PRODUCT : 5344

DELIVERY LIMIT : 95%

DELIVERY LIMIT : 5641

DELIVERY LIMIT : 50%

DELIVERY LIMIT : 2969

LOW PRODUCT : 1000

LEAK ALARM LIMIT: 10

SUDDEN LOSS LIMIT: 50

TANK TILT : 0.00

MANIFOLDED TANKS

T#: NONE

LEAK MIN PERIODIC: 40%

LEAK MIN ANNUAL : 2375

LEAK MIN ANNUAL : 40%

LEAK MIN ANNUAL : 2375

PERIODIC TEST TYPE

STANDARD

ANNUAL TEST FAIL

ALARM DISABLED

PERIODIC TEST FAIL

ALARM DISABLED

GROSS TEST FAIL

ALARM DISABLED

ANN TEST AVERAGING: OFF

PER TEST AVERAGING: OFF

TANK TEST NOTIFY: OFF

TNK TST SIPHON BREAK:OFF

DELIVERY DELAY : 5 MIN

SYSTEM SETUP

MAY 30, 2024 9:34 AM

SYSTEM UNITS

U.S.
SYSTEM LANGUAGE
ENGLISH
SYSTEM DATE/TIME FORMAT
MON DD YYYY HH:MM:SS xM

BEVERTON CO
4155 SW CEDAR HILLS
BEAVERTON OR
J1 5330 B01

SHIFT TIME 1 : DISABLED
SHIFT TIME 2 : DISABLED
SHIFT TIME 3 : DISABLED
SHIFT TIME 4 : DISABLED

TANK PERIODIC WARNINGS
DISABLED
TANK ANNUAL WARNINGS
DISABLED
LINE PERIODIC WARNINGS
DISABLED
LINE ANNUAL WARNINGS
DISABLED

PRINT TC VOLUMES
ENABLED

TEMP COMPENSATION
VALUE (DEG F) : 60.0
STICK HEIGHT OFFSET
DISABLED

H-PROTOCOL DATA FORMAT
HEIGHT
DAYLIGHT SAVING TIME
ENABLED
START DATE
MAY WEEK 2 SUN
START TIME
2:00 AM
END DATE
NOV WEEK 1 SUN
END TIME
2:00 AM

RE-DIRECT LOCAL PRINTOUT
DISABLED

COMMUNICATIONS SETUP

PORT SETTINGS:

COMM BOARD : 2 (FXMOD)
BAUD RATE : 2400
PARITY : ODD
STOP BIT : 1 STOP
DATA LENGTH: 7 DATA
DIAL TYPE : TONE
ANSWER ON : 1 RING

RECEIVER SETUP:

D 1:BUILDING TECH
1-425-308-1576
RCVR TYPE: FACSIMILE
PORT NO: 2
RETRY NO: 40
RETRY DELAY: 5
CONFIRMATION REPORT: OFF

AUTO DIAL TIME SETUP:

D 1:BUILDING TECH
DIAL ON DATE
JAN 1, 1996
DIAL TIME : DISABLED
RECEIVER REPORTS:

RS-232 SECURITY
CODE : *****

ALARM HISTORY REPORT

----- SENSOR ALARM ----
L 1:SUMP SENSOR
STP SUMP
FUEL ALARM
MAY 30, 2024 9:42 AM

ALARM HISTORY REPORT

----- IN-TANK ALARM -----

T 2:DIESEL 2

HIGH WATER ALARM
MAY 30, 2024 9:56 AM

OVERFILL ALARM
MAY 30, 2024 9:46 AM

LOW PRODUCT ALARM
MAY 30, 2024 9:45 AM

HIGH PRODUCT ALARM
MAY 30, 2024 9:46 AM

INVALID FUEL LEVEL
MAY 30, 2024 9:45 AM

PROBE OUT
MAY 30, 2024 9:57 AM
MAY 30, 2024 9:44 AM
DEC 4, 2023 12:40 PM

HIGH WATER WARNING
MAY 30, 2024 9:56 AM

DELIVERY NEEDED
MAY 30, 2024 9:45 AM

ALARM HISTORY REPORT

----- SENSOR ALARM ----
L 2:INTERSTITIAL SPACE
ANNULAR SPACE
HIGH LIQUID ALARM
MAY 30, 2024 9:47 AM

LOW LIQUID ALARM
MAY 30, 2024 9:47 AM

***** END *****

***** END *****

From: [GAFFNEY Ingrid * DEQ](#)
To: [Mayer, John](#); [UST Duty Officer * DEQ](#)
Cc: [Siefken, Rod](#); [Kelly, Peter](#); [Varnam, Lee](#); [Ildelfonso, Tony](#)
Subject: RE: DEQ UST Inspection Determinations: Ziplly #5664, #5666 and #5662
Date: Thursday, June 27, 2024 2:06:13 PM
Attachments: [image001.png](#)
[image002.png](#)

John

Thank you for clarifying what occurred. These reports are now meeting the criteria for the field citation's corrective actions.

DEQ will look out for the payments. Once they're received we'll close out the citation.

Emily – we can close this out once DEQ receives the payment. Can you add these documents to the official file?

Regards,

Ingrid Gaffney
UST Compliance Inspector
DEQ UST Program
700 NE Multnomah St, Ste 600
Portland, OR 97232
<https://www.oregon.gov/deq/Pages/index.aspx>
she/ her

From: Mayer, John <john.mayer@ziply.com>
Sent: Thursday, June 27, 2024 9:21 AM
To: UST Duty Officer * DEQ <UST.DutyOfficer@DEQ.oregon.gov>; GAFFNEY Ingrid * DEQ <Ingrid.GAFFNEY@deq.oregon.gov>
Cc: Siefken, Rod <rodney.siefken@ziply.com>; Kelly, Peter <peter.kelly@ziply.com>; Varnam, Lee <lee.varnam@ziply.com>; Ildelfonso, Tony <Tony.Ildelfonso@ziply.com>
Subject: RE: DEQ UST Inspection Determinations: Ziplly #5664, #5666 and #5662

Good Fine Morning All !

This email is concerning **Facility 5662 Ziplly Beaverton Central Office (2024-FC-9317)**.

In my previous email below I mentioned that the monitor "woke-up" during a tank cleaning process. I was wrong, it was the annual monitor certification work that "woke up" the modem / monitor communications. The annual monitor certification was performed on 5/30/2024. See Attachment - "Beaverton CO 2024". The work was performed by Tanknology and their W.O. number was NW1-2371258, and Ziplly's P.O. / W,O, number was 13B-2878-015.

As per your request I've also attached the Sensor Report for the past 30 days and 12 months. Also are the Tank Leak Reports for the past 30 days and 12

months. The 2) 30 day reports should satisfy the requirement that communications has been re-established with the monitor. And the 2) 12 month reports should let you know that we had communications up until the monitor had its "hiccup".

The fines should be paid or at least in the process of being paid. Please let me know if there is any further documentation that you need to resolve **2024-FC-9317**.

Thanks for your time & help !

John Mayer

Build Services Specialist

Ziply Fiber

425-308-1576 (c)

john.mayer@ziply.com

From: UST Duty Officer * DEQ <UST.DutyOfficer@DEQ.oregon.gov>

Sent: Tuesday, June 11, 2024 9:44 AM

To: Mayer, John <john.mayer@ziply.com>; GAFFNEY Ingrid * DEQ <Ingrid.GAFFNEY@deq.oregon.gov>

Cc: UST Duty Officer * DEQ <UST.DutyOfficer@DEQ.oregon.gov>; Siefken, Rod <rodney.siefken@ziply.com>; Kelly, Peter <peter.kelly@ziply.com>; Varnam, Lee <lee.varnam@ziply.com>; Ildelfonso, Tony <Tony.Ildelfonso@ziply.com>

Subject: RE: DEQ UST Inspection Determinations: Ziply #5664, #5666 and #5662

Good morning John,

Facility 5666 Ziply Forest Grove Office #5360 (2024-FC-9316)

Thank you for sending the tanknology testing and inspection report. Yes, this documentation satisfies the violations listed on the field citation. As soon as the \$400 fine is received, then the inspection can be closed out. Please send payment as soon as possible.

Facility 5662 Ziply Beaverton Central Office (2024-FC-9317)

DEQ wants to see that the tank probe is programmed correctly and that it is reading/diagnosing the system with the correct data.

-Can you please provide more information on the what the annual cleaning entailed and who the work was completed by. Include any work orders and the set up report for the system.

-Send one more month of leak detection to ensure the system is still functioning correctly.

-Send a year's worth of testing, which can be found under diagnostics in the system.

Payment of the \$300 fine is also due on 6/28/24



Emily Litke (she/her)
Duty Officer, Underground Storage Tanks
DEQ Headquarters, Land Quality Division
700 NE Multnomah Street, Suite 600
Portland OR 97232-4100
503-806-9516
Emily.LITKE@deq.oregon.gov

From: Mayer, John <john.mayer@ziply.com>

Sent: Monday, June 10, 2024 12:25 PM

To: GAFFNEY Ingrid * DEQ <Ingrid.GAFFNEY@deq.oregon.gov>

Cc: UST Duty Officer * DEQ <UST.DutyOfficer@DEQ.oregon.gov>; Siefken, Rod <rodney.siefken@ziply.com>; Kelly, Peter <peter.kelly@ziply.com>; Varnam, Lee <lee.varnam@ziply.com>; Ildelfonso, Tony <Tony.Ildelfonso@ziply.com>

Subject: RE: DEQ UST Inspection Determinations: Ziply #5664, #5666 and #5662

Good Fine Morning Ingrid !

I'm catching you up on the progress of the "Field Violations" from recent inspections.

2024-FC-9316

We have had the annual tank inspection completed. Along with the inspection the overfill alarm was tested and certified. Please see the attachment titled "Forest Grove CO 2024". I believe that should take care of the violation, other than paying the fines. Do you agree ?

2024-FC-9317

On the 30th of May our annual tank cleaning was done at this site. During this process it is customary for the probe to be removed from the tank. This action "woke-up" the CPU to modem communications. And I have been able to communicate with the site frequently since then. I have attached the recent sensor and tank test reports. I'm hoping that this resolves the violations. I realize that we will still need to pay the fines. Also since the system "repaired itself" I cannot provide a receipt of the repair. Would you require further proof that communications has been restored ?

Please let me know if you need more documentation to resolve these issues.

Thanks for your time and have a GREAT day !

John Mayer
Build Services Specialist
Ziply Fiber
425-308-1576 (c)
john.mayer@ziply.com

From: GAFFNEY Ingrid * DEQ <Ingrid.GAFFNEY@deq.oregon.gov>
Sent: Tuesday, May 28, 2024 2:07 PM
To: Varnam, Lee <lee.varnam@ziply.com>; Mayer, John <john.mayer@ziply.com>; Kelly, Peter <peter.kelly@ziply.com>
Cc: UST Duty Officer * DEQ <UST.DutyOfficer@DEQ.oregon.gov>
Subject: RE: DEQ UST Inspection Determinations: Ziply #5664, #5666 and #5662

You're welcome. Keep me and our UST duty officer updated on the progress. IF you require more time for repairs at Cedar Hills, please let me know in advance.

Regards,

Ingrid Gaffney
UST Compliance Inspector
DEQ UST Program
700 NE Multnomah St, Ste 600
Portland, OR 97232
<https://www.oregon.gov/deq/Pages/index.aspx>
she/ her

From: Varnam, Lee <lee.varnam@ziply.com>
Sent: Tuesday, May 28, 2024 1:29 PM
To: GAFFNEY Ingrid * DEQ <Ingrid.GAFFNEY@deq.oregon.gov>; Mayer, John <john.mayer@ziply.com>; Kelly, Peter <peter.kelly@ziply.com>
Cc: UST Duty Officer * DEQ <UST.DutyOfficer@DEQ.oregon.gov>
Subject: RE: DEQ UST Inspection Determinations: Ziply #5664, #5666 and #5662

Thank you, Ingrid.

Lee Varnam
Facilities Manager
(206) 947-7581
Lee.Varnam@ziply.com
Ziplyfiber.com



From: GAFFNEY Ingrid * DEQ <Ingrid.GAFFNEY@deq.oregon.gov>
Sent: Tuesday, May 28, 2024 9:52 AM
To: Varnam, Lee <lee.varnam@ziply.com>; Mayer, John <john.mayer@ziply.com>; Kelly, Peter <peter.kelly@ziply.com>
Cc: UST Duty Officer * DEQ <UST.DutyOfficer@DEQ.oregon.gov>
Subject: DEQ UST Inspection Determinations: Ziply #5664, #5666 and #5662
Importance: High

WARNING: External email. Please verify sender before opening attachments or clicking on links.

Hello Lee, John and Peter:

Thank you to Peter for meeting with DEQ and helping perform the Ziply inspections at 2018 College Way, Forest Grove, 19555 SW Kinnamen Rd, Aloha and 4155 SW Cedar Hills Blvd, Beaverton on May 23rd, 2024.

19555 SW Kinnamen Rd, Aloha is in compliance. Please see the attached letter.. Let me know if you require hardcopies mailed.

In regards to the other two sites, DEQ observed missing testing records at 2018 College Way from 2023 for the annual tank gauge testing and overfill testing at the time of the inspection. Also, DEQ observed the ATG/Veeder Root at 4155 SW Cedar Hills Blvd is not functioning correctly nor is the site collecting monthly leak detection records since December of 2023. DEQ must issue a field citation for both sites, per enforcement guidance. Please see the attached citation.

CORRECTIVE ACTIONS: 2018 College Way, Forest Grove

1. Failure to test spill/overfill prevention equipment at least once every 3 years OAR 340-150-0310(8)(c) Perform testing, submit testing, and work order to DEQ by 7/28/2024.
2. Failure to operate, maintain or calibrate Release Detection equipment (ATG) per manufacturer's instructions, including testing for operability or running condition annually. OAR 340-150-0400(2) Perform annual testing and submit to DEQ within 60 days.

CORRECTIVE ACTIONS: 4155 SW Cedar Hills Blvd, Beaverton

1. **Failure to maintain adequate records of ATG monitoring and testing results. Provide monthly release results once repair or replacement is performed.**
340-150-450(5) submit by 7/28/2024
2. **Failure to repair, install, operate, maintain, or calibrate per manufacturer's instructions, including service checks for operability or running condition.**
Repair or replace the ATG/Veeder Root so the site is maintaining monthly leak detection records, send the repair invoice and final testing to DEQ. 340-150-400(1)(c)

This field citation will help DEQ keep track of the necessary repairs and testing required due to the ATG not functioning properly. The field citation states Ziply has **60 days to perform** or schedule the repairs and necessary repair testing with submission of recent CSLD results. If you require more time, please let DEQ know.

Please make sure to only hire licensed DEQ contractors. Here is the list:

<https://www.oregon.gov/deq/tanks/Pages/UST-Service.aspx>

***Please contact the UST Duty Officer at 503-229-5034 or ust.dutyofficer@deq.oregon.gov for the investigation and repairs and be sure to CC UST duty officer when sending over the final documentation. Enforcement is being handled through our Duty officer.**

Please let me know if you would like me to mail a copy of the field citation.

Regards,

Ingrid Gaffney
UST Compliance Inspector
DEQ UST Program
700 NE Multnomah St, Ste 600
Portland, OR 97232
<https://www.oregon.gov/deq/Pages/index.aspx>
she/ her



Oregon Department of Environmental Quality

DataBase Connection: **PROD**

Program Enforcement Maintenance



Program Enforcement

Violations List (2)

Corrective Actions (0)

Link Actions

File #

5662

Create PEN

Create OCE Enforcement

Name

ZIPLY BEAVERTON CENTRAL OFFICE 5330

Location

4155 SW CEDAR HILLS BLVD / BEAVERTON / WASHINGTON

Permit

UST General Permit.34-5662-2024-OPER.Active

Recipient Information:

Show Recipient Selection

Name / Title

Varnam, Lee /

Address

2610 W Casino Rd / Everett / WA / 98024

Phone / Fax / Email

(206) 947-7581 / /

Cancel

Save

Program Enforcement Number

2024-FC-9317

Regulatory Program

Underground Storage Tanks

Staff Assigned

Ingrid Gaffney

Enforcement Type

Field Citation

Enforcement Action Issued Date

05/28/2024

Show Calendar

Response Received Date

Show Calendar

Payment Due Date

06/28/2024

Show Calendar

Payment Received Date

7/30/24

Show Calendar

Penalty Amount

\$300.00

PEN Referral Date

Show Calendar

Closed Date

Show Calendar

Withdrawn Date

Show Calendar

Link To Complaint

Comments

60 days to repair or replace the ATG that is not functioning properly. Also, the site must send a current report of the leak detection reading from the ATG to DEQ by 7/28/2024

PAID ON 07/30/24; PAID BY ZIPLY FIBER; CK # 32252-2; AMT \$300. XIAN

Cancel

Save

Create By

05/28/2024 09:23:17

Ingrid Gaffney

Last Update By

05/28/2024 09:23:17

Ingrid Gaffney

Record ID

9317

Create PEN

Create OCE Enforcement

Related Items

View Selected

	ID	Name/Reference	Date
Select	SV: 21569	Full Compliance Inspection (FCI)	05/23/2024
Select	PE: 9317	Field Citation	05/28/2024
Select	SV Vio: 20089	(15) ATG - TCR	05/23/2024
Select	SV Vio: 20090	(15) ATG - TCR	05/23/2024

Records Found = 4

Legend

ID Type	Description
SV	Site Visit
PE	Program Enforcement
SV Vio	Site Visit Violation

Compliance Events Report

Post a Comment or Report a Problem

https://webp01.deq.state.or.us/aces/ACESProgramEnforcement.aspx

1/1