

LUST # 24-84-4007 Rawlinson's laundry

This file created 8/8/2014.

There is no NFA letter.

Release reported 3/15/1984.

File closed 3/20/1984.

Probably "Admin" closure,
but no documents to indicate
one way or another. - Just correspondence
and release form.

- Ginny Dech

8/8/2014

Rawlinson's

1264 BROADWAY

SALEM, OREGON

PHONE 363-3165

March 14, 1984

Mr. David St. Louis P.E.
Department of Enviromental Quality
895 Summer Street, N.E.
Salem, Oregon 97310

*LAST GSN FILE
Mention*

Dear Mr. St. Louis,

Since heavy, black, fresh oil was found seeping in the alley, we dug an exploratory tunnel next to our existing storage tank. This exposed seepage from our tank.

A new tank was ordered, the old tank was pumped dry and filled with a sand slurry.

The new tank is buried, hooked up, and operating to meet and satisfy all codes.

The City of Salem Fire Marshall, City Inspectors, and Pollution Control Officer observed the back filling of the old tank and positioning of the new tank.

Very Truly Yours,

RAWLINSON'S LAUNDRY

Keith Perkins
Keith Perkins
General Manager

KP:dc

LAUNDRY
CUSTOM LAUNDERED SHIRTS
SANITONE DRY CLEANING
LINEN SUPPLY
INDUSTRIAL LINEN SUPPLY

RECEIVED
MAR 15 1984

State of Oregon
DEPARTMENT OF ENVIRONMENTAL QUALITY
SALEM, OFFICE

LUST PRIORITY RANKING WORKSHEET

Facility Name: Rawlinson's Laundry Location: 1264 Broadway Salem

Hazard Ranking

WVR :LUST NUMBER 29844007

- I. TYPE OF CONTAMINANT _____
- II. IMPACTS TO WATER SUPPLY _____
- III. ENVIRONMENTAL IMPACTS _____
- IV. (A) SOIL CHARACTERISTICS _____
- IV. (B) RAINFALL _____
- IV. (C) DISTANCE TO SURFACE WATER _____
- IV. (D) DEPTH TO UPPERMOST AQUIFER _____
- V. NUMBER OF GALLONS LOST _____

Workload Prioritization

- VI. HAZARD RANK _____ 0
- VII. OTHER ENVIRONMENTAL IMPACTS _____
- VIII. NON-ENVIRONMENTAL FACTORS _____
- IX. CURRENT PHASE _____
- X. PHASE DURATION _____
- XI. RECALCITRANCE _____
- XII. PRP READINESS _____
- XIII. DEQ COMMITMENT _____
- XIV. DEQ RESOURCES ALREADY EXPENDED _____
- XV. DEQ RESOURCES PROJECTED TO BE NEEDED _____
- XVI. FUND ALLOCATION _____ 0

TOTAL SCORE _____ 3

Completed by: Larry Jack

Date: 6-15-89

Updated by: _____

Date: _____

*** OREGON DEQ LUST REPORT ***

INITIAL INFORMATION

UST FACILITY I.D. #: _____ EMERGENCY RESPONSE TAKEN: Y N
 LUST INCIDENT #: County 24 - Year 84 - Number 4007
 DATE RECEIVED: 3/15/84 RECEIVED BY: _____
 LEAK REPORTED BY: _____ TANK LOCATION: _____ LUST CONTACT: _____ RP: _____
 _____ RAWLINSON'S LAUNDRY KEITH PEAKINS RAWLINSON'S LAUNDRY
 _____ 1264 Broadway _____
 _____ Salem _____ Salem
 Ph#: _____ Ph#: 363-3165 Ph#: _____ Ph#: _____

CONFIRMATION OF RELEASE: Date Release Confirmed: / /
 Staff Site Inspection Lab Sample: DEQ RP Other
 (Name: _____) (Results: _____)
 Written Report by RP Other(_____)

SITE ASSESSMENT

HOW DISCOVERED: Date Release Discovered: / /
 Routine Monitoring Inventory Control Decommissioning
 Site Assessment Complaint(_____) Other(_____)
 AMOUNT RELEASED: _____ TYPE OF MATERIAL RELEASED: Heavy Fuel Oil
 SOURCE OF RELEASE: Tank Leak Overfill
 Pipe Leak Other(_____)
 EXTENT OF CONTAMINATION: Minor Moderate Major PRIORITY: +

	Potential Impact	Impacted
AQ/SW/WQ: Soil	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
AQ: Vapors	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N
Fire: Vapors or Free Product	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N
WQ: Groundwater	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N
WQ: Surface Water or Storm Drain	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N
WQ: Drinking Water (_____)	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N

EXPOSURE ASSESSMENT RESULTS: _____

SITE MANAGEMENT

DATE RELEASE STOPPED: / / GUIDELINE: Matrix Non-Matrix
 DISPOSAL OF MATERIAL REMOVED: Free Product Soil
 Estimated Quantity: _____
 Party Responsible: _____
 Location of Disposal: _____
 Date of Evacuation: _____
 ENFORCEMENT ACTION UNDERTAKEN: Y N
 Action Date: Notice of Violation: / / NOI: / /
 Administrative Order: / / Court Action: / /

CLEANUP ACTIVITY:
 Date Cleanup Started: / / Date Site Under Control: / /
 Date Cleanup Finished: / / Contractor's Name: _____
 SOURCE OF PAYMENT FOR CLEANUP ACTIVITY:
 Responsible Party State With Trust State Without Trust
 COST RECOVERY INITIATED: Y N OFF-SITE MIGRATION: Y ?
 ESTIMATIONS: Cost of Cleanup: _____ Staff Time On Project: _____

COMMENTS: _____

