



# 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

December 12, 2024

Valberg Building Materials, Inc.  
Attn: James Valberg  
PO Box 794  
Boring, OR 97009-0794

RE: UST Compliance Inspection  
DEQ UST #9739 – 27960 SE Hwy 212

Dear Valberg Building Materials, Inc.:

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 facilities, among others, has been selected for inspection. A thorough inspection of your facilities 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 February 21, 2025, starting at approximately 9 am at the DEQ UST #s listed below.**

**February 21 at 9 am:**

- DEQ UST #9739 – 27960 SE Hwy 212, Boring, OR

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 or open sump lids. Please be prepared to open and operate these system parts.

The DEQ requests the following documentation be submitted electronically via email 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 for the past three years
- Spill prevention testing records, was due by October 2020
- Monthly walkthroughs, one year
- Overfill Prevention Equipment testing, was due by October 2020
- Cathodic protection testing (if applicable).

Please submit these records to [ingrid.gaffney@deq.oregon.gov](mailto: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.

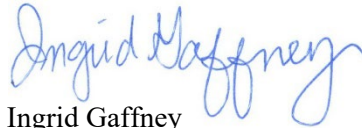
DEQ will not touch any equipment, if you are unable to assist with equipment access, please have your UST Service Provider there. DEQ will need to observe what equipment is in the tank top sumps and under the dispensers. If ball floats are the primary overflow protection device, these will need to be 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 503-875-1246 [ingrid.gaffney@deq.oregon.gov](mailto: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

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

Inspector: Ingrid Gaffney      Date: 2/29/2025      Time: 9 AM      Facility: 9739

<b>I. Site Information</b>		
Facility Name: <u>Boring Shell</u>	Permittee: <u>Valberg Building Materials</u>	Contact: <u>James Valberg</u>
Site Address: <u>27960 SE Hwy 212</u>	Organization: <u>SAME</u>	Phone:
City: <u>Boring, OR 97009</u>	Phone:	<u>503-663-0383</u>

<b>II. Tank Information</b>					
DEQ Permit #	<u>BEJCC</u>	<u>BEJCD</u>	<u>BEJCE</u>		
Estimated Gallons	<u>15000</u>	<u>8000</u>	<u>7000</u>		
Substance	<u>GASOLINE</u>	<u>GASOLINE</u>	<u>DIESEL</u>		
Tank Material	<u>XERXES</u>	→	→		
Tank Install Date	<u>5/8/1998</u>	<u>5/8/1998</u>	<u>5/8/1998</u>		
Pipe Material	<u>SNUPLEX plastic</u>	→	→		
Pipe Type	<u>pressure</u>	→	→		
Pipe Install Date	<u>5/8/1998</u>	<u>5/8/1998</u>	<u>5/8/1998</u>		
Overfill Device	<u>Alarm</u>	<u>Alarm</u>	<u>Alarm</u>		

**Notes and Comments from the UST database:**  Check file before conducting inspection

DUPLICATE

If tanks are manifolded, which tanks:  Yes    No

<b>III. Operating Certificate</b>			<b>Compliance</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input checked="" type="checkbox"/> Current	<input checked="" type="checkbox"/> Accurate	<input checked="" type="checkbox"/> Posted for delivery drive to observe		

<b>IV. Operator Training</b>			<b>Compliance</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Class A/B Operator	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name:	Date:	
Class C Operator	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Cardlock			

<b>V. Financial Responsibility</b>			<b>Compliance</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Type of coverage:	Begin Date:	End Date:		
Coverage amount correct:	Number of tanks covered:			
Financial responsibility could also be in the form of self insurance, bonds, local government, trust fund, and or guarantee				

<b>VI. Walkthrough Requirements</b>			<b>Compliance</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Spill prevention and release detection equipment checked monthly?	<u>performing not tracking</u>		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Tank top sumps checked annually?	<u>somewhat</u>		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

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

Date of last testing: 1/31/2025 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: 1/31/2025 Last three tests available?  Yes  No

Number of lines tested: 3 Number of LD tested: 3

Leak detector manufacturer make and model: 99 LD 2000

Tank gauge manufacturer make and model: veeder root TLS 2000

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 Veeder 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)

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

*2025*

*missing months of leak detection reports - sensor reports*

Tank release detection records available during inspection

1. <input checked="" type="checkbox"/> Jan	<input type="checkbox"/> Feb	<input checked="" type="checkbox"/> Mar	<input type="checkbox"/> Apr	<input checked="" type="checkbox"/> May	<input type="checkbox"/> Jun	<input checked="" type="checkbox"/> Jul	<input checked="" type="checkbox"/> Aug	<input type="checkbox"/> Sep	<input type="checkbox"/> Oct	<input checked="" type="checkbox"/> Nov	<input type="checkbox"/> Dec
2. <input checked="" type="checkbox"/> Jan	<input type="checkbox"/> Feb	<input checked="" type="checkbox"/> Mar	<input type="checkbox"/> Apr	<input checked="" type="checkbox"/> May	<input type="checkbox"/> Jun	<input checked="" type="checkbox"/> Jul	<input checked="" type="checkbox"/> Aug	<input type="checkbox"/> Sep	<input type="checkbox"/> Oct	<input checked="" type="checkbox"/> Nov	<input type="checkbox"/> Dec
3. <input type="checkbox"/> Jan	<input type="checkbox"/> Feb	<input checked="" type="checkbox"/> Mar	<input type="checkbox"/> Apr	<input checked="" type="checkbox"/> May	<input type="checkbox"/> Jun	<input checked="" type="checkbox"/> Jul	<input checked="" type="checkbox"/> Aug	<input type="checkbox"/> Sep	<input type="checkbox"/> Oct	<input checked="" type="checkbox"/> Nov	<input checked="" type="checkbox"/> Dec
4. <input type="checkbox"/> Jan	<input type="checkbox"/> Feb	<input type="checkbox"/> Mar	<input type="checkbox"/> Apr	<input type="checkbox"/> May	<input type="checkbox"/> Jun	<input type="checkbox"/> Jul	<input type="checkbox"/> Aug	<input type="checkbox"/> Sep	<input type="checkbox"/> Oct	<input type="checkbox"/> Nov	<input type="checkbox"/> Dec
5. <input type="checkbox"/> Jan	<input type="checkbox"/> Feb	<input type="checkbox"/> Mar	<input type="checkbox"/> Apr	<input type="checkbox"/> May	<input type="checkbox"/> Jun	<input type="checkbox"/> Jul	<input type="checkbox"/> Aug	<input type="checkbox"/> Sep	<input type="checkbox"/> Oct	<input type="checkbox"/> Nov	<input type="checkbox"/> Dec

**VIII. Spill Prevention** Compliance  Yes  No

Date(s) of testing: 1/31/2025 NO 2020 Number of spill buckets tested? \_\_\_\_\_

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: 1/31/2025 NO 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

XI. General notes from inspection

Representative onsite: Jim Valberg

email: only does phone calls

\* Annular sensors  
violations

\* Missing last two years of records for annual testing

\* NO 2020 spill and overfill, performed 2025

\* missing training records

\* Not documenting monthly walktroughs.

\* Missing several months of leak detection records.

\* NO proof of insurance provided at inspection.

Compliance Determination:

No Violations Observed

Observed violations resulting in enforcement

Inspector Signature:

Dorinda Maggry

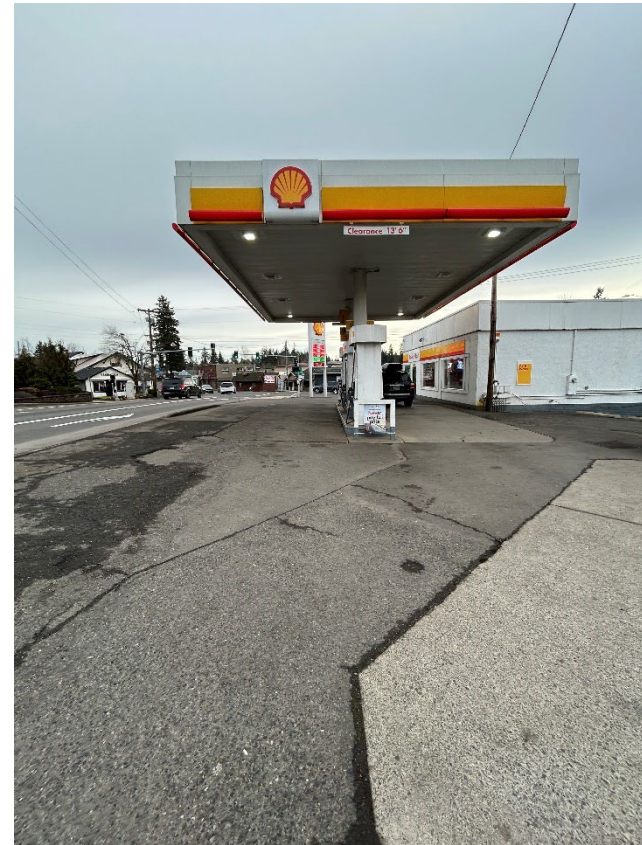
Date:

2/21/2025



**OREGON DEPARTMENT OF ENVIRONMENTAL QUALITY  
INSPECTION PHOTOLOG**

**FACILITY NAME: Boring Shell #9739  
INSPECTION DATE: February 21, 2025**



**1: 27960 SE HWY 212, Boring, OR 97009**



2: Tank nest looking east



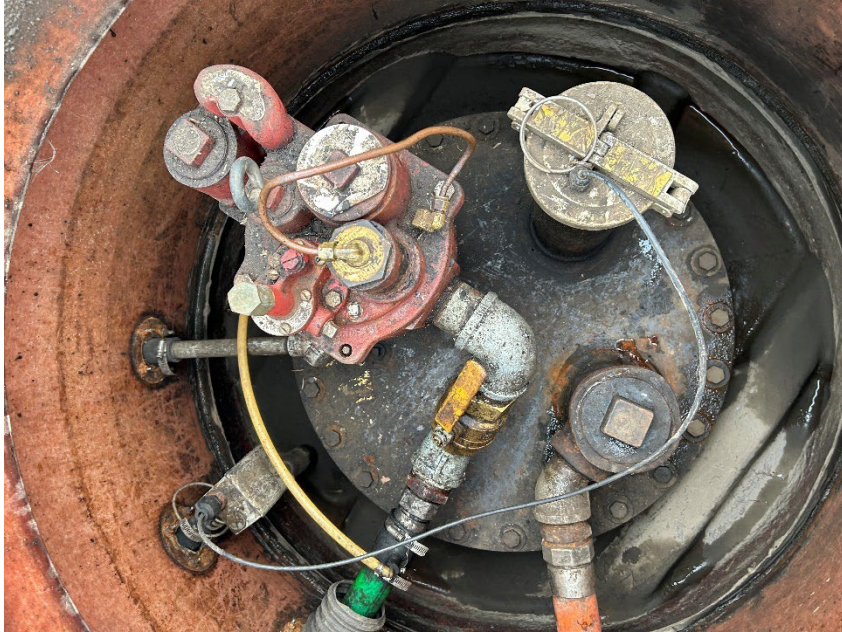
3: Premium fill



4: Premium sump



5: Diesel fill



6: Diesel sump



7: Regular fill



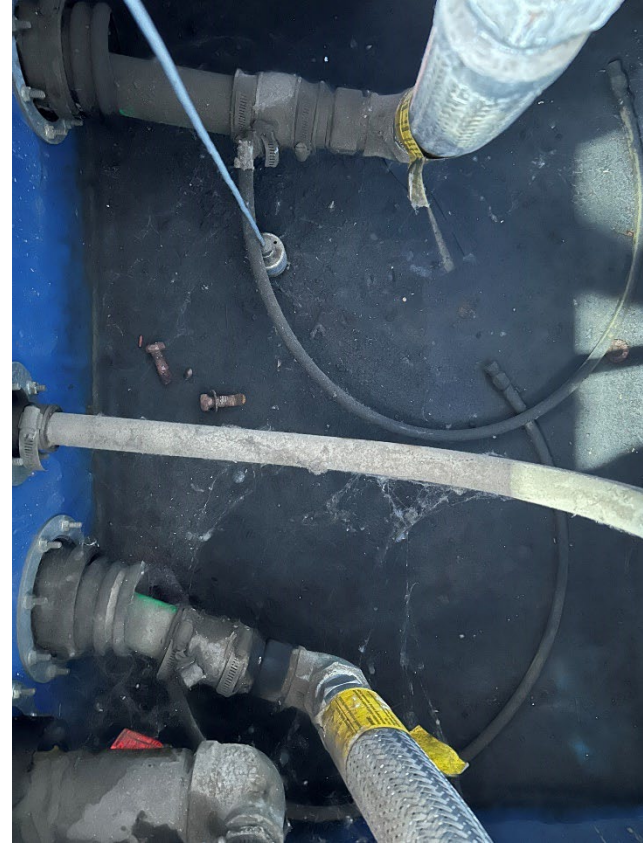
8: Regular sump



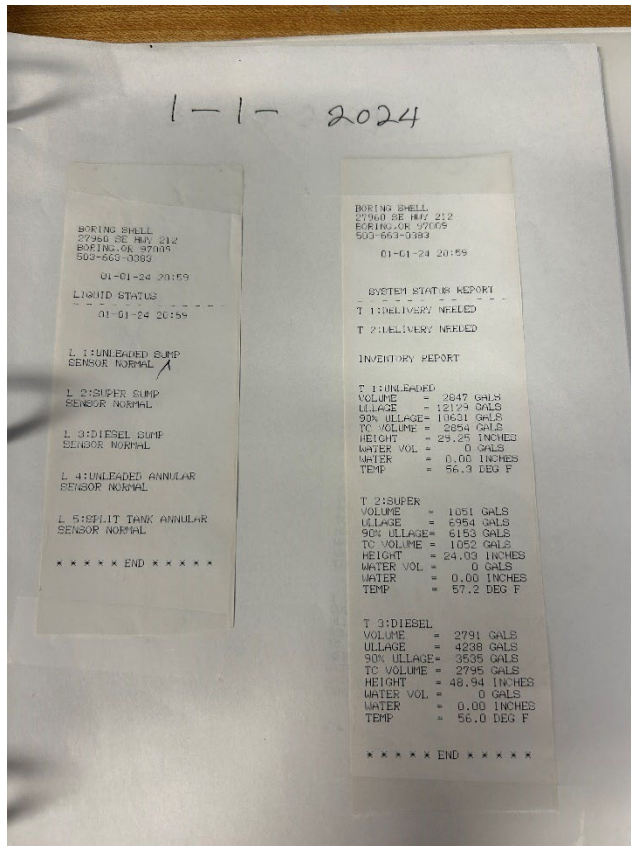
9: UDC #5



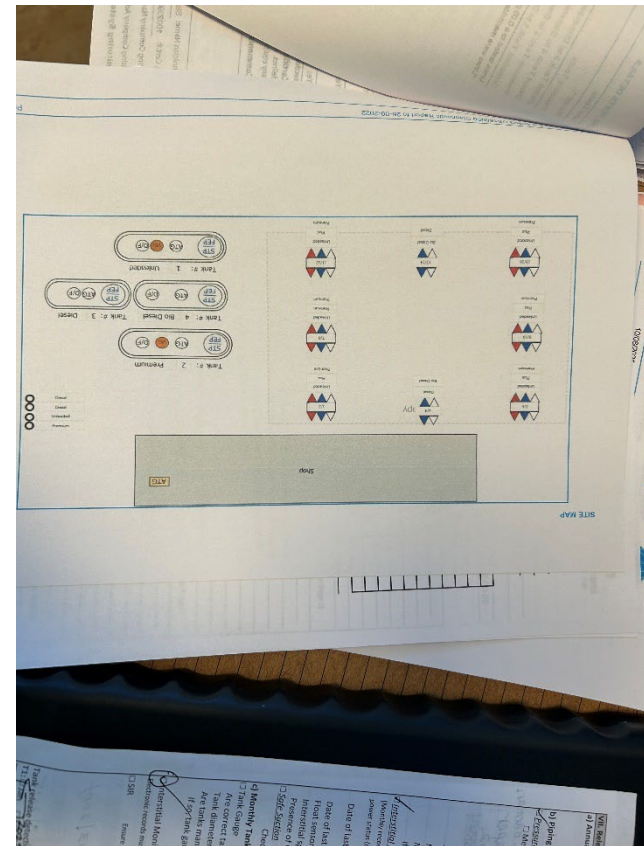
10: UDC #3



11: UDC #1



12: Leak detection report



13: Site layout



This section for DEQ use only

State of Oregon  
Department of  
Environmental  
Quality

Department of Environmental Quality  
Underground Storage Tank Program

Field Citation  
For UST Violations

DEQ Information		UST Facility Information	
Inspection Date:	02/21/2025	Facility ID#:	9739
Inspector:	Ingrid GAFFNEY	Facility Name:	BORING SHELL
DEQ Office:	700 NE Multnomah St Ste 600	Facility Address:	27960 SE HWY 212 PO BOX 306, BORING, Oregon 97009
Phone #:	503-229-5048	County:	Clackamas

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="checkbox"/> In Person	<input checked="" type="checkbox"/> By Mail	<input type="checkbox"/> Both	Date Issued: 03/10/2025
Facility Representative Present During Inspection:	James D. Valberg			<input type="checkbox"/> Permittee <input type="checkbox"/> Owner <input type="checkbox"/> Other
Name of Permittee or Owner:	Valberg Building Materials			
Mailing Address:	PO Box 794 , Boring Oregon 97009			

**Field Citation Penalty** – See Page 3 for detailed listing of each violation. \$ 650

**Check payable to: DEQ Financial Services LBX3615; P.O. Box 3615; Portland OR 97208-3615**

**Or pay online through your YDO account**

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 for to DEQ by the following date:**

**04/14/2025**

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.**

DATE ISSUED: 03/10/2025

PROGRAM ENFORCEMENT No.: 2025-FC-9791

FACILITY ID: 9739

Page 3 of 3

**Violation #1:** **Failure to keep the most recent 12 consecutive months of interstitial monitoring records for review and inspection.**  
**\*TCR:**

Corrective Action: Conduct daily monitoring (print all reports of sensor and leak detectors) as required by rule. Maintain all records from the Veeder Root, daily. Submit copies of most recent monthly monitoring record/printouts from the tank gauge and submit copies to DEQ by April 14, 2025.

Rule Citation: <b>OAR 340-150-0465(6)</b>	Penalty Amount: \$ 300	Correct Violation by: 04/14/2025	Date Violation Corrected:
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**Violation #2:** **Failure to complete initial overfill, spill prevention or sump testing requirements by October 1, 2020**  
**\*TCR:**

Corrective Action: Maintain site on tri-annual testing schedule for all spill buckets and overfill alarm testing. Testing performed January 21, 2025 reviewed at inspection February 21, 2025. No corrective action required.

Rule Citation: <b>OAR 340-150-0310(10)</b>	Penalty Amount: \$	Correct Violation by: N/a	Date Violation Corrected:
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**Violation #3:** **Failure to provide documentation of compliance with operator training upon request**  
**\*TCR:**

Corrective Action: Submit proof of compliance with operator training for A/B and C class. Submit proof of testing certification and Class C to DEQ by April 14, 2025

Rule Citation: <b>OAR 340-150-0210 (7)(b)</b>	Penalty Amount: \$ 50	Correct Violation by: 04/14/2025	Date Violation Corrected:
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**Violation #4:** **Failure to maintain records of periodic operation and maintenance walkthrough inspections for one year.**  
**\*TCR:**

Corrective Action: Conduct monthly walkthrough inspection, required by rule. Maintain the log. Submit March/April walkghrough to DEQ by April 14, 2025

Rule Citation: <b>OAR 340-150-0315(2)</b>	Penalty Amount: \$ 150	Correct Violation by: 04/14/2025	Date Violation Corrected:
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**Violation #5:** **Failure to install, operate, maintain or calibrate RD equipment per manufacturer's instructions, including service checks for operability or running condition (i.e. device has been incorrectly installed, is defective, damaged, or may have been tamper**  
**\*TCR:**

Corrective Action: Maintain site on annual testing schedule for release detection equipment that is to be maintained per manufacturer's specifications. Testing performed January 21, 2025. No corrective action required.

Rule Citation: <b>OAR 340-150-0400(1)(c)</b>	Penalty Amount: \$ 100	Correct Violation by: N/a	Date Violation Corrected:
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**Violation #6:** **Failure to provide documentation of compliance with financial responsibility upon request**  
**\*TCR:**

Corrective Action: Submit proof of compliance with financial responsibility within 15 business days of receiving the citation from Oregon DEQ. Due April 4, 2025.

Rule Citation: <b>OAR 340-150-0163 (k)</b>	Penalty Amount: \$ 50	Correct Violation by: 04/04/2025	Date Violation Corrected:
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Total Penalty Amount	650		
(This Page): \$			

**YOU MUST CORRECT THE VIOLATIONS AS REQUIRED, SIGN THE STATEMENT BELOW AND**

**RETURN THIS FORM TO THE DEQ INSPECTOR LISTED ON PAGE 1 ON OR BEFORE: 04/14/2025**

**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

# CERTIFICATE OF COMPLETION

THIS CERTIFIES THAT

**James D. Valberg**

**Completed the required course of Oregon UST Operator Training  
Class A/B**

Training course approved by the  
Department of Environmental Quality for the State of Oregon

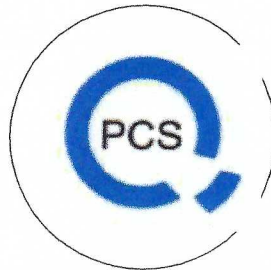
Training provided by Petroleum Compliance Services LLC

Given the 28<sup>th</sup> day August 2025

At, 27960 SE Hwy 212 Boring, OR 97009



Jeff Pike Instructor



# CERTIFICATE OF COMPLETION

THIS CERTIFIES THAT

**Jin-Wan Valberg**

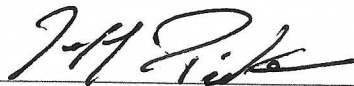
**Completed the required course of Oregon UST Operator Training  
Class A/B**

Training course approved by the  
Department of Environmental Quality for the State of Oregon

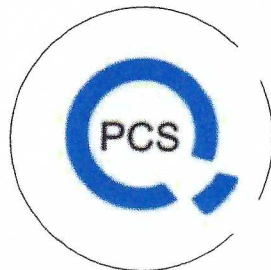
Training provided by Petroleum Compliance Services LLC

Given the 28<sup>th</sup> day August 2025

At, 27960 SE Hwy 212 Boring, OR 97009



Jeff Pike Instructor



**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Valberg Building Materials Inc  
Attn: James Valberg  
P.O. Box 794  
Boring, OR 97009-0794



9590 9402 4394 8248 2876 74

2. Article Number (Transfer from service label)

7017 1070 0000 8875 4937

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *James V. Valberg*  Agent  
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

6/23/25

D. Is delivery address different from item 1?  Yes

If YES, enter delivery address below:  No

3. Service Type

- |  |   |
|--|---|
| <input type="checkbox"/> Adult Signature                         | <input type="checkbox"/> Priority Mail Express®                     |
| <input type="checkbox"/> Adult Signature Restricted Delivery     | <input type="checkbox"/> Registered Mail™                           |
| <input type="checkbox"/> Certified Mail®                         | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input type="checkbox"/> Certified Mail Restricted Delivery      | <input type="checkbox"/> Return Receipt for Merchandise             |
| <input type="checkbox"/> Collect on Delivery                     | <input type="checkbox"/> Signature Confirmation™                    |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Insured Mail                            |   |
| <input type="checkbox"/> Insured Mail Restricted Delivery        |   |

6/13/25

Emily,

I hope this is the print out  
that you need.

James D. Valberg

James D. Valberg  
Valberg Building Materials, Inc.  
DBA Boring Shell  
P.O. Box 794  
Boring, Oregon 97009

BORING SHELL  
27960 SE HWY 212  
BORING.OR 97009  
503-663-0383

06-12-25 10:10

LIQUID STATUS

-----  
06-12-25 10:10

L 1:UNLEADED SUMP  
SENSOR NORMAL

L 2:SUPER SUMP  
SENSOR NORMAL

L 3:DIESEL SUMP  
SENSOR NORMAL

L 4:UNLEADED ANNULAR  
SENSOR NORMAL

L 5:SPLIT TANK ANNULAR  
SENSOR NORMAL

\* \* \* \* \* END \* \* \* \* \*

BORING SHELL  
27960 SE HWY 212  
BORING,OR 97009  
503-663-0383

06-12-25 10:10

SYSTEM STATUS REPORT

ALL FUNCTIONS NORMAL

INVENTORY REPORT

T 1:UNLEADED

VOLUME = 8081 GALS  
ULLAGE = 6895 GALS  
90% ULLAGE= 5397 GALS  
TC VOLUME = 8060 GALS  
HEIGHT = 61.92 INCHES  
WATER VOL = 0 GALS  
WATER = 0.00 INCHES  
TEMP = 63.6 DEG F

T 2:SUPER

VOLUME = 2737 GALS  
ULLAGE = 5268 GALS  
90% ULLAGE= 4467 GALS  
TC VOLUME = 2733 GALS  
HEIGHT = 45.01 INCHES  
WATER VOL = 7 GALS  
WATER = 0.94 INCHES  
TEMP = 61.9 DEG F

T 3:DIESEL

VOLUME = 3370 GALS  
ULLAGE = 3659 GALS  
90% ULLAGE= 2956 GALS  
TC VOLUME = 3363 GALS  
HEIGHT = 56.88 INCHES  
WATER VOL = 0 GALS  
WATER = 0.00 INCHES  
TEMP = 64.1 DEG F

\* \* \* \* \* END \* \* \* \* \*

Fee	-	Paid	=	Due
\$ 650.00		\$ 650.00		\$ 0.00

Penalty

▶ 2025-FC-9791 \$ 650.00

① UST - Field Citation

1 Results

➕ Add Penalty ➡ Send to FIMS

Payment

▼ Check by Mail 30889 \$ 650.00

📅 3/31/2025

① 46203

Type	Amount
Check by Mail	650

E-Payment Confirmation#	E-Payment Settle Date
	mm/dd/yyyy

Ref#	Payment Date
46203	03/31/2025

Comments

(Remaining Length: 4000)

Site Info

BORING SHELL



📍 27960 SE HWY 212 PO BOX 306, BORING, OR 97009

① 41549 ✓

① 251255

① dbo.Incident.LustId=10549 UST (9739)

📁 Stationary

Inspection Info

7782 Completed

☰ UST

📁 Full Compliance Inspection (FCI) TCR only

📅 Start Date 2/21/2025

📅 End Date 2/21/2025

Created & Updated Info