



Oregon

Tina Kotek, Governor

Department of Environmental Quality
Western Region Eugene Office
165 East 7th Avenue, Suite 100
Eugene, OR 97401
(541) 686-7838
FAX (541) 686-7551
TTY 711

October 4, 2025

Victoria Doyle
Keizer Mist LLC
3159 Broadway St. NE
Salem, OR 97303

RE: UST Compliance Inspection
DEQ UST #12665
Keizer Mist LLC
3159 Broadway St. NE
Salem, OR 97303

To Ms. Doyle,

Please read this entire notice and contact the DEQ inspector if you have questions about the upcoming inspection.

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.

The compliance inspection for this facility is scheduled for October 27, 2025 starting at approximately 1:30 pdm.

You must contact the inspector at least two (2) weeks prior to the date above to reschedule if you are unavailable at the stated time. Failure to reschedule within this timeframe may result in enforcement actions if equipment or records are not made available.

The inspection will require **uninterrupted participation** and attendance by you or a knowledgeable assistant. You should expect that you won't be able to attend to customers or vendors and should staff accordingly. 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 lift lids. **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.

The DEQ requests the following documentation be prepared and available on-site during the inspection

- Line and leak detector testing results (most recent (3) years)
- Monthly tank leak detection records (12 months),
- Annual tank gauge / release detection equipment certification (most recent 3 years)
- Spill prevention testing records (past (2) tests)
- Overfill Prevention Equipment testing (past (2) tests)
- Cathodic protection testing (if applicable | past (2) tests)
- Tank lining records (if applicable)
- Monthly walkthroughs (12 months)
- Annual walkthroughs (most recent (3) years)
- Class A, B, and C training documentation.
- Financial responsibility mechanism.

Any documents not available prior to or on-site during the inspection may result in a violation. Documents submitted after the inspection will only be evaluated as a corrective action and does not alter pursuit of enforcement action per guidance. Ie. Fines are not removed if documents are submitted AFTER the inspection.

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 and significant compliance deficiencies, will go through a longer and more formal process through the Office of Compliance and Enforcement and can potentially lead to larger penalties.

As stated previously, DEQ will not touch any equipment and if you are unable to assist with equipment access, please have your UST Service Provider there to remove manway or sump lids. 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.

Thank you for your cooperation. I can be reached at 541-215-2368 or dylan.eckert@deq.oregon.gov to answer any questions you may have and assist you in the preparation for your inspection.

Sincerely,

Dylan Eckert

Dylan Eckert
Natural Resource Specialist - Inspector
Underground Storage Tanks Program

Submitted By: dylan.eckert_deq

Submitted Time: October 30, 2025 3:34 PM

Creation Time: February 10, 2026 10:29 AM

Date

October 30, 2025

Time

14:57

UST Facility ID

12,665

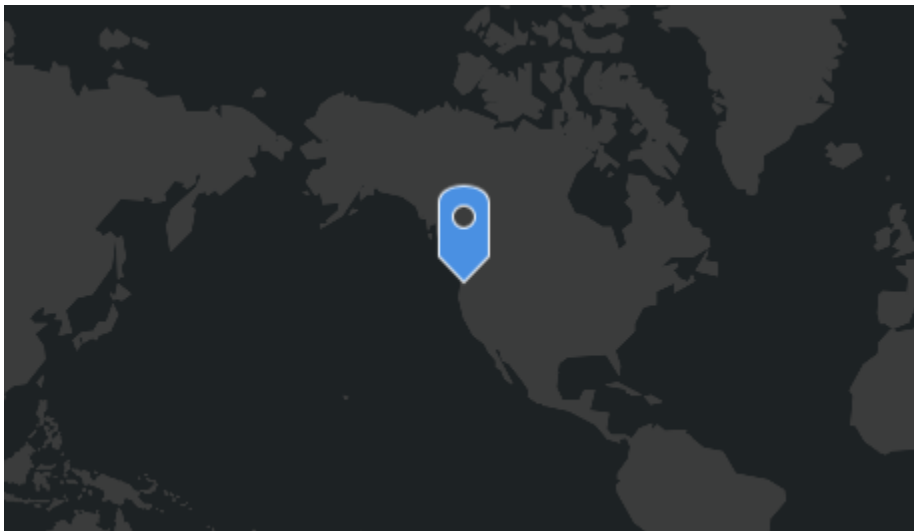
Inspector

Dylan Eckert

Type of Inspection

Full Compliance

Location



Esri, FAO, NOAA, USGS

Powered by Esri

Photograph



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photos-20251030-222606-rulvaporadapterloose.jpg



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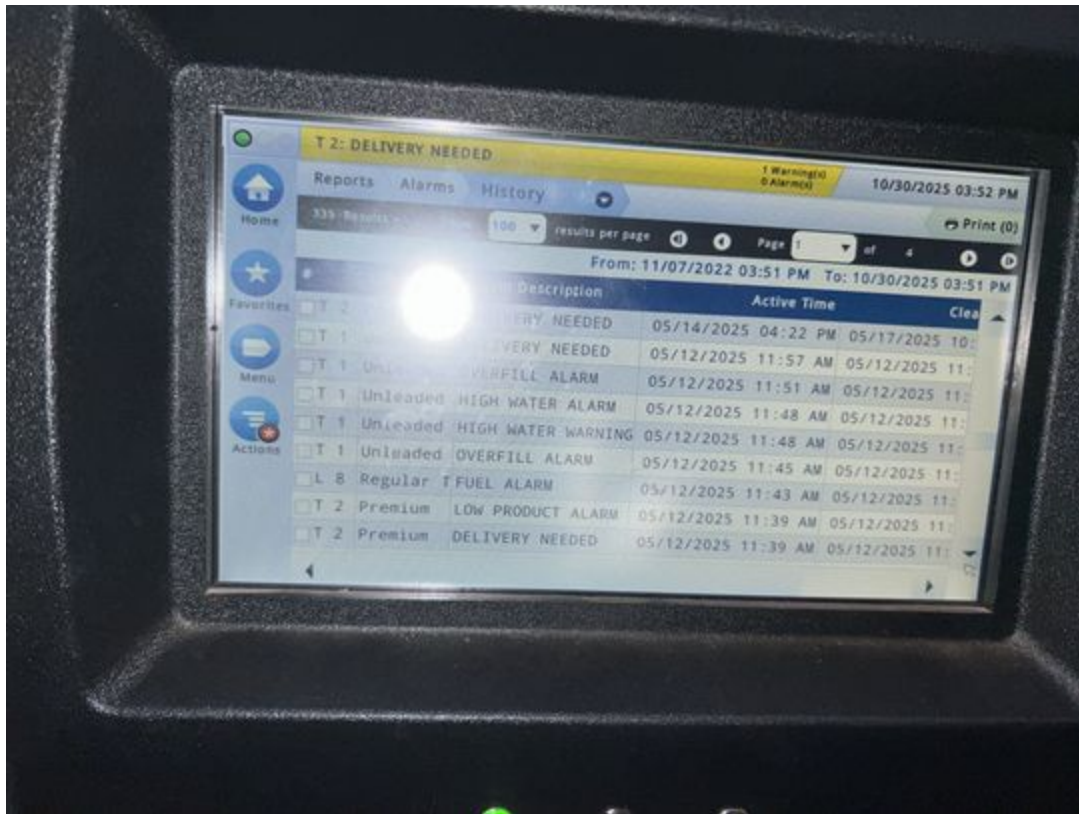
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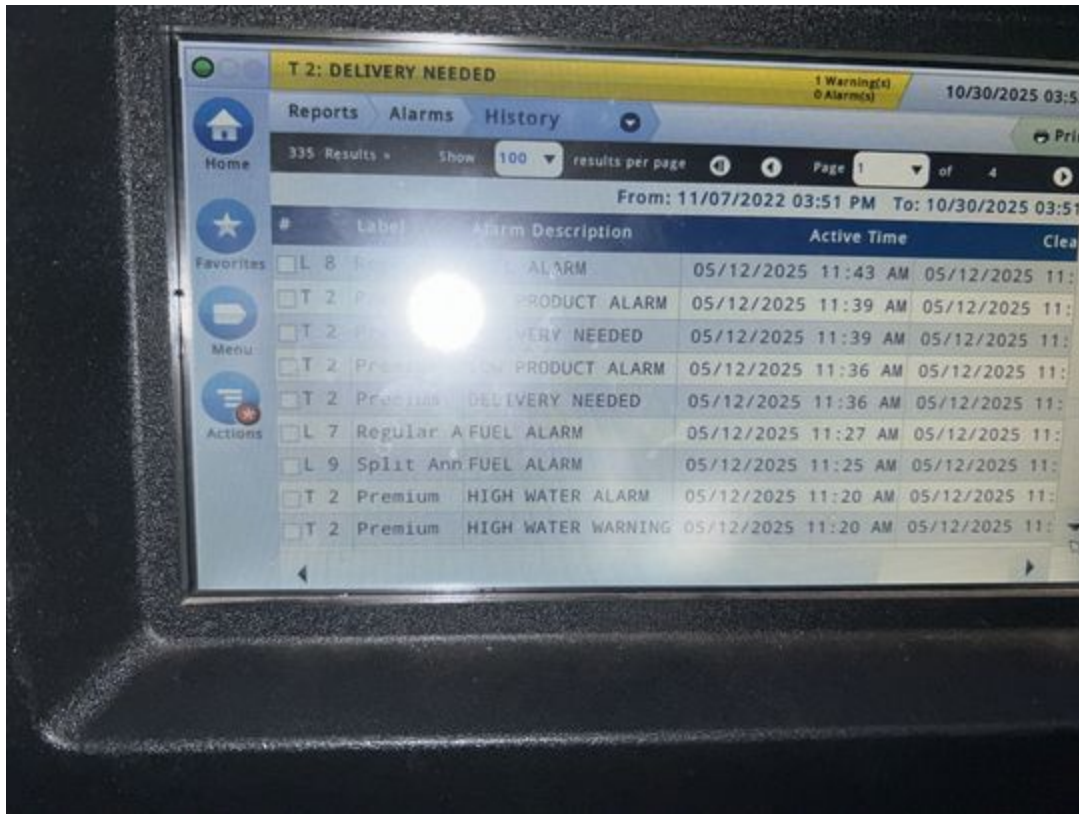
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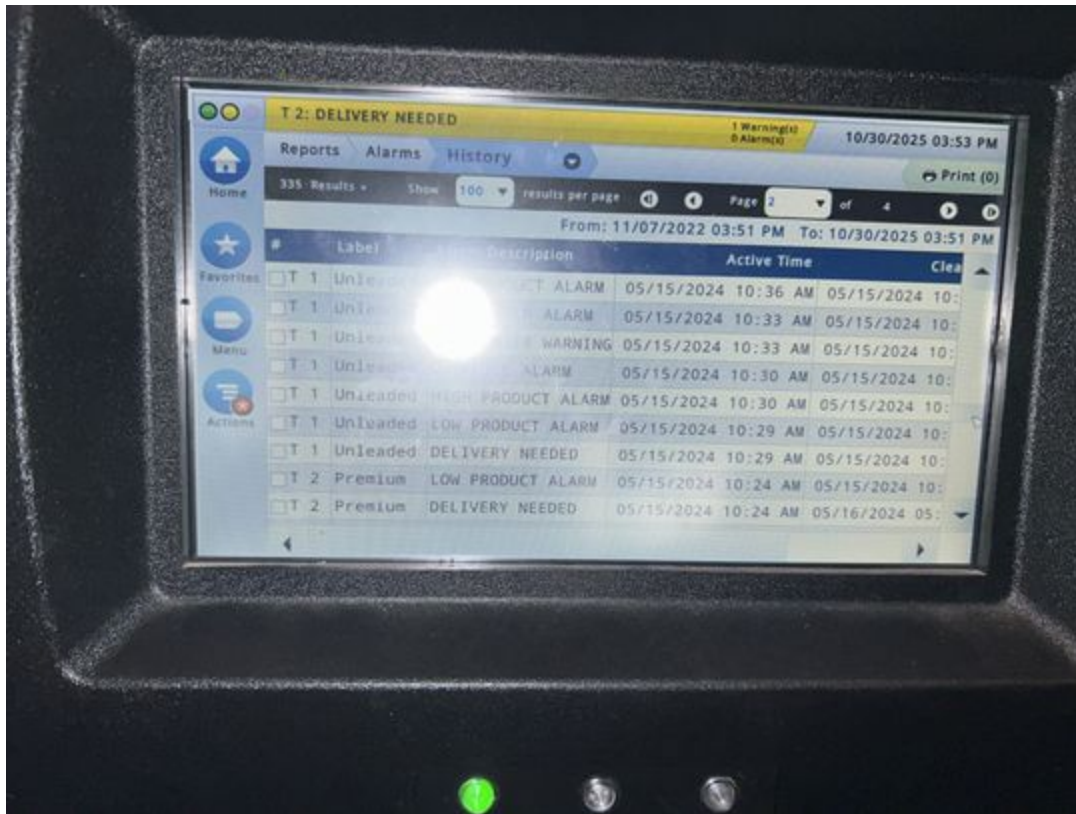
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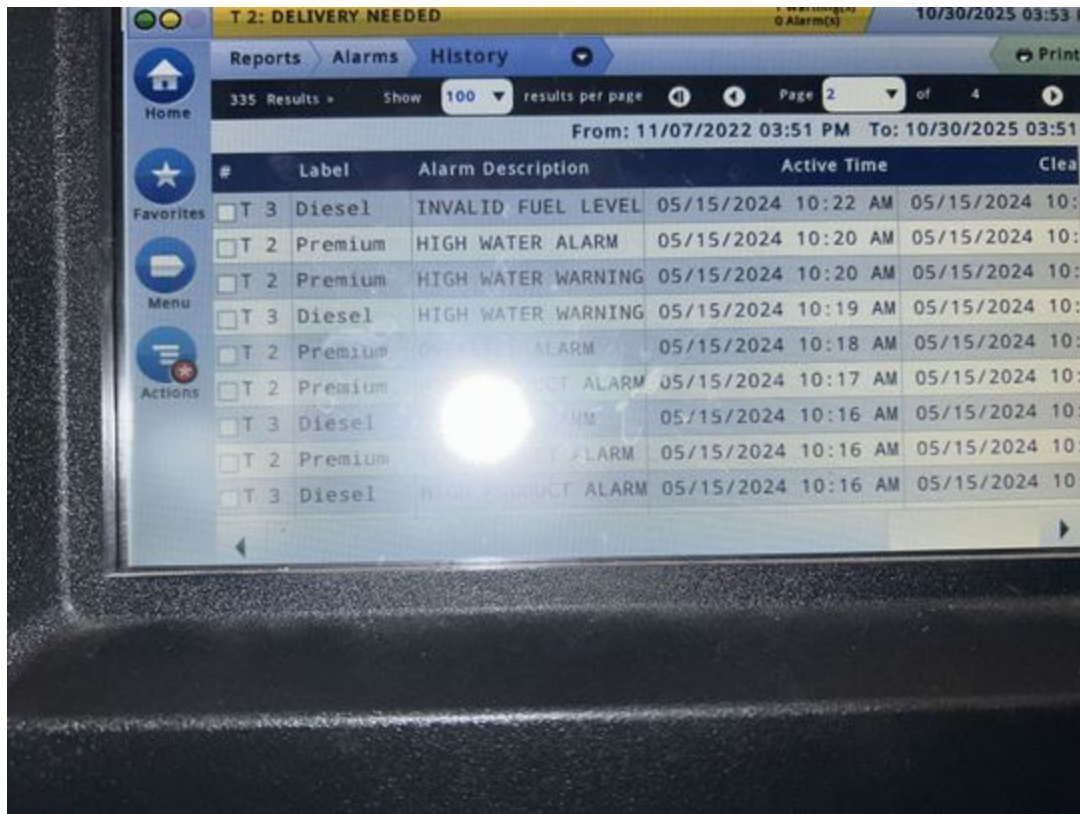
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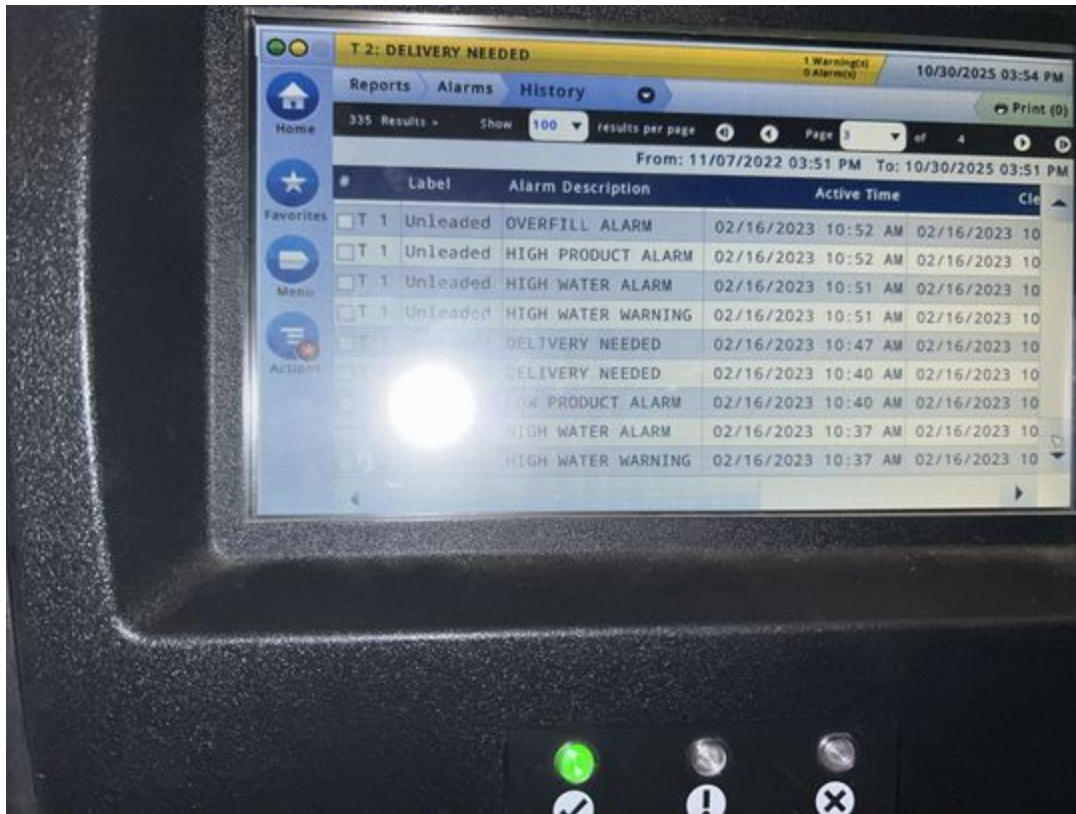
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Recommended Practices for Bio-Terror and Vermin Control of Spill, Overfill, Leak Detection and Secondary Containment Equipment at UST Facilities

APPENDIX C-8

**UST OVERFILL EQUIPMENT INSPECTION
AUTOMATIC SHUTOFF DEVICE AND BALL FLOAT VALVE**

Facility Name: **Amstar Mill**
 Address: **31259 Brookshire Dr NE**
 City, State, Zip Code: **Salem, OR 97303**
 Facility ID #: **129665**
 Inspecting Company: **Pedestalium Compliance Services, LLC**
 Phone #: **888-9-12-2025**

This data sheet is for inspecting automatic shutoff devices and ball float valves. See P.14, P.19 & 200 sections for inspection procedures.
 Product Name: **Auto Shut**
 Manufacturer: **Automatic Shutoff Device**
 Model Number: **1**
 Tank Volume: **60000**
 Tank Diameter: **6000**
 Charted Prevention Device Brand: **APDF**
 Type: **Automatic Shutoff Device**

Inspection Item	Pass	Fail	Pass	Fail	Pass	Fail
1. Drop tube removed from tank?	Yes	No	Yes	No	Yes	No
2. Drop tube and float valve restrict flow of air?	Yes	No	Yes	No	Yes	No
3. Float moves freely without binding and proper motion into flow path?	Yes	No	Yes	No	Yes	No
4. Operation in the shop tube clean and free of blockage of debris?	Yes	No	Yes	No	Yes	No
5. Pressure maintained to shut off flow at 90% capacity?	Yes	No	Yes	No	Yes	No

BALL FLOAT VALVE INSPECTION

Inspection Item	Pass	Fail	Pass	Fail	Pass	Fail
1. Tank top-venting vapor tight and seal-free?	Yes	No	Yes	No	Yes	No
2. Ball float cage free of debris?	Yes	No	Yes	No	Yes	No
3. Ball float of valve and circles and moves freely in cage?	Yes	No	Yes	No	Yes	No
4. Vent tube in pipe open and same top of tank?	Yes	No	Yes	No	Yes	No
5. Ball float pipe proper length to restrict flow at 90% capacity?***	Yes	No	Yes	No	Yes	No

A, "No" to any item in Levels 1-5 indicates a limit failure.
Pass/Fail Pass Fail Pass/Fail Pass/Fail Pass/Fail Pass/Fail

Comments:
 * Use manufacturer's suggested procedure for determining if automatic shutoff device will shut off flow at 90% capacity.
 ** If a ball float is found to fail the inspection, another method of venting must be used.
 *** Use manufacturer's suggested procedure for determining if flow restriction device will restrict flow at 90% capacity.

Inspector's Name (print): **Amstead Blue** Inspector's Signature: *Amstead Blue*

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APPENDIX C-6

**OVERFILL ALARM
OPERATION INSPECTION**

Facility Name: Keizer Mist	Owner: Victoria L. Doyle
Address: 3159 Broadway St NE	Address: 3159 Broadway St NE
City, State, Zip Code: Salem, OR 97303	City, State, Zip Code: Salem, OR 97303
Facility I.D. #: 12665	Phone #:
Testing Company: Petroleum Compliance Services, LLC	Phone #: 5-12-2025

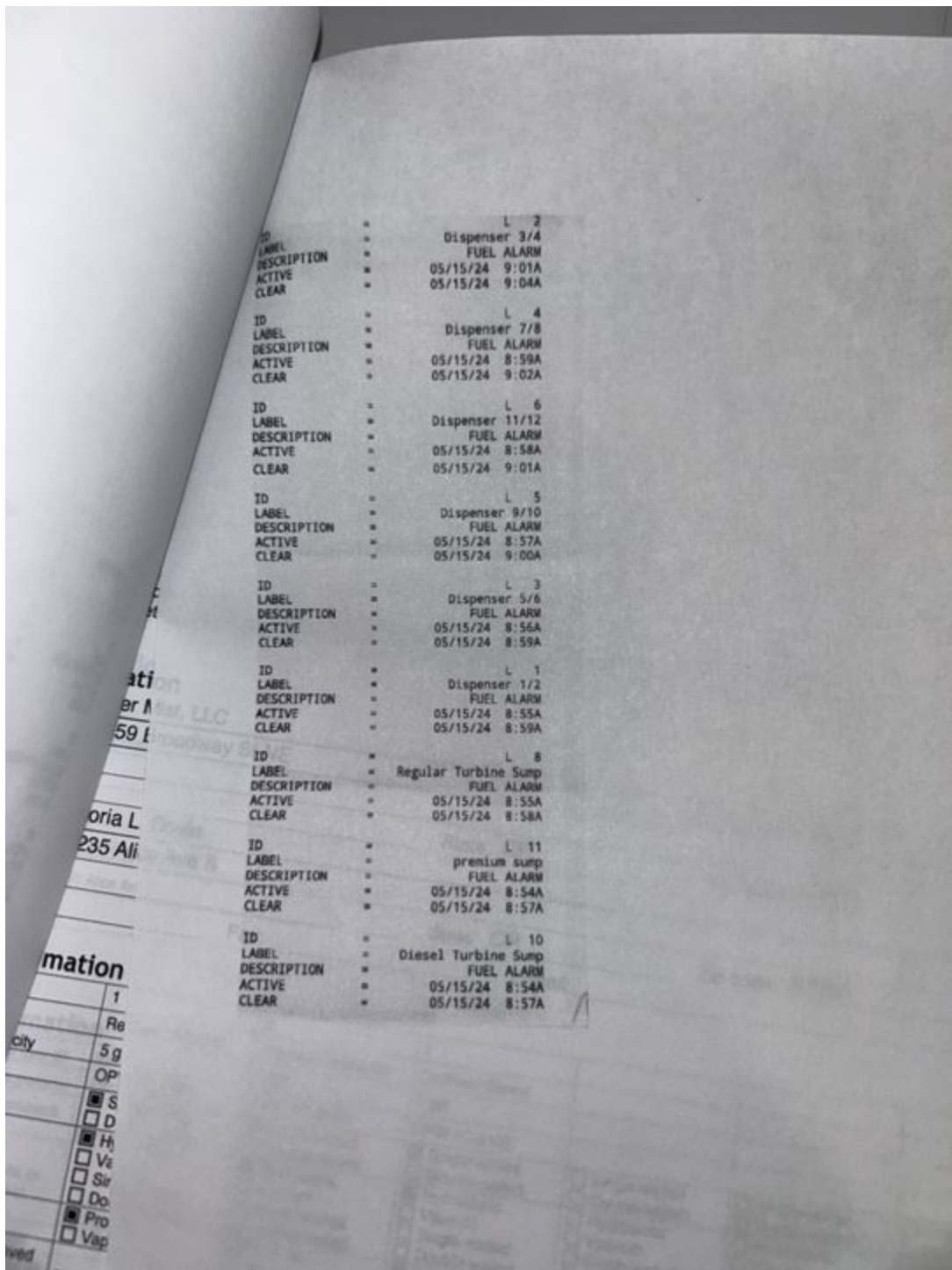
This procedure is to determine whether the high level alarm is operational and will trigger when the tank is no more than 90% full. See PEI/RP1200 Section 7.3 for the inspection procedure. This procedure is applicable to tank level monitor stems that touch the bottom of the tank when in place.

Tank Number	1	2	3	
Product Stored	Unleaded	Premium	Diesel	
Tank Level Monitor Brand and Model	VR-TLS 450	VR-TLS 450	VR-TLS 450	
1. Tank Volume, gallons	19,930	11,897	8,039	
2. Tank Diameter, inches	120	120	120	
3. Overfill alarm activates in the test mode at the console?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. When activated, overfill alarm can be heard or seen while delivering to the tank?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. After removing the probe from the tank, it has been inspected and any damaged or missing parts replaced?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
6. Float moves freely on the stem without binding?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
7. Moving product level float up the stem trigger alarm?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
8. Inch level from bottom of stem when 90% alarm is triggered.	100	100	100.8	
9. Tank volume at inch level in Line 8.	17,937	10,707.3	7,235.1	
10. Calculate (Line 9 / Line 1) x 100	90%	90%	90%	
11. Is Line 10 less than 90%?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
12. Fuel float level on the console agrees with the gauge stick reading?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
13. Overfill alarm activates at any product level above 90% tank capacity?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
If any answers in Lines 3, 4, 5, 6, 7 or 11 are "No," or Line 13 is "Yes," the system has failed the test.				
Test Results	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Pass <input type="checkbox"/> Fail

Comments:

Tester's Name (print) Kenneth Pike Tester's Signature Kenneth Pike

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Petroleum Compliance Services LLC

**UST Containment Sump
Integrity Testing Form**

Underground Storage Tanks (UST) Program

Doc Type: Compliance Certification

Purpose: This procedure is to test the leak integrity of containment sumps. Consult PEI/RP1200, Section 6.5 for the test method.

Facility Information

Facility name: Keizer Mill, LLC
 Facility address: 3159 Broadway St NE Facility ID#: 12665
 Mailing address: _____
 City: Salem State: OR Zip code: 97302
 Owner name: Victoria L. Doyle
 Mailing address: 235 Alice Ave S
 City: Salem State: OR Zip code: 97302
 Phone: _____ Fax: _____ E-mail: _____

Testing Information

1. Containment sump tank ID	Regular Unlined Tubing Fiberglass	Premium Unlined Tubing Fiberglass	On-Road Diesel Tubing Fiberglass	Dispenser 1-2 Fiberglass	Dispenser 5-6 Fiberglass	Dispenser 9-10 Fiberglass
2. Containment sump material						
3. Liquid and debris removed from sump?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4. Visual inspection (No cracks, loose parts or separation of the bucket from the fill pipe.)?	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
5. Containment sump depth	48"	48"	48"	30"	30"	30"
6. Height from bottom to top of highest penetration	28"	29"	24"	10"	9"	9"
7. Starting water level	32"	33"	28"	14"	13"	13"
8. Test start time	10:15am	9:00am	9:00am	11:30am	11:30am	11:30am
9. Ending water level	32"	33"	28"	14"	13"	13"
10. Test end time	11:15am	10:00am	10:00am	12:30pm	12:30pm	12:30pm
11. Test period (minimum test time: 1 hour)	1 hour	1 hour	1 hour	1 hour	1 hour	1 hour
12. Water level change	0"	0"	0"	0"	0"	0"
Test results:	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail

Pass/fail criteria: Must pass visual inspection. Water level drop of less than 1/8 inch.

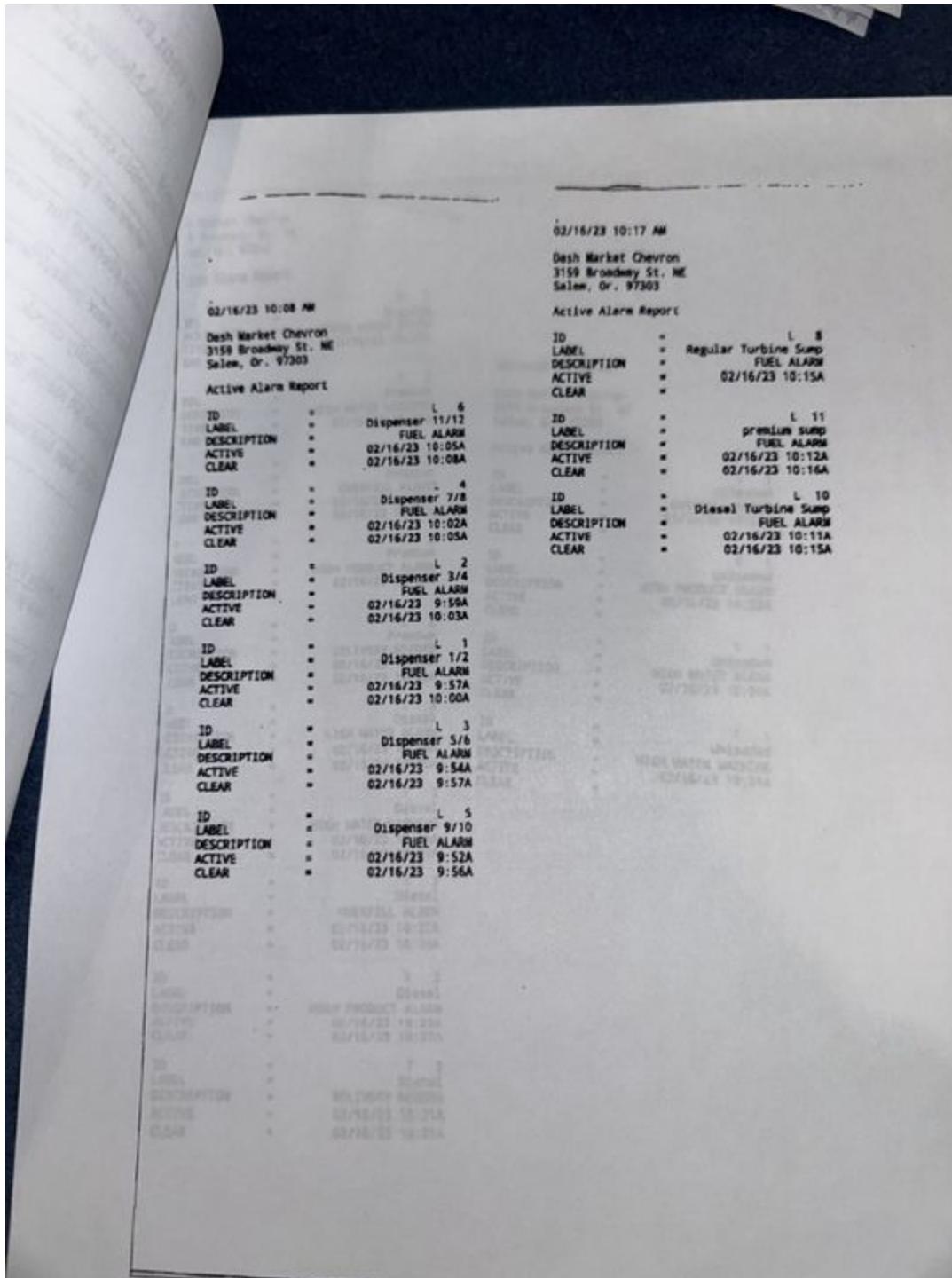
Comments:

* All liquids and debris must be disposed of properly.

Testing company name: Petroleum Compliance Services LLC Tester's name: Kenneth Pike
 Date (mm/dd/yyyy): 5-15-2024 Tester's signature: Kenneth Pike

www.pcsnw.us • 503-873-4139 • Fax 503-873-8070 • Email pcs@pcsnw.net

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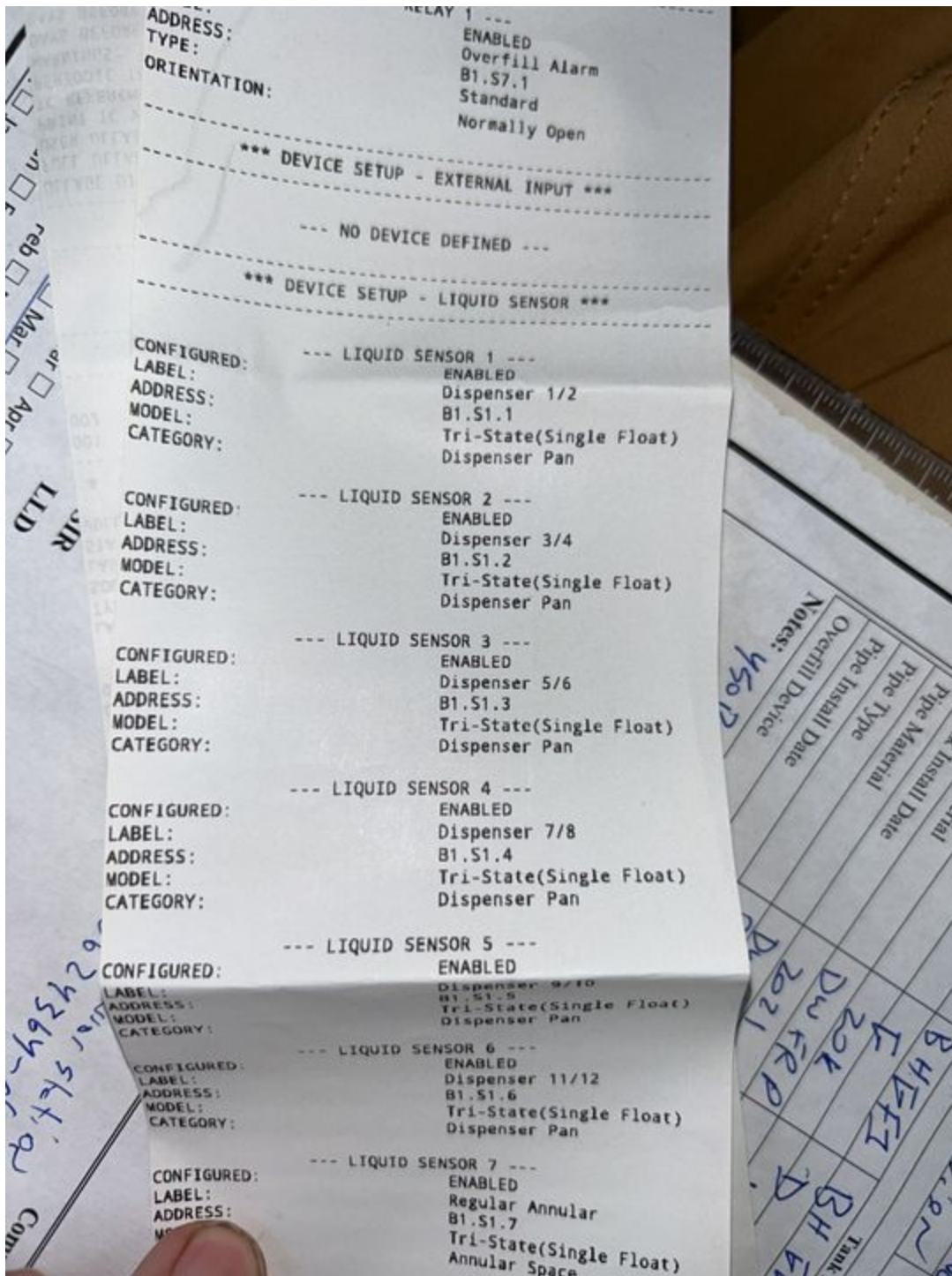
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MODE NUMBER: 3
 PROBE OFFSET: Pb 3: Diesel
 FULL VOLUME: 0.00 INCHES
 DIAMETER: 8039 GALLONS
 TILT: 120.0 INCHES
 THERMAL COEFFICIENT: 0.00 INCHES
 METER DATA PRESENT: 0.000450
 DELIVERY DELAY: DISABLED
 LOSS TEST FAIL: 1 MINUTES
 TEST FAIL: ALARMS ENABLED
 TEST FAIL: ALARMS ENABLED
 VOLUME CORRECTION: ALARMS DISABLED
 TEST FAIL: DISABLED

*** TANK SETUP - LIMITS ***

--- TANK 1 ---
 MAX VOLUME: 19930 GALLONS
 HIGH PRODUCT: 95%
 DELIVERY OVERFILL: 90%
 DELIVERY LIMIT: 10%
 LOW PRODUCT: 582 GALLONS
 HIGH WATER WARNING: 1.00 INCHES
 HIGH WATER ALARM: 2.00 INCHES
 WATER ALARM FILTER LEVEL: LOW
 LEAK ALARM LIMIT: 20 GALLONS
 SUDDEN LOSS LIMIT: 100 GALLONS
 FUEL LOW TEMP LIMIT: -58.000 DEG F
 FUEL HIGH TEMP LIMIT: 140.000 DEG F

--- TANK 2 ---
 MAX VOLUME: 11897 GALLONS
 HIGH PRODUCT: 95%
 DELIVERY OVERFILL: 90%
 DELIVERY LIMIT: 10%
 LOW PRODUCT: 400 GALLONS
 HIGH WATER WARNING: 1.00 INCHES
 HIGH WATER ALARM: 2.00 INCHES
 WATER ALARM FILTER LEVEL: LOW
 LEAK ALARM LIMIT: 20 GALLONS
 SUDDEN LOSS LIMIT: 100 GALLONS
 FUEL LOW TEMP LIMIT: -58.000 DEG F
 FUEL HIGH TEMP LIMIT: 140.000 DEG F

--- TANK 3 ---
 MAX VOLUME: 8039 GALLONS
 HIGH PRODUCT: 95%
 DELIVERY OVERFILL: 90%
 DELIVERY LIMIT: 10%
 LOW PRODUCT: 350 GALLONS
 HIGH WATER WARNING: 1.00 INCHES
 HIGH WATER ALARM: 2.00 INCHES
 WATER ALARM FILTER LEVEL: LOW
 LEAK ALARM LIMIT: 20 GALLONS
 SUDDEN LOSS LIMIT: 100 GALLONS
 FUEL LOW TEMP LIMIT: -58.000 DEG F
 FUEL HIGH TEMP LIMIT: 140.000 DEG F

*** TANK SETUP - ENVIRONMENTAL TESTS ***

--- TANK 1 ---
 DISABLED

Handwritten notes:
 546624521
 5/16/11
 BHTA
 2011
 3000
 2/16

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001 120.0 11897 003 60.0 6010
 002 90.0 9703 004 30.0 2298

--- TANK 3 ---
 TANK PROFILE: FOUR POINT

#	HEIGHT	VOLUME	#	HEIGHT	VOLUME
001	120.0	8039	003	60.0	4060
002	90.0	6506	004	30.0	1604

*** TANK CHART SETUP - CHARTS ***

--- TANK 1 - CHART 1 ---

 LABEL: FOUR POINT
 TYPE: USER ENTERED
 SOURCE: 2023-02-21
 LAST CHANGE:
 STATUS: ACTIVE
 VOLUME ENTRY: TOTAL VOLUME

#	HEIGHT	VOLUME	#	HEIGHT	VOLUME
001	120.0	19930	003	60.0	10067
002	90.0	16203	004	30.0	3901

--- TANK 2 - CHART 1 ---

 LABEL: FOUR POINT
 TYPE: USER ENTERED
 SOURCE: 2023-02-21
 LAST CHANGE:
 STATUS: ACTIVE
 VOLUME ENTRY: TOTAL VOLUME

#	HEIGHT	VOLUME	#	HEIGHT	VOLUME
001	120.0	11897	003	60.0	6010
002	90.0	9703	004	30.0	2298

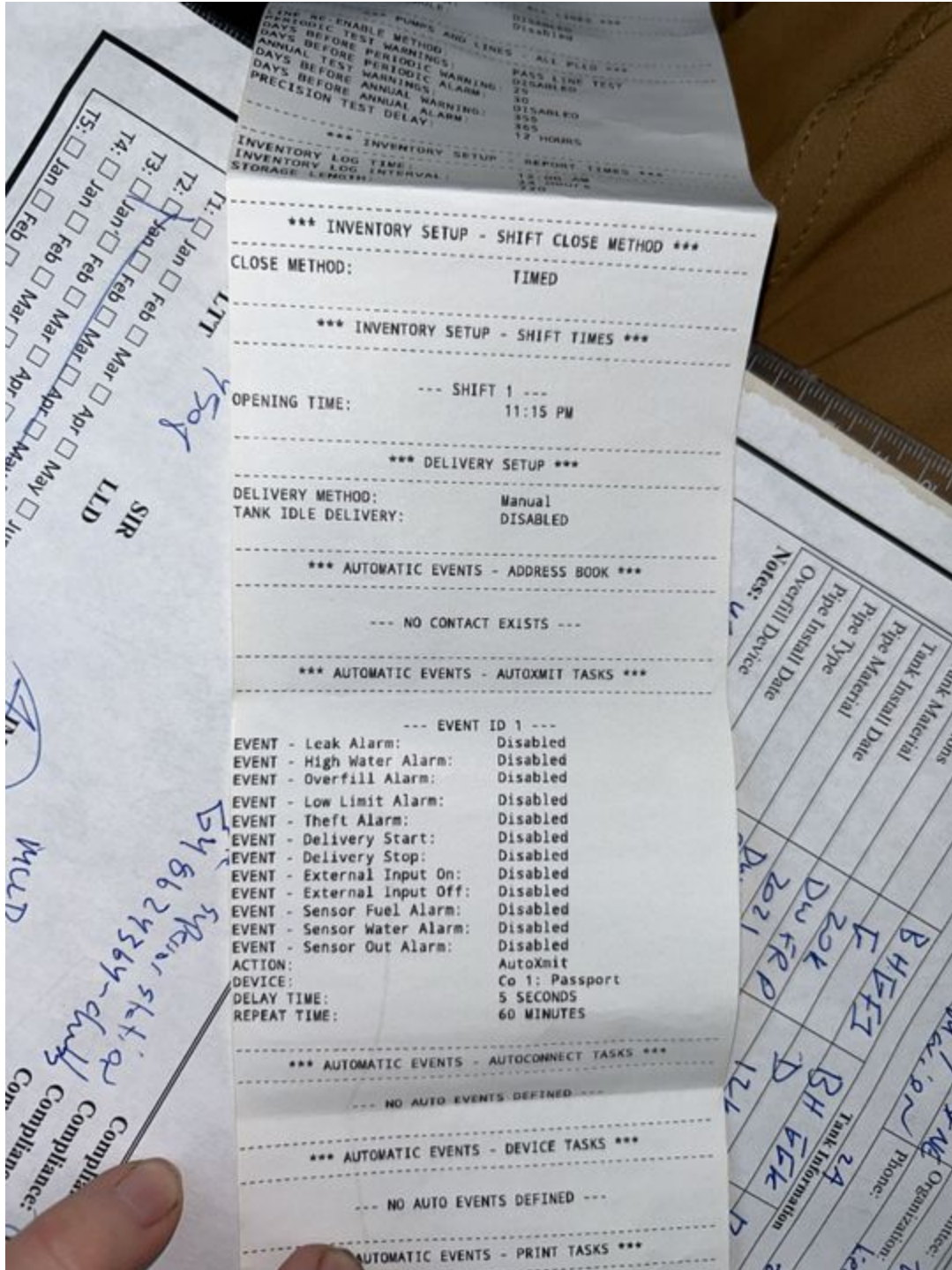
--- TANK 3 - CHART 1 ---

 LABEL: FOUR POINT
 TYPE: USER ENTERED
 SOURCE: 2023-02-21
 LAST CHANGE:
 STATUS: ACTIVE
 VOLUME ENTRY: TOTAL VOLUME

#	HEIGHT	VOLUME	#	HEIGHT	VOLUME
001	120.0	8039	003	60.0	4060
002	90.0	6506	004	30.0	1604

*** TANK SETUP - SIPHON SETS ***

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

Inspection conducted by Dylan Eckert Date 30 Oct 2025 Time 1500 Facility 12665

Facility Name: <u>Keizer Mist LLC</u>	Permittee: <u>Victoria Doyle</u>	Contact:
Site Address: <u>31 S Broadway St NE</u>	Organization: <u>Keizer Mist LLC</u>	Phone:
City: <u>Salem</u>	County: <u>Marion</u>	Phone: <u>503-584-1572</u>

DEQ #	Tank Information		
	2A	2B	
Substance	<u>BHFFI</u>	<u>BHFFK</u>	<u>BHFFA</u>
Est. Gallons	<u>F</u>	<u>D</u>	<u>F</u>
Tank Material	<u>20k</u>	<u>12k</u>	<u>6k</u>
Tank Install Date	<u>DW FRP</u>		
Pipe Material	<u>2021</u>		
Pipe Type	<u>DW APT</u>		
Pipe Install Date	<u>Pressurc</u>		
Overfill Device	<u>2021</u>		
	<u>HLA</u>		

Notes: 450P

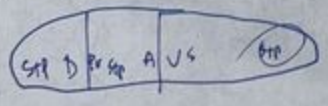
Operating Certificate	Compliance: <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Operator Training <u>Done</u> - <u>done w/ double supervisor</u>	Compliance: <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Financial Responsibility <u>01 Aug 2026</u> - <u>548624364-clubb</u>	Compliance: <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Walkthrough Inspections	Compliance: <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Corrosion Protection Lining	Compliance: <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Overfill Prevention	Compliance: <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Spill Prevention:	Compliance: <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Release Detection:	Compliance: <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Tank - <u>ATG 450g</u> SIR	<input checked="" type="checkbox"/> IM <input type="checkbox"/> IM <u>1 closed boots raised and sensor tank sd piping</u>
Piping - LTT LLD	
T1: <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	
T2: <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	
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T4: <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	
T5: <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	

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Date	RD	LT	LD	S	O HLA	CS
12 May 2028	X		X		DIFF	
15 May 2029	X		X	3/30 12"		
16 Feb 2023	X		X			

↳ no LEDs stated as replaced? why vapor to syphon or die

gilbarco pumps venting vent



3"
7/16 5/16 3"
1/2

3"
1 1/2 5/16 3"
3/4

N ↓

estor

Die vapor boots moved up die 3/4 - 1 1/2 drips meter

photos-20251030-233311.jpg



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:	10/30/2025	Facility ID#:	12665
Inspector:	Dylan ECKERT	Facility Name:	KEIZER MIST LLC
DEQ Office:	165 E 7th Ave 100	Facility Address:	3159 BROADWAY ST NE, SALEM, Oregon 97303
Phone #:	541-686-7517	County:	Marion

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 Email	<input type="checkbox"/> Both	Date Issued: 11/03/2025
Facility Representative Present During Inspection:				<input type="checkbox"/> Permittee <input type="checkbox"/> Owner <input type="checkbox"/> Other
Name of Permittee or Owner:	Keizer Mist LLC			
Mailing Address:	235 Alice Ave S , Salem Oregon 97302			

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

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 form to DEQ by the following date: 12/03/2025

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.

UST FIELD CITATION

DATE ISSUED: 11/03/2025

PROGRAM ENFORCEMENT No.: 2025-FC-10025

FACILITY ID: 12665

Page 3 of 3

Violation #1: *TCR:	(J8.2) Failure to operate or maintain a method or combination of methods for release detection such that the method can detect a release from any portion of the UST system.		
Corrective Action:	Submit confirmation of boot opening, sensors being correctly installed, meters being fixed, and proper installation of the mechanical line leak detector vapor return line prior to by 12 Nov 2025.		
Rule Citation: OAR 340-150-0400(1)(a)	Penalty Amount: \$ 300	Correct Violation by: 11/12/2025	Date Violation Corrected:
Violation #2: *TCR:			
Corrective Action:			
Rule Citation: OAR	Penalty Amount: \$	Correct Violation by:	Date Violation Corrected:
Violation #3: *TCR:			
Corrective Action:			
Rule Citation: OAR	Penalty Amount: \$	Correct Violation by:	Date Violation Corrected:
Violation #4: *TCR:			
Corrective Action:			
Rule Citation: OAR	Penalty Amount: \$	Correct Violation by:	Date Violation Corrected:
Violation #5: *TCR:			
Corrective Action:			
Rule Citation: OAR	Penalty Amount: \$	Correct Violation by:	Date Violation Corrected:
Violation #6: *TCR:			
Corrective Action:			
Rule Citation: OAR	Penalty Amount: \$	Correct Violation by:	Date Violation Corrected:
Total Penalty Amount: \$ 300			

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: 12/03/2025

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



1:



2:



3:




4:

Fw: 12665 - Keizer Mist LLC - UST Inspection Follow-up

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

Date Tue 1/6/2026 2:06 PM

To ECKERT Dylan * DEQ <Dylan.ECKERT@deq.oregon.gov>

 4 attachments (5 MB)

4AF7F9EC-FDC2-4C38-83C5-310D93B57E55.jpeg; 8895D979-0E9C-4F5B-B7C5-42F64DA05094.jpeg; 8FF96EB3-E4C5-4264-B708-2CC9ED788832.jpeg; A48FDB31-363C-421E-8A2B-16DC95C5407F.jpeg;

Can you provide some input.

Emily

From: Victoria Doyle <victoria@dashoregon.com>

Sent: Tuesday, January 6, 2026 1:57 PM

To: UST Duty Officer * DEQ <ust.dutyofficer@deq.oregon.gov>

Subject: Re: 12665 - Keizer Mist LLC - UST Inspection Follow-up

Hi Emily.

Thank you for the VM. I really appreciate you updating the contact info.

I finally received a response to an email I sent to Kenneth Pike, Technician Petroleum Compliance Services, LLC. AMPP CP1 Tester #69924. He said that they had worked with Dylan Eckert. He called him and sent the photos and confirmed everything was good on November 7, 2025. He said maybe it had just not been closed out at that time. He sent me the photos which I've attached.

Let me know if this meets your needs.

Warm regards,

Victoria Doyle
971-400-1126*
Chief Executive Manager
Keizer Mist Operations
dba
Dash Market, Dash Car Wash
& Fuel

****Note new phone number.***

On Fri, 2 Jan 2026 at 11:34 AM UST wrote:

Good morning,
UST facility 12665 Keizer Mist located at 3159 Broadway St NE Salem, OR

I am following up on open UST 2025 inspections. I see that payment of the \$300 penalty was processed, but I have not received documentation pertaining to the requested corrective actions noted at the time of the inspection.

Corrective Actions:

1. Submit confirmation of boot opening, sensors correctly installed, meters fixed, and proper installation of the mechanical line leak detector vapor return line (Please refer to Dylan's initial inspection follow up email with additional information on each item)

Please email the invoice from the tester with photos pertaining to each item.



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: UST Duty Officer * DEQ <UST.DutyOfficer@DEQ.oregon.gov>
Sent: Monday, December 1, 2025 2:25 PM
To: UST Duty Officer * DEQ <UST.DutyOfficer@DEQ.oregon.gov>; dndyldash@gmail.com <dndyldash@gmail.com>
Subject: Re: 12665 - Keizer Mist LLC - UST Inspection Follow-up

Good afternoon,
UST facility 12665 Keizer Mist located at 3159 Broadway St NE Salem, OR

Please provide an update on the completion of the corrective actions. Payment of the penalty was processed on 11/24/25, as soon as documentation or the requested corrective actions is received then this UST inspection can be closed.

Corrective Actions:

1. Submit confirmation of boot opening, sensors correctly installed, meters fixed, and proper installation of the mechanical line leak detector vapor return line prior to by 12 Nov 2025.



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: UST Duty Officer * DEQ <UST.DutyOfficer@DEQ.oregon.gov>
Sent: Monday, November 3, 2025 3:17 PM
To: dndyldash@gmail.com <dndyldash@gmail.com>
Cc: UST Duty Officer * DEQ <UST.DutyOfficer@DEQ.oregon.gov>
Subject: Re: 12665 - Keizer Mist LLC - UST Inspection Follow-up

Good afternoon,
UST facility 12665 Keizer Mist located at 3159 Broadway St NE Salem, OR

Please review the attached field citation. **The deadline for payment of the \$300 penalty is 12/3/25. The deadline for the documentation of the corrective actions is 11/12/15.**

Corrective Action:

1. Submit confirmation of boot opening, sensors being correctly installed, meters being fixed, and proper installation of the mechanical line leak detector vapor return line prior to by 12 Nov 2025.

Payment of Field Citation Penalty Instructions

Payment can be made either through **check** or **online** through Your DEQ Online – follow the link below to create an account.
[Department of Environmental Quality : Welcome to Your DEQ Online : Online Services : State of Oregon](#)

[PaymentsforEEOs.pdf](#) – step by step instructions for submitting payments online

Questions about online payments and submittals can be directed to the Help Desk at itservicedesk@deq.oregon.gov



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: ECKERT Dylan * DEQ <Dylan.ECKERT@deq.oregon.gov>

Sent: Monday, November 3, 2025 1:49 PM

To: dndyldash@gmail.com <dndyldash@gmail.com>

Cc: UST Duty Officer * DEQ <UST.DutyOfficer@DEQ.oregon.gov>; FOSS Diana * DEQ <Diana.FOSS@deq.oregon.gov>; ECKERT Dylan * DEQ <Dylan.ECKERT@deq.oregon.gov>

Subject: 12665 - Keizer Mist LLC - UST Inspection Follow-up

Hello Mr. and Ms. Doyle –

Thank you for allowing me to inspect your facility located at 3159 Broadway St. NE in Keizer, Oregon on 30oct2025. You were on-site to assist me with the inspection... both with accessing equipment and providing release detection and equipment testing records.

The facility had a few compliance issues which need to be addressed and will be discussed below.

Equipment / Records

1 – The piping at this facility had restricted communication between the piping primary and secondary wall and the containment sump used for release detection... aka.... The boot used on the APT piping to close the secondary wall off had tight band clamps. These need to be loosed in every sump to meet the interstitial monitoring requirement. Please submit confirmation that all boots have been opened.



2 – The diesel mechanical line leak detector (VMI) had a vapor return line which was not properly installed into the ullage space of the tank but rather the syphon port on the turbine head. Which needs to be corrected to meet manufacturer requirements.
Please submit confirmation this was corrected.



3 – There was petroleum observed in the under-dispenser containment (UDC 11/12 and 3/4) with 3/4 being the highest volume of diesel which looks like might be sourced from a leaking meter. Both sensors were raised about an inch of the bottom. Sensors are required to be at the lowest point of containment in an area most likely to notify the operator of a release. Please submit the invoice of the repair and confirmation petroleum was removed from the sumps, sensors installed to the sump bottom, and meters fixed.



UDC ¾ - Leaking Diesel Meter – Raised

Sensor



UDC 11/12 – Leaking Meter – Raised Sensor

4 – Shear Valves were bypassed using quick connects which disables their functionality and is a violation of the UST Rules and Fire Code. @ Disp. 9/10
Please submit confirmation of correction.



5 – Although it appears to be corrected as of the May 12, 2025 testing, the tank annular sensors were not pulled during annual compliance testing. Testing of ALL SENSORS! Is required at least 1 year from the previous test.

T 2: DELIVERY NEEDED 1 Warning(s) 0 Alarm(s) 10/30/2025 03:52

Reports Alarms History

335 Results Show 100 results per page Page 1 of 4

From: 11/07/2022 03:51 PM To: 10/30/2025 03:51

#	Label	Alarm Description	Active Time	Clea
<input type="checkbox"/>	L 8 Regular	FUEL ALARM	05/12/2025 11:43 AM	05/12/2025 11:
<input type="checkbox"/>	T 2 Premium	PRODUCT ALARM	05/12/2025 11:39 AM	05/12/2025 11:
<input type="checkbox"/>	T 2 Premium	DELIVERY NEEDED	05/12/2025 11:39 AM	05/12/2025 11:
<input type="checkbox"/>	T 2 Premium	PRODUCT ALARM	05/12/2025 11:36 AM	05/12/2025 11:
<input type="checkbox"/>	T 2 Premium	DELIVERY NEEDED	05/12/2025 11:36 AM	05/12/2025 11:
<input type="checkbox"/>	L 7 Regular A	FUEL ALARM	05/12/2025 11:27 AM	05/12/2025 11:
<input type="checkbox"/>	L 9 Split Ann	FUEL ALARM	05/12/2025 11:25 AM	05/12/2025 11:
<input type="checkbox"/>	T 2 Premium	HIGH WATER ALARM	05/12/2025 11:20 AM	05/12/2025 11:
<input type="checkbox"/>	T 2 Premium	HIGH WATER WARNING	05/12/2025 11:20 AM	05/12/2025 11:

```

ID = L 2
LABEL = Dispenser 3/4
DESCRIPTION = FUEL ALARM
ACTIVE = 05/15/24 9:01A
CLEAR = 05/15/24 9:04A

ID = L 4
LABEL = Dispenser 7/8
DESCRIPTION = FUEL ALARM
ACTIVE = 05/15/24 8:59A
CLEAR = 05/15/24 9:02A

ID = L 6
LABEL = Dispenser 11/12
DESCRIPTION = FUEL ALARM
ACTIVE = 05/15/24 8:58A
CLEAR = 05/15/24 9:01A

ID = L 5
LABEL = Dispenser 9/10
DESCRIPTION = FUEL ALARM
ACTIVE = 05/15/24 8:57A
CLEAR = 05/15/24 9:00A

ID = L 3
LABEL = Dispenser 5/6
DESCRIPTION = FUEL ALARM
ACTIVE = 05/15/24 8:56A
CLEAR = 05/15/24 8:59A

ID = L 1
LABEL = Dispenser 1/2
DESCRIPTION = FUEL ALARM
ACTIVE = 05/15/24 8:55A
CLEAR = 05/15/24 8:59A

ID = L 8
LABEL = Regular Turbine Sump
DESCRIPTION = FUEL ALARM
ACTIVE = 05/15/24 8:55A
CLEAR = 05/15/24 8:58A

ID = L 11
LABEL = premium sump
DESCRIPTION = FUEL ALARM
ACTIVE = 05/15/24 8:54A
CLEAR = 05/15/24 8:57A

ID = L 10
LABEL = Diesel Turbine Sump
DESCRIPTION = FUEL ALARM
ACTIVE = 05/15/24 8:54A
CLEAR = 05/15/24 8:57A

```

```

3159 Broadway St. NE
Salem, Or. 97303

02/16/23 10:08 AM
Dash Market Chevron
3159 Broadway St. NE
Salem, Or. 97303

Active Alarm Report

ID = L 6
LABEL = Dispenser 11/12
DESCRIPTION = FUEL ALARM
ACTIVE = 02/16/23 10:05A
CLEAR = 02/16/23 10:08A

ID = L 4
LABEL = Dispenser 7/8
DESCRIPTION = FUEL ALARM
ACTIVE = 02/16/23 10:02A
CLEAR = 02/16/23 10:05A

ID = L 2
LABEL = Dispenser 3/4
DESCRIPTION = FUEL ALARM
ACTIVE = 02/16/23 9:59A
CLEAR = 02/16/23 10:03A

ID = L 1
LABEL = Dispenser 1/2
DESCRIPTION = FUEL ALARM
ACTIVE = 02/16/23 9:57A
CLEAR = 02/16/23 10:00A

ID = L 3
LABEL = Dispenser 5/6
DESCRIPTION = FUEL ALARM
ACTIVE = 02/16/23 9:54A
CLEAR = 02/16/23 9:57A

ID = L 5
LABEL = Dispenser 9/10
DESCRIPTION = FUEL ALARM
ACTIVE = 02/16/23 9:52A
CLEAR = 02/16/23 9:56A

Active Alarm Report

ID = L 8
LABEL = Regular Turbine Sump
DESCRIPTION = FUEL ALARM
ACTIVE = 02/16/23 10:15A
CLEAR =

ID = L 11
LABEL = premium sump
DESCRIPTION = FUEL ALARM
ACTIVE = 02/16/23 10:12A
CLEAR = 02/16/23 10:16A

ID = L 10
LABEL = Diesel Turbine Sump
DESCRIPTION = FUEL ALARM
ACTIVE = 02/16/23 10:11A
CLEAR = 02/16/23 10:15A

```

6 – The facility has both mechanical shut-off devices and an overfill alarm. Although both were tested on 12 May 2025... it does not appear that the high-level alarm is setup to alarm under an overfill condition. There is only required to be a single method of overfill prevention... and tested every 3 years. There is technically no violation here.... But is recommended to be corrected since you have the equipment installed and is simply a programming issue.

APPENDIX C-5

**UST OVER FILL EQUIPMENT INSPECTION
AUTOMATIC SHUTOFF DEVICE AND BALL FLOAT VALVE**

Facility Name: Keizer Mist	Owner: Victoria L. Doyle
Address: 3159 Broadway St NE	Address: 3159 Broadway St NE
City, State, Zip Code: Salem, OR 97303	City, State, Zip Code: Salem, OR 97303
Facility I.D. #: 12665	Phone #:
Testing Company: Petroleum Compliance Services, LLC	Phone #: Date: 5-12-2025

This data sheet is for inspecting automatic shutoff devices and ball float valves. See PEI/RP1200 Section 7 for inspection procedures.

Product Grade	Unleaded	Premium	Diesel			
Tank Number	1	2	3			
Tank Volume, gallons	19,930	11,897	8,039			
Tank Diameter, inches	120	120	120			
Overfill Prevention Device Brand	OPW	OPW	OPW			
Type	Automatic Shutoff Device	Automatic Shutoff Device	Automatic Shutoff Device	Automatic Shutoff Device	Automatic Shutoff Device	Automatic Shutoff Device

AUTOMATIC SHUTOFF DEVICE INSPECTION

1. Drop tube removed from tank?	Yes	Yes	Yes	Yes	No	Yes	No	Yes	No
2. Drop tube and float mechanisms free of debris?	Yes	Yes	Yes	Yes	No	Yes	No	Yes	No
3. Float moves freely without binding and poppet moves into flow path?	Yes	Yes	Yes	Yes	No	Yes	No	Yes	No
4. Bypass valve in the drop tube open and free of blockage (if present)?	Yes	Yes	Yes	Yes	No	Yes	No	Yes	No
5. Flapper adjusted to shut off flow at 95% capacity?*	Yes	Yes	Yes	Yes	No	Yes	No	Yes	No

A "No" to any item in Lines 1-5 indicates a test failure.

BALL FLOAT VALVE INSPECTION**

1. Tank top fittings vapor-tight and leak-free?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
2. Ball float cage free of debris?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
3. Ball free of holes and cracks and moves freely in cage?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
4. Vent hole in pipe open and near top of tank?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
5. Ball float pipe proper length to restrict flow at 90% capacity?***	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No

A "No" to any item in Lines 1-5 indicates a test failure.

Test Results	Pass	Pass	Pass	Pass	Fail	Pass	Fail	Pass	Fail

Comments:

* Use manufacturer's suggested procedure for determining if automatic shutoff device will shut off flow at 95% capacity.
 ** If a ball float is found to fail the inspection, another method of overfill must be used.
 *** Use manufacturer's suggested procedure for determining if flow restriction device will restrict flow at 90% capacity.

Tester's Name (print) - Kenneth Pike

Tester's Signature Kenneth Pike

Dash... at Chevron
y St. NE
7303

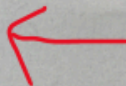
*** AUTOMATIC EVENTS - ADDRESS BOOK ***

--- NO CONTACT EXISTS ---

*** AUTOMATIC EVENTS - ALL TASKS ***

--- EVENT ID 1 ---

EVENT - Leak Alarm: Disabled
EVENT - High Water Alarm: Disabled
EVENT - Overfill Alarm: Disabled
EVENT - Low Limit Alarm: Disabled
EVENT - Theft Alarm: Disabled
EVENT - Delivery Start: Disabled
EVENT - Delivery Stop: Disabled
EVENT - External Input On: Disabled
EVENT - External Input Off: Disabled
EVENT - Sensor Fuel Alarm: Disabled
EVENT - Sensor Water Alarm: Disabled
EVENT - Sensor Out Alarm: Disabled
ACTION: AutoXmit
DEVICE: Co 1: Passport
DELAY TIME: 5 SECONDS
REPEAT TIME: 60 MINUTES



--- EVENT ID 2 ---

TIME: Weekly, Monday, 6:00 AM
REPORT: Liquid Sensor Status Report
DEVICE: TLSIntegralPrinter

--- EVENT ID 3 ---

TIME: Daily, 11:15 PM
REPORT: Current Inventory Report
DEVICE: TLSIntegralPrinter



This email has two intended recipients: you (permittee) and our enforcement/follow-up team. Because of this split audience, there might be some jargon used which is for DEQ internal purposes. I'll be asking for paperwork/documentation by a specific time and will state the violation/corrective action.

Alleged Violations:

1. Failure to operate functional interstitial monitoring methods by installing sensors to the lowest area of containment capable of detecting a release and opening communication between the piping secondary and the monitored containment sump. (J8.2) | OAR 340-150-0400(1)(a); Class 1

Corrective Action:

1. Submit confirmation of boot opening, sensors being correctly installed, meters being fixed, and proper installation of the mechanical line leak detector vapor return line prior to by 12 Nov 2025.

Next Steps :

Please direct your responses to ust.dutyofficer@deq.oregon.gov This team will work with me on documents you submit or corrective actions completed to ensure the work is sufficient to close the inspection.

These violations will fit into the field citation guidance and that team will issue enforcement based off a preset calculation matrix.

Dylan Eckert
Inspector, Underground Storage Tanks
DEQ - Eugene, Land Quality Division
165 E. 7th Ave Suite 100
Eugene, OR 97401-3049
C 541-215-2368

Messages to and from this e-mail address may be available to the public under Oregon Public Records Law.

Sign-up for UST Program Updates:

https://service.govdelivery.com/accounts/ORDEQ/subscriber/new?topic_id=ORDEQ_546

The UST Program. 60-Minute story: <https://www.youtube.com/watch?v=leYoLtsQ2WQ>

Fee \$ 300.00 - Paid \$ 300.00 = Due \$ 0.00

Penalty

▶ 2025-fc-10025 \$ 300.00
① UST - Field Citation

1 Results

⊖ Add Penalty ➡ Send to FIMS

Payment


▼ Check by Mail 2893 \$ 300.00
📅 11/24/2025
① 60040

Type	Amount
Check by Mail	300
E-Payment Confirmation#	E-Payment Settle Date
	mm/dd/yyyy
Ref#	Payment Date
60040	11/24/2025
Comments	
2025-FC-10025	

(Remaining Length: 3987)

Site Info

KEIZER MIST LLC



3159 BROADWAY ST NE, SALEM, OR 97303

85527 ✓

301574

CEM_FacilityIdentifier=163802 UST (12665)

Stationary

Inspection Info

11102 Completed

UST

Full Compliance Inspection (FCI) TCR only

Start Date 10/30/2025 End Date 10/30/2025

Created & Updated Info