

PST STII / PST 56664 / S / 2013-09-05 / INV 1116751

**Galveston County Air Pollution Control  
Investigation Report  
GORKHALI INVESTMENTS, L.L.C.  
CN603538323**

---

**TIKI FOOD STORE**

**RN102232055**

**Investigation #** 1116751

**Incident #**

**Investigator:** ANNA BROWN

**Site Classification**

UNDERGROUND STORAGE TANK -  
PST STAGE II

**Conducted:** 09/05/2013 -- 09/05/2013

**No Industry Code Assigned**

**Program(s):** PETROLEUM STORAGE  
TANK STAGE II

RECEIVED

DEC 09 2014

TCEQ  
CENTRAL FILE ROOM

**Investigation Type :** Compliance Investigation

**Location :**

**Additional ID(s) :** 56664

**Address:** 200 TIKI DR; GALVESTON,  
TX 77554

**Activity Type :** GALVESTON COUNTY LOCAL PROGRAM  
STICEI - CEI conducted on vapor recovery  
equipment of gasoline dispensing stations  
STITOB - Tester Observation CEI on vapor  
recovery equipment of gasoline dispensing  
stations

**Principal(s) :**

**Role**

**Name**

RESPONDENT

GORKHALI INVESTMENTS LLC

**Contact(s) :**

**Role**

**Title**

**Name**

**Phone**

Participated in Investigation

STAGE II TESTER

MR MANSOOR  
BUKHARI

Cell (713) 296-9745

Regulated Entity Mail Contact

FACILITY OWNER

MR NAEEM  
SADRUDDIN

Cell (832) 620-3364  
Work (409) 935-1782

**Other Staff Member(s) :**

**Role**

**Name**

QA Reviewer  
Supervisor

LORI FITZSIMMONS-EVANS  
LORI FITZSIMMONS-EVANS

**Associated Check List**

**Checklist Name**

**Unit Name**

STAGE I AND II TEST OBSERVATION - 101 VAPOR  
SPACE MANIFOLD TEST  
STAGE I AND II TEST OBSERVATION - 102  
PRESSURE DECAY TEST  
STAGE I AND II TEST OBSERVATION - 103  
DYNAMIC BACK PRESSURE TEST

Sitewide  
Sitewide  
Sitewide

RECEIVED

NOV 06 2013

REGION 12

|                                             |          |
|---------------------------------------------|----------|
| STAGE I AND II TEST OBSERVATION - 104       | Sitewide |
| FLOWRATE DETERMINATION TEST                 |          |
| STAGE I AND II TEST OBSERVATION - 106       | Sitewide |
| ALTERNATIVE PROCEDURES                      |          |
| STAGE I AND II TEST OBSERVATION - EQUIPMENT | Sitewide |
| SPECIFICATIONS FOR ALL TESTS                |          |
| STAGE II VAPOR RECOVERY INVESTIGATION       | Sitewide |

**Investigation Comments :**

RE: Stage II Vapor Recovery Compliance Evaluation and Test Observation Investigation for:  
Tiki Food Store, 200 Tiki Drive, Galveston (Galveston County), Texas 77565  
Facility ID No.: 56664

**INTRODUCTION:**

On September 5, 2013, Investigator Anna Brown of the Galveston County Health District (GCHD), Air and Water Pollution Services, a contracted Agency of Texas Commission on Environmental Quality (TCEQ), conducted a test observation and Compliance Evaluation Investigation (CEI) of the above-referenced facility to evaluate compliance with applicable requirements for control of vehicle refueling emissions (Stage II) at motor vehicle fuel dispensing facilities.

Gorkhali Investments LLC owns this property and underground storage tanks. Mr. Naeem Sadruddin is the owner of Gorkhali Investments LLC and is the Manager and facility contact.

**GENERAL FACILITY AND PROCESS INFORMATION:**

This site is a convenience store with retail sales of gasoline fuel.

VAPOR RECOVERY - Is Stage I Vapor Recovery equipment required? Yes; Stage II Vapor Recovery Present? Yes; Is ORVR (Onboard Refueling Vapor Recovery) equipment required? Yes; ORVR Present? Yes

STAGE II SYSTEM - Stage II System installed is a Healy Systems Inc., CARB Executive Order G-70-186-AE, Nozzle Type? Healy

MONTHLY THROUGHPUT: The approximate amount of fuel dispensed at this facility is 30,000 gallons per month.

WERE RECORDS ON SITE AND AVAILABLE FOR REVIEW - Yes

DAILY INSPECTIONS - Yes

MONTHLY INSPECTIONS - Yes

FACILITY REPRESENTATIVE TRAINING CERTIFICATE - Yes

EMPLOYEE TRAINING LOG - Yes

RECORD OF MAINTENANCE - Yes

CORRECT CARB ORDER - Yes

ANNUAL & TRIENNIAL TESTING COMPLETED - Yes

Last Annual Test Passed: September 18, 2012 by Mansoor Bukhari, STR Stage II Testing

Last Triennial Test Passed: September 13, 2010 by Mansoor Bukhari, STR Stage II Testing

COPIES OF TEST RESULTS - Yes

PRE-TEST NOTIFICATION SUBMITTED - Yes

NON-COAXIAL STAGE I - Yes

P/V VENT - in working condition - Yes

DRYBREAKS - in working condition - Yes

HOSES, BOOTS, FACEPLATES - in good condition - Yes

TESTS OBSERVED:

101- Pass  
102 - Pass  
103- Pass  
104 - Pass  
201 - Pass

BACKGROUND:

A previous investigation was conducted on September 13, 2010 and found non-compliant. At the time of the investigation, one violation was identified.

1) Failure to ensure that verification of proper operation of the Stage II equipment must be performed in accordance with the test procedures referenced in paragraph (1) of this section at least once every 12 months. The verification must include all functional tests that were required for the initial system test, except for TXP-101, Determination of Vapor Space Manifolding of Vapor Recovery Systems at Gasoline Dispensing Facilities, and TXP-103, Determination of Dynamic Pressure Performance (Dynamic Back-Pressure) of Vapor Recovery Systems at Gasoline Dispensing Facilities, which must be performed at least once every 36 months. The previous annual Stage II system test was conducted on May 15, 2008, therefore at the time of the investigation it had been more than 12 months since the last Stage II system test. This is a violation of 30 TAC 115.245(2). This violation was resolved through documentation, submitted to GCHD on July 17, 2009, showing successful completion of annual Stage II system test conducted on October 15, 2010.

This investigation was sent to enforcement for violation of 30 TAC 115.245(2), for failure to verify proper operation of the Stage II equipment in accordance with the test procedures at least once every 12 months.

ADDITIONAL INFORMATION:

During the investigation, Mr. Naeem Sadruddin, Manager, assisted by providing information. The Stage II triennial system tests were conducted on September 13, 2010 by Mansoor Bukhari, STR Stage II Testing. The 101 (vapor space manifold), 102 (pressure decay), 103 (dynamic back pressure), 104 (flow rate determination), and 201.5 (A/L ratio) tests passed.

All documentation was current, complete, and available for review.

CONCLUSION:

The facility representative was notified that there were no violations cited.

Was the site in compliance? Yes

A General Compliance letter has been issued as a result of the investigation.

**No Violations Associated to this Investigation**

Signed *Lina Brown*  
Environmental Investigator

Date 10/31/13

Signed *Dr. D. J. S.*  
Supervisor

Date 10/31/13

**Attachments: (in order of final report submittal)**

☐ Enforcement Action Request (EAR)  
3 ☒ Letter to Facility (specify type) : Compliance  
Investigation Report  
☐ Sample Analysis Results  
☐ Manifests  
☐ NOR

☐ Maps, Plans, Sketches  
☐ Photographs  
☐ Correspondence from the facility  
☒ Other (specify) :

1- Test Results  
2- Pre-test Notification



## Stage II Testing

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

### Vapor Recovery Test Result Cover Sheet

(Notice: Submit Test Results to the appropriate TCEQ regional office, or local program with jurisdiction, within 10 working days of test completion)

Test of the Vapor Recovery System were conducted at the following location:

Facility Name: **Tiki Food Store**

Facility ID Number: **56664**

Facility Address: **200 Tiki Dr.**

Facility City: **Galveston**

State: **TX**

Zip Code: **77554**

Facility Phone: **409-935-1782**

Facility Owner Name: **Mr. Naeem**

Phone Number: **832-620-3364**

#### Vapor Recovery System Installed:

| Systems  | UST or AST | Type of System <sup>1</sup> | Executive Order or Certification Number | Test Purpose <sup>2</sup> |
|----------|------------|-----------------------------|-----------------------------------------|---------------------------|
| Stage I  | UST        | Two Point                   | N/A                                     | N/A                       |
| Stage II | UST        | Healy Mini Jet              | G 70-186                                | 3 Y                       |

<sup>1</sup> Coaxial or Two-point for Stage I, Balance or Assist for Stage II.

<sup>2</sup> Test Purposes are: CI=Initial Compliance, CA=Annual Compliance, CM=After Major Modification, or 3Y=Three Year.

The Following Tests were conducted at this Facility:

| Number    | Test Procedure Name     | Date Tested | Name of Person(s) Conducting Test | Pass or Fail |
|-----------|-------------------------|-------------|-----------------------------------|--------------|
| TXP 101.1 | Vapor Space Manifold    | 9/5/2013    | Mansoor A Bukhari                 | Pass         |
| TXP 102.1 | Pressure Decay          | 9/5/2013    | Mansoor A Bukhari                 | Pass         |
| TXP 103.1 | Dynamic Backpressure    | 9/5/2013    | Mansoor A Bukhari                 | Pass         |
| TXP 104.1 | Flow Rate Determination | 9/5/2013    | Mansoor A Bukhari                 | Pass         |
| TXP 105.1 | Liquid Removal Device   |             |                                   |              |
| TXP 106.1 | V/L Ratio               |             |                                   |              |
| TXP-201.5 | CARB A/L Ratio          | 9/5/2013    | Mansoor A Bukhari                 | Pass         |
| TXP 107.1 | Healy Booted Nozzle     |             |                                   |              |
| Other:    | LLD Test                | 9/5/2013    | Mansoor A Bukhari                 | Pass         |

The tester arrived on site at: **9:40AM**

(AM or PM) and departed at: **1:30PM**

(AM or PM).

There are a total of 6 pages containing test results attached to this cover sheet.

I certify that the above tests, the results of which are attached to this cover sheet, were conducted in accordance with the test procedures as outlined in the Vapor Recovery Test Procedures Handbook, and that the results submitted here are true and correct to the best of my knowledge.

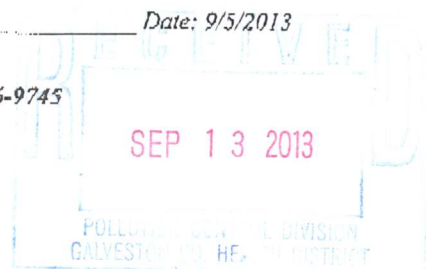
Signature of Test Contractor Responsible Party: Mansoor A Bukhari

Date: **9/5/2013**

Test Company Name: **STR Stage II Testing.**

Phone Number: **713-296-9745**

|               |         |
|---------------|---------|
| Investigation | 1116751 |
| Attachment    | 1       |





11675

### Attachments:

30.77

Para

**Form 102-1:**  
**Pressure Decay Test Data**

Test Date: 9/5/2013  
Page 3 of 6

Facility Name: **Tiki Food Store**

Facility ID Number: 56664

Test Company Name: **STR Stage II Testing.**

Type of Stage II System Installed: **Healy Mini Jet**

Executive Order: G 70-186

Describe manifolding of System (if any): **Underground**

Date and Time of Last Bulk Delivery/Removal: 9/5/2013

@

6:20AM

Time of Last Vehicle Refueling Prior to Test: 9:50AM

Time Test Began: 10:20AM

| Parameter<br>(Indicate Manifolding by Circling Tank Numbers) | Tank Number                      |        |        |   | Total  |
|--------------------------------------------------------------|----------------------------------|--------|--------|---|--------|
|                                                              | 1                                | 2      | 3      | 4 |        |
| 1 Product Grade                                              | REG                              | REG    | SUP    |   |        |
| 2 Type of Storage Tank (AST or UST)                          | UST                              | UST    | UST    |   |        |
| 3 Actual Tank Capacity (Gallons)                             | 10,028                           | 10,028 | 10,028 |   | 30,084 |
| 4 Gasoline Volume (Gallons)                                  | 4,005                            | 4,099  | 3,500  |   | 11,604 |
| 5 Ullage (Gallons) (Items 3 - Item 4)                        |                                  |        |        |   | 18,480 |
| 6 Number of Nozzles w/Vapor Return to Tank                   |                                  |        |        |   | 8      |
| 7 P/V Manufactures Rated Cracking Pressure                   |                                  |        |        |   | 3      |
| 8 P/V Pressure When Cracking Began                           |                                  |        |        |   | 3.08   |
| 9 Time Required to Pressurize System (seconds)               |                                  |        |        |   | 128    |
| 10 Nitrogen Flow Rate Circle: (SCFM) or SCFH                 | Flowrate                         |        |        |   | 3 - 4  |
| 11 Initial Pressure (Inches WC)                              |                                  |        |        |   | 2.00   |
| 12 Pressure after 1 minute (Inches WC)                       |                                  |        |        |   | 2.00   |
| 13 Pressure after 2 minutes (Inches WC)                      |                                  |        |        |   | 2.00   |
| 14 Pressure after 3 minutes (Inches WC)                      |                                  |        |        |   | 2.02   |
| 15 Pressure After 4 Minutes (Inches WC)                      |                                  |        |        |   | 2.02   |
| 16 Pressure After 5 Minutes (Inches WC)                      |                                  |        |        |   | 2.03   |
| 17 Allowable Final Pressure: (from table or equation)*       |                                  |        |        |   | 1.93   |
| 18 Healy Nozzle to Multi / Mini-Jet: Pass or Fail            | A x V= Piping length= ft. A x V= |        |        |   | Pass   |
| 19 Test Result: Pass or Fail                                 |                                  |        |        |   | Pass   |

Comments: (Include any equipment replaced and / or repairs made prior to or during the test):

**Replaced one new P/V valve on vent line**

\* Final regulatory compliance must be determined by using the appropriate equation in Section 9.2.

TCEQ- 10504 (06-05-2002)

Investigation 1116751  
Attachment 1  
Page 4 of 7







**Form 103-2:**  
**Dynamic Back-Pressure Data: Vapor Piping Method**

Test Date: 9/5/2013

Page 4 of 6

Facility Name: **Tiki Food Store**

Facility ID Number: 56664

| Vent Line<br>to Tank<br>Number | Gas<br>Grade | System Manifold:<br>Back Pressure<br>("WC) at 60 SCFH | ^ Above-ground   ^ Below-ground                                                   |                                                                                    |                                                                                     |                                                                                     | Pass/Fail <sup>1</sup> |
|--------------------------------|--------------|-------------------------------------------------------|-----------------------------------------------------------------------------------|------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|------------------------|
|                                |              |                                                       | Back Pressure ("WC) through below-ground manifold to tank # (if applicable)       |                                                                                    |                                                                                     |                                                                                     |                        |
|                                |              |                                                       | 1                                                                                 | 2                                                                                  | 3                                                                                   | 4                                                                                   |                        |
| 1                              | UPS          | 0.46 - 0.48 = 0.02                                    |  |                                                                                    |                                                                                     |                                                                                     | Pass                   |
| 2                              | UPS          | 0.46 - 0.48 = 0.02                                    |                                                                                   |  |                                                                                     |                                                                                     | Pass                   |
|                                |              |                                                       |                                                                                   |                                                                                    |  |                                                                                     |                        |
|                                |              |                                                       |                                                                                   |                                                                                    |                                                                                     |  |                        |

| Dispenser |          | Back-Pressure ("WC) at a Flow Rate of |        |  | Pass/Fail <sup>1</sup> |
|-----------|----------|---------------------------------------|--------|--|------------------------|
| Numbers   | Make     |                                       | 60 CFH |  |                        |
| 1+2       | Gilbarco | 0.42 - 0.46 = 0.04                    |        |  | Pass                   |
| 3+4       | Gilbarco | 0.42 - 0.46 = 0.04                    |        |  | Pass                   |
| 5+6       | Gilbarco | 0.42 - 0.46 = 0.04                    |        |  | Pass                   |
| 7+8       | Gilbarco | 0.42 - 0.46 = 0.04                    |        |  | Pass                   |
|           |          |                                       |        |  |                        |
|           |          |                                       |        |  |                        |
|           |          |                                       |        |  |                        |
|           |          |                                       |        |  |                        |
|           |          |                                       |        |  |                        |
|           |          |                                       |        |  |                        |
|           |          |                                       |        |  |                        |
|           |          |                                       |        |  |                        |
|           |          |                                       |        |  |                        |
|           |          |                                       |        |  |                        |
|           |          |                                       |        |  |                        |

<sup>1</sup> Compare flow-rate readings with the appropriate values from # 12.1 above to determine pass/fail status.

TCEQ- 10507 (06-05-2002)

Investigation 1116751  
Attachment 1  
Page 5 of 7

Investigation 1116751  
Attachment 1  
Page 100 of 7

|                                                                                                  |                                                             |  |                                                                                                       |  |
|--------------------------------------------------------------------------------------------------|-------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------|--|
| <b>GDF Name and Address</b><br><br><b>Tiki Food Store</b><br>200 Tiki Dr.<br>Galveston, TX 77554 | <b>A/L FIELD DATA SHEET</b>                                 |  | <b>Testing Firm name and Address</b>                                                                  |  |
|                                                                                                  |                                                             |  | STR                                                                                                   |  |
|                                                                                                  |                                                             |  | Stage II Testing                                                                                      |  |
|                                                                                                  |                                                             |  | P.O. BOX 681656 Houston, Tx 77268                                                                     |  |
|                                                                                                  |                                                             |  | Phone No. (713) 296-9745                                                                              |  |
| Test Date : 9/5/2013<br><br>STR-098-2013                                                         | Source : GDF Phase II Vapor Recovery<br>Facility ID # 56664 |  | Test Perform By : Mansoor A Bukhari<br><br>Applicable CARB EO #<br>Allowable A/L Range : 0.90 to 1.10 |  |

| Pump # | Nozzle<br>Model | Product<br>Grade | Flow Rate Calculation   |                      |                                | Vapor Volume Metered |                  |      | Result    |
|--------|-----------------|------------------|-------------------------|----------------------|--------------------------------|----------------------|------------------|------|-----------|
|        |                 |                  | Gallons(G)<br>Dispensed | Time(S)<br>(seconds) | Flowrate <sup>1</sup><br>(GPM) | Ending Rm value      | Initial Rm value | A/L  | Pass/Fail |
| D1-1   | Healy 800       | Reg              | 5.052                   | 38                   | 7.98                           | 48.50                | 47.74            | 1.13 | PASS      |
|        |                 | Srp              | 5.056                   | 36                   | 8.43                           | 49.24                | 48.5             | 1.09 | PASS      |
| D2-1   | Healy 800       | Reg              | 4.524                   | 38                   | 7.14                           | 49.90                | 49.24            | 1.09 | PASS      |
|        |                 | Srp              | 4.510                   | 35                   | 7.73                           | 50.58                | 49.9             | 1.13 | PASS      |
| D3-1   | Healy 800       | Reg              | 4.512                   | 37                   | 7.32                           | 51.24                | 50.58            | 1.09 | PASS      |
|        |                 | Srp              | 4.544                   | 36                   | 7.57                           | 51.90                | 51.24            | 1.09 | PASS      |
| D4-1   | Healy 800       | Reg              | 4.536                   | 38                   | 7.16                           | 52.56                | 51.9             | 1.09 | PASS      |
|        |                 | Srp              | 4.564                   | 36                   | 7.61                           | 53.24                | 52.56            | 1.11 | PASS      |
| D5-1   | Healy 800       | Reg              | 4.523                   | 37                   | 7.33                           | 55.12                | 54.46            | 1.09 | PASS      |
|        |                 | Srp              | 4.535                   | 37                   | 7.35                           | 55.80                | 55.12            | 1.12 | PASS      |
| D6-1   | Healy 800       | Reg              | 4.524                   | 37                   | 7.34                           | 56.46                | 55.8             | 1.09 | PASS      |
|        |                 | Srp              | 4.562                   | 36                   | 7.60                           | 57.12                | 56.46            | 1.08 | PASS      |
| D7-1   | Healy 800       | Reg              | 4.534                   | 37                   | 7.35                           | 57.78                | 57.12            | 1.09 | PASS      |
|        |                 | Srp              | 4.576                   | 37                   | 7.42                           | 58.46                | 57.78            | 1.11 | PASS      |
| D8-1   | Healy 800       | Reg              | 4.554                   | 37                   | 7.38                           | 59.14                | 58.46            | 1.12 | PASS      |
|        |                 | Srp              | 4.54                    | 36                   | 7.57                           | 59.8                 | 59.14            | 1.09 | PASS      |

0.76  
0.74  
0.66  
0.68  
0.66  
0.66  
0.66  
0.68  
0.66  
0.68  
0.66  
0.66  
0.66  
0.68  
0.68  
0.66

1 Flowrate Calculated as GPM = (G/S) \* 60

2. A/L = Final RM Reading - Initial RM Reading /Gallons x 7.481

Investigation 1116751  
 Attachment 1  
 Page 7 of 7

Last ToB/CEI: 9/20/10

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

Stage II Vapor Recovery Pre-Test Notification

(NOTICE: Written notification must be received by TCEQ 10 working days in advance of the test. See reverse side for addresses.)

Notification Type and Test Purpose:

Notification Type (Check one): ☒ Original ☐ Revised ☐ Rescheduled ☐ Canceled

If revised, rescheduled or canceled, what was the original notification date?:

Original test date?:

Test Purpose: ☐ Compliance ☐ Problem Resolution ☐ Other (Explain):

If compliance, What type

**Full Compliance**

☐ Startup ☐ Annual ☐ Major Modification

Test(s) will begin on (date):

**9/5/2013**

at( time ):

**9:30AM**

Test(s) of the Vapor Recovery System are to be conducted at the following location:

Facility Name:

**Tiki Food Store**

Facility Address: **200 Tiki Dr.**

Facility City **Galveston**

Facility Zip Code: **Texas 77554**

Facility PST ID#: **56664**

Directions to Facility (if needed):

Facility Vapor Recovery System Information:

Number of Gasoline Storage Tanks at the Facility:      ASTs   2   USTs

Total number of gasoline nozzles: 8

Type of Stage I System: ☐ Coaxial

☒ Two Point

Type of Stage II System: ☐ Balance

☐ Booted Assist

☒ Bootless Assist

CARB Executive Order: G-70-186

Test(s) to be Conducted at the Facility:

☒ TXP-101.1 Vapor Space Manifold ☒ TXP-104.1 Flow Rate Determination ☐ TXP-107.1 Healy Booted Nozzle

☒ TXP-102.1 Pressure Decay ☐ TXP 105.1 Liquid Removal Device ☒ CARB TP-201.5 A/L Ratio

☒ TXP-103.1 Dynamic Back-Pressure ☐ TXP-106.1 V/L Ratio

☒ Other (Explain):

Facility Contact Information:

Facility Contact Name: **Mr. Naeem**

Facility Phone # **409-935-1782**

Facility Owner Name: **Mr. Naeem**

Owner Phone # **832-620-3364**

Testing Contractor ( Company) Information:

Test Contractor Name: **STR Stage II Testing**

Certification # **111ST**

Person Conducting Test (s) **Mansoor A Bukhari**

Registration # **46**

Phone or Pager Number where person conducting the test can be reached:

Submitted by : **Mansoor**

*Mansoor*

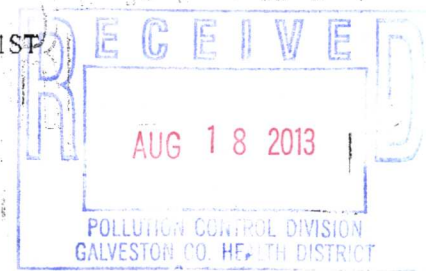
Printed Name

Signature

Phone: **713-296-9745**

Date : **8/28/2013**

Investigation 1116751  
Attachment 2  
Page 1 of 1



POOR QUALITY ORIGINAL

# GALVESTON COUNTY HEALTH DISTRICT

John Zendt  
Chair, United Board of Health

Harlan "Mark" Guidry, MD, MPH  
Chief Executive Officer



Warren J. Holland, III  
Chief Operating Officer

Kathy Barroso  
Chief Financial Officer

October 31, 2013

Mr. Naeem Sadruddin  
Gorkhali Investments LLC  
200 Tiki Drive  
Galveston, TX 77565

**Re: Stage II Vapor Recovery Compliance Evaluation Investigation / Test Observation at:  
Tiki Food Store, 200 Tiki Drive, Galveston (Galveston County), Texas 77565  
RN102232055, TCEQ Additional ID. 56664, Investigation No. 1116751**

Dear Mr. Sadruddin,

On September 5, 2013, Investigator Anna Brown of the Galveston County Health District (GCHD), Air and Water Pollution Services, a contracted agency with the Texas Commission on Environmental Quality (TCEQ), conducted a Compliance Evaluation Investigation (CEI) and Test Observation (TOB) of the above referenced facility to evaluate compliance with applicable requirements for control of vehicle refueling emissions (Stage II) at motor vehicle fuel dispensing facilities. No violations are being alleged as a result of the investigation.

The Texas Commission Environmental Quality appreciates your assistance in this matter and your compliance efforts to ensure protection of the State's environment. If you or members of your staff have any questions regarding these matters, please feel free to contact Anna Brown at 409- 938-2312.

Sincerely,

Lori FitzSimmons-Evans  
Program Manager  
Air & Water Pollution Services Division  
Galveston County Health District

LF/ab

|               |         |
|---------------|---------|
| Investigation | 1116751 |
| Attachment    | 3       |
| Page          | 2 of 2  |