

FORM INSTRUCTIONS: Use this form to report suspected/confirmed PST releases to the Texas Commission on Environmental Quality (TCEQ) within 24-hours of discovery. Forms may be emailed (pstrpr@tceq.texas.gov), faxed (512/239-2216), or phoned in (512/239-2200). Call 512/ 656-9320 for emergencies.

TEXAS PETROLEUM STORAGE TANK PROGRAM INCIDENT REPORT FORM

Facility Information	Facility Name: <u>40560</u> Address: <u>2101 N. Hwy 123, Suite A</u> City: <u>San Marcos</u> County: <u>Hays County</u> Region: _____ Facility ID: <u>67844</u> Ghost tank(s)? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N Pre-existing LPST ID? <input type="checkbox"/> N <input type="checkbox"/> Y: # _____
Responsible Party (RP) Information	Contact Person: <u>Peggie Betz</u> Phone: <u>972-828-7805</u> Company: <u>7-Eleven, Inc.</u> Fax: _____ Address: <u>1601 Luna Road, Suite 300</u> City: <u>Farmers Branch</u> State: <u>Tx</u> Zip: <u>75006</u> The RP is the . . . <input checked="" type="checkbox"/> tank owner <input type="checkbox"/> tank operator <input type="checkbox"/> landowner <input type="checkbox"/> other
Release reported by (if different than RP):	Contact person: <u>Peggie Betz</u> Phone: <u>972-828-7805</u> Company: <u>7-Eleven, Inc.</u> Address: <u>1601 Luna Road, Suite 300</u> City: <u>Farmers Branch</u> State: <u>TX</u> Zip: <u>75006</u>
Insurance Provider	Name of insurance provider: <u>Ironshore Specialty Insurance</u> Policy No. XXXXXXXXXX Date insurance provider was notified about this release: <u>n/a</u>

RELEASE DETAILS

<input type="checkbox"/> Confirmed	<input type="checkbox"/> AST	Date discovered: <u>4/23/2021</u>	Date reported to TCEQ: <u>4/23/2021</u>	Tank system piping: <input checked="" type="checkbox"/> pressurized
<input checked="" type="checkbox"/> Suspected	<input checked="" type="checkbox"/> UST			<input type="checkbox"/> suction/gravity
				<input type="checkbox"/> unknown

Check all that apply:

<u>Release discovery</u>	<u>Substance</u>	<u>Impacted media</u>	<u>Source</u>
<input type="checkbox"/> Routine tank closure or site assessment	<input checked="" type="checkbox"/> Gasoline (leaded, unleaded, unknown)	<input type="checkbox"/> Groundwater	<input type="checkbox"/> Tank
<input type="checkbox"/> Free product or sheen	<input type="checkbox"/> Diesel/Fuel oil	<input type="checkbox"/> Surface water	<input type="checkbox"/> Dispenser
<input type="checkbox"/> Odors	<input type="checkbox"/> Waste oil	<input type="checkbox"/> Soil	<input type="checkbox"/> Piping
<input type="checkbox"/> Automatic tank gauge	<input type="checkbox"/> Hydraulic/ transmission/ mineral oil	<input type="checkbox"/> Air	<input type="checkbox"/> Submersible Turbine Pump (STP) Area
<input type="checkbox"/> Probe or sensor	<input type="checkbox"/> Jet fuel/kerosene		<input type="checkbox"/> Delivery Problem
<input checked="" type="checkbox"/> Inventory records	<input type="checkbox"/> Petroleum of unknown type	<u>Cause</u>	<input type="checkbox"/> Other (describe in Comments)
<input type="checkbox"/> Tank tightness test failure	<input type="checkbox"/> Hazardous subst. (describe in Comments)	<input type="checkbox"/> Spill	<input type="checkbox"/> Other (describe in Comments)
<input type="checkbox"/> Line tightness test failure	<input type="checkbox"/> Unknown	<input type="checkbox"/> Overfill	<input type="checkbox"/> Unknown
<input type="checkbox"/> Groundwater monitoring well	<input type="checkbox"/> Other (describe in Comments)	<input type="checkbox"/> Phys/mech damage	
<input type="checkbox"/> 1-mo. SIR failure or "inconclusive"		<input type="checkbox"/> Faulty installation	
<input checked="" type="checkbox"/> 2-mo. inventory control discrepancy		<input type="checkbox"/> Corrosion	
<input type="checkbox"/> Vapor detection (auto or manual)		<input type="checkbox"/> Other (describe in Comments)	
<input type="checkbox"/> Public or private water supply contaminated		<input type="checkbox"/> Unknown	

Comments/Notes

<<< TCEQ USE ONLY >>> PM complete this form when a PST release is reported to TCEQ, and provide to Admin Staff for LPST ID No. assignment. TL initial here to assign new LPST ID No.: _____ PM _____ TL. **ADMIN** - Enter information into appropriate databases.
NEW LPST ID No.: _____