

## UST Annual Walkthrough Inspection

### 1. UST Facility Information

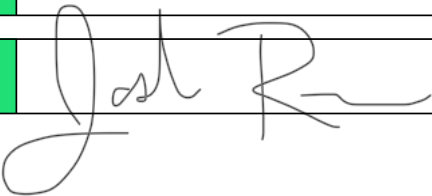
|                               |                                     |                   |                  |
|-------------------------------|-------------------------------------|-------------------|------------------|
| Facility I.D. #:              | 10551                               |                   |                  |
| UST Facility Name             | Food Center Marathon                |                   |                  |
| UST Facility Physical Address | Street Address : 2322 W Western Ave | City : South Bend | Zip Code : 46613 |

### 2. Annual Inspection Checklist

| Category             | Description                                                                                               | N/A                                 | Tank 1 | Tank 2 | Tank 3 | Tank 4 | Tank 5 | Tank 6 | Tank 7 | Tank 8 |
|----------------------|-----------------------------------------------------------------------------------------------------------|-------------------------------------|--------|--------|--------|--------|--------|--------|--------|--------|
|                      |                                                                                                           |                                     | Reg 1  | Reg 2  | Prem   |        |        |        |        |        |
| ATG Manhole          | Cap in good condition, seals tightly, hole sealed where probe wire goes through                           | <input type="checkbox"/>            | No     | Yes    | No     |        |        |        |        |        |
|                      | Junction box has cover, not corroded; intrinsically safe wiring in good condition                         | <input type="checkbox"/>            | Yes    | Yes    | Yes    |        |        |        |        |        |
|                      | Manhole cover in good condition                                                                           | <input type="checkbox"/>            | Yes    | Yes    | Yes    |        |        |        |        |        |
|                      | Functionality Test Date : <span style="border: 1px solid black; padding: 2px;">10/7/24</span>             | <input type="checkbox"/>            |        |        |        |        |        |        |        |        |
| Spill Bucket         | Single-walled spill containment manhole tightness tested within last 3 years                              | <input type="checkbox"/>            | Yes    | Yes    | Yes    |        |        |        |        |        |
|                      | Double-walled spill containment manhole tightness tested within last 3 years OR inspected monthly         | <input checked="" type="checkbox"/> |        |        |        |        |        |        |        |        |
|                      | Are spill buckets free of product, water and debris ?                                                     | <input type="checkbox"/>            | No     | No     | No     |        |        |        |        |        |
|                      | Are spill buckets free of damage/cracks ?                                                                 | <input type="checkbox"/>            | Yes    | Yes    | Yes    |        |        |        |        |        |
|                      | HSB Test Date : <span style="border: 1px solid black; padding: 2px;">10/9/23</span>                       | <input type="checkbox"/>            |        |        |        |        |        |        |        |        |
| Overfill Prevention  | Drop tube shutoff valve passes inspection & excessive corrosion not present                               | <input type="checkbox"/>            | Yes    | Yes    | Yes    |        |        |        |        |        |
|                      | Ball float valve passes inspection, can be removed & excessive corrosion not present                      | <input checked="" type="checkbox"/> |        |        |        |        |        |        |        |        |
|                      | Overfill alarm passes inspection                                                                          | <input type="checkbox"/>            | No     | No     | No     |        |        |        |        |        |
|                      | OPV Test Date : <span style="border: 1px solid black; padding: 2px;">10/9/23</span>                       | <input type="checkbox"/>            |        |        |        |        |        |        |        |        |
| Corrosion Protection | Galvanic Cathodic Protection test has been conducted within the past 3 years and the test passed          | <input type="checkbox"/>            | Yes    | Yes    | Yes    |        |        |        |        |        |
|                      | Impressed Current Cathodic Protection test has been conducted within the past 3 years and the test passed | <input checked="" type="checkbox"/> |        |        |        |        |        |        |        |        |
|                      | Tank Lining inspected as required and in good condition                                                   | <input checked="" type="checkbox"/> |        |        |        |        |        |        |        |        |
|                      | CP Test Date : <span style="border: 1px solid black; padding: 2px;">8/17/23</span>                        | <input type="checkbox"/>            |        |        |        |        |        |        |        |        |

| Category          | Description                                                                 | N/A                                 | Tank 1 | Tank 2 | Tank 3 | Tank 4 | Tank 5 | Tank 6 | Tank 7 | Tank 8 |   |   |   |   |   |   |   |
|-------------------|-----------------------------------------------------------------------------|-------------------------------------|--------|--------|--------|--------|--------|--------|--------|--------|---|---|---|---|---|---|---|
|                   |                                                                             |                                     | Reg 1  | Reg 2  | Prem   |        |        |        |        |        |   |   |   |   |   |   |   |
| Release Detection | 12 Months of RD printed and on site                                         | <input type="checkbox"/>            | Yes    | ▼      | Yes    | ▼      | Yes    | ▼      | .      | ▼      | . | ▼ | . | ▼ | . | ▼ | . |
|                   | Release Detection Report have issues in past months                         | <input type="checkbox"/>            | No     | ▼      | No     | ▼      | No     | ▼      | .      | ▼      | . | ▼ | . | ▼ | . | ▼ | . |
|                   | ATG console has any history of alarm in past months                         | <input type="checkbox"/>            | No     | ▼      | No     | ▼      | No     | ▼      | .      | ▼      | . | ▼ | . | ▼ | . | ▼ | . |
|                   | Release Detection Type : <div>ATG</div>                                     | <input type="checkbox"/>            | .      | ▼      | .      | ▼      | .      | ▼      | .      | ▼      | . | ▼ | . | ▼ | . | ▼ | . |
| Containment Sumps | Liquid and debris removed from sump ?                                       | <input type="checkbox"/>            | Yes    | ▼      | Yes    | ▼      | Yes    | ▼      | .      | ▼      | . | ▼ | . | ▼ | . | ▼ | . |
|                   | Are containment sumps free of damage/cracks ?                               | <input type="checkbox"/>            | Yes    | ▼      | Yes    | ▼      | Yes    | ▼      | .      | ▼      | . | ▼ | . | ▼ | . | ▼ | . |
|                   | HSC Test Date : <div></div>                                                 | <input checked="" type="checkbox"/> | .      | ▼      | .      | ▼      | .      | ▼      | .      | ▼      | . | ▼ | . | ▼ | . | ▼ | . |
| Stage I Testing   | Verify that Stage I testing has been conducted and test results are passing | <input checked="" type="checkbox"/> | .      | ▼      | .      | ▼      | .      | ▼      | .      | ▼      | . | ▼ | . | ▼ | . | ▼ | . |

Comments/Deficiencies:

|                                               |                                                                                     |
|-----------------------------------------------|-------------------------------------------------------------------------------------|
| Name (Class A & B Operator) :                 |                                                                                     |
| Name (Person conducted the inspection) :      | Josh Rider                                                                          |
| Signature (Person conducted the inspection) : |  |