



Massachusetts Department of Environmental Protection
Bureau of Waste Site Cleanup

BWSC-101

RELEASE LOG FORM

Release Tracking Number

4 - 17582

A. LOG INFORMATION:

Log Date:

1-21-03

Log Time:

1:09

Check one:

☐ AM ☒ PM

Use of Form:
(check one)

☒ Initial Office
☐ Boston
☐ Amended

TYPE OF CALL (check one):

☒ Release or TOR
☐ Complaint ☐ Inquiry

CALLER (check one):

☐ PRP
☐ Public Safety Official
☐ Other Government Agency
☐ Citizen
☐ Anonymous
☒ LSP or PRP Agent
☐ Other Person: _____

DISPOSITION OF CALL (check the one most applicable disposition below):

If selecting one of the two following options, assign a Release Tracking Number (RTN) in the space provided above:

☒ Reportable Release or Threat of Release
☐ Release or Threat of Release Less Than Reporting Threshold

Selected one of the two following options only if an RTN was previously assigned:

☐ Release Notification Retraction (with BWSC-103 only)
☐ Not a 21E Release

If selecting any option below, do not assign an RTN:

☐ Release or Threat of Release Exempt from Reporting Requirements (not referred)
☐ Report Referred to Other Agency or Division

Reporting Person: James Decoulos

Telephone: (617) 485-7795 Ext.: _____

Organization: Decoulos & Company

☐ No Action Taken ☐ Site Visit ☐ Compliance Site Visit

B. RELEASE OR THREAT OF RELEASE LOCATION:

Street: 131 Main St.

Location Aid: Route 58 - Eagle Gas Station

City/Town: Camden

Adequately Regulated Status: _____

Fee Status: _____

Use of Location (check all that apply): ☒ Commercial ☐ Industrial ☐ Residential ☐ School ☐ Municipal ☐ State
☐ Federal ☐ Right of Way ☐ Roadway ☐ Water Body ☐ Open Space Other: _____

Release Tracking Number of Associated Transition or Tier Classified Site, if any: _____

C. RELEASE OR THREAT OF RELEASE (TOR) INFORMATION:

Notification Date, if different from log date: _____

"One Year" Status Date, if not one year after notification date: _____

Date and time reporting person obtained knowledge of the Release or TOR. Date: 12 Time: _____ ☐ AM ☐ PM

IF KNOWN, record date and time Release or TOR occurred. Date: 12 Time: _____ ☐ AM ☐ PM

Check all conditions that apply to the Release or Threat of Release:

2 HOUR REPORTING CONDITIONS

☐ Sudden Release
☐ Threat of Sudden Release
☐ Oil Sheen on Surface Water
☐ Poses Imminent Hazard
☐ Could Pose Imminent Hazard
☐ Release Detected in Private Well
☐ Release to Storm Drain
☐ Sanitary Sewer Release (Imminent Hazard Only)

72 HOUR REPORTING CONDITIONS

☒ Subsurface NAPL = or > 1/2 Inch
☐ UST Release
☐ Threat of UST Release
☐ Release to Groundwater near Water Supply
☐ Release to Groundwater near School or Residence

120 DAY REPORTING CONDITIONS

☐ Release of HM(s) to Soil or Groundwater > RC(s)
☐ Release of Oil to Soil > RC(s) and Affecting > 2 Cubic Yards
☐ Release of Oil to Groundwater > RC(s)
☐ Subsurface NAPL = or > 1/8 Inch and < 1/2 Inch
☐ Check here if Substantial Release Migration exists in connection with 120 Day Reporting Conditions

Source of Release or TOR (check all that apply): ☒ UST ☐ Pipe/Hose/Line ☐ AST ☐ Drums ☐ Transformer ☐ Boat

☐ Tanker Truck ☐ Vehicle ☒ Unknown ☐ Other Specify: _____

Federal LUST Eligible? ☒ Yes ☐ No ☐ Unknown

SECTION C IS CONTINUED ON THE NEXT PAGE.



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C. RELEASE OR THREAT OF RELEASE (TOR) INFORMATION: (continued)

Type of Release or TOR (check all that apply): ☐ Leak ☐ Spill ☐ Rupture ☐ Dumping ☐ Tank Removal ☐ Overfill

☐ Vehicle Accident ☐ Test Failure ☐ Fire ☐ Threat Only ☒ Unknown ☐ Other Specify: _____

Identify Media and Receptors Affected: (check all that apply) ☐ Air ☒ Groundwater ☐ Surface Water ☐ Sediments ☐ Soil

☐ Wetlands ☐ Storm Drain ☐ Paved Surface ☐ Private Well ☐ Public Water Supply ☐ Zone 2 ☐ Residence

☐ School ☐ Unknown ☐ Other Specify: _____

O or HM Released

(check one)

CAS # (if known)

Amount or Conc.

Units

RCs Exceeded?

diesel fuel

☐ O ☐ HM

gasoline

☐ O ☐ HM

10

in

Y

Description of Release or Threat of Release:

Other RTN 4-13333. Client owns station, bought after PTN was given. Prior owner was to remediate site and has been doing so. Recently, other LSP found product on gw, 1st time NAPL found. Pumped product & NAPL went away - not reported. Kasegal represents former owner. Within 500 feet of a private well. Wednesday 1-15th found 10 inches of NAPL (Kasegal). Tanks were tight tested over weekend - no problems. UST & piping < two years old.

D. PRP INFORMATION:

☐ PRP Unknown ☒ PRP Performing Response Actions ☐ Check here if additional involved parties are listed on an RLFA.

☐ PRP Unwilling or Unable to Perform Response Actions. Who is? ☐ DEP ☐ Other Person Who: _____

Name of PRP Organization: Eagle Gas, Inc.

Name of PRP Contact: Najib Badaoui

Title: President

Street: 131 Main Street

☐ Check here if this PRP received a field NOR.

City/Town: Carver

State: _____ ZIP Code: 02330

Telephone: (508) 866 9098

Ext.: _____

FAX: _____

E. CONTRACTOR:

Contractor Name: James Decoulas

Telephone: _____ Ext.: _____

Name of Contact: _____

☐ Check here if this is a State Contractor.

F. LSP:

LSP Name: James Decoulas

LSP Number: _____

Telephone: _____ Ext.: _____

FAX: _____

G. MCP RESPONSE ACTIONS: (check any that apply) none at time of report.

☐ IRA Assessment Only ☐ IRA Oral Plan Approved* ☐ IRA Oral Plan Denied ☐ IRA Pre-notification

☐ Oral RAM Plan Approved* ☐ Oral RAM Plan Denied ☐ Notice of Intent to Conduct a URAM

Date of Action, if different from Log Date: _____ * Provide details of approved plans on an RLFA.

☐ Check here if soil was removed from the site prior to notification.

☐ Check here if the soil was removed as part of an UST closure.

Quantity of soil previously removed and destination: _____

H. DEP ASSIGNMENT:

RNF Submittal Requested: ☒ No ☐ Yes From Who: _____

Provisions of 21E Explained: ☐ Yes ☒ No Why Not: _____

Prepared By: Andrew Jones

Regional Use: _____

Staff Lead Assigned
(if different from Preparer):

ASQ Jones

Number of RLFA Pages Attached: _____

☐ Check here if Release or TOR is unassigned.