



Date Prepared/Revised

DEP USE ONLY

Date Received

## FORM FC-1

### NOTIFICATION OF INTENT TO DISPOSE OF SOIL CONTAMINATED BY VIRGIN PETROLEUM FUEL

This form must be fully and accurately completed. All required information must be typed or legibly printed in the spaces provided. If additional space is necessary, identify each attached sheet as Form FC-1, reference the item number and identify the date prepared. The "date prepared/revised" on any attached sheets needs to match the "date prepared/revised" on this page.

#### SECTION A. SITE IDENTIFIER

Applicant/permittee: \_\_\_\_\_

Site Name: \_\_\_\_\_

Facility ID (as issued by DEP): \_\_\_\_\_

Facility contact person: \_\_\_\_\_

Name : \_\_\_\_\_ Title: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

#### SECTION B. GENERATOR OF WASTE

Name of company: \_\_\_\_\_

Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Municipality: \_\_\_\_\_ County : \_\_\_\_\_

Location of site where waste originated, if different from above (instate, out-of-state): \_\_\_\_\_

If a subsidiary, name of parent company: \_\_\_\_\_

Company contact person

Name : \_\_\_\_\_ Title: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

**SECTION C. WASTE DESCRIPTION (Must be completed by generator of waste)****A. General Properties**

1. Physical state: (must contain no free liquids by EPA Method 9095). \_\_\_\_\_
2. Volume of waste to be shipped to facility for disposal: \_\_\_\_\_ tons, cu, yds., (circle one)
3. Contaminant type (check all that apply):
 

<input type="checkbox"/> Gasoline	<input type="checkbox"/> Jet Fuel
<input type="checkbox"/> Diesel	<input type="checkbox"/> Kerosene
<input type="checkbox"/> Fuel Oil - Type _____	<input type="checkbox"/> Other - Attach description
4. Contaminant source (check one):
  - a. ☐ Leaking underground storage tank. Qualifies for exemption for toxicity characteristics D018 through D043 under 40 CFR 261.4(b)(10), as incorporated by reference at 25 Pa. Code 261a.1.
  - b. ☐ Leaking above ground storage tank
  - c. ☐ Leaking or spill from drum
  - d. ☐ Spill during transportation
  - e. ☐ Other (Specify) \_\_\_\_\_
5. Estimated volume of contaminant \_\_\_\_\_ gallons
6. If contaminant source checked in (4) had been used to store any materials other than those checked in (3), attach a detailed description.
7. Have any state or federal agencies been involved in the cleanup? ☐ Yes ☐ No (Check one)  
If yes, attach the agency name(s), contact person(s), and an address and phone number for each.
8. Have any notices of violation issued as a result of the event? ☐ Yes ☐ No (Check one)

**If yes, attach the date of the NOV(s), issuing agency name, contact person, address and phone number.**

**B. Chemical Analysis**

Attach report sheets from the laboratory that include: date of sampling, date of analysis, analytical results, reference to analytical methods used, name and address of laboratory performing analysis, contact person, telephone number, and signature of laboratory representative certifying that the information reported is correct.

1. Samples should be run as received for determinations in a, b, and c. Report all results on a dry weight basis.
  - a. Total Petroleum Hydrocarbons (PHC) Max. \_\_\_\_\_ mg/kg Ave. \_\_\_\_\_ mg/kg

**SECTION C. WASTE DESCRIPTION (Must be completed by generator of waste) (Cont'd)**

## b. Aromatic Volatile Organics:

	<u>Max.</u>	<u>Ave.</u>
Benzene.	_____ mg/kg	_____ mg/kg
Toluene.	_____ mg/kg	_____ mg/kg
Xylenes.	_____ mg/kg	_____ mg/kg
Ethylbenzene.	_____ mg/kg	_____ mg/kg
Total BTXE	_____ mg/kg	_____ mg/kg

c. Total Organic Halogen (TOX) \_\_\_\_\_ mg/kg

d. Total lead – For gasoline contaminated soil only (unless instructed otherwise by the Department).

\_\_\_\_\_ mg/kg \_\_\_\_\_ mg/kg

2. If the total concentration of lead exceeds 50 mg/kg for soil to be disposed at a single-lined landfill or 100 mg/kg for soil to be disposed at a double-lined landfill or twenty times the landfill's maximum allowable level, a toxicity characteristic determination (TCLP) for lead is required (EPA Methods 1311 and 7420 or 7421).

\_\_\_\_\_ mg/kg \_\_\_\_\_ mg/kg

3. If the total analytical concentration of benzene exceeds 5 mg/kg for soil to be disposed at a single-lined landfill or twenty times the landfill's maximum allowable level, a toxicity characteristic determination (TCLP) for benzene is required (EPA Methods 1311 and 8020A or 8021A). If the total analytical concentration of benzene exceeds 10 mg/kg for soil to be disposed at a double-lined landfill, a toxicity characteristic determination (TCLP) for benzene is required, unless exempt under 40 CFR 261.4(b)(10), as incorporated by reference at 25 Pa. Code 261a.1.

\_\_\_\_\_ mg/kg \_\_\_\_\_ mg/kg

4. If the total analytical concentration of toluene exceeds 1,000 mg/kg for soil to be disposed at single-lined landfill or twenty times the landfill's maximum allowable level, a toxicity characteristic determination (TCLP) for toluene is required (EPA Methods 1311 and 8020A or 8021A).

\_\_\_\_\_ mg/kg \_\_\_\_\_ mg/kg

5. If the total analytical concentration of xylenes exceeds 10,000 mg/kg for soil to be disposed at single-lined landfill or twenty times the landfill's maximum allowable level, a toxicity characteristic determination (TCLP) for xylenes is required (EPA Methods 1311 and 8020A or 8021A).

\_\_\_\_\_ mg/kg \_\_\_\_\_ mg/kg

6. If the total analytical concentration of ethylbenzene exceeds 700 mg/kg for soil to be disposed at a single-lined landfill or twenty times the landfill's maximum allowable level, a toxicity characteristic determination (TCLP) for ethylbenzene is required (EPA Methods 1311 and 8020A or 8021A).

\_\_\_\_\_ mg/kg \_\_\_\_\_ mg/kg

7. Additional chemical parameters may be requested by the Department.

**SECTION D. CERTIFICATION OF GENERATOR**

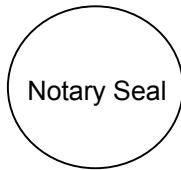
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based upon my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I certify that the waste is not a hazardous waste as defined in §261.3 of the Pennsylvania Code of Regulations. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Name of Responsible

Official \_\_\_\_\_ Title \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Taken, sworn, and subscribed before me, this



\_\_\_\_\_ day of \_\_\_\_\_ A.D. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**SECTION E. CERTIFICATION OF OWNER/OPERATOR OF DISPOSAL FACILITY**

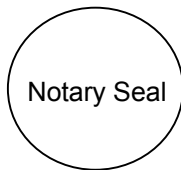
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based upon my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Name of Responsible

Official \_\_\_\_\_ Title \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Taken, sworn, and subscribed before me, this



\_\_\_\_\_ day of \_\_\_\_\_ A.D. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_