

Texas Commission on Environmental Quality

CHECKLIST WORKSHEET

LPST CASE STATUS INVESTIGATION CHECKLIST

Reg Ent Name : _____

Date : _____

Add ID _____

Investigator Name _____

| Item No. | Description | Answer | Citations | Notes |
|----------|---|--------|-----------|-------|
| A | SITE INFORMATION | | | |
| 1 | What is the UST System Status? (Removed, Out-of-Service, Permanently Abandoned or Operational) | | | |
| 2 | Is the Site Map reasonably accurate? | | | |
| B | INTERVIEW QUESTIONS | | | |
| 1 | Name and Phone Number of person interviewed: | | | |
| 2 | Name and Phone Number of RCAS representing the RP: | | | |
| 3 | Any known vapor impact? | | | |
| 4 | Are any monitor wells currently impacted by NAPL? | | | |
| 5 | Is NAPL currently being removed? | | | |
| 6 | Any known water wells within 500 feet? | | | |
| 7 | Was the field work approved by the TCEQ completed? | | | |
| 8 | If Yes, date of completion: | | | |
| 9 | If work was conducted/completed, was the report on that work submitted to TCEQ? If Yes, date the report was received: | | | |
| 10 | If the work was not completed, why not? | | | |

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