



DEPARTMENT OF THE NAVY  
COMMANDER  
NAVY REGION HAWAII  
517 RUSSELL AVENUE, SUITE 110  
PEARL HARBOR, HAWAII 96860-4884

JUL 23 2002  
7/24/02

IN REPLY REFER TO:

5090  
Ser N465/ 00222

CERTIFIED MAIL NO. 7001 1940 0006 1626 3077

17 JUL 2002

Hawaii State Department of Health  
Environmental Management Division  
Solid and Hazardous Waste Branch  
Underground Storage Tank Section  
919 Ala Moana Boulevard Suite 212  
Honolulu HI 96814

RT

SUBJECT: CONFIRMED RELEASE NOTIFICATION FOR RELEASE AT RED HILL TANK  
COMPLEX, FLEET AND INDUSTRIAL SUPPLY CENTER (FISC) PEARL  
HARBOR

Gentlemen:

In accordance with Subchapter 7, Chapter 281, Title 11 of the Hawaii Administrative Rules, and as discussed during the meeting at the State of Hawaii DOH on July 2, 2002, enclosure (1) is submitted. The suspected releases were discovered during a preliminary site investigation of the Red Hill Tank Complex. The final report should be completed shortly, and will be forwarded to your office as soon as it is available. We are submitting a single Confirmed Release Notification form for the entire Red Hill Tank Complex, even though previous notifications were made for suspected releases at tanks 6 and 16. This is because any response or remedial actions from now on will likely be directed at the Complex as a whole instead of at individual tanks. We will notify your office of follow on actions at a later date.

If there are any questions regarding this matter, please contact Mr. John T. Muraoka at (808) 471-1171, extension 214.

Sincerely,

R. M. WAKUMOTO  
Director (Acting)  
Regional Environmental Department  
By direction of  
Commander, Navy Region Hawaii

Enclosure: 1. State of Hawaii Confirmed Release Notification Form for  
Red Hill Tank Complex, FISC Pearl Harbor

Copy to: Commanding Officer, Fleet Industrial Supply Center, Pearl  
Harbor (Code 70C)



**APPENDIX 5-B**

**CONFIRMED RELEASE NOTIFICATION FORM**

<b>STATE USE ONLY</b>				0.11
Facility ID:	Release ID:	Date Sent:	Date Received:	III 23 2002
<b>GENERAL INFORMATION AND INSTRUCTIONS</b>				
<p><i>This form should be completed immediately and only after reporting a confirmed release by telephone within 24-hours to the Hawai'i DOH UST Section. Completion of this notice will serve to fulfill part of the notification requirements of HAR 11-64-71. Please type or print in ink all items except "Signature" in Section III. This form must be completed for each UST release occurrence. Completed form must be mailed to: Department of Health, Solid and Hazardous Branch, 919 Ala Moana Boulevard, Room 212, Honolulu, Hawaii 96814</i></p>				
<b>I. REPORTING PARTY AND FACILITY INFORMATION</b>				
24-Hour Reporting Party Name, Title, & Affiliation:				
John Santo Salvo, LCDR, USN, Director, FISC Fuel Department				
Facility Name & Address:				
Red Hill Tank Complex, FISC, Pearl Harbor				
Facility Contact Person, Affiliation, & Address:				
John Muraoka, Environmental Engineer, CNR-HI, Ph: 471-1171				
Facility Information: (Check only one item)				
<input type="checkbox"/> Gas Station	<input type="checkbox"/> Aircraft Owner	<input type="checkbox"/> State Government	<input type="checkbox"/> Commercial	<input type="checkbox"/> Utilities
<input type="checkbox"/> Petroleum Distributor	<input type="checkbox"/> Auto Dealership	<input type="checkbox"/> Federal Non-Military	<input type="checkbox"/> Industrial	<input type="checkbox"/> Other
<input type="checkbox"/> Airline	<input type="checkbox"/> County Government	<input checked="" type="checkbox"/> Federal Military	<input type="checkbox"/> Truck/ Transportation	
<b>II. RELEASE INFORMATION (Circle all that apply in Items A-H)</b>				
A. Source of the Release: Piping      Tank(s)      Spill      Overfill				
If "Tank(s)" list tank sizes: <span style="float: right;">Red Hill Tank Complex (see atch)</span>				
B. Method of Discovery & Confirmation: Closure      Monthly Release Detection      Tightness Test      Site Check				
Other (Specify): <span style="float: right;">site investigation</span>				
C. Estimated Quantity of Substance Released: 0      Gallons      XX      Unknown				
D. Type of Substance Released: Unleaded Gas      Leaded Gas      Diesel      Used or Waste Oil      Hazardous Substance				
Other (Specify): <span style="float: right;">unknown</span>				
E. Immediate Hazards: Explosion      Fire      Vapor Exposure      Recoverable Free Product      Drinking Water Threat				
Other (Specify): <span style="float: right;">none</span>				
F. Release Impact: Surface Water      possible Ground Water      XX      Soil      Air				
G. Migration Pathways: None      Utility Conduits      Subsurface Drains      Sewer Lines      Unknown				
Other (Specify): <span style="float: right;">unknown</span>				
H. Actions Taken: Evacuated Nearby Area/Removed UST Contents/Recovered Free Product/Excavated Soils/Ground Water/Recovery				
Other (Specify):				
<b>III. UST OWNER OR OPERATOR CERTIFICATION (Read and sign after completing all sections to the extent possible)</b>				
I certify under penalty of law that I have examined and am familiar with the information submitted in this notice, and that based upon my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true and accurate.				
Name, Title, & Company:				
John Santo Salvo, LCDR, USN, Director, FISC Fuel Department				
Signature: <i>John Santo Salvo</i>				Date: 7/10/02
DOH Form CRN (8/92)				

Summary of Site Investigation of Red Hill Tank Complex

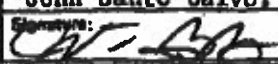
Tank No.	Date sampled	Core	Liquid
1	7 Feb 01	TPH, lead	TPH, lead
2	5 Feb 01	TPH, <b>methylene chloride</b>	
3	31 Jan 01	TPH, lead, acetone	
4	29 Jan 01	TPH, lead, acetone	
5	25 Jan 01	TPH, lead, acetone, naphthalene	
6	19 Jan 01	TPH, lead	<b>lead</b>
7	17 Jan 01	TPH, lead, acetone, naphthalene, xylene, ethylbenzene	
8	15 Jan 01	TPH, lead	
9	26 Jan 01	unknown hydrocarbon	
10		<b>nothing detected</b>	
11	15 Dec 00	TPH, toluene, xylene, ethylbenzene lead, acetone	
12	12 Dec 00	TPH	
13	11 Dec 00	TPH, lead, acetone	TPH
14	6 Dec 00	<b>TPH, toluene, xylene, ethylbenzene, naphthalene</b>	
15	4 Dec 00	TPH, acetone	
16	22 Oct 98	<b>unknown hydrocarbon, naphthalene, toluene, xylene, ethylbenzene</b>	unknown hydrocarbon, xylene
17	1 Nov 00	TPH, <b>methylene chloride</b> , toluene, lead	<b>lead</b>
18	6 Nov 00	toluene, lead	
19	22 Nov 00	TPH, naphthalene, ethylbenzene, xylene	<b>lead</b>
20	2 Mar 01	TPH, lead	
		vertical well	TPH, lead

Note:

- Under items detected, for both the core and liquid samples, the values in bold denote values exceeding tier I levels.
- In some cases, a liquid was found in the boring. In these cases, the liquid was sampled and tested. The results are shown in the 'liquid' column.
- Confirmed Release Notifications have already been submitted for tanks 6 and 16.

APPENDIX 5-B

CONFIRMED RELEASE NOTIFICATION FORM

STATE USE ONLY			
Facility ID: <b>40001</b>	Release ID: <b>02002X</b>	Date Sent:	Date Received:
<b>GENERAL INFORMATION AND INSTRUCTIONS</b>			
<p>This form should be completed immediately and only after reporting a confirmed release by telephone within 24-hours to the Hawaii DOH UST Section. Completion of this notice will serve to fulfill part of the notification requirements of HAR 11-64-71. Please type or print in ink all items except "Signature" in Section III. This form must be completed for each UST release occurrence. Completed form must be mailed to: Department of Health, Solid and Hazardous Branch, 919 Ala Moana Boulevard, Room 212, Honolulu, Hawaii 96814</p>			
<b>I. REPORTING PARTY AND FACILITY INFORMATION</b>			
24-Hour Reporting Party Name, Title, & Affiliation:			
John Santo Salvo, LCDR, USN, Director, FISC Fuel Department			
Facility Name & Address:			
Red Hill Tank Complex, FISC Pearl Harbor			
Facility Contact Person, Affiliation, & Address:			
John T. Muraoka, Envir. Engrn., CNR-HI      Ph: (808) 471-1171			
Facility Information: (Check only one item)			
<input type="checkbox"/> Gas Station	<input type="checkbox"/> Aircraft Owner	<input type="checkbox"/> State Government	<input type="checkbox"/> Commercial
<input type="checkbox"/> Petroleum Distributor	<input type="checkbox"/> Auto Dealership	<input type="checkbox"/> Federal Non-Military	<input type="checkbox"/> Industrial
<input type="checkbox"/> Airline	<input type="checkbox"/> County Government	<input checked="" type="checkbox"/> Federal Military	<input type="checkbox"/> Truck/Transportation
<input type="checkbox"/> Utilities	<input type="checkbox"/> Other		
<b>II. RELEASE INFORMATION (Circle all that apply in items A-F)</b>			
A. Source of the Release:    Piping      Tank(s)      Spill      Overfill			
If "Tank(s)" list tank sizes:    Tank 6, 13 million gallons			
B. Method of Discovery & Confirmation:    Closure      Monthly Release Detection      Tightness Test      Site Check			
Other (Specify):    Inventory check			
C. Estimated Quantity of Substance Released:    Gallons      X      Unknown			
D. Type of Substance Released:    Unleaded Gas    Leaded Gas    Diesel    Used or Waste Oil    Hazardous Substance			
Other (Specify):    JP-5 Fuel			
E. Immediate Hazards:    Explosion    Fire    Vapor Exposure    Recoverable Free Product    Drinking Water Threat			
Other (Specify):    None			
F. Release Impact:    Surface Water    possible Ground Water    X    Soil    Air			
G. Migration Pathways:    None    Utility Conduits    Subsurface Drains    Sewer Lines    XX    Unknown			
Other (Specify):			
H. Actions Taken:    Evacuated Nearby Area/Removed UST Contents/Recovered Free Product/Excavated Soils/Ground Water/Recovery			
Other (Specify):    Tank has been drained and taken out of service			
<b>III. UST OWNER OR OPERATOR CERTIFICATION (Read and sign after completing all sections to the extent possible)</b>			
I certify under penalty of law that I have examined and am familiar with the information submitted in this notice, and that based upon my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true and accurate.			
Name, Title, & Company:			
John Santo Salvo, LCDR, USN, Director, FISC Fuel Department			
Signature: 		Date: 4/16/02	
DOH Form CRN (8/92)			

