93-19-1 (1/97)—q

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF ENVIRONMENTAL REMEDIATION

PETROLEUM BULK STORAGE APPLICATION

Pursuant to the Petroleum Bulk Storage Law,
Article 17, Title 10 of ECL; 6 NYCRR 612-614 and 6 NYCRR, Subpart 360-14
(Continued on the Reverse Side—Please Be Sure to Complete Section B)

SECTION A—See Instructions on Cover Sheet

Please Type or Print Clearly and Complete All Items

RETURN COMPLETED FORM & FEE TO:

NYS DEC - REGION 8
6274 E. AVON-LIMA ROAD
AVON, NY 14414
(716) 226-2466

PBS NUMBER: 8-417602

Indicate other existing DEC Numbers, if any, for this facility:

CBS Number: 8-417602

SPDES Number:

TRANSACTION TYPE (Check all that apply)
NOTE: Transaction Types 1, 2 and 5 may require a fee.

1 ☐ Initial/New Facility
2 ☒ Change of Ownership CORPORATION
3 ☐ Substantial Tank Modification
4 ☐ Information Correction
5 ☒ Renewal

Geographical Locator for this Facility: (If known)

LATITUDE: DEG MIN SEC

LONGITUDE: DEG MIN SEC

FACILITY

FACILITY NAME: VILLAGE GAS MART INC.
LOCATION (Not P.O. Boxes): 2 MILTON STREET
LOCATION (Continued):
CITY/TOWN/VILLAGE: DANSVILLE | STATE: NY | ZIP CODE: 14437
COUNTY: LIVINGSTON | TOWNSHIP OR CITY: NORTH DANSVILLE
NAME OF OPERATOR AT FACILITY: JOHN PAPPAS | FACILITY TELEPHONE NUMBER: (716) 335-2092
EMERGENCY CONTACT NAME: JOHN PAPPAS | EMERGENCY TELEPHONE NO.: (716) 335-2516

OWNER

OWNER NAME: JOHN PAPPAS PRES.
ADDRESS (Street and/or PO Box): 2 MILTON STREET, ~~PO BOX 338~~
CITY: DANSVILLE | STATE: NY | ZIP CODE: 14437
FEDERAL TAX ID NUMBER: ~~16-0927793~~ 16-1490082 | OWNER TELEPHONE NUMBER: (716) 335-2516

TYPE OF OWNER (Check only one)
1 ☐ Private Resident 2 ☐ State Government 3 ☐ Local Government
4 ☐ Federal Government 5 ☒ Corporate/Commercial

TYPE OF PETROLEUM FACILITY:
(Check all that apply)

A. ☐ Storage Terminal/Petroleum Distributor
B. ☒ Retail Gasoline Sales
C. ☒ Other Retail Sales
D. ☐ Manufacturing
E. ☐ Utility
F. ☐ Trucking/Transportation
G. ☐ Apartment Building
H. ☐ School
I. ☐ Farm
J. ☐ Private Residence
K. ☐ Airline (Air Taxi)
L. ☐ Other (Specify Below)

RECEIVED
OCT - 2 1997
SPILLS / BULK STORAGE
NYS DEC REGION 8

I hereby certify under penalty of perjury that the information provided on this form is true to the best of my knowledge and belief. False statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

NAME OF OWNER OR AUTHORIZED REPRESENTATIVE: John Pappas | AMOUNT ENCLOSED: $ 250.00
TITLE: PRES.
SIGNATURE: John Pappas | DATE: 9/10/97

CORRESPONDENCE

ATTENTION:
NAME OF COMPANY: ~~JOHN PAPPAS~~ VILLAGE GAS MART INC.
ADDRESS: 2 MILTON STREET
ADDRESS: ~~PO BOX 338~~
CITY/STATE/ZIP CODE: DANSVILLE, NY 14437
TELEPHONE NUMBER: (716 335-2092

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Page 1 of 2
Date Received: 10/2/97
Date Processed: 10/6/97
Amount Received $ 250.00
Reviewed By: MS

PBS NUMBER: 8-417602

Tank Information for Petroleum Bulk Storage Facility
SECTION B—See Instructions on Cover Sheet

EXPIRATION DATE: 10/06/97

Action	Tank Number	Tank Location	Status	Installation or Permanent Closure Date (MO) (YR)	Capacity (Gallons)	Product Stored	Tank Type	Tank Internal Protection	Tank External Protection	Piping Location	Piping Type	Piping Internal Protection	Piping External Protection	Secondary Containment	Leak Detection	Spill/ Overfill Prevention	Dispenser	Last Test Date (Underground Tanks) (MO) (YR)
1	001	4	1	0 8 8 6	8,000	1	1	0	2 1	2	2	0		0	2 3	1,5	2	10/1/88
1	002	4	1	0 8 8 6	8,000	2	1	0	2 1	2	2	0		0	2 3	1,5	2	10/1/88
1	003	4	1	0 8 8 6	1,000	5	1	0	2 1	2	2	0		0	2 3		2	10/1/88

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SPILLS / BULK STORAGE
NYS DEC

KEY FOR SECTION B

ACTION
1. Initial Listing
2. Add Tank
3. Close/Remove Tank
4. Information Correction
5. Recondition/Repair/ Reline Tank

TANK LOCATION
1. Aboveground
2. Aboveground on saddles, legs, stilts, rack, or cradle
3. Aboveground: 10% or more below ground
4. Underground
5. Underground, vaulted, with access

STATUS
1. In-service
2. Temporarily out-of-service
3. Closed—Removed
4. Closed—In Place
5. Tank Converted to Non-Regulated Use

PRODUCT STORED
0. Empty
1. Leaded Gasoline
2. Unleaded Gasoline
3. Nos. 1, 2, or 4 Fuel Oil
4. Nos. 5 or 6 Fuel Oil
5. Kerosene
6. Diesel
A. Lube Oil
B. ~~XXXXXXX~~ Used Oil(fuel)
C Used Oil
9. Other*

TANK TYPE
1. Steel/Carbon Steel
2. Stainless Steel Alloy
3. Concrete
4. Fiberglass Coated Steel
5. Fiberglass Reinforced Plastic (FRP)
6. Equivalent Technology
9. Other*

PIPING TYPE
0. None
1. Steel/Iron
2. Galvanized Steel
3. Fiberglass (FRP)
4. Copper
9. Other*

INTERNAL PROTECTION: Tank/Piping
0. None
1. Epoxy Liner
2. Rubber Liner
3. Fiberglass Liner (FRP)
4. Glass Liner
9. Other*

EXTERNAL PROTECTION: Tank/Piping
0. None
1. Painted/Asphalt Coating
2. Sacrifical Anode
3. Impressed Current
4. Fiberglass
5. Jacketed
6. Wrapped (Piping)
9. Other*

* If other, please list on separate sheet including Tank Number

PIPING LOCATION
0. None
1. Aboveground
2. Underground
3. Aboveground/ Underground Combination

SECONDARY CONTAINMENT
0. None
1. Vault
2. Double-Walled Tank
3. Excavation Liner
4. Cut-off Walls
5. Impervious Underlayment
6. Earthen Dike
7. Prefabicated Steel Dike
8. Concrete Dike
A. Synthetic Liner
B. Natural Liner
9. Other*

LEAK DETECTION
0. None
1. Interstitial Monitoring
2. Vapor Well
3. Groundwater Well
4. In-Tank System
5. Concrete Pad w/channels
6. Double Bottom
9. Other*

SPILL/OVERFILL PREVENTION
0. None
1. Float Vent Valve
2. High Level Alarm
3. Automatic Shut-off
4. Product Level Gauge
5. Catch Basin
6. Vent Whistle
9. Other*

DISPENSER
1. Submersible
2. Suction
3. Gravity

APRIL - 97
CHECKED FOR GROUND
PASSED - 1.063 SUPER
- .984 UNLEADED

(1/97)—4

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF ENVIRONMENTAL REMEDIATION

PETROLEUM BULK STORAGE APPLICATION

Pursuant to the Petroleum Bulk Storage Law,
Article 17, Title 10 of ECL; 6 NYCRR 612-614 and 6 NYCRR, Subpart 360-14
(Continued on the Reverse Side—Please Be Sure to Complete Section B)

SECTION A—See Instructions on Cover Sheet

Please Type or Print Clearly and Complete All Items

RETURN COMPLETED FORM & FEE TO:

NYS DEC - REGION 8
6274 E. AVON-LIMA ROAD
AVON, NY 14414
(585) 226-2466

PBS NUMBER: 8-417602

Indicate other existing DEC Numbers, if any, for this facility:

CBS Number

SPDES Number

TRANSACTION TYPE (Check all that apply)
NOTE: Transaction Types 1, 2 and 5 may require a fee.

1 ☐ Initial/ New Facility
2 ☐ Change of Ownership
3 ☐ Substantial Tank Modification
4 ☐ Information Correction
5 ☒ Renewal

Geographical Locator for this Facility: (If known)

LATITUDE: DEG MIN SEC

LONGITUDE: DEG MIN SEC

FACILITY

FACILITY NAME: VILLAGE GAS MART INC
LOCATION (Not P.O. Boxes): 2 MILTON STREET
LOCATION (Continued):
CITY/TOWN/VILLAGE: DANSVILLE | STATE: NY | ZIP CODE: 14437
COUNTY: LIVINGSTON | TOWNSHIP OR CITY: NORTH DANSVILLE
NAME OF OPERATOR AT FACILITY: FRANK N. TONKER | FACILITY TELEPHONE NUMBER: (716) 335-2092
EMERGENCY CONTACT NAME: FRANK N. TONKER | EMERGENCY TELEPHONE NO.: (716) 335-2363

OWNER

OWNER NAME: VILLAGE GAS MART INC
ADDRESS (Street and/or PO Box): 2 MILTON STREET
CITY: DANSVILLE | STATE: NY | ZIP CODE: 14437
FEDERAL TAX ID NUMBER: 16-1490082 | OWNER TELEPHONE NUMBER: (716) 335-2516
TYPE OF OWNER (Check only one)
1 ☐ Private Resident 2 ☐ State Government 3 ☐ Local Government
4 ☐ Federal Government 5 ☒ Corporate/Commercial

CORRESPONDENCE

ATTENTION: FRANK TONKERY
NAME OF COMPANY: VILLAGE GAS MART INC
ADDRESS: 2 MILTON STREET
ADDRESS:
CITY/STATE/ZIP CODE: DANSVILLE, NY 14437
TELEPHONE NUMBER: (716) 335-2092

TYPE OF PETROLEUM FACILITY:
(Check all that apply)

A. ☐ Storage Terminal/Petroleum Distributor
B. ☒ Retail Gasoline Sales
C. ☐ Other Retail Sales
D. ☐ Manufacturing
E. ☐ Utility
F. ☐ Trucking/Transportation
G. ☐ Apartment Building
H. ☐ School
I. ☐ Farm
J. ☐ Private Residence
K. ☐ Airline (Air Taxi)
L. ☐ Other (Specify Below)

RECEIVED
OCT 16 2002
SPILLS / BULK STORAGE
NYS DEC REGION 8

I hereby certify under penalty of perjury that the information provided on this form is true to the best of my knowledge and belief. False statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

NAME OF OWNER OR AUTHORIZED REPRESENTATIVE: Frank N. Tonkery | AMOUNT ENCLOSED: $ 250.00
TITLE: Pres. | DATE: 10-1-02
SIGNATURE: Frank Tonkery

OFFICIAL USE ONLY

Page 1 of 2
Date Received: 10/16/02
Date Processed: 10/16/02 map
Amount Received $ 250
Reviewed By: lm

PBS NUMBER: 8-417602

Tank Information for Petroleum Bulk Storage Facility
SECTION B—See Instructions on Cover Sheet

EXPIRATION DATE: 10/06/2002

Action	Tank Number	Tank Location	Status	MM/DD/YYYY Installation or Permanent Closure Date	Capacity (Gallons)	Product Stored	Tank Type	Tank Internal Protection	Tank External Protection	Piping Location	Piping Type	Piping Internal Protection	Piping External Protection	Secondary Containment	Leak Detection	Spill/ Overfill Prevention	Dispenser	MM/DD/YYYY Last Test Date (Underground Tanks)
1	001	4	1	08/01/1986	8,000	2	1	0	1 2	2	2	0	1 2	0	2 3	1 5	2	/ /
1	002	4	1	08/01/1986	8,000	2	1	0	1 2	2	2	0	1 2	0	2 3	1 5	2	/ /
1	003	4	1	08/01/1986	1,000	5	1	0	1 2	2	2	0	1 2	0	2 3		2	/ /
1	004	1	1	/ /	275	C	1	0	1	0	0	0	0	0	9	0	0	

KEY FOR SECTION B

ACTION
1. Initial Listing
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3. Close/Remove Tank
4. Information Correction
5. Recondition/Repair/ Reline Tank

TANK LOCATION
1. Aboveground
2. Aboveground on saddles, legs, stilts, rack, or cradle
3. Aboveground: 10% or more below ground
4. Underground
5. Underground, vaulted, with access

STATUS
1. In-service
2. Temporarily out-of-service
3. Closed—Removed
4. Closed—In Place
5. Tank Converted to Non-Regulated Use

PRODUCT STORED
0. Empty
1. Leaded Gasoline
2. Unleaded Gasoline
3. Nos. 1, 2, or 4 Fuel Oil
4. Nos. 5 or 6 Fuel Oil
5. Kerosene
6. Diesel
A. Lube Oil
B. Lube Oil (fuel)
C Used Oil
9. Other*

TANK TYPE
1. Steel/Carbon Steel
2. Stainless Steel Alloy
3. Concrete
4. Fiberglass Coated Steel
5. Fiberglass Reinforced Plastic (FRP)
6. Equivalent Technology
9. Other*

PIPING TYPE
0. None
1. Steel/Iron
2. Galvanized Steel
3. Fiberglass (FRP)
4. Copper
9. Other*

INTERNAL PROTECTION: Tank/Piping
0. None
1. Epoxy Liner
2. Rubber Liner
3. Fiberglass Liner (FRP)
4. Glass Liner
9. Other*

EXTERNAL PROTECTION: Tank/Piping
0. None
1. Painted/Asphalt Coating
2. Sacrifical Anode
3. Impressed Current
4. Fiberglass
5. Jacketed
6. Wrapped (Piping)
9. Other*

PIPING LOCATION
0. None
1. Aboveground
2. Underground
3. Aboveground/ Underground Combination

SECONDARY CONTAINMENT
0. None
1. Vault
2. Double-Walled Tank
3. Excavation Liner
4. Cut-off Walls
5. Impervious Underlayment
6. Earthen Dike
7. Prefabicated Steel Dike
8. Concrete Dike
A. Synthetic Liner
B. Natural Liner
9. Other*

LEAK DETECTION
0. None
1. Interstitial Monitoring
2. Vapor Well
3. Groundwater Well
4. In-Tank System
5. Concrete Pad w/channels
6. Double Bottom
9. Other*

SPILL/OVERFILL PREVENTION
0. None
1. Float Vent Valve
2. High Level Alarm
3. Automatic Shut-off
4. Product Level Gauge
5. Catch Basin
6. Vent Whistle
9. Other*

DISPENSER
1. Submersible
2. Suction
3. Gravity

* If other, please list on separate sheet including Tank Number

RECEIVED
OCT 16 2002
SPILLS / BULK STORAGE
NYS DEC REGION 8

93-19-1 (1/97)—q

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF ENVIRONMENTAL REMEDIATION

PETROLEUM BULK STORAGE APPLICATION

Pursuant to the Petroleum Bulk Storage Law,
Article 17, Title 10 of ECL; 6 NYCRR 612-614 and 6 NYCRR, Subpart 360-14
(Continued on the Reverse Side—Please Be Sure to Complete Section B)

SECTION A—See Instructions on Cover Sheet

NYSDEC
6274 East Avon-Lima Road
Avon, NY 14414
Telephone: 716-226-2466

Please Type or Print Clearly and Complete All Items

PBS NUMBER: 8-417602

Indicate other existing DEC Numbers, if any, for this facility:

CBS Number

SPDES Number

TRANSACTION TYPE (Check all that apply)
NOTE: Transaction Types 1, 2 and 5 may require a fee.

1 ☐ Initial/ New Facility
2 ☐ Change of Ownership
3 ☒ Substantial Tank Modification
4 ☒ Information Correction
5 ☐ Renewal

Geographical Locator for this Facility: (If known)

LATITUDE: DEG MIN SEC

LONGITUDE: DEG MIN SEC

FACILITY

FACILITY NAME: Village Gas Mart
LOCATION (Not P.O. Boxes): 2 Milton St
LOCATION (Continued):
CITY/TOWN/VILLAGE: Dansville
STATE: NY
ZIP CODE: 14437
COUNTY: Liv.
TOWNSHIP OR CITY: N. Dansville
NAME OF OPERATOR AT FACILITY: Frank N. Tonkery
FACILITY TELEPHONE NUMBER: (716) 335-2097
EMERGENCY CONTACT NAME: Frank N. Tonkery
EMERGENCY TELEPHONE NO.: (716) 335-2363

OWNER

OWNER NAME:
ADDRESS (Street and/or PO Box):
CITY:
STATE:
ZIP CODE:
FEDERAL TAX ID NUMBER:
OWNER TELEPHONE NUMBER: ( )
TYPE OF OWNER (Check only one)
1 ☐ Private Resident 2 ☐ State Government 3 ☐ Local Government
4 ☐ Federal Government 5 ☐ Corporate/Commercial

CORRESPONDENCE

ATTENTION: Frank Tonkery
NAME OF COMPANY: same
ADDRESS:
ADDRESS:
CITY/STATE/ZIP CODE:
TELEPHONE NUMBER: ( )

TYPE OF PETROLEUM FACILITY:
(Check all that apply)

A. ☐ Storage Terminal/Petroleum Distributor
B. ☒ Retail Gasoline Sales
C. ☐ Other Retail Sales
D. ☐ Manufacturing
E. ☐ Utility
F. ☐ Trucking/Transportation
G. ☐ Apartment Building
H. ☐ School
I. ☐ Farm
J. ☐ Private Residence
K. ☐ Airline (Air Taxi)
L. ☐ Other (Specify Below)

RECEIVED
JUL - 8 1999
SPILLS / BULK ST RAGE
NYS DEC

I hereby certify under penalty of perjury that the information provided on this form is true to the best of my knowledge and belief. False statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

NAME OF OWNER OR AUTHORIZED REPRESENTATIVE: Frank N. Tonkery
AMOUNT ENCLOSED: $
TITLE: Pres.
SIGNATURE: Frank Tonkery
DATE: 6/23/99

OFFICIAL USE ONLY

Page 1 of 2
Date Received: 7/8/99
Date Processed: 7/9/99 map
Amount Received $
Reviewed By: C. Herington

NATURE'S WAY
ENVIRONMENTAL CONSULTANTS AND CONTRACTORS, INC.
3553 Crittenden Rd.
Crittenden, N.Y. 14308
(716) 937-6527
(FAX) 937-9360

TO WHOM IT MAY CONCERN:

PIPING TYPE #9 OTHER IS AS FOLLOWS, PIPING THAT WAS INSTALLED AT THIS LOCATION 11/98 IS EPOXY COATED CATHODICALLY PROTECTED STEEL PIPING, THIS PIPING ALSO HAS ONLY ONE CHECK VALVE LOCATED DIRECTLY

Sincerely,

Daniel B. Wik
Project Mgr.