



## NOTICE OF VIOLATION (NOV)

April 3, 2026

Jason Heimlich  
WRIGHT BEVERAGE  
3 WRIGHT AVENUE  
LEROY, NY 14482

Via Email: [jheimlich@wrightbev.com](mailto:jheimlich@wrightbev.com)

Re: Petroleum Bulk Storage (PBS) Program Site Inspection - 6 NYCRR Part 613  
PBS# 8-601091 - WRIGHT BEVERAGE  
3 WRIGHT AVENUE  
LeRoy, NY 14482

Dear Jason Heimlich:

On March 12, 2026, the New York State Department of Environmental Conservation (NYSDEC or DEC) inspected the WRIGHT BEVERAGE facility to determine compliance with New York State's PBS regulations (6 NYCRR Part 613). The following violations were identified during that inspection and need your immediate attention to bring your facility into compliance. Citations to the applicable regulations are noted in brackets and pertain to the tank(s) listed. The PBS regulations and inspection checklist are available online at:

- <https://dec.ny.gov/sites/default/files/2024-01/part613.pdf>
- <https://dec.ny.gov/sites/default/files/2025-03/pbsinspectionform.pdf>

The law requires that you comply fully with the PBS regulations. You must correct all of the violations noted below within the stated time frame(s) and submit required documentation.

**Cert not displayed – [613-1.9(a)(2)].** The registration certificate is not posted, or is not posted at a conspicuous location. The certificate must be posted in a location accessible to the facility operator and readily observable to a DEC inspector or emergency responder.

*Within 30 calendar days after the date of the NOV, display (and submit a photograph showing) the certificate in a conspicuous location.*

Tank # 1

**Aboveground storage tank (AST) secondary containment contains water/debris – [613-1.12 / 4.1(b)(1)(ii)(c)(1)].** The (conventional) tank secondary containment area contains water and/or debris.

*Within 30 calendar days after the date of the NOV, clean the secondary containment area to be free of all liquids and debris, and submit a photograph showing the cleaned containment area.*

Tank # 1

**Surface coating is faded or no longer covers the entire aboveground storage tank (AST) exterior – [613-1.12 / 4.1(b)(1)(ii)(a)(2)].** The surface coating on the AST exterior either is faded or no longer covers the whole exterior.

*Within 30 calendar days after the date of the NOV, re-coat the tank exterior and submit a photograph showing the coated exterior.*

## **Corrective Action and Penalties**

As a result of these violations, you may be subject to penalties. Pursuant to Environmental Conservation Law Section 71-1929, you may be liable for a civil penalty of up to \$37,500 per day for each of the above noted 6 NYCRR Part 613 violations. The violations identified in this letter require your immediate attention. Delays in correcting the violations noted above will affect the amount of penalties for which you will be liable. In addition, under Environmental Conservation Law Section 71-1933, a person may be held criminally liable if any of the foregoing violations was the result of intentional, knowing or criminally negligent conduct.

Note that the inspection may not have disclosed all violations that exist at your site. You are responsible for ensuring that the entire facility is in compliance with applicable requirements.

**Except where a shorter time frame is expressly required, within 30 calendar days from the date of this notice you must submit either documentation that the violations have been corrected or a plan to achieve compliance, as noted above. In accordance with any corrective action plan, you must submit documentation after compliance is achieved.**

When sending documentation and/or compliance plans, be sure to reference PBS # 8-601091.

Sincerely,



Matthew J Griffiths  
NYSDEC, Region 8

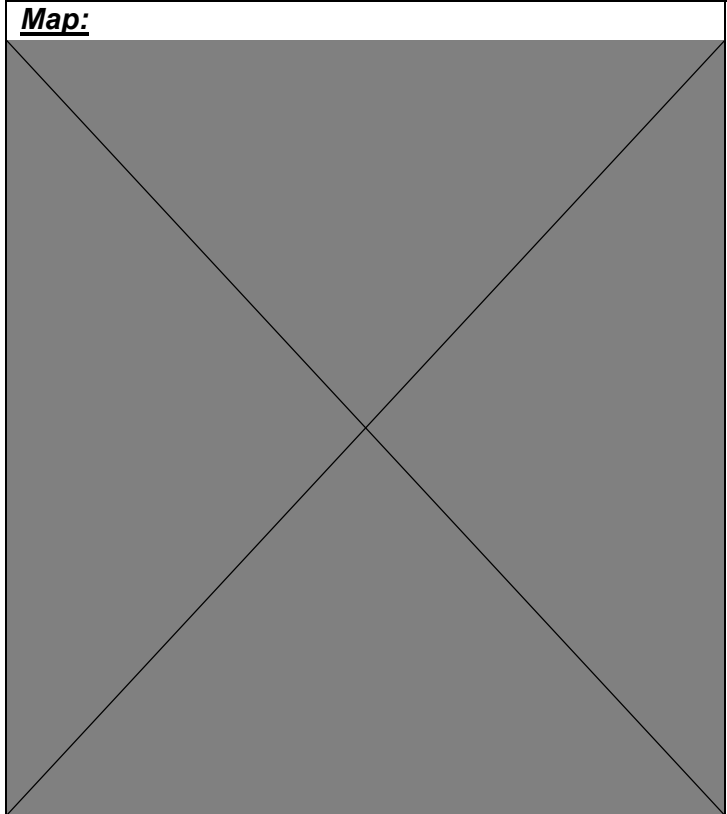
Enclosures: Inspection Report

ECC: ECO Laczi, NYSDEC Region 8, Division of Law Enforcement

**New York State Department of Environmental Conservation**  
**Petroleum Bulk Storage (PBS) Inspection Form**

Facility Information				Mail Contact			
<b>PBS Number</b>		8-601091		<b>Contact Name</b>		Jason Heimlich	
<b>Facility Name</b>		WRIGHT BEVERAGE		<b>Company Name</b>		WRIGHT BEVERAGE	
<b>Street Address</b>	3 WRIGHT AVENUE			<b>Street Address</b>	3 WRIGHT AVENUE		
<b>City</b>	LeRoy			<b>City</b>	LEROY		
<b>County</b>	Genesee	<b>ZIP Code</b>	14482	<b>State</b>	NY	<b>ZIP Code</b>	14482
<b>Phone Number</b>		XXX-XXX-XXXX		<b>Email</b>		jheimlich@wrightbev.com	
<b>Facility Status</b>		1 - Active		<b>PIN</b>			

Facility Information			
<b>Latitude</b>		42.981869819	
<b>Longitude</b>		-77.999219182	



**Inspection-Specific Questions**

Inspection Information			Facility Representative	
<b>Inspector Name</b>	ECO Laczi		<b>Rep. Name</b>	Terry
<b>Inspection Date</b>	March 12, 2026		<b>Title</b>	
<b>NOV Date</b>	March 16, 2026		<b><u>Signature:</u></b>	
<b>Case Closed Date</b>				
<b>Is the inspection announced or unannounced?</b>	A - Announced		<b>Was site access granted?</b>	Y – Yes

**Comments:**  
 -Certificate not posted -Insufficient tank exterior coating -Secondary containment not maintained (accumulation of stormwater in dike)

### Site-Specific Questions

#### Registration

**REG\_info** – Is the registration information current and accurate? Note: this pertains to tank system information not captured in other questions.

Y – Yes

**REG\_cert** – Is the registration certificate signed/posted at a conspicuous location at the facility?

ND – Cert not displayed

#### As-Built Diagram

**AB\_dia** – Does the facility have a complete/accurate as-built diagram?

XT – As-built diagram not required - no Cat. 2/3 UST systems on site [SP2/SP3/SP5]

#### Financial Responsibility

**FR\_ap** – Does Financial Responsibility apply to this facility?

XTU – FR not required - no SP2/SP5 UST systems

### Tank-Specific Questions

Tank System Information			
<b>Tank ID</b>	1	<b>Compartment</b>	0 - Not part of compartmented tank
<b>(T) Location</b>	3 - Aboveground on saddles, legs, stilts, rack or cradle	<b>Manifolded</b>	0 - Not manifolded to another tank
<b>(T) Type</b>	01	<b>Tank Capacity [gals.]</b>	8,000
<b>Stored (or Formerly Stored) Petroleum</b>	0008		
<b>Applicable Subpart</b>	4	<b>(P) Location</b>	C01 – Aboveground
<b>Status</b>	1 - In-service	<b>(P) Type</b>	D02 - Galvanized Steel
<b>(T) Install Date</b>	November 1, 2004	<b>(P) Install Date</b>	
<b>(T) Closure Date</b>		<b>Pumping/Dispensing Method</b>	J02 - Suction Dispenser
<b>(T) Leak Detection</b>	H00 - None	<b>(P) Leak Detection</b>	L00 - None
<b>(T) Secondary Containment</b>	G01 - Diking (AST Only)	<b>(P) Secondary Containment</b>	E00 - None
		<b>Under-Dispenser Containment</b>	FALSE - No UDC/dispenser sump
<b>(T) Corrosion Protection</b>	B01 - Painted/Asphalt Coating	<b>(P) Corrosion Protection</b>	F01 - Painted/Asphalt Coating
<b>(T) (Internal) Lining</b>	A00 - None	<b>Overfill Prevention</b>	I04 - Product Level Gauge (AST Only)
<b>Fill Port Catch Basin</b>	K01 - Catch Basin		

#### OOS Status & Permanent Closure

**OC\_rc** – What's the tank system's status?

1 – In-service

**Tank System: Design/Construction, Installation, Compatibility, Repair**

***TS\_cs – Does the tank system meet pertinent construction standards?***

Y – Yes

***TS\_bf – Is the entire tank system compatible with the stored petroleum?***

XP – Compatibility documentation not required - no biofuel blends greater than E10/B20

**Walkthrough Inspections**

***WT\_itm – Are the inspections being performed periodically? Note: 30-day (UST system) inspections may be performed less frequently (i.e., prior to every delivery) if deliveries are less frequent than every 30 days.***

Y – Yes

***WT\_rec – Are the inspection records being retained? Note: records must be retained for 3 years. 30-day (UST system) inspection records must include delivery records if inspections are performed less frequently than every 30 days.***

Y – Yes

***WT\_com – Was the inspection complete/adequate? Note: while containment sumps and handheld LD equipment are to be covered under the annual inspections, certain facilities include them in the 30-day inspection to avoid having to create/use a separate form for the annual walkthrough inspection. In those cases, the annual walkthrough inspection requirement is satisfied, and ACS and AHH do not apply.***

Y – Yes

**Leak Detection**

***LD\_trc – Tank LD Methods: select all LD methods that apply to the tank, including those required, and any supplementary methods being performed.***

XT – Tank LD not required - exempt AST [SP4/SP5]

**Secondary Containment**

***SC\_trc – Tank SC Equipment: select all SC equipment that apply to the tank, including those required, and any supplementary equipment installed.***

DK – Diking

***SC\_tri – Is the registered tank SC equipment accurate?***

Y – Yes

***SC\_gwo – Is the equipment in good working order?***

WDA – AST SC contains water/debris [SP4/SP5]

**Corrosion Protection**

***CP\_gwo – Is the equipment in good working order?***

SCF – Surface coating is faded or no longer covers the entire AST exterior [SP4/SP5]

**Color Code & (Tank) Label**

***CL\_pre – Is the required equipment present?***

Y – Yes

***CL\_gwo – Is the equipment in good working order?***

Y – Yes

**Fill Port Catch Basin**

***CB\_pre – Is the required equipment present?***

Y – Yes

***CB\_gwo – Is the equipment in good working order?***

Y – Yes

**Overfill Prevention**

***OP\_rc – OP equipment: select all OP equipment that apply to the tank, including those required, and any supplementary equipment installed.***

LG – Level Gauge

**OP<sub>ri</sub>** – Is the registered OP equipment accurate?

Y – Yes

**OP<sub>val</sub>** – Is the equipment valid for the tank system?

Y – Yes

**OP<sub>gwo</sub>** – Is the equipment in good working order?

Y – Yes

**Valves**

**VL<sub>pre</sub>** – Is the required equipment present?

Y – Yes

**VL<sub>gwo</sub>** – Is the equipment in good working order?

Y – Yes

Tank System Information			
<b>Tank ID</b>	2	<b>Compartment</b>	0 - Not part of compartmented tank
<b>(T) Location</b>	3 - Aboveground on saddles, legs, stilts, rack or cradle	<b>Manifolded</b>	0 - Not manifolded to another tank
<b>(T) Type</b>	01	<b>Tank Capacity [gals.]</b>	8,000
<b>Stored (or Formerly Stored) Petroleum</b>	0008		
<b>Applicable Subpart</b>	4	<b>(P) Location</b>	C01 - Aboveground
<b>Status</b>	1 - In-service	<b>(P) Type</b>	D02 - Galvanized Steel
<b>(T) Install Date</b>	November 1, 2004	<b>(P) Install Date</b>	
<b>(T) Closure Date</b>		<b>Pumping/Dispensing Method</b>	J02 - Suction Dispenser
<b>(T) Leak Detection</b>	H00 - None	<b>(P) Leak Detection</b>	L00 - None
<b>(T) Secondary Containment</b>	G01 - Diking (AST Only)	<b>(P) Secondary Containment</b>	E00 - None
		<b>Under-Dispenser Containment</b>	FALSE - No UDC/dispenser sump
<b>(T) Corrosion Protection</b>	B01 - Painted/Asphalt Coating	<b>(P) Corrosion Protection</b>	F01 - Painted/Asphalt Coating
<b>(T) (Internal) Lining</b>	A00 - None	<b>Overfill Prevention</b>	I04 - Product Level Gauge (AST Only)
<b>Fill Port Catch Basin</b>	K01 - Catch Basin		

**OOS Status & Permanent Closure**

**OC<sub>rc</sub>** – What's the tank system's status?

1 – In-service

**Tank System: Design/Construction, Installation, Compatibility, Repair**

**TS<sub>cs</sub>** – Does the tank system meet pertinent construction standards?

Y – Yes

**TS<sub>bf</sub>** – Is the entire tank system compatible with the stored petroleum?

XP – Compatibility documentation not required - no biofuel blends greater than E10/B20

**Walkthrough Inspections**

**WT\_itm** – Are the inspections being performed periodically? Note: 30-day (UST system) inspections may be performed less frequently (i.e., prior to every delivery) if deliveries are less frequent than every 30 days.

Y – Yes

**WT\_rec** – Are the inspection records being retained? Note: records must be retained for 3 years. 30-day (UST system) inspection records must include delivery records if inspections are performed less frequently than every 30 days.

Y – Yes

**WT\_com** – Was the inspection complete/adequate? Note: while containment sumps and handheld LD equipment are to be covered under the annual inspections, certain facilities include them in the 30-day inspection to avoid having to create/use a separate form for the annual walkthrough inspection. In those cases, the annual walkthrough inspection requirement is satisfied, and ACS and AHH do not apply.

Y – Yes

### **Leak Detection**

**LD\_trc** – Tank LD Methods: select all LD methods that apply to the tank, including those required, and any supplementary methods being performed.

XT – Tank LD not required - exempt AST [SP4/SP5]

### **Secondary Containment**

**SC\_trc** – Tank SC Equipment: select all SC equipment that apply to the tank, including those required, and any supplementary equipment installed.

DK – Diking

**SC\_tri** – Is the registered tank SC equipment accurate?

Y – Yes

**SC\_gwo** – Is the equipment in good working order?

WDA – AST SC contains water/debris [SP4/SP5]

### **Corrosion Protection**

**CP\_gwo** – Is the equipment in good working order?

SCF – Surface coating is faded or no longer covers the entire AST exterior [SP4/SP5]

### **Color Code & (Tank) Label**

**CL\_pre** – Is the required equipment present?

Y – Yes

**CL\_gwo** – Is the equipment in good working order?

Y – Yes

### **Fill Port Catch Basin**

**CB\_pre** – Is the required equipment present?

Y – Yes

**CB\_gwo** – Is the equipment in good working order?

Y – Yes

### **Overfill Prevention**

**OP\_rc** – OP equipment: select all OP equipment that apply to the tank, including those required, and any supplementary equipment installed.

LG – Level Gauge

**OP\_ri** – Is the registered OP equipment accurate?

Y – Yes

**OP\_val** – Is the equipment valid for the tank system?

Y – Yes

**OP\_gwo** – Is the equipment in good working order?

Y – Yes

**Valves**

***VL\_pre – Is the required equipment present?***

Y – Yes

***VL\_gwo – Is the equipment in good working order?***

Y – Yes

**Spills Observed**

***SP\_des – Description: give this spill a short name/identifier to distinguish it from any other observed spills.***

None









ABOVEGROUND PETROLEUM TANK MONTHLY INSPECTION REPORT

Facility Registration Number 03-601091 Name of Inspector Jason Himmlich  
 Date of Inspection 2-27-26 Address of Inspector 3 Wagon Ave - LeRoy NY

ITEM	TANK # 1	TANK # 2	TANK # 3	TANK # 4	REPORT ON THE NEED FOR REPAIR
TANK CONDITION					
CIRCLE BELOW Y=YES, OR N=NO					
Leaks or Spills	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	
Cracks/Bulges/Corrosion	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y <input checked="" type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	
Exterior Tank Surfaces Painted	<input checked="" type="radio"/> Y <input type="radio"/> N	<input checked="" type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	
Labeled (Design/Working Capacity/Tank#)	<input checked="" type="radio"/> Y <input type="radio"/> N	<input checked="" type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	
Gauge or High Level Alarm Working	<input checked="" type="radio"/> Y <input type="radio"/> N	<input checked="" type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	

FOUNDATION/STRUCTURAL					
Settlement/Cracks/Corrosion	<input checked="" type="radio"/> Y <input type="radio"/> N	<input checked="" type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	
Anchor Bolts Tight	<input checked="" type="radio"/> Y <input type="radio"/> N	<input checked="" type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	

SECONDARY CONTAINMENT					
Cracks/Gaps/Punctures/Corrosion	<input checked="" type="radio"/> Y <input type="radio"/> N	<input checked="" type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	
Paint/Sealant in Good Condition	<input checked="" type="radio"/> Y <input type="radio"/> N	<input checked="" type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	
Stormwater Build-up					
Stormwater Discharge Date(s)	<input checked="" type="radio"/> Y <input type="radio"/> N	<input checked="" type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	
Drainage Valve Locked Closed					

PIPES/VALVES/PUMPS/SUMPS					
Leaks or Spills	<input checked="" type="radio"/> Y <input type="radio"/> N	<input checked="" type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	
Fill Port API Color Coded	<input checked="" type="radio"/> Y <input type="radio"/> N	<input checked="" type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	
Fill Port & Dispenser Sumps Maintained	<input checked="" type="radio"/> Y <input type="radio"/> N	<input checked="" type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	
Corrosion/Discoloration	<input checked="" type="radio"/> Y <input type="radio"/> N	<input checked="" type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	
Supports in Good Condition	<input checked="" type="radio"/> Y <input type="radio"/> N	<input checked="" type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	
Valves Operational	<input checked="" type="radio"/> Y <input type="radio"/> N	<input checked="" type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	<input type="radio"/> Y <input type="radio"/> N	

Inspector Certification I certify that this inspection was performed in a manner consistent with requirements of 6NYCRR Part 613.6 (see back). Signature [Signature]