93-06-004 (12/94)—26c

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION

PETROLEUM BULK STORAGE REGISTRATION CERTIFICATE

NYS DEC - R2, PBS UNIT
HUNTERS POINT PLAZA
47-40 21st STREET
LONG ISLAND CITY, NY 11101
(718) 482-6454

TANK NUMBER	DATE INSTALLED	TANK TYPE	CAPACITY (GALLONS)	DATE LAST TESTED	TESTING DUE DATE
006	01/01/1971	Steel/Carbon Steel	7,500	6/27/2000	06/27/2005
101	12/01/1976	Steel/Carbon Steel	550		

OWNER
KINLOCH COMPANY INC.
27-10 HUNTERS POINT BOULEVARD
LONG ISLAND CITY, NY 11101

SITE
BLACK BEAR COMPANY
27-10 HUNTERS POINT BOULEVARD
LONG ISLAND CITY, NY 11101

OPERATOR (Name and Telephone Number)
BLACK BEAR
(718) 784-7330

EMERGENCY CONTACT (Name and Telephone Number)
MR. LENNY TRUBIA
(718) 326-2465

As an authorized representative of the above named facility, I affirm under penalty of perjury that the information displayed on this form is correct to the best of my knowledge. Additionally, I recognize that I am responsible for assuring that this facility is in compliance with all sections of 6 NYCRR Parts 612, 613 and 614, and applicable sections of 6 NYCRR Subpart 360-14 (used oil tanks only), not just those cited below:

- The facility must be re-registered if there is a transfer of ownership.
- The Department must be notified within 30 days prior to adding, replacing, reconditioning, or permanently closing a stationary tank.
- The facility must be operated in accordance with the code for storing petroleum, 6 NYCRR Part 613.
- Any new facility or substantially modified facility must comply with 6 NYCRR Part 614.
- **This certificate must be posted on the premises at all times.** Posting must be at the tank, at the entrance of the facility, or the main office where the storage tanks are located.
- Any person with knowledge of a spill, leak or discharge must report the incident to DEC within two hours (1-800-457-7362).

Signature of Authorized Representative/Owner — Date

Name of Authorized Representative/Owner (Please Print)

Title

ISSUED BY:
Commissioner Erin M. Crotty

PETROLEUM BULK STORAGE ID NUMBER
2-452335

DATE ISSUED	EXPIRATION DATE
06/30/2003	08/23/2008

FEE PAID
$ 250

MAILING CORRESPONDENCE
MR. DEREK CHOU
BLACK BEAR COMPANY INC.
27-10 HUNTERS POINT BOULEVARD
LONG ISLAND CITY, NY 11101

Date Printed: 07/03/2003

THIS REGISTRATION CERTIFICATE IS NON-TRANSFERABLE

93-06-004 (12/94)—26c

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION

PETROLEUM BULK STORAGE REGISTRATION CERTIFICATE

NYS DEC - REGION 2
HUNTERS POINT PLAZA
47-40 21st STREET
LONG ISLAND CITY, NY 11101
(718) 482-4933

SEP - 8 1995

TANK NUMBER	DATE INSTALLED	TANK TYPE	CAPACITY (GALLONS)	DATE LAST TESTED	TESTING DUE DATE
006	01/71	Steel/Carbon Steel	7,500	07/95	07/00

OWNER
KINLOCH COMPANY INC.
27-10 HUNTERS POINT BOULEVARD
LONG ISLAND CITY, NY 11101

SITE
BLACK BEAR COMPANY
27-10 HUNTERS POINT BOULEVARD
27010 HUNTERS POINT BLVD
LONG ISLAND CITY, NY 11101

OPERATOR (Name and Telephone Number)
BLACK BEAR
(718) 784-7330

EMERGENCY CONTACT (Name and Telephone Number)
MR. LENNY TRUBIA
(718) 326-2465

As an authorized representative of the above named facility, I affirm under penalty of perjury that the information displayed on this form is correct to the best of my knowledge. Additionally, I recognize that I am responsible for assuring that this facility is in compliance with all sections of 6 NYCRR Parts 612, 613 and 614, and applicable sections of 6 NYCRR Subpart 360-14 (used oil tanks only), not just those cited below:

- The facility must be re-registered if there is a transfer of ownership.
- The Department must be notified within 30 days prior to adding, replacing, reconditioning, or permanently closing a stationary tank.
- The facility must be operated in accordance with the code for storing petroleum, 6 NYCRR Part 613.
- Any new facility or substantially modified facility must comply with 6 NYCRR Part 614.
- **This certificate must be posted on the premises at all times.** Posting must be at the tank, at the entrance of the facility, or the main office where the storage tanks are located.
- Any person with knowledge of a spill, leak or discharge must report the incident to DEC within two hours (1-800-457-7362).

Signature of Authorized Representative/Owner Date

Name of Authorized Representative/Owner (Please Print)

Title

ISSUED BY: Commissioner Michael Zagata

PETROLEUM BULK STORAGE ID NUMBER
2-452335

DATE ISSUED 09/06/95 | EXPIRATION DATE 08/23/98

FEE PAID $ 250

MAILING CORRESPONDENCE

MR. DEREK CHOU
BLACK BEAR COMPANY INC.
27-10 HUNTERS POINT BOULEVARD
LONG ISLAND CITY, NY 11101

THIS REGISTRATION CERTIFICATE IS NON-TRANSFERABLE

93-19-1 (10/93)—26c

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SPILLS MANAGEMENT • BUREAU OF SOURCE CONTROL

PETROLEUM BULK STORAGE APPLICATION

Pursuant to the Petroleum Bulk Storage Law, Article 17, Title 10 of ECL; and 6 NYCRR 612-614.

Please Type or Print Clearly and Complete All Items

(Continued on Reverse Side—Please Be Sure to Complete Section B)

SECTION A—See Instructions on Cover Sheet

PBS NUMBER: 2 - 452335

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 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

NAME: BLACK BEAR CO., INC.

LOCATION (Not P.O. Boxes): 27-10 49th AVENUE

LOCATION (Continued):

CITY/TOWN/VILLAGE: LONG ISLAND CITY | STATE: NY | ZIP CODE: 11101

COUNTY: QUEENS | TOWNSHIP OR CITY: N.Y.C.

NAME OF OPERATOR AT FACILITY: BLACK BEAR COMPANY INC | FACILITY TELEPHONE NUMBER: (718) 784-7330

EMERGENCY CONTACT NAME: Mr Lenny Trubia | EMERGENCY CONTACT PHONE NO.: (718) 326-2465

OWNER

NAME: KINLOCH CO. INC.

ADDRESS (Street and/or P.O. Box): 27-10 49th AVENUE

CITY: L.I.C. | STATE: NY | ZIP CODE: 11101

FEDERAL TAX ID NO.: 11-2047661 | OWNER TELEPHONE NUMBER: (718) 784-7330

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

MAILING CORRESPONDENCE

ATTENTION: Mr Derek Chou

NAME OF COMPANY: Black BEar Company Inc.

ADDRESS: 27-10 49th Ave

ADDRESS:

CITY/STATE/ZIP CODE: Long Island City NY 11101

TELEPHONE NUMBER: (718) 784-7330

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)

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: Derek Chou | AMOUNT ENCLOSED: $250.00

TITLE: TREASURER

SIGNATURE: Derek Chou | DATE: 7/20/95

OFFICIAL USE ONLY

Page _____ of _____

Date Received: ____/____/____

Date Processed: ____/____/____

Amount Received $ _____

Reviewed By: _____

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION

Petroleum Bulk Storage Program

Facility Information Report

Printed : 07/13/95

PBS # : 2-452335

Site : PUROLATOR COURIER CORP
27-10 HUNTERS POINT BLVD
27010 HUNTERS POINT BLVD
LONG ISLAND CITY, NY 11101
County : QUEENS Town : NEW YORK CITY
Latitude : N Longitude : W
SPDES# : CBS# : -
Site Type : Info Not Given.

Operator : PUROLATOR COURIER CORP (718) 729-3770
Emergency : PUROLATOR COURIER CORP (718) 729-3770

Site status : Active
Total Active Tanks : 1
Active Capacity : 7,500 gals.

Reg Expires : 08/23/93
Last Inspection : / /
Cert Printed : 08/23/88

Site Errors : Minor Data Missing
Owner Error : Minor Data Missing
Tank Errors : Minor Data Missing

Owner : PUROLATOR COURIER CORP
27-10 HUNTERS POINT BLVD
LONG ISLAND CITY, NY 11101

Phone : (718) 729-3770
Owner Type : Corporate/Commercial

Mail : PUROLATOR COURIER CORP
27-10 HUNTERS POINT BLVD
LONG ISLAND CITY, NY 11101

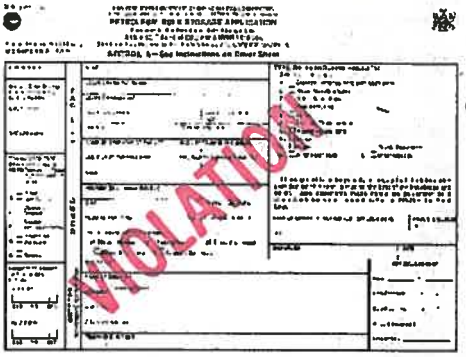
Att : (718) 729-3770

TankNo	TankLoc	Stat	DateIn	Capac (g)	Product	TankType	TankInt	TankExt	PipeLoc	PipeType	PipeInt	PipeExt	SecCont	Leak	OverFil	Disp	LastTest	NextTest	TStat
006	4	1	00/00	7,500	3	1							0	9		3	11/89	11/94	2
001	4	6	00/00	5,000	2	1							0	9		3		CLOSED : 00/00	
002	4	6	00/00	5,000	2	1							0	9		3		CLOSED : 00/00	
003	4	6	00/00	5,000	2	1							0	9		3		CLOSED : 00/00	
004	4	6	00/00	5,000	2	1							0	9		3		CLOSED : 00/00	
005	4	6	00/00	5,000	2	1							0	9		3		CLOSED : 00/00	

IMMEDIATE ATTENTION REQUIRED

JUL 14 1995

Date: July 13, 1995



To: SUPERINTENDENT / CURRENT RESIDENT
27-10 HUNTERS POINT BLVD
LONG ISLAND CITY, NY 11101

Re: **Oil Tank Registration Renewal**
PBS # 2-452335

PLEASE FORWARD THIS LETTER TO OWNER OR MANAGING AGENT

Dear Property Owner / Manager:

You have been identified as the owner/managing agent of those facilities included in this renewal package. Enclosed with this letter are computer records of bulk oil storage facilities that show the registration status with New York State Department of Environmental Conservation (NYS DEC) expired on 08/23/1993. Failure to renew the registration with NYS DEC is a violation of the Environmental Conservation Law (ECL), Section 17-1009(2). Under ECL, Section 71-1929, the maximum allowable monetary penalty is $25,000 per day per violation.

It is imperative that you take immediate action to alleviate this serious violation. You have **ten (10)** business days from the date of this letter to respond to this notice. Failure to respond will trigger a field inspection and referral to the legal division for formal enforcement action.

To facilitate filling out of the applications for renewal, we have included computer printouts of the facilities information from existing registration records. You should copy as much information from the computer printouts onto the applications as appropriate. The registration fee schedule is included in the instruction sheet. Completed applications and fee checks should be sent to the following address.

NYS Dept. of Environmental Conservation
47-40 21st Street, 2nd Floor
Long Island City, NY 11101
Attn: PBS Unit
(718) 482-4933 Ext. 7149

Sincerely,

PBS Unit

93-19-1 (1/92)—26c

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION

INSTRUCTIONS FOR COMPLETING PETROLEUM BULK STORAGE APPLICATION

Please type or print all items, except "signature" in Section A. This form must be completed for each applicable petroleum facility. Forward completed applications to the appropriate DEC Regional Office. Use one form if there are 15 or less regulated tanks at a facility. For more than 15 regulated tanks at a facility, use additional forms as required. A site plan including tank numbers should be enclosed. **Instructions for Section B are on the reverse side.**

SECTION A

Item Name	Specific Instructions
PBS NUMBER	Enter the seven digit DEC Registration Number if the facility was previously registered; otherwise, leave blank.
OTHER EXISTING DEC NUMBERS	**CBS Number:** Enter the Chemical Bulk Storage Number if the facility has been registered under the Hazardous Substance Bulk Storage Law, Article 40 of ECL; 6 NYCRR Parts 595-599. If not applicable, write "Not Applicable". **SPDES Number:** Enter the number which has been assigned to a facility under the State Pollutant Discharge Elimination System, Article 17, Title 8 of ECL, 6 NYCRR Parts 750-758. If not applicable, write "Not Applicable".
TRANSACTION TYPE	
Initial/New Facility:	First application for registration by the owner of a regulated facility. PBS Number will be assigned by DEC.
Change of Ownership:	Application for registration by the new owner of the facility being transferred. Be sure to enter the PBS Number from the existing registration certificate and complete all sections.
Substantial Tank Modification:	Complete this section if one of the following applies: (1) one or more new stationary tanks has been added to the facility; or (2) an existing stationary tank has been replaced, reconditioned or permanently closed. In Section A, only complete the Facility Section and PBS Number. Be sure to provide the signature of a duly authorized officer. In Section B, fill in the entire line of information for each tank being amended.
Information Correction:	If any information changes have occurred since the initial application or the last renewal, include the corrected information in the appropriate spaces and be sure to include the PBS Number. In Section A, the signature of a duly authorized officer must be provided.
Renewal:	Application is being made for a previously registered facility that has not changed ownership since the last registration. Registration certificates for petroleum bulk storage facilities must be renewed every five years and are not transferable. Indicate any changes that may have occurred since last renewal and provide the signature of the duly authorized officer.
GEOGRAPHICAL LOCATOR	Indicate the actual latitude and longitude for the facility. This includes the degrees, minutes and seconds of the location. If known, please provide.
FACILITY INFORMATION	Enter the name and location (NO PO Boxes, please) of the facility. Include any information that would asist in locating the facility. For county, enter the county in which the facility is located. For township, enter the geographical location, not the mailing city. Enter the facility telephone number and the name of the operator at the facility who is familiar with the tanks and the efforts of the business to comply with provisions of Article 17, Title 10 of the Petroleum Bulk Storage Law, 6 NYCRR Parts 612-614.
OWNER INFORMATION	Name, address and telephone number of the company which owns the facility. Federal Tax Identification Number is the number assigned by the Internal Revenue Service. It is required by New York State Department of Tax and Finance. For owner type, check the appropriate box. Note: apartment buildings are considered corporate/commercial.
MAILING CORRESPONDENCE	Enter the desired mailing name and address for correspondence (i.e. Certificates, Tank Bulletin) and the name of the contact person who is familiar with the efforts of the business to comply with the provisions of Article 17, Title 10 of the Petroleum Bulk Storage Law, 6 NYCRR Parts 612-614.
TYPE OF PETROLEUM FACILITY	Check the appropriate box(es). If other, specify the type of facility in the space provided.
NAME AND OFFICIAL TITLE OF OWNER OR OWNER'S AUTHORIZED REPRESENTATIVE	Please type or print both name and title. An application submitted by a corporation must be signed by a principal executive officer of at least the level of vice president or his/her duly authorized representative, if such representative is responsible for the overall operation of the facility. In the case of a partnership or sole proprietorship, the application must be signed by a general partner or the proprietor, respectively. In the case of a municipality, state or other public facility, the application must be signed by either a principal or executive officer, ranking elected official or other duly authorized employee.
AMOUNT ENCLOSED	For Transaction Types 1, 2 and 5, please indicate the enclosed fee. Make check/money order payable to NYSDEC. The fee is based on combined petroleum tank storage capacity at the facility in gallons: 1,101-2,000 gallons—$50/facility, 2,001-4,999 gallons—$150/facility, 5,000-399,999 gallons—$250/facility.
SIGNATURE AND DATE	Signature of the owner or duly authorized officer is required, along with the date the application was prepared.

New York State Recycles
Printed on Recycled Paper

NEW YORK CITY TANK TESTING INC.

OIL TANKS TESTED OIL TANKS INSTALLED

1624 WEBSTER AVENUE
BRONX, NY 10457
TEL: 718-731-7011
877-TANK- TEST

Dear Customer;

Enclosed please find the tank test report. Please file one copy with the Department Of Environmental Conservation at the following address. Keep one copy for your records.

Send a copy via certified mail to,

NYSDEC-R2, PBS Unit
Hunters Point Plaza
47-40 21 Street
Long Island City, NY 11101

Yours truly

Bernard Bauer

Sent
7/13/2000

NYS DEPARTMENT OF ENVIRONMENTAL CONSERVATION

Petroleum Bulk Storage

Tank Test Cover Form

Return to: NYSDEC - R2, PBS UNIT
HUNTERS POINT PLAZA
47-40 21ST STREET
LONG ISLAND CITY, NY 11101
718-482-4933

FACILITY

PBS Number: 2-452335

Name of Facility: Black Bear Oil

Address: 27-10 Hunters Point

L.I.C. N.Y.

TESTER

Test Method: Horner Ezy 3 Date: 6/27/00

Tester (name): Bernard Bauer

Address: 1624 Webster Ave.

Bronx N.Y. 10457

Certification Number: 642329

TEST RESULTS

Tank Number	Passed	Failed
01	Yes	

(Tester's Signature)

HORNER EZY 3
TANK TIGHTNESS TESTER

SITE NAME OR OWNER: Black Bear Oil.

SITE ADDRESS:

MAP #: 27-10 Hunters Point

CITY, STATE: L.I.C. N.Y.

CONTACT/PHONE:

TANK I.D. No.: 01

TANK CAPACITY: 7,500 gal

TANK DIAMETER: 84"

PRODUCT TYPE: # 2 Oil

INCHES OF PRODUCT AT TEST TIME: 66 inches

INCHES OF WATER AT TEST TIME: 1 inches

GALLONS OF PRODUCT AT TEST TIME: 6,300 gallons

GALLONS OF WATER AT TEST TIME: 20 gallons

INCHES OF WATER FROM TANK BOTTOM: U/N inches

MAXIMUM DETERMINED PRESSURE: 101

MINIMUM DETERMINED PRESSURE: 91

THRESHOLD VALUE: 1

TECHNICIAN NAME/CERTIFICATION NUMBER:

Bernard Bauer #642329

CONTRACTOR:

New York City Tank Testing Inc.

TANK TIGHTNESS TEST

DATE: 6/27/00

LOCATION: 27-10 Hunters Point
L.I.C. N.Y.

1. TIME BLOWER STARTED: 3:30
2. TIME AT 50% MAXIMUM PRESSURE: 3:37
3. TIME AT MAXIMUM PRESSURE: 3:50
4. TIME BLOWER TURNED OFF: 4:05
5. PRESSURE AFTER BLOWER TURNED OFF: 100
6. PRESSURE AT END OF WAITING PERIOD: _____
7. DIFFERENCE DURING THE WAIT: _____
8. TIME BLOWER ON: _____
9. TIME BLOWER OFF: _____
10. PRESSURE AFTER BLOWER TURNED OFF: _____
11. PRESSURE AT END OF WAITING PERIOD: _____
12. DIFFERENCE DURING THE WAIT: _____
13. TIME BLOWER ON: _____
14. TIME BLOWER OFF: _____
15. PRESSURE AT CONCLUSION: 99.2

WATER SENSOR CALIBRATION

	CALIBRATION #1	CALIBRATION #2	CALIBRATION #3
ADDED:	300	300	200

AVERAGE 266 / 1.40 HR

DATA SHEET

PRESSURE DATA				WATER DATA			
TIME	DATA	-/+	BPH	START G/Y/R	END G/Y/R	"A"	GAIN YES/NO
4:05	100	—					
10	100.1	+1					
15	100	-1					
20	100	—					
25	99.9	-1					
30	99.9	—					
35	99.8	-1					
40	99.8	—					
45	99.8	—					
50	99.7	-1					
55	99.6	-1					
5:00	99.6	—					
05	99.6	—					
10	99.5	-1					
15	99.5	—					
20	99.4	-1					
25	99.4	—					
30	99.4	—					
35	99.3	-1					
40	99.2	-1					
5:45	99.2	—	-0.8				

DATE: 6/27/00
LOCATION/ADDRESS: 27-10 Hunters Point
CITY/STATE/ZIP: L.I.C. N.Y.
TECHNICIAN NAME/NUMBER: Bernard Bauer # 642329
PRESSURE RATE PER HOUR: 0.8
WATER INTRUSION: 0

HORNER EZY3
PRESSURE CALCULATIONS

66 INCHES OF PRODUCT	X	.031 WEIGHT OF PRODUCT	=	2.046 PSI	[1]
1 INCHES OF WATER IN TANK	X	.036 (WEIGHT OF WATER)	+	.036 PSI	[2]
TOTAL POSITIVE HEAD PRESSURE IN TANK			=	2.082 PSI	[3]
			−		
U/N INCHES OF WATER OUTSIDE OF TANK	X	.936 (WEIGHT OF WATER)	=	0 PSI	[4]
TOTAL HEAD PRESSURE AFTER WATER COMP.			=	2.082 +/-PSI	[5]
			+		
REQUIRED PRESSURE BY ULLAGE CAPACITY			=	1.2 PSI	[6]
CHANGE TO WC MEASUREMENT			=	3.282 PSI / .036	[7]
MINIMUM DETERMINED PRESSURE			=	91 WC	[8]
ADD 10 OR 15 DEPENDING ON PRODUCT TESTED			+	10 WC	[9]
MAXIMUM DETERMINED PRESSURE			=	101 WC	[10]

MAXIMUM DETERMINED PRESSURE 101 WC

MINIMUM DETERMINED PRESSURE 91 WC

Notes:

SITE NAME/LOCATION: Black Bear Oil
27-10 Hunters Point
L.I.C. N.Y.

TANK I.D.#: 01

TECHNICIAN NAME/NUMBER: Bernard Bauer / # 642329

PRO-TEST CO.

PRECISION TESTING OF UNDERGROUND TANKS

1 800 439-TANK

FEB 5 1996

516 321-4670
JOHN LEDDY
331 WALKER STREET
N. BABYLON, NY 11704

718 668-1363
TOM LEDDY
53 SPRATT AVE.
STATEN ISLAND, NY 10306

Owner/Dealer BLACK BEAR CO INC. Date: 7-28-95

Telephone —

Address 27-10 HUNTER POINT AVE

City & State LONG ISLAND CITY

Tank # 001 Cap. 7500 Dia. 84"

Product: # 2 F.O Tank bottom to grade: 112 "

Total " in Tank: 68 Groundwater above Tank bottom 24 "

Water: 0 " Gals. water: 0

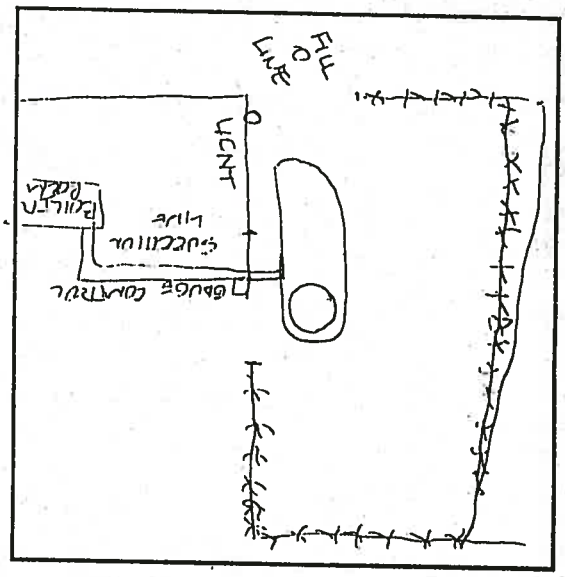
Product 68 " Gals. product 6518

Total Cap 7500

Product Cap 6518

Ullage Cap 982

TYPE OF PUMP: Suction



PRESSURE CALCULATIONS

(1.) 68 Inches of Product	X .031 Weight of Product	= 2.108	PSI	(1.)
(2.) 0 Inches of Water in Tank X .036		+ = 0	PSI	(2.)
(3.) Total Positive Head Pressure in Tank		= 2.108	PSI	(3.)
(4.) 24 Inches of Water outside Tank X .036		− = .864	PSI	(4.)
(5.) Total Head Pressure after Water comp.		= 1.244	+/-PSI	(5.)
(6.) Required Pressure by Ullage Capacity		+ 1.2	PSI	(6.)
(7.)		= 2.444 ÷.036	+/-PSI	(7.)
(8.) Minimum Determined Pressure (*25 or more)		= 67.8	+/-WC	(8.)
(9.) Add 10 for Diesel, 15 for Gasoline		+ 10	WC	(9.)
(10.) Maximum Determined Pressure		= 77.8	+/-WC	(10.)

* If #8 is less than 25, the Minimum Determined Pressure shall be 25. The Maximum Determined Pressure shall be 35 for #2 or heavier and 40 for Gas.

PBS # 2-452335

Maximum Determined Pressure 77.8 WC

Minimum Determined Pressure 67.8 WC

Threshhold: Gasoline = 10% of Min. Del. Press. = 1"

Diesel = 1"

WATER SENSOR CALIBRATION (IF NEEDED)

#1. START — END — DIFF. —

#2. START — END — DIFF. —

#3. START — END — DIFF. — = AVERAGE —

HORNER EZY 3 TANK TIGHTNESS TEST

AUG - 3 1995

TONE
TANK & PUMP, INC.

8671 - 18th Avenue, Brooklyn, NY 11214 Phone: 718-331-5003 Fax: 718-256-6427
Construction, Maintenance, Testing and Environmental Services
Federal Identification Number: 11-2693555

07/28/95

1130
INVOICE #

JOB NO: J2024

Black Bear
27-10 Hunters Point Avenue,
L.I.C. NY 11101
Attention: Jennifer

S.S.#
c485

JOB SITE
Black Bear
27-10 Hunters Point Avenue
L.I.C. , NY
11101

ACCOUNT NUMBER: C485

PAYMENT DUE UPON RECEIPT

Invoice

WORK ORDER NO:

NTE AMOUNT:

DATE	DESCRIPTION	AMOUNT
07/28/95	Contractor went to the above location to perform a precision test.	
LABOR	WORKER(S) CLASSIFICATION / NO WKRS / # HRS / LABOR RATE / LABOR AMT Precision test	800.00
TRAVEL	TRAVEL DESCRIPTION / TRAVEL HRS / TRAVEL RATE / AMOUNT	
MATERIALS	QTY / MATERIALS USED	

CO-4062 REF. NOS

Subtotal	800.00
Sales Tax	66.00
Total Due	$866.00

New York State Department of Environmental Conservation
50 Wolf Road, Albany, New York 12233 -3520

Thomas C. Jorling
Commissioner

Dear Petroleum Storage Tank Owner:

The 5-year registration for your petroleum storage tank(s) will expire soon. The expiration date of your registration certificate is printed on the top right-hand corner of Section B of the enclosed renewal application. The enclosed Petroleum Bulk Storage (PBS) renewal package includes the following documents:

(1) A PBS renewal application form with portions of Sections A and B pre-printed;

(2) An instruction sheet with detailed explanations for completing the PBS renewal application form; and

(3) A list of special instructions on completing your renewal application form (on the back of this letter).

Owners are required to use the enclosed pre-printed revised PBS application form for renewal. Several items have been added to the application form to supplement the information collected originally at registration.

Please review, revise (if necessary), and complete the renewal application form according to the enclosed instruction sheet. Be sure to fill in all blank portions of the form. Return the completed and signed form and fee to the appropriate DEC regional office, whose address is printed on the top right-hand corner of Section A of the renewal form, before the facility's current registration expires.

Upon receipt and review of the package, the Department will process the completed renewal forms and print a new 5-year certificate. The certificate and all future correspondence will be mailed to the address provided in the "Mail Correspondence" section of the renewal form.

If you have any questions or need additional forms or regulations, please call the appropriate DEC Regional Office or the Bulk Storage Help-line at 1-800-242-4351.

Sincerely,

Thomas E. Quinn, Director
Bureau of Spill Prevention & Response

enclosures

New York State Recycling
Printed on Recycled Paper

93-19-1 (12/90)—26c

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF WATER • BUREAU OF SPILL PREVENTION AND RESPONSE

PETROLEUM BULK STORAGE APPLICATION

Pursuant to the Petroleum Bulk Storage Law, Article 17, Title 10 of ECL; and 6 NYCRR 612-614.

(Continued on Reverse Side—Please Be Sure to Complete Section B)

Please Type or Print Clearly and Complete All Items

SECTION A—See Instructions on Cover Sheet

RETURN COMPLETED FORM & FEE TO:

NYS DEC - R2, ATTN: PBS UNIT
HUNTERS POINT PLAZA
47-40 21st STREET
LONG ISLAND CITY, NY 11101
(718) 482-4933

PBS NUMBER: 2-483192

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 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

NAME: BLACK BEAR COMPANY

LOCATION (Not P.O. Boxes): 27-10 49TH AVENUE

LOCATION (Continued): 27010 49TH AVENUE

CITY/TOWN/VILLAGE: LONG ISLAND CITY | STATE: NY | ZIP CODE: 11101

COUNTY: QUEENS | TOWNSHIP OR CITY: NEW YORK CITY

NAME OF OPERATOR AT FACILITY: KINLOCH CO INC | FACILITY TELEPHONE NUMBER: (718) 784-7330

EMERGENCY CONTACT NAME: WALTER SPREEN | EMERGENCY CONTACT PHONE NO.: (718) 331-5003

OWNER

NAME: KINLOCH CO INC

ADDRESS (Street and/or P.O. Box): 27-10 HUNTERS POINT AVENUE

CITY: LONG ISLAND CITY | STATE: NY | ZIP CODE: 11101

FEDERAL TAX ID NO. | OWNER TELEPHONE NUMBER: (718) 784-7330

TYPE OF OWNER (Check only one)

1 ☐ Private Resident 2 ☐ State Government 3 ☐ Local Government
4 ☐ Federal Government 5 ☐ Corporate/Commercial

MAILING CORRESPONDENCE

ATTENTION:

NAME OF COMPANY: KINLOCH CO INC

ADDRESS: 27-10 HUNTERS POINT AVENUE

ADDRESS:

CITY/STATE/ZIP CODE: LONG ISLAND CITY, NY 11101

TELEPHONE NUMBER: (718) 784-7330

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)

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 | AMOUNT ENCLOSED $

TITLE

SIGNATURE | DATE

OFFICIAL USE ONLY

Page _____ of _____

Date Received: ____/____/____

Date Processed: ____/____/____

Amount Received $ _____

Reviewed By: _____

PBS NUMBER: 2-483192

Tank Information for Petroleum Bulk Storage Facility

SECTION B—See Instructions on Cover Sheet

EXPIRATION DATE: 11/20/95

Action	Tank Number	Tank Location	Status	Installation or Permanent Closure Date (MO)		(YR)		Capacity (Gallons)	Product Stored	Tank Type	Tank Internal Prot.	Tank External Protection		Piping Location	Piping Type	Piping Internal Prot.	Piping External Protection		Secondary Containment		Leak Detection		Spill/ Overfill Prevention		Dispenser	Last Test Date (underground Tanks) (MO)		(YR)	
1	001	4	1	1	2	7	6	550	9	1					2				0		0				2				
1	002	4	1	1	2	7	6	4,000	2	1					2				0		3				2				
1	003	4	1	1	2	7	6	4,000	2	1					2				0		3				2				
1	004	4	1	1	2	7	6	4,000	2	1					2				0		3				2				
1	005	4	1	1	2	7	6	4,000	2	1					2				0		3				2				
1	006	4	1	1	2	7	6	4,000	2	1					2				0		3				2				
1	007	4	1	0	1	7	1	7,500	3	1					1				0		0		4		2				

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
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 Sacrificial 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 the Tank Number

93-19-1 (1/92)—26c

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION

INSTRUCTIONS FOR COMPLETING PETROLEUM BULK STORAGE APPLICATION

Please type or print all items, except "signature" in Section A. This form must be completed for each applicable petroleum facility. Forward completed applications to the appropriate DEC Regional Office. Use one form if there are 15 or less regulated tanks at a facility. For more than 15 regulated tanks at a facility, use additional forms as required. A site plan including tank numbers should be enclosed. **Instructions for Section B are on the reverse side.**

SECTION A

Item Name	Specific Instructions
PBS NUMBER	Enter the seven digit DEC Registration Number if the facility was previously registered; otherwise, leave blank.
OTHER EXISTING DEC NUMBERS	**CBS Number:** Enter the Chemical Bulk Storage Number if the facility has been registered under the Hazardous Substance Bulk Storage Law, Article 40 of ECL; 6 NYCRR Parts 595-599. If not applicable, write "Not Applicable". **SPDES Number:** Enter the number which has been assigned to a facility under the State Pollutant Discharge Elimination System, Article 17, Title 8 of ECL, 6 NYCRR Parts 750-758. If not applicable, write "Not Applicable".
TRANSACTION TYPE	
Initial/New Facility:	First application for registration by the owner of a regulated facility. PBS Number will be assigned by DEC.
Change of Ownership:	Application for registration by the new owner of the facility being transferred. Be sure to enter the PBS Number from the existing registration certificate and complete all sections.
Substantial Tank Modification:	Complete this section if one of the following applies: (1) one or more new stationary tanks has been added to the facility; or (2) an existing stationary tank has been replaced, reconditioned or permanently closed. In Section A, only complete the Facility Section and PBS Number. Be sure to provide the signature of a duly authorized officer. In Section B, fill in the entire line of information for each tank being amended.
Information Correction:	If any information changes have occurred since the initial application or the last renewal, include the corrected information in the appropriate spaces and be sure to include the PBS Number. In Section A, the signature of a duly authorized officer must be provided.
Renewal:	Application is being made for a previously registered facility that has not changed ownership since the last registration. Registration certificates for petroleum bulk storage facilities must be renewed every five years and are not transferable. Indicate any changes that may have occurred since last renewal and provide the signature of the duly authorized officer.
GEOGRAPHICAL LOCATOR	Indicate the actual latitude and longitude for the facility. This includes the degrees, minutes and seconds of the location. If known, please provide.
FACILITY INFORMATION	Enter the name and location (**NO PO Boxes, please**) of the facility. Include any information that would asist in locating the facility. For county, enter the county in which the facility is located. For township, enter the geographical location, not the mailing city. Enter the facility telephone number and the name of the operator at the facility who is familiar with the tanks and the efforts of the business to comply with provisions of Article 17, Title 10 of the Petroleum Bulk Storage Law, 6 NYCRR Parts 612-614.
OWNER INFORMATION	Name, address and telephone number of the company which owns the facility. Federal Tax Identification Number is the number assigned by the Internal Revenue Service. It is required by New York State Department of Tax and Finance. For owner type, check the appropriate box. Note: apartment buildings are considered corporate/commercial.
MAILING CORRESPONDENCE	Enter the desired mailing name and address for correspondence (i.e. Certificates, Tank Bulletin) and the name of the contact person who is familiar with the efforts of the business to comply with the provisions of Article 17, Title 10 of the Petroleum Bulk Storage Law, 6 NYCRR Parts 612-614.
TYPE OF PETROLEUM FACILITY	Check the appropriate box(es). If other, specify the type of facility in the space provided.
NAME AND OFFICIAL TITLE OF OWNER OR OWNER'S AUTHORIZED REPRESENTATIVE	Please type or print both name and title. An application submitted by a corporation must be signed by a principal executive officer of at least the level of vice president or his/her duly authorized representative, if such representative is responsible for the overall operation of the facility. In the case of a partnership or sole proprietorship, the application must be signed by a general partner or the proprietor, respectively. In the case of a municipality, state or other public facility, the application must be signed by either a principal or executive officer, ranking elected official or other duly authorized employee.
AMOUNT ENCLOSED	For Transaction Types 1, 2 and 5, please indicate the enclosed fee. Make check/money order payable to NYSDEC. The fee is based on combined petroleum tank storage capacity at the facility in gallons: 1,101-2,000 gallons—$50/facility, 2,001-4,999 gallons—$150/facility, 5,000-399,999 gallons—$250/facility.
SIGNATURE AND DATE	Signature of the owner or duly authorized officer is required, along with the date the application was prepared.

New York State Recycling
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KINLOCH CO. INC.
27-10 HUNTERS POINT AVE,
LONG ISLAND CITY, NY 11101-4408

JPMORGAN CHASE BANK
LONG ISLAND CITY, NY 11101
1-2/210

1697

6/8/2005

PAY TO THE ORDER OF NEW YORK CITY TANK TESTING INC. $**1,931.35

One Thousand Nine Hundred Thirty-One and 35/100********** DOLLARS

NEW YORK CITY TANK TESTING INC.
1624 WEBSTER AVE.
BRONX, NY 10457

MEMO Clean,Del&Dispose of oil:Inv# 1103&1105

Robert T. Sullivan MP

⑈001697⑈ ⑆021000021⑆087008394⑈

NEW YORK CITY TANK TESTING INC.

1624 WEBSTER AVE.
BRONX. NY 10457
TEL. (718) 731-7011

Invoice

Date	Invoice #
5/11/2005	1105

TO	Black Bear Oil 27-10 Hunter Point Avenue Long Island City, NY 11101

827

Job Location	Terms
27-10 Hunter Point Avenue Long Island City, NY 11101	Due on receipt

DATE	Quantity	Description	Unit Price	AMOUNT
5/5/2005	1	Tested tank & submitted report.	650.00	650.00T

Thank you for your business.

Sales Tax (8.625%)	$56.06
Total	$706.06

Bernie

EZY 3 LOCATOR PLUS — FINAL REPORT

DATE 5/05/05 — PBS # (NEW YORK) 2-452335 Spill # 0501474

TOTAL TANK VOL 7,500 — TANK # 01

PRODUCT VOL 2,869 — LOCATION 27-10 Hunter Point Avenue

ULLAGE VOL 4,631 — Long Island City, NY 11101

PRODUCT TYPE # 2 oil

THE ACOUSTIC CHARACTERISTIC OF A LEAK REVEALS:
(CHECK ONLY ONE)

_____ TIGHT TANK AND SYSTEM
THIS UNDERGROUND STORAGE TANK PASSES THE CRITERIA SET FORTH BY THE U.S. EPA.

_____ ULLAGE (DRY) PORTION LEAK
THIS UNDERGROUND STORAGE TANK FAILS THE CRITERIA SET FORTH BY THE U.S. EPA.

__✓__ BELOW PRODUCT LEVEL (WET) PORTION LEAK
THIS UNDERGROUND STORAGE TANK FAILS THE CRITERIA SET FORTH BY THE U.S. EPA.

WATER SENSOR INDICATES:
(CHECK ONLY ONE)

NO WATER INTRUSION _____ WATER INTRUSION _____ NOT APPLICABLE _____

Operator Name: Print Abraham Wachsler Sign A Wachsler

Certification # 665898 Expiration Date January 14, 2007

Testing Firm: N.Y.C. Tank Testing Inc Address 1624 Webster Avenue

Telephone # (718) 731-7011 Bronx, N.Y. 10457

NEW YORK STATE REQUIREMENT: A DIAGRAM OF THE TANK SYSTEM MUST BE SUBMITTED TO THE STATE WITH THIS REPORT.

EZY 3 LOCATOR PLUS

PRESSURE CALCULATION & WATER SENSOR CALIBRATION DATA SHEET

DATE 5/05/05

PBS # (NEW YORK) 2-452335 Spill # 0501474

TOTAL TANK VOL. 7,500

TANK # 01

PRODUCT VOL. 2,869

LOCATION 27-10 Hunter Point Avenue

ULLAGE VOL. 4,631

Long Island City, NY 11101

PRODUCT TYPE # 2 oil

PRESSURE SENSOR CALCULATION

31.25 INCHES OF PRODUCT	X	0.031 WEIGHT OF PRODUCT	= 0.968	PSI (1)
2.5 INCHES OF WATER IN TANK	X	.036	= 0.09	PSI (2)
Line 1 + Line 2 = Total Positive Head Pressure In Tank			= 1.058	PSI (3)
15 INCHES OF WATER OUTSIDE TANK	X	.036	= 0.54	PSI (4)
Total Head Pressure Minus Outside Water Pressure			= 0.518	+/- PSI(5)
Always add .5 PSI			+ 0.5	PSI (6)
NOTE: If Line 6 is Less Than .5 PSI Line 7 Shall be .5 PSI				
TEST PRESSURE			= 1.02	+/- PSI (7)

	TIME	PRESSURE
Blower Started:	5:21	0
Test Pressure Reached:	5:29	1.02
Blower Turned Off:	5:32	1.05
Test Began:	5:33	1.04
Test Ended:	5:35	1.02

Depth of Groundwater Determined:

By: Smart probe

Where: Ground water well within five feet of tank

WATER SENSOR CALIBRATION

Added: was (Cal #1) not (Cal #2) used (Cal #3)

Average: _____

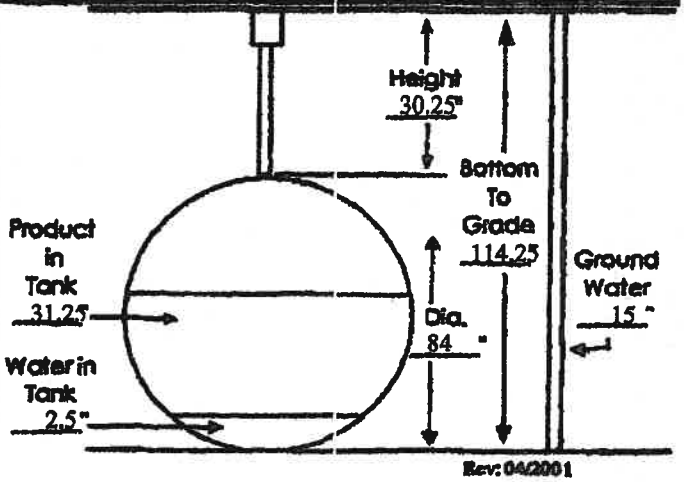
Water Intrusion Test Period: Began: _____

Ended: _____

Calculation for Test Period:

_____ ÷ 3780 = _____ ÷ .05 = _____

Ave. Cal. "A" Factor Time of Test



Rev: 04/2001

NEW YORK CITY TANK TESTING INC.

OIL TANKS TESTED OIL TANKS INSTALLED

1624 WEBSTER AVENUE
BRONX, N.Y. 10457
TEL. (718) 731-7011
877-TANK-TEST

DIAGRAM OF THE TANK SYSTEM

LOCATION 27-10 Hunters Point Ave. Long Island City, NY 11101

DATE 5/5/05

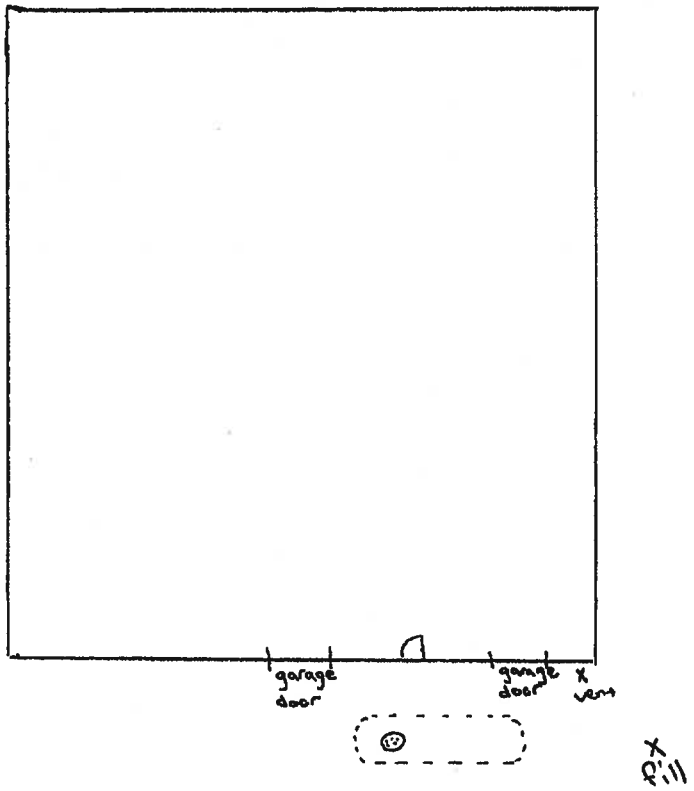


DIAGRAM IS NOT TO SCALE
DIAGRAM MAY POSSIBLY BE INACCURATE

NOTE: _____