

## Free Product Recovery Report Leaking Underground Storage Tank Site Assessment for the Iowa Department of Natural Resources

SITE IDENTIFICATION							
LUST No. UST F	Registration No.						
Site Name:							
Site Address:							
City:							
RESPONSIBLE PARTY IDENTIFICATION							
Name:							
Street:							
City:	State:	Zip Code:					
Submittal Date:							
STATEMENT C	OF CERTIFICATI	ON					
I,, Groundwater Professional Certification No, am familiar with all Applicable requirements of Iowa Code § 455B.474 and all rules and procedures adopted thereunder including, but not limited to, Chapter 567-135 and the Department of Natural Resources' Free Product Recovery Report guidance. Based on my knowledge of those documents and information I have prepared and reviewed regarding this site, UST Registration No, LUST No, I certify that this document is complete and accurate as provided in 567 IAC 135.9(11)"c) and meets the applicable requirements of the Free Product Recovery Report.							
Print: Name/Address of Certified Groundwater Professional							
	Signature:						
Phone:							
	Date:						
I certify that I have reviewed this document and attachments for submittal to the lowa Department of Natural Resources.							
Print Name of Responsible Party	Signature- Respo	nsible Party					

Official IDNR Use Only							
Date Received:		Comment Letter Date:					
Reviewer:		Approved:	Y / N				
		I					

Free Product Recovery Information								
Tabulate the free product and groundwater volumes removed from each well. List each extraction event chronologically with the oldest data first. The results for all events must be provided. Give all elevations as feet Above Sea Level (ASL). Ground surface elevation must be reported to the nearest 0.1 foot. Top of casing elevation, static water elevations, and free product thickness must be reported to the nearest 0.01 foot. Volume of free product and groundwater removed must be reported to the nearest 0.1 gallon. A separate sheet should be used for each recovery well.								
Well Number:	Ground	Surface Elevation:		Top of Casing Elevation:				
Date Sampled	Static Groundwater Level (feet ASL)	Free Product Thickness (feet)	Volume of Remove	Free Product d (gallons)	Volume of Groundwater Removed (gallons)			