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# SURVEY QUESTIONNAIRE Parts A and B

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In the space below, please attach the reusable mailing label used to deliver this survey to you or provide the following information.

_____
Facility name
_____
Address
_____
_____
_____
County
_____
Survey Identification Number

Please provide the following information about the person completing this survey.

_____
Name
_____
Title
_____
Address (if different from facility address)
_____
_____
_____
Telephone Number

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## INSTRUCTIONS

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### GENERAL

This survey will ask you to provide information about your facility (or business), your aboveground and underground oil storage tanks, and your facility's operations.

The questionnaire is divided into two (2) parts. Part A of the questionnaire asks a series of questions to determine whether you are exempt from completing the remainder of the questionnaire. **You must complete Part A regardless of whether or not you store oil.** Part B only needs to be completed if your facility meets certain criteria outlined in Part A. Part B asks specific questions about your facility's storage of oil and requires that you complete the two tables that are enclosed.

When answering each question, please circle the code to the right of the appropriate answer, or fill in specific data. Please answer ALL questions as thoroughly and accurately as possible.

When you have completed all required sections of the survey questionnaire, please return all forms to EPA using the envelope provided.

### SURVEY HELP IS AVAILABLE

If you need help completing the survey questionnaire, please call the Survey Hotline at **1-800-276-5485**. When you call this number, you will be asked to leave your name, survey identification number (located on the mailing label), and telephone number; someone will return your call during business hours to provide assistance.

### CONFIDENTIAL BUSINESS INFORMATION IS PROTECTED

You may claim business information that you submit to EPA as confidential. If you wish to assert a claim of confidentiality, you must mark the response "Confidential Business Information" on the survey form itself, and complete the "Request for Confidential Treatment of Business Information" form provided in this booklet. You should avoid generalized claims that all information submitted is confidential business information. Information designated as confidential will be disclosed by EPA only to the extent allowed by, and by means of, the procedures published in the U.S. Code of Federal Regulations at 40 CFR Part 2. If you fail to claim the information you disclose as confidential upon submission, it may be made available to the public without further notice to you.

### RESPONSE BURDEN

The burden for completion of Part A of the survey is estimated to range from 0.2 to 0.5 hours. The burden for completing Part B of the survey is estimated to range from 2.7 hours to 12.1 hours, depending on the size of the facility, with an average estimate of about 5.7 hours. Send comments regarding this collection of information, including suggestions for reducing burden, to: Chief, Information Policy Branch, Mail Code 2131, U.S. Environmental Protection Agency, 401 M Street SW, Washington, DC 20460; and to Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

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## SURVEY DEFINITIONS

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**For the purpose of this survey, please use the following terms as they are defined below.**

**Oil** means oil of any kind or in any form, including crude oil, gasoline, diesel oil, fuel oil, heating oil, asphalt, and other refined petroleum products. Oil also means animal or vegetable oil, oil refuse, oil sludge, and oil mixed with wastes other than dredged spoil.

**Facility** means all establishments, installations, buildings, structures, and equipment that are used as part of your business operations in the *county* identified on the mailing label used to deliver this survey. Some examples of facilities include: industrial plants, factories, terminals and transfer stations, production wells, refineries, gas stations, warehouses, commercial stores, office buildings, schools, farms, and hospitals. The term facility does not include property that you lease to others. For purposes of this survey, the entire area within a county where a facility's operations occur is considered a single facility and includes any subsidiaries in the county, except that:

- ◆ Owners or operators of petroleum production facilities that have multiple leases within a county should consider each lease a separate facility, and complete a separate survey form for each lease.
- ◆ Owners or operators of electric utility facilities should consider only their primary electrical generating stations to be a facility and, thus, should complete a survey form for each of those facilities only. There is no need to complete a survey form for substations.

**Storage Capacity** means the total volume or shell capacity of a tank or container (e.g., drums, cans, etc.) that is used to store oil or a mixture of oil and another substance, regardless of whether the tank or container is filled. In addition, mobile tanks should be included in determining storage capacity if the tank is not used to transport oil off-site (i.e., outside the facility boundaries). Storage capacity also refers to tanks or containers used for standby storage, seasonal storage, or temporary storage, but not permanently closed tanks or containers.

**Aboveground Storage Tank** means any oil storage tank or container that is not entirely covered by earth and includes tanks in subterranean vaults, bunkered tanks, or partially buried tanks.

**Underground Storage Tank** means any oil storage tank completely covered with earth. Oil storage tanks in subterranean vaults, bunkered tanks, or partially buried tanks are not considered underground storage tanks.

**Discharge** means any release of oil or oil mixture, whether intentional or not, and includes any spilling, overfilling, leaking, pumping, pouring, emitting, emptying, or dumping of oil.

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**REQUEST FOR CONFIDENTIAL TREATMENT  
OF BUSINESS INFORMATION**

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I hereby request that the information I have provided to the U.S. Environmental Protection Agency in response to the questions identified below be treated as confidential business information under 40 CFR Part 2, and Section 1905 of Title 19 of the United States Code.

LIST THE QUESTION NUMBERS OF THE RESPONSES OR PORTION OF THE FORM FOR WHICH YOU ARE REQUESTING CONFIDENTIAL TREATMENT:

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**PLEASE PRINT OR TYPE**

Establishment Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_

Establishment Owner/Operator: \_\_\_\_\_ (Print or type)      \_\_\_\_\_ (Signature)

Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month      Day      Year

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**FOR ASSISTANCE IN ANSWERING ANY QUESTION IN THIS SURVEY,  
PLEASE CALL THE SURVEY HOTLINE AT 1-800-276-5485**

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## PART A - EXEMPTION DETERMINATION

**Note: Part A must be completed by ALL respondents and returned to EPA in the envelope provided.**


1a. Does the name of your business or establishment differ from the name provided on the mailing label used to deliver this survey?

YES ..... 1  
NO ..... 2

**If you answered NO, please proceed to Question 2.**


1b. Does your establishment continue to operate in the same line of business as the facility to which this survey was addressed?

YES [skip to 3]. ..... 1  
NO ..... 2


 **If you answered NO, you are not required to complete Part B. Please return this questionnaire to EPA in the envelope provided.**

2. Do any of the following apply to you? (*Circle ALL applicable codes.*)


- Your facility is no longer in business. . . 1
- Your facility was sold to a non-family member and you no longer have any affiliation with that business. . . . . 2
- Your facility has moved to a location outside the county listed on the mailing label . . . . . 3
- The person to which this survey was addressed is deceased and the facility is no longer in business . . . . . 4

 **If you circled any of the above, you are not required to complete Part B. Please return this questionnaire to EPA in the envelope provided. If none of the above apply to you or your facility, please continue to Question 3.**

3. Are there oil storage tanks or containers either located at, or operated by, your establishment in the county provided on the mailing label?


 **NOTE: Oil includes crude oil, gasoline, diesel fuel, heating oil, asphalt, other petroleum products, as well as animal or vegetable oil, oil refuse, oil sludge, and oil mixed with wastes other than dredged spoil.**

YES ..... 1  
NO ..... 2

 **If you answered YES, please go to Question 4. If you answered NO, you are not required to complete Part B. Please return this questionnaire to EPA in the envelope provided.**

4. Which of the following describe your facility's oil storage tanks or containers? (*Circle ALL codes that apply.*)

- One aboveground tank or container with a storage capacity of more than 660 gallons. . . . . 1
- Multiple aboveground tanks or containers with a total storage capacity of more than 1,320 gallons. . . . . 2
- Total underground (completely buried) oil storage capacity of more than 42,000 gallons . . . . . 3
- None of the above. . . . . 4

 **If you circled codes 1, 2, or 3, you must complete Part B of this survey questionnaire. If you circled code 4, "None of the above," you are not required to complete Part B. Please return this questionnaire to EPA in the envelope provided.**

## PART B - FACILITY INFORMATION

1a. What is the total oil storage capacity (i.e., filled or not) of aboveground tanks (including partially buried tanks) at your facility? (*Enter capacity in gallons. NOTE: 1 barrel equals 42 gallons.*)

Total aboveground capacity \_\_\_\_\_ gallons

1b. Has your facility stored oil or petroleum products in underground (i.e., completely buried) tanks within the past two years? (*Circle only one code.*)

YES . . . . . 1  
NO [skip to 3]. . . . . 2

1c. What is the current oil storage capacity (i.e., filled or not) of underground (i.e., completely buried) tanks at your facility? (*Enter capacity in gallons. NOTE: 1 barrel equals 42 gallons.*)

Total underground capacity \_\_\_\_\_ gallons

2a. How many of your facility's underground (i.e., completely buried) storage tanks have been replaced in the past two years? (*Circle only one.*)

NONE [skip to 3]. . . . . 1  
ONE. . . . . 2  
MORE THAN ONE (*specify*) \_\_\_\_\_ 3

2b. How many of these tanks were replaced with aboveground storage tanks? (*Circle only one.*)

NONE . . . . . 1  
ONE. . . . . 2  
MORE THAN ONE (*specify*) \_\_\_\_\_ 3

2c. How many of these tanks were replaced with other underground storage tanks? (*Circle only one.*)

NONE . . . . . 1  
ONE. . . . . 2  
MORE THAN ONE (*specify*) \_\_\_\_\_ 3

3. What is the approximate percentage of oil stored in storage tanks versus other types of containers (e.g., drums, cans, etc.)? (*Total should equal 100 percent.*)

TANKS \_\_\_\_\_ percent  
OTHER CONTAINERS \_\_\_\_\_ percent  
TOTAL \_\_\_\_\_ percent

4a. Is your company/organization in the electrical utility industry (i.e., SIC Code 491)? (*Circle only one.*)

YES . . . . . 1  
NO [skip to 5a] . . . . . 2

4b. How many of the following does your organization own or operate in your county with more than 660 gallons in a single piece of equipment or 1,320 gallons in total?

SUBSTATIONS (*Circle only one.*)  
One or more (*specify #*) \_\_\_\_\_ 1  
None . . . . . 2

TRANSFORMER INSTALLATIONS  
OTHER THAN SUBSTATIONS (*Circle only one.*)  
One or more (*specify #*) \_\_\_\_\_ 1  
None . . . . . 2

4c. How many of the following, operated in the county by your organization, have a total oil storage capacity of greater than 42,000 gallons?

SUBSTATIONS (*Circle only one.*)  
One or more (*specify #*) \_\_\_\_\_ 1  
None . . . . . 2

TRANSFORMER INSTALLATIONS  
OTHER THAN SUBSTATIONS (*Circle only one.*)  
One or more (*specify #*) \_\_\_\_\_ 1  
None . . . . . 2

- 5a. Is oil delivered to, shipped to, or produced at your facility? (*Circle only one.*)
- YES ..... 1  
 NO [skip to 8a] ..... 2
- 5b. On average, how much oil is delivered to, shipped to, or produced at your facility in a year? (*Enter quantity in gallons. NOTE: 1 barrel equals 42 gallons.*)
- Annual quantity \_\_\_\_\_ gallons
- 5c. Is any portion of the quantity reported in Question 5b burned, used, recycled, or otherwise consumed at your facility? (*Circle only one.*)
- YES ..... 1  
 If yes, specify the approximate percentage \_\_\_\_\_ percent  
 NO. .... 2
- 5d. Does any portion of the quantity reported in Question 5b leave your facility as product? (*Circle only one.*)
- YES ..... 1  
 If yes, specify the approximate percentage \_\_\_\_\_ percent  
 NO. .... 2
6. By what method(s) is oil delivered TO or shipped FROM your facility? (*Circle ALL applicable codes.*)
- Tank truck ..... 1  
 -- Tanker ship. .... 2  
 -- Tanker barge. .... 3  
 -- Rail car. .... 4  
 -- Pipeline. .... 5  
 -- Other truck (e.g., drums). .... 6  
 -- Other (*specify*) \_\_\_\_\_ 7

- 7a. For each transport method identified in Question 6 (except pipelines), how many times is oil delivered TO your facility each year? (*Complete ALL that apply.*)

**Example:** One truck that delivers oil to 5 different tanks at a facility each month is equal to 70 transfers per year (5 x 12 months).


- Tank truck \_\_\_\_\_ times per year  
 -- Tanker ship \_\_\_\_\_ times per year  
 -- Tanker barge \_\_\_\_\_ times per year  
 -- Rail car \_\_\_\_\_ times per year  
 -- Other truck (e.g., drums) \_\_\_\_\_ times per year  
 -- Other \_\_\_\_\_ times per year

- 7b. For each transport method identified in Question 6 (except pipelines), how many times is oil transferred FROM your facility each year? (*Complete ALL that apply.*)

**Example:** A facility that transfers oil from one tank to 10 trucks each week is equal to 520 transfers per year (10 x 52 weeks).

- Tank truck \_\_\_\_\_ times per year  
 -- Tanker ship \_\_\_\_\_ times per year  
 -- Tanker barge \_\_\_\_\_ times per year  
 -- Rail car \_\_\_\_\_ times per year  
 -- Other truck (drums) \_\_\_\_\_ times per year  
 -- Other \_\_\_\_\_ times per year

- 8a. At your facility, is there an oil transfer point or oil storage tank or oil storage container within 1/2 mile of navigable water? (*Circle only one code.*)

 NOTE: For questions 8, 9, and 10, the term "transfer point" refers to the location where oil is delivered to or moved from an oil storage tank, such as a fuel dispenser, a truck loading rack or platform, a loading arm, etc.

- YES [go to 8b] ..... 1  
 NO [skip to 8c] ..... 2  
 DON'T KNOW [skip to 8c] ..... 9

- 8b. Which one of the following navigable waters is closest? (*Circle only one.*)
- Lake . . . . . 1
  - River/stream . . . . . 2
  - Coastal waters . . . . . 3
  - Other tidally-influenced waters . . . . . 4
  - Other (*specify*)\_\_\_\_\_ 5

- 8c. At your facility, is there an oil transfer point or oil storage tank or oil storage container within 1/2 mile of a storm drain? (*Circle only one.*)
- YES . . . . . 1
  - NO . . . . . 2
  - DON'T KNOW . . . . . 9

- 9a. Is there a navigable water or storm drain downhill (down gradient) from your facility? (*Circle only one.*)
- YES . . . . . 1
  - NO [skip to 10] . . . . . 2
  - DON'T KNOW [skip to 10]. . . . . 9

- 9b. Is there a natural, physical impediment that would prevent a release from reaching the navigable water or storm drain? (*Circle only one.*)
- YES [describe]\_\_\_\_\_ 1
  - NO . . . . . 2
  - DON'T KNOW . . . . . 9

- 9c. Is there a man-made, physical impediment that would prevent a release from reaching the navigable water or storm drain? (*Circle only one.*)
- YES [describe]\_\_\_\_\_ 1
  - NO . . . . . 2
  - DON'T KNOW . . . . . 9

10. What is the shortest distance from an oil transfer point or oil storage tank or oil storage container to a sensitive environment (e.g., wetlands, national or state parks, critical habitats for endangered species, wilderness areas, or marine sanctuaries)? (*Circle only one.*)
- Less than 1/2 mile. . . . . 1
  - 1/2 to 1 mile. . . . . 2
  - Greater than 1 mile. . . . . 3
  - Don't know. . . . . 9

- 11a. Are subsurface monitoring techniques currently being used at your facility to detect contamination in soil or groundwater from hydrocarbons or related petroleum products (e.g., benzene)? (*Circle only one.*)
- YES . . . . . 1
  - NO [skip to 12a]. . . . . 2

- 11b. Indicate the number of groundwater monitoring wells and/or soil vapor monitoring devices operating at your facility. (*Complete ALL that apply.*)
- Number of groundwater monitoring wells: \_\_\_\_\_
  - Number of soil vapor monitoring devices: \_\_\_\_\_

- 12a. Does your facility have a written plan for responding to an oil spill when one occurs? (*Circle only one.*)
- YES . . . . . 1
  - NO [skip to 13a]. . . . . 2

- 12b. When was the plan described in Question 12a first developed? (*Provide BOTH month and year.*)
- MONTH (*circle only one*)
- 1 2 3 4 5 6 7 8 9 10 11 12 unknown
- YEAR (*specify*)\_\_\_\_\_



- 12c. Has the plan been updated since that time?  
(Circle only one.)
- YES ..... 1  
NO [skip to 13a]. ..... 2
- 12d. When was the plan described in Question 12a last updated? (Provide BOTH month and year.)
- MONTH (circle only one)  
1 2 3 4 5 6 7 8 9 10 11 12 unknown  
YEAR (specify) \_\_\_\_\_
- 13a. Are you aware of the federal government's oil Spill Prevention, Control and Countermeasures, or SPCC, regulation (40 CFR Part 112)? (Circle only one.)
- YES ..... 1  
NO. .... 2
- 13b. Do the requirements of that regulation apply to your facility? (Circle only one.)
- YES ..... 1  
NO. .... 2  
DON'T KNOW..... 9
14. What arrangements does your facility have for responding to discharges (spills, leaks, etc.) of oil? (Circle ALL that apply.)
- Facility equipment and personnel. . . . 1
  - Response contractor (on retainer). . . . 2
  - Response contractor (per incident). . . . 3
  - Oil spill cooperative. . . . . 4
  - Mutual assistance agreement. . . . . 5
  - Other (specify) \_\_\_\_\_ 6
  - None [skip to 16a]. . . . . 9

- 15a. Approximately how much did it cost to acquire (i.e., one-time, upfront costs) the response mechanisms identified in Question 14? (Complete ALL that apply.)
- Facility equipment/ personnel \_\_\_\_\_ Dollars
  - Response contractor(s) \_\_\_\_\_ Dollars
  - Oil spill cooperative \_\_\_\_\_ Dollars
  - Mutual assistance agreement \_\_\_\_\_ Dollars
  - Other \_\_\_\_\_ Dollars
- 15b. On average, how much does it cost to maintain these response mechanisms per year? (Complete ALL that apply.)
- Facility equipment/ personnel \_\_\_\_\_ Dollars/year
  - Response contractor(s) \_\_\_\_\_ Dollars/year
  - Oil spill cooperative \_\_\_\_\_ Dollars/year
  - Mutual assistance agreement \_\_\_\_\_ Dollars/year
  - Other \_\_\_\_\_ Dollars/year

**Questions 16 to 21 are voluntary; you may choose to answer these questions or skip to Tables 1 & 2.**

- 16a. Do you have a written plan for preventing oil discharges (leaks, spills, etc.) at your facility? (Circle only one.)
- YES ..... 1  
NO [skip to 17a]. ..... 2
- 16b. When was the plan described in Question 16a first developed? (Provide BOTH month and year.)
- MONTH (circle only one)  
1 2 3 4 5 6 7 8 9 10 11 12 unknown  
YEAR (specify) \_\_\_\_\_

- 16c. Has the plan been updated since that time?  
(Circle only one.)
- YES ..... 1  
NO [skip to 17a]. .... 2
- 16d. When was the plan described in Question 16a last updated? (Provide **BOTH** month and year.)
- MONTH (circle only one)  
1 2 3 4 5 6 7 8 9 10 11 12 unknown  
YEAR (specify) \_\_\_\_\_
- 17a. Do you have a formal inspection or oil spill/leak detection program at your facility?  
(Circle only one.)
- YES ..... 1  
NO [skip to 18a] ..... 2

- 17b. What type of inspections or detection methods are used? (Circle **ALL** that apply.)
- Visual external inspections. .... 1  
-- Internal tank inspections. .... 2  
-- Inventory monitoring. .... 3  
-- Integrity testing. .... 4  
-- Other (specify) \_\_\_\_\_ 5
- 18a. What formal training related to your facility's oil operations does your facility offer its employees? (Circle **ALL** that apply.)
- Spill prevention (SPCC plan) training . 1  
-- Spill response training. .... 2  
-- Oil-related safety and health. .... 3  
-- Other (specify) \_\_\_\_\_ 4  
-- No training provided. .... 5

18b. For each type of training selected in Question 18a, identify in the table below: (1) the number of employees who attend the training per year; (2) the percentage of all employees at your facility that receive the particular type of training per year; and (3) the average number of hours of training provided to each employee per year. (Complete **ALL** that apply.)

Type of Training	Number of Employees (Circle one code for each type of training.)	Percentage of all Employees (Enter a percentage for each type of training.)	Average Number of Hours Each Year (Enter a number for each type of training.)
Spill Prevention Training	One or more [specify] _____ . 1 None ..... 2	_____ . Percent	_____ Hours/year
Spill Response Training	One or more [specify] _____ . 1 None ..... 2	_____ . Percent	_____ Hours/year
Safety and Health Training	One or more [specify] _____ . 1 None ..... 2	_____ . Percent	_____ Hours/year
Other Training	One or more [specify] _____ . 1 None ..... 2	_____ . Percent	_____ Hours/year

*If you are familiar with EPA's oil Spill Prevention, Control, and Countermeasures (SPCC) program, please answer the following questions on what, if anything, you believe could be done to improve the program's implementation.*

19. Do you think that the SPCC program is effective in preventing or minimizing oil releases ? (*Circle only one.*)

YES. . . . . 1  
NO. . . . . 2

Why or why not?

20. Would you recommend changing the SPCC program to be more effective at your facility?

YES. . . . . 1  
NO. . . . . 2

If yes, how?

21. What types of information would assist you in understanding and/or complying with the federal government's SPCC program?

***Thank you for completing this portion of the survey questionnaire. Please note that you are also required to complete the enclosed two tables which request specific information about your oil storage tanks and any oil discharges that may have occurred at your facility.***

**RETURN COMPLETED SURVEYS TO:**

EPA SPCC SURVEY  
c/o ICF Incorporated  
9300 Lee Highway  
Fairfax, Virginia 22031-1207

**DIRECT OTHER WRITTEN CORRESPONDENCE TO:**

U.S. Environmental Protection Agency  
Emergency Response Division  
Mail Code 5202G  
401 M Street, SW  
Washington, D.C. 20460

**FOR SURVEY ASSISTANCE CALL:**

1-800-276-5485

**PLEASE USE YOUR SURVEY IDENTIFICATION NUMBER  
ON ALL CORRESPONDENCE. YOUR SURVEY IDENTIFICATION  
NUMBER IS LOCATED ON THE MAILING LABEL USED TO  
DELIVER THIS SURVEY TO YOU.**

