



**OFFICE OF THE ILLINOIS STATE FIRE MARSHAL**  
**Division of Petroleum and Chemical Safety**  
 1035 Stevenson Drive  
 Springfield, Illinois 62703-4259  
 (217)785-1020

<u>FOR OFFICE USE ONLY</u>
Facility # 2-045437
Permit # 00774-2013REM
Request Rec'd 08/07/2013
Amended Date
Approval Date 8/7/2013 DS
Permit Expires 2/7/2014

**Permit for REMOVAL of Underground Storage Tank(s) and Piping for Petroleum and Hazardous Substances.**

Permission to remove underground storage tank(s) or piping is hereby granted. Such removal shall not commence until the contractor the permit was issued to or an employee of that contractor (this does not include a subcontractor) shall establish a date certain to perform the UST activity by contacting the Office of the State Fire Marshal, Division of Petroleum and Chemical Safety, by telephone at the Springfield office between 8:30 a.m. and 12:00 p.m., at which time a mutually agreed upon date and time for the UST activity shall be scheduled. **THIS PERMIT IS VALID FOR SIX MONTHS FROM THE APPROVAL DATE.**

<p><b>(1) OWNER OF TANKS</b> - Corporation, partnership, or other business entity:</p> <p>Sessions Family Trust        11660 German Church Road        Burr Ridge, IL 60527</p> <p>Contact:</p>	<p><b>(2) FACILITY</b> - name and address where tanks are located:</p> <p>Sessions Property        11660 German Church Road        Burr Ridge, Du Page Co., IL</p> <p>Contact:</p>
---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

**(3) REMOVAL OF TANKS:**

- (a) *Number and size of tanks being removed:* (TK # 1) - 2,000 gallons
- (b) *Description/location of piping being removed:*
- (c) *Product stored in each tank:* (TK # 1) - Gasoline
- (d) *Reason of tanks being removed:*
- (e) *If tank(s) is leaking, indicate IEMA incident number:*
- (f) *Date each tank was last used:* (TK # 1) - 06/01/2005

**(4) The owner must notify this Office when completion of tank removal has occurred, on the Notification for Underground Storage Tank Form. This form can be obtained at [www.sfm.illinois.gov](http://www.sfm.illinois.gov) or by calling (217)785-1020. After removal is completed, the owner/operator shall perform a site assessment by measuring for the presence of a release where contamination is most likely to be present at the UST site. This is in accordance with the Illinois Administrative Code 176.360 (a) regulations and 40 CFR Part 280.72 (a) Federal Register Requirement.**

**(5) SPECIAL CONTINGENCIES:**

<p><b>(6) PERSON, FIRM OR COMPANY PERFORMING WORK:</b></p>	
<p>R. W. Collins Company        7225 West 66th Street        Chicago, IL 60638</p>	<p>Contact Person: Kimberly Collins        Phone: (708) 458-6868</p> <p>Contractor Registration # IL-772 Exp. 02/09/2014</p>

Sincerely,

Daniel Starks

cc: Storage Tank Safety Specialist -  
 Fire Department -  
 Division File  
 (Rev. - 9/10)