

**PETROLEUM UST RELEASE COMPENSATION BOARD  
ANNUAL FREE PRODUCT RECOVERY (FPR) EVALUATION & COST PRE-APPROVAL**

Instructions: If free product has been present for more than one year after initiating free product recovery (FPR), this annual evaluation must be completed and returned to the Board for pre-approval of future FPR costs for each release site. The contents of this form (except for responses) may not be altered. PLEASE TYPE or PRINT.

Claim # \_\_\_\_\_ Owner Name: \_\_\_\_\_  
Release # \_\_\_\_\_ and address \_\_\_\_\_  
\_\_\_\_\_

Release Site Name \_\_\_\_\_ Contact Person \_\_\_\_\_  
& address \_\_\_\_\_ phone number & e-mail \_\_\_\_\_  
\_\_\_\_\_ Consultant Name \_\_\_\_\_  
and address \_\_\_\_\_  
\_\_\_\_\_

Date the Free Product Recovery first began: \_\_\_\_\_

Type(s) of product recovered:  Gasoline  Diesel  Other (specify) \_\_\_\_\_

Frequency of FPR visits during the past 12 months: \_\_\_\_\_ times per year

Method(s) used during the past 12 months:

Method(s) proposed:

- Hand Bailing
- Absorbent Socks
- Active Skimmer
- Passive Skimmer
- Vac Truck
- Pump & Treat
- Other (specify) \_\_\_\_\_

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- Other (specify) \_\_\_\_\_

Total dollars requested for the next 12 months: \_\_\_\_\_ Estimated Time Until FPR Completion \_\_\_\_\_ (months)

Frequency of FPR visits anticipated for the next 12 months: \_\_\_\_\_ times per year

Cost Summary: **Please attach** a detailed cost breakdown (labor, time and materials, etc.) for the work proposed in this evaluation.

Progress Summary: **Please attach:**

- A brief (no more than two pages) narrative regarding progress made on the FPR. Please do not attach FPR reports completed to fulfill BUSTR requirements;
- A site map showing the location of all monitoring wells and extraction wells with product;
- A tabular summary (no more than two pages) of the FPR history, including the total amount of product recovered;
- A brief statement evaluating whether a more cost effective alternative is an option.

\_\_\_\_\_  
**Owner Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Consultant Signature**

\_\_\_\_\_  
**Date**