



UNITED STATES MARINE CORPS  
MARINE CORPS INSTALLATIONS EAST-MARINE CORPS BASE  
PSC BOX 20005  
CAMP LEJEUNE NC 28542-0005

MCIEAST-MCB CAMLEJO 5090.91B  
G-F/BEMD

01 OCT 2025

MARINE CORPS INSTALLATIONS EAST-MARINE CORPS BASE CAMP LEJEUNE ORDER  
5090.91B

From: Commanding General  
To: Distribution List

Subj: USED OIL, OFF-SPECIFICATION FUEL, USED ANTIFREEZE, AND OIL POLLUTION ABATEMENT SYSTEMS MANAGEMENT

Ref: (a) 42 USC §6901, Congressional findings  
(b) 33 USC §1251, Congressional declaration of goals and policy  
(c) MCIEAST-MCB CAMLEJO 11320.1

Encl: (1) ESOP 9.101 Used Oil, Off-Spec Fuel, and Used Antifreeze Management Program  
(2) ESOP 9.102 Management of Oil-Water Separators (OWS) and Pollution Abatement Facilities  
(3) Monitoring Log for Oil Pollution Abatement Facilities OWS Daily Inspection  
(4) MCIEAST-MCB CAMLEJ Service Request  
(5) Drum Site Inspection Checklist  
(6) Weekly Storage Tank System Inspection Checklist  
(7) MCIEAST-MCB CAMLEJ Spill Report  
(8) Environmental Personnel Training Record

1. Situation. Reference (a), in part, expresses congressional desire for proper and economical solid waste disposal practices. Reference (b), in part, requires Federal agencies to cooperate with State and local agencies to develop solutions to prevent, reduce, and eliminate pollution in concert with programs for managing water resources. This Order, in part, supplements the references, establishes procedures, and assigns responsibilities for Marine Corps Installations East-Marine Corps Base Camp Lejeune (MCIEAST-MCB CAMLEJ) used oil, off-specification (Off-Spec) fuel (e.g., gasoline, diesel), and used antifreeze management on Marine Corps Base Camp Lejeune (MCB CAMLEJ) and Marine Corps Air Station New River (MCAS NR). It also establishes procedures for managing oil pollution abatement systems. MCB CAMLEJ and MCAS New River may be referred to as the "Installation" within this Order.

2. Cancellation. MCIEAST-MCB CAMLEJO 5090.91A.

3. Mission. To protect human health and the environment; protect, sustain, and enhance mission readiness; and promote compliance with all applicable Federal, state, and local requirements and policy concerning

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used oil, off-spec fuel, used anti-freeze management, and waste minimization. To establish procedures and assign responsibilities supporting used oil, off-spec fuel, used antifreeze management, and oil pollution abatement on the Installation.

4. Execution

a. Commander's Intent and Concept of Operations

(1) Commander's Intent. To abate oil pollution and effectively manage, monitor, and maintain used oil, off-spec fuel, and used antifreeze to comply with all applicable requirements governing their management.

(2) Concept of Operations. Primary tasks and information are provided below and in the enclosures. This Order ensures that MCIEAST-MCB CAMLEJ, and its subordinate commands, staff sections, and Installation tenants, prioritize proper management of used oil, off-spec fuel, used antifreeze, and pollution abatement systems to protect human health and the environment.

b. Tasks

(1) MCIEAST-MCB CAMLEJ Assistant Chief of Staff (AC/S), G-F. Shall serve as the principal staff lead for Used Oil, Off-Specification Fuel, Used Antifreeze, and Pollution Abatement System management on the Installation and oversee, coordinate, and direct implementation of this Order. The other MCIEAST-MCB CAMLEJ principal and special staff support the AC/S, G-F in overseeing, coordinating, and directing implementation of this Order.

(2) MCIEAST-MCB CAMLEJ Unit and Area Commanders, Primary and Special Staff, and Supervisors on the Installation. Shall comply with all applicable requirements within this Order and support the AC/S, G-F in overseeing, coordinating, and directing implementation of this Order.

(3) AC/S Security and Emergency Services (SES) Department. Shall support the AC/S G-F in implementing this Order and reference (c), by directing the MCIEAST-MCB CAMLEJ Fire and Emergency Division and its support of safe and proper management of used oil, off-spec fuel, and used antifreeze, and by overseeing its emergency responses to oil spills and hazardous substance releases on the Installation.

(4) Resident Officer-in-Charge of Construction (ROICC). The ROICC, with Environmental Management Division support, shall support the AC/S GF in implementing this Order by addressing management of used oil, off-spec fuel, and used antifreeze, as applicable in Government contracting and in Government contract management and oversight.

(5) Tenant Organizations and Contractors. Shall comply with all applicable requirements within this Order. Tenant organizations

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may also develop orders, directives, and/or standard operating procedures as needed to implement this Order.

5. Administration and Logistics. All Environmental Standard Operating Procedures (ESOPs) enclosed within this Order are found within the Environmental Management System (EMS) for the Installation. The EMS also contains ESOPs identifying the roles and responsibilities for the Environmental Compliance Officer (ECC) and Environmental Compliance Coordinator (ECO). The ESOPs can be found at <https://www.lejeune.marines.mil/Offices-Staff/Environmental-Mgmt/ECPSOP/Shop-Level-Standard-Operating-Procedures/>.

6. Command and Signal

a. Command. This Order is applicable to MCIEAST-MCB CAMLEJ and its subordinate commands and staff sections on the Installation. It is also applicable to Installation tenant organizations and contractors (in the absence of a specific contractual requirement to the contrary).

b. Signal. This Order is effective the date signed.



D. K. BURROWS  
Chief of Staff

DISTRIBUTION: A/C (plus NMCL, MCAS NR, H&S Bn, and WTBn)

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Environmental Standard Operating Procedures (ESOP)

Title: 9.101 - USED OIL, OFF-SPEC FUEL, AND USED ANTIFREEZE MANAGEMENT PROGRAM ENVIRONMENTAL STANDING OPERATING PROCEDURES (ESOP)

Purpose: This ESOP establishes the procedures for the proper management and storage of used oil, off-spec fuel (e.g., gasoline, diesel), and used antifreeze. Properly managed, used oil, off-spec fuel, and used antifreeze can be collected, recycled, and reused. This ESOP must be placed into the unit's/department's environmental binder.

Applicability: This ESOP applies to all organizations on Marine Corps MCB CAMLEJ and MCAS NR, including any command, active or reserve component; staff organization; or supporting agency which is affiliated with the United States Marine Corps (USMC), Department of the Navy (DON), or Department of Defense (DOD).

General Administration

1. This ESOP publishes environmental compliance requirements; those who violate it may be subject to Federal or state laws, nonjudicial punishment (NJP), judicial action under the Uniform Code of Military Justice (UCMJ), or adverse administrative action.
2. Garrison operations on MCAS NR shall coordinate with the Installation and Environmental Department (I&E), MCAS NR at 910-449-5997, to determine proper container types for management of off-spec F24 fuel, used oil, other off-spec fuels, and used antifreeze. Servicing containers at MCAS NR will be coordinated through I&E, MCAS NR.
3. Off-spec fuel must be stored in separate tanks from used oil as the flashpoint for off-spec fuel is lower and has the potential to be classified as a hazardous waste (HW) if not managed in accordance with this ESOP.
4. Compressor oil must be stored separately as it will add chlorinated solvents to the storage container of used oil, off-spec fuel, or used antifreeze which has the potential to make the material be classified as a HW.

Responsibility: All units/departments who handle used oil, off-spec fuel, and used antifreeze, or operate/utilize used oil, off-spec fuel, and used antifreeze collection facilities.

Procedure

1. Unit-Level Collection of Used Oil, Off-Spec Fuel, and Used Antifreeze

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a. Ensure containers used to transfer used oil, off-spec fuel, or used antifreeze to their storage locations are labeled "USED OIL", "OFF-SPEC FUEL including the type (e.g., gasoline, diesel)," or "USED ANTIFREEZE" as appropriate.

b. Used oil, off-spec fuel, and used antifreeze which cannot be utilized in tacticle vehicles will be separately collected in appropriate containers of sufficient capacity.

c. The Unit's hazardous material (HM) handler or environmental representative shall notify EMD's Resource Conservation and Recovery Section (RCRS) when the container reaches 75% of its capacity. This notification will be made from an official work e-mail address to [Lejeune\\_PAS@usmc.mil](mailto:Lejeune_PAS@usmc.mil) using the "MCIEAST\_MCB Camp Lejeune Service Request" Form MCIEAST-MCB CAMLEJ/G-F/EMD/14.

d. The RCRS will dispatch a vehicle to remove the used oil, off-spec fuel, and/or used antifreeze. In the event emergency storage space is needed, properly marked 55-gallon drums may be used as temporary storage and RCRS must be notified via email ([Lejeune\\_PAS@usmc.mil](mailto:Lejeune_PAS@usmc.mil)). Long-term accumulation of used oil, off-spec fuel, and used antifreeze using 55-gallon drums requires documented approval with a specific date range provided by RCRS. Contact RCRS via e-mail ([Lejeune\\_PAS@usmc.mil](mailto:Lejeune_PAS@usmc.mil)) for more inforamtion.

e. Secondary containment must be provided for all used oil, off-spec fuel, and used antifreeze accumulation sites in accordance with paragraph 3 of this ESOP.

f. Spent or unserviceable lubrication grease will be collected and accumulated in suitable containers, and turned in to RCRS during the unit's next Curbside Service appointment.

g. Personnel must ensure Petroleum, Oils, and Lubricants (POLs), including used oil, off-spec fuel, and used antifreeze are handled safely and carefully to minimize the possibility of spillage.

h. Saturated soils in the vicinity of used oil, off-spec fuel, or used antifreeze storage areas shall be reported to RCRS and noted on the "Drum Site Inspection Checklist" Form MCIEAST-MCB CAMLEJ/G-F/EMD/32. The Drum Site Inspection Checklist shall be filed in the unit's/department's environmental binder.

i. Oil-Water Separators (OWSs) shall be inspected daily using the "Monitoring Log for Oil Pollution Abatement Facilities OWS Daily Inspection" Form MCIEAST-MCB CAMLEJ/G-F/EMD/5090.91/31.

j. Personnel changing privately owned vehicle oil, antifreeze, fuel or conducting vehicle maintenance on the Installation shall use established Marine Corps Community Services (MCCS) facilities and deposit used oil, off-spec fuel, and used antifreeze into one of the MCCS authorized collection containers. The deliberate discharge of POLs into the environment is unlawful.

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k. Personnel shall ensure POLs, used oil, off-spec fuel, and used antifreeze are not mixed.

l. Personnel shall ensure Aboveground Storage Tank (AST) levels are monitored and recorded every operational day.

2. Used Oil, Off-Spec Fuel, and Used Antifreeze Accumulation Areas

a. Containers, ASTs, and fill pipes used to accumulate waste or transfer waste to an underground storage tank system, must be clearly labeled "USED OIL", "OFF-SPEC FUEL including the type (gasoline, diesel)", or "USED ANTIFREEZE" as appropriate.

b. Containers used to accumulate used oil, off-spec fuel, or used antifreeze must:

- (1) Be in good, serviceable condition;
- (2) Not be leaking, bulging, rusting, damaged, or dented;
- (3) Be compatible with the material stored in them; and
- (4) Be closed and properly vented when not being filled.

3. Secondary Containment

a. Secondary containment must be provided for ASTs (with a capacity of 55-gallons and greater) used to accumulate used oil, off-spec fuel, or used antifreeze.

b. Secondary containment must meet the following criteria:

- (1) Be inspected weekly;
- (2) Be constructed of, or lined with, materials compatible with, and impervious to, the product being accumulated and any accumulated precipitation or soil conditions;
- (3) Be designed to contain 100 percent of the largest capacity within its boundary plus precipitation from a maximal 25-year, 24-hour rainfall event if the accumulation area is located outside or inside with the potential for spillage reaching the exterior of the building. Currently this equals the volume of the largest container plus eight inches of freeboard;
- (4) Be free of cracks, gaps, rips, or tears;
- (5) Be capable of collecting releases and accumulated liquids until removal is possible;
- (6) Be sloped or designed to drain and remove liquids from leaks, spills, and precipitation; and

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(7) Not be used to accumulate wastes incompatible with the used oil, off-spec fuel, and/or used antifreeze being accumulated.

c. There are no specific marking requirements for secondary containment.

d. Appropriate measures must be taken to prevent spillage and overfilling. These include, but are not limited to:

(1) Spill prevention controls;

(2) Overfill prevention controls; and

(3) Frequent tank level monitoring using a dipstick.

**4. Collection and Transport of Used Oil, Off-Spec Fuel, or Used Antifreeze by RCRS**

a. The unit HM Handler will notify RCRS when a used oil, off-spec fuel or used antifreeze tank reaches 75 percent of its capacity. Notification will be made with the "MCIEAST\_MCB Camp Lejeune Service Request" Form MCIEAST-MCB CAMLEJ/G-F/EMD/14 and email the form from an official work e-mail address to Lejeune\_PAS@usmc.mil. Notification will include the type of off-spec fuel (e.g. gasoline, diesel).

b. The unit HM Handler shall document this on the Weekly Storage Tank System Inspection Checklist and keep a copy in the unit's/department's environmental binder.

**5. Management of Used Oil and Used Fuel Filters. Both used oil and used fuel filters shall be managed as a solid waste consistent with the following procedures.**

a. Each filter shall have its dome or anti-drain back valve punctured and be drained into a properly marked (used oil or off-spec fuel) container for a minimum of 24-hours.

b. Properly drained filters shall be placed into a RCRS approved container, with the lid on and closed, for weekly curbside service pick-up by RCRS.

**6. Prohibited Acts**

a. No person may knowingly:

(1) Discharge used oil, off-spec fuel, or used antifreeze into oil water separators (OWSs), sewers, drainage systems, septic tanks, floor drains, surface waters, ground waters, watercourses, or marine waters.

(2) Dispose of used oil, off-spec fuel, or used antifreeze in landfills.

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(3) Mix used oil, off-spec fuel, or used antifreeze with solid waste that are to be disposed of in landfills.

(4) Mix used oil, off-spec fuel, or used antifreeze with hazardous waste that makes the mixture unsuitable for recycling or beneficial use.

b. Used oil, off-spec fuel, or used antifreeze shall not be used for road oiling, dust control, weed abatement, or other similar purposes that would release used oil, off-spec fuel, or used antifreeze into the environment.

## 7. Spill Reporting and Response Requirements

a. All unit's/departments are required to maintain a current Unit Level Contingency Plan (ULCP). Ensure the ULCP contains policies and procedures for the control and prevention of oil and HM spills. The ULCP must be posted in a prominent location.

b. Any releases or spills that occur in or around the unit's area of responsibility must be reported immediately to the Base Fire and Emergency Services Division (FESD) by dialing 911. The "MCIEAST-MCB Camp Lejeune Spill Report" Form MCIEAST-MCB CAMLEJ/G-F/EMD/5090.91/18 must be completed and forwarded to the command ECO via the unit's ECC or Assistant Environmental Compliance Coordinator (AECC). A copy of the completed spill report must be maintained in the unit's/department's environmental binder. Forms can be obtained by the unit ECC/AECC, the command ECO, or downloaded at <https://www.lejeune.marines.mil/Offices-Staff/Environmental-Mgmt/emd-approved-Forms/>

c. Units must stock appropriate amounts of spill containment and control equipment on-site for use in the event of a spill.

d. Signs are to be posted in the vicinity of the used oil, off-spec fuel, used antifreeze, HM, or pollution abatement facility that states the following:

**IN CASE OF AN OIL OR HAZARDOUS MATERIAL SPILL  
CALL FIRE AND EMERGENCY SERVICES DIVISION AT 911  
NOTIFY YOUR COMMANDER/SUPERVISOR IMMEDIATELY**

The sign must have yellow background with black lettering. Information to purchase the signs can be obtained from the cognizant ECO.

## References

(a) Environmental Binder Webpage  
<https://www.lejeune.marines.mil/Offices-Staff/Environmental-Mgmt/ECObinder/>

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Training

1. All unit personnel shall be trained on the provisions of this ESOP.
2. All unit personnel shall be trained on the environmental impact a release of HM, HW, wastewater, POLs, Fire, or release of toxic fumes and the prevention of such incidents.
3. Unit commanders shall ensure personnel performing operations such as vehicle maintenance, fueling, or washing are properly trained in the operation and maintenance of pollution abatement systems.
4. All environmental compliance training must be documented in each individual's Environmental Personnel Training Record using "Environmental Personnel Training Record" Form MCIEAST-MCB CAMLEJ/G-F/EMD/5090.9/27 and available for review.

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Environmental Standard Operating Procedures (ESOP)

Title: 9.102 - MANAGEMENT OF OIL-WATER SEPARATORS (OWS) AND POLLUTION ABATEMENT SYSTEMS ESOP

Purpose: This ESOP establishes the procedures for the proper management of OWS and pollution abatement systems to ensure compliance with 42 USC §6901, Congressional findings. This ESOP must be placed into the unit's/department's environmental binder.

Applicability: This ESOP applies to all organizations on MCB CAMLEJ and MCAS NR, including; any command, active or reserve component; staff organization; or supporting agency which is affiliated with the USMC, DON, or DoD.

General Administration

1. Pollution abatement systems primarily collect rinsate (run-off) from vehicle wash racks, some maintenance garage floor drains, and fuel transfer areas. These systems must be routinely monitored to ensure proper operation and usage. Without proper oversight, these systems may malfunction and discharge POLs to the MCB CAMLEJ Advance Wastewater Treatment Plant or to a storm water drainage system.
2. Garrison operations on MCAS NR shall coordinate with the Installation and Environmental Department (I&E), MCAS NR at 910-449-5997.
3. Servicing of OWS systems on MCAS NR will be coordinated through I&E, MCAS NR at 910-449-5997.

Responsibility: All unit's/department's with pollution abatement systems associated with their unit operations, or under their cognizance.

Procedure1. Prohibited Activities:

a. The direct disposal of oils, fuels, HM, or HW from a container, vehicle, or equipment into the pollution abatement systems is STRICTLY PROHIBITED. Triple rinsing of POL containers (55gal or less) is authorized if the container is empty. Do not rinse antifreeze containers at these facilities as antifreeze is mixed with water and will not be captured by the systems. Antifreeze containers will be turned into the EMD RCRS.

b. No cans, sticks, leaves, oil filters, rags, brushes, litter, or other foreign objects may be discarded on or into the pollution abatement systems. Units are responsible for removal of trash and debris from the pollution abatement systems using a pool net or

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something similar and at no time will personnel enter a confined space.

c. Do not use or discard solvents on wash racks or in floor drains. Floor drains are designed for incidental spills or leaks and are not intended for direct discharges of wastes. Cleaning agents and detergents used on wash racks must be approved and listed on the unit's applicable work center Authorized Use List (AUL).

d. Floor sweepings and dry sweep will not be washed down the floor drain. Any spill requiring dry sweep shall be swept and disposed of appropriately before washing down the racks.

e. Immediate unrestricted vehicle access to all parts of the pollution abatement systems shall be available.

f. Vehicle washing operations are only to be conducted on an approved wash rack tied to an OWS system. Only government owned, commercial, or tactical equipment and vehicles shall be washed.

2. Daily Inspections: The unit ECC, AECC, or trained hazardous material HM handler operating the system is responsible for inspecting the unit's pollution abatement systems each operational day.

a. The inspections must be documented on the "Monitoring Log for Oil Pollution Abatement Facilities OWS Daily Insektion" Form MCIEAST-MCB CAMLEJ/G-F/EMD/5090.91/31.

b. The inspection process includes checks for:

- (1) Cracks or other structural damage;
- (2) Oil spills around the systems;
- (3) Direct discharges of oil, used oil, fuel and/or off-spec fuel (e.g., gasoline, diesel);
- (4) Foreign objects/debris (e.g., cans, bottles, sticks, rags,) and removal;
- (5) System clogging or OWS bypass; and
- (6) Post-indicator valves closure and locking

3. Daily Maintenance/Housekeeping

a. Policing: Ensure all grass and vegetation adjacent to the systems is cut and trash and other debris are removed on a regular basis. Remove any foreign objects/debris observed in the pollution abatement systems by using a dip net or other appropriate equipment. UNDER NO CIRCUMSTANCES ARE PERSONNEL ALLOWED TO ENTER THE OWS OR OTHER SYSTEM COMPONENTS IN ORDER TO RETRIEVE DEBRIS. These systems are

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permit-required confined spaces and require special training and equipment to enter.

b. Vehicle Management: Whenever possible, vehicles should be parked on an impervious surface (i.e., concrete or asphalt) to avoid the discharge of HM into the environment. Maintenance operations should always be conducted on impervious surfaces and wet maintenance will be conducted inside the maintenance facility. Prior to using the wash apron, excess grit should be removed, prior to vehicle washing.

c. Bilge Water: Utilize the wash rack to clean vehicles and equipment as well as release the bilge water. Bilge water will be removed from vehicles and equipment on the wash rack only. Bilge water will be collected in a container large enough to contain the bilge water and marked with the words "used oil" for visual inspection of POLs. If a sheen is visible on the surface, utilize matting to collect the POL prior to allowing the bilge water to enter the OWS. Contact EMD RCRS Pollution Abatement Section at (910) 451-5264/5478/3124 or [lejeune\\_pas@usmc.mil](mailto:lejeune_pas@usmc.mil) for bilge water that may contain antifreeze or sea die packs.

d. Wash Aprons: Properly dispose of all absorbents prior to washing down the concrete wash apron. Concrete wash aprons should be washed and hosed down after each use to keep the aprons neat and orderly. Pressure washers are highly recommended. Only detergents approved and listed on the unit's applicable work center AUL may be utilized for washing. Any spills that occur must be cleaned up using an absorbent prior to hosing down. Ensure that any wash water is directed to the OWS.

e. Grit Chambers: Grit chambers are designed to collect runoff from wash aprons and to capture any sand, grit or large solids prior to entering downstream structures (e.g., OWS). It is important that the grit chambers be checked daily to ensure solids are not accumulating to such an extent that grit could be further transmitted through the pollution abatement systems. The grating which covers the top of the grit chamber or piping and allows the surface drainage to enter the structure must remain in place as designed and be kept free of heavy accumulations of solids, such as rags and leaves.

f. Stormwater Bypass: The stormwater bypass must be inspected daily for any visible signs of oily discharge. Any deficiencies noted should be immediately reported to the FESD 911 and RCRS at 910-451-5264/1482.

#### 4. Servicing and Maintenance Requests

a. Oil that accumulates and floats on the surface of the OWS must be periodically removed. The oil must not be allowed to collect to such an extent that it is discharged from the OWS to the wastewater distribution system.

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b. Personnel from RCRS service most of the OWS and grit chambers on a regular basis to keep them from filling to critical levels. Unit personnel must record this servicing on the "Monitoring Log for Oil Pollution Abatement Facilities OWS Daily Inspection" Form MCIEAST-MCB CAMLEJ/G-F/EMD/5090.91/31.

c. When the thickness of the oil floating on top of the OWS becomes approximately two inches, operating personnel need to request service for the facility by filling out the "MCIEAST\_MCB Camp Lejeune Service Request" Form MCIEAST-MCB CAMLEJ/G-F/EMD/14 and emailing it from an official work e-mail address to Lejeune\_PAS@usmc.mil. To determine if two inches of oil is present, the surface must be disturbed using a pole or other device to agitate any POLs.

d. If oil appears to be bypassing the system, immediately cease operations and contact FESD 911 and RCRS at 910-451-5264/1482.

e. Mechanical maintenance on pollution abatement systems is prohibited at the unit level. If repairs are required to address structural or mechanical damage to any part of the pollution abatement systems, please contact RCRS prior to initiating a work ticket through MCIEAST-MCB CAMLEJ Public Works Division's (PWD) Operations Section. If an immediate problem arises with the system, call RCRS at 910-451-5264/1482. If a spill or release is identified immediately call FESD 911. Annotate any problems on the Monitoring Log for Oil Pollution Abatement Facilities OWS Daily Inspection. PWD/Operations Section's work reception phone number is 910-451-3001.

## 5. Spill Reporting and Response Requirements

a. All unit's/departments are required to maintain a current ULCP. Ensure the ULCP contains policies and procedures for the control and prevention of oil and HM spills. The ULCP must be posted in a prominent location.

b. Any releases or spills that occur in or around the unit's area of responsibility must be reported immediately to the Base FESD by dialing 911. The "MCIEAST-MCB Camp Lejeune Spill Report" Form MCIEAST-MCB CAMLEJ/G-F/EMD/5090.91/18 must be completed and forwarded to the command ECO via the unit's ECC or AECC. A copy of the completed spill report must be maintained in the unit's/department's environmental binder. Forms can be obtained by the unit ECC/AECC, the command ECO, or downloaded at <https://www.lejeune.marines.mil/Offices-Staff/Environmental-Mgmt/emd-approved-Forms/>

c. Units must stock appropriate amounts of spill containment and control equipment on-site for use in the event of a spill.

d. Signs are to be posted in the vicinity of the used oil, off-spec fuel, used antifreeze, HM, or pollution abatement facility that indicates the following information:

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IN CASE OF AN OIL OR HAZARDOUS MATERIAL SPILL  
CALL FIRE AND EMERGENCY SERVICES DIVISION AT 911  
NOTIFY YOUR COMMANDER/SUPERVISOR IMMEDIATELY

The sign must have yellow background with black lettering.  
Information to purchase the signs can be obtained from the cognizant ECO.

References

- (a) 42 USC §6901, Congressional findings
- (b) 33 USC §1251, Congressional declaration of goals and policy
- (c) Environmental Binder Webpage  
<https://www.lejeune.marines.mil/Offices-Staff/Environmental-Mgmt/ECObinder/>

Training

1. All unit personnel shall be trained on the provisions of this ESOP.
2. All unit personnel shall be trained on the environmental impact a release of HM, wastewater, POLs, Fire, or release of toxic fumes and the prevention of such incidents.
3. Unit commanders shall ensure personnel performing operations such as vehicle maintenance, fueling, or washing are properly trained in the operation and maintenance of pollution abatement systems.
4. All environmental compliance training must be documented in each individual's Environmental Personnel Training Record using "Environmental Personnel Training Record" Form MCIEAST-MCB CAMLEJ/G-F/EMD/5090.9/27 and available for review

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# MONITORING LOG FOR OIL POLLUTION ABATEMENT FACILITIES

## OWS Daily Inspection

MONTH: \_\_\_\_\_

BUILDING NUMBER: \_\_\_\_\_

UNIT: \_\_\_\_\_

DAY INSPECTED	PERSON CONDUCTING INSPECTION	TIME	IS OWS FREE OF DEBRIS?	IS THERE LESS THAN 2' OF OIL ON TOP?	VEHICLE WASHING COMPLETED ON LOT?	SPILLS ON LOT OR WITHIN BUILDING?	IS THE PIV CLOSED? (IF APPLICABLE)	IF DEBRIS PRESENT WAS IT REMOVED?	WAS A SERVICE TICKET REQUIRED?	TICKET NUMBER	COMMENT/PERSON CONTACTED FOR TICKET NUMBER
1			<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES
2			<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES
3			<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES
4			<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES
5			<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES
6			<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES
7			<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES
8			<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES
9			<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES
10			<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES
11			<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES
12			<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES
13			<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES
14			<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES
15			<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES
16			<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES
17			<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES
18			<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES
19			<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES
20			<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES
21			<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES
22			<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES
23			<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES
24			<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES
25			<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES
26			<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES
27			<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES
28			<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES
29			<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES
30			<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES
31			<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES

01 OCT 2025

**MCIEAST-MCB CAMP LEJEUNE  
SERVICE REQUEST****REQUEST Identification**

Request Number: \_\_\_\_\_ Entered By: \_\_\_\_\_

Branch: \_\_\_\_\_ Entry Date: \_\_\_\_\_

Second Request: \_\_\_\_\_

**UNIT IDENTIFICATION**Major Command: \_\_\_\_\_  Building: \_\_\_\_\_

Unit Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Unit Point of Contact: \_\_\_\_\_ RCRS Commodity: \_\_\_\_\_

**SERVICE DOCUMENTATION**

Date Inspected: \_\_\_\_\_ Inspected By: \_\_\_\_\_

Date Picked Up: \_\_\_\_\_ Picked Up By: \_\_\_\_\_

Vehicle Used: \_\_\_\_\_ Amount Picked Up: \_\_\_\_\_ Unit: 

FAC/STORAGE: \_\_\_\_\_ Chlor-n-oil ppm: \_\_\_\_\_

**ADMIN NOTES:****DRIVER NOTES:**

E-mail to: Lejeune\_PAS@usmc.mil

01 OCT 2025

## DRUM SITE INSPECTION CHECKLIST

**Instructions:** One inspection checklist per drum set. (\*) designates an item in non-conformance/unsatisfactory status; provide action in comment section to resolve problem and notify Environmental Protection Specialist if any significant deficiencies are identified.

**Regulatory Driver:** 40 CFR 112

**Frequency:** Weekly

Drum Site Name:

Date:

Location: \_\_\_\_\_ Quantity of Drums: \_\_\_\_\_ Volume of Drums: \_\_\_\_\_ Content: \_\_\_\_\_

**Inspection Guidance:**

- > For equipment not included in this Standard, follow the manufacturer recommended inspection/testing schedules and procedures.
- > The periodic AST inspection is intended for monitoring the external AST condition and its containment structure. This visual inspection does not require a Certified Inspector. It shall be performed by an owner's inspector who is familiar with the site and can identify changes and developing problems.
- > (\*) designates an item in a non-conformance status. This indicates that action is required to address a problem.
- > Non-conforming items important to tank or containment integrity require evaluation by an engineer experienced in AST design, a Certified Inspector, or a tank manufacturer who will determine the corrective action. Note the non-conformance and corresponding corrective action in the comment section.
- > Retain the completed checklist for 36 months.

Item	Area: _____	Area: _____	Area: _____
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**1.0 AST Containment/Storage Area**

1.1 AST's within designated storage area?	<input type="checkbox"/> Yes	<input type="checkbox"/> No*	<input type="checkbox"/> Yes	<input type="checkbox"/> No*	<input type="checkbox"/> Yes	<input type="checkbox"/> No*
1.2 Debris, spills, or other fire hazards in containment or storage areas?	<input type="checkbox"/> Yes*	<input type="checkbox"/> No	<input type="checkbox"/> Yes*	<input type="checkbox"/> No	<input type="checkbox"/> Yes*	<input type="checkbox"/> No
1.3 Water in outdoor secondary containment?	<input type="checkbox"/> Yes*	<input type="checkbox"/> No	<input type="checkbox"/> Yes*	<input type="checkbox"/> No	<input type="checkbox"/> Yes*	<input type="checkbox"/> No
1.3.1 Secondary Containment Drainage Log	Sheen Visible <input type="checkbox"/> Yes <input type="checkbox"/> No Product Visible <input type="checkbox"/> Yes <input type="checkbox"/> No Treatment Employed: <input type="checkbox"/> Yes <input type="checkbox"/> No Time Drain Valve Opened _____ Time Drain Valve Closed _____	Sheen Visible <input type="checkbox"/> Yes <input type="checkbox"/> No Product Visible <input type="checkbox"/> Yes <input type="checkbox"/> No Treatment Employed: <input type="checkbox"/> Yes <input type="checkbox"/> No Time Drain Valve Opened _____ Time Drain Valve Closed _____	Sheen Visible <input type="checkbox"/> Yes <input type="checkbox"/> No Product Visible <input type="checkbox"/> Yes <input type="checkbox"/> No Treatment Employed: <input type="checkbox"/> Yes <input type="checkbox"/> No Time Drain Valve Opened _____ Time Drain Valve Closed _____			
1.4 Drain valves operable and in a closed position?	<input type="checkbox"/> Yes	<input type="checkbox"/> No*	<input type="checkbox"/> Yes	<input type="checkbox"/> No*	<input type="checkbox"/> Yes	<input type="checkbox"/> No*
1.5 Egress pathways clear and gates/doors operable?	<input type="checkbox"/> Yes	<input type="checkbox"/> No*	<input type="checkbox"/> Yes	<input type="checkbox"/> No*	<input type="checkbox"/> Yes	<input type="checkbox"/> No*

**2.0 Leak Detection**

2.1 Visible signs of leakage around the container or storage area?	<input type="checkbox"/> Yes*	<input type="checkbox"/> No	<input type="checkbox"/> Yes*	<input type="checkbox"/> No	<input type="checkbox"/> Yes*	<input type="checkbox"/> No
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**3.0 Container**

3.1 Noticeable container distortion buckling, denting or bulging?	<input type="checkbox"/> Yes*	<input type="checkbox"/> No	<input type="checkbox"/> Yes*	<input type="checkbox"/> No	<input type="checkbox"/> Yes*	<input type="checkbox"/> No
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(\*) designates an item in non-conformance status. This indicates that action is required to address a problem.

Comments

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Inspector:

\_\_\_\_\_

Date:

Signature: \_\_\_\_\_

## WEEKLY STORAGE TANK SYSTEM INSPECTION CHECKLIST

Tank ID:	Location:	Tank Size:	Content:																																																																																																																																																																																								
<table border="1"> <thead> <tr> <th>Item</th> <th>Task</th> <th>DATE 1 Inspector</th> <th>DATE 2 Inspector</th> <th>DATE 3 Inspector</th> <th>DATE 4 Inspector</th> </tr> </thead> <tbody> <tr> <td colspan="2"><b>1.0 Tank Containment</b></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>1.1 Containment Structure</td> <td>Check for water, debris, cracks or fire hazard</td> <td><input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A</td> <td><input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A</td> <td><input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A</td> <td><input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A</td> </tr> <tr> <td>1.2 Primary Tank</td> <td>Check for water</td> <td colspan="2">N/A</td> <td colspan="2">N/A</td> </tr> <tr> <td>1.3 Containment drain valves</td> <td>Operable and in a closed position</td> <td><input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A</td> <td><input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A</td> <td><input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A</td> <td><input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A</td> </tr> <tr> <td>1.4 Pathways and Entry</td> <td>Clear and gates/doors operable</td> <td><input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A</td> <td><input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A</td> <td><input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A</td> <td><input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A</td> </tr> <tr> <td colspan="2"><b>2.0 Leak Detection</b></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>2.1 Tank</td> <td>Visible signs of leakage</td> <td><input type="checkbox"/> Yes* <input type="checkbox"/> No</td> </tr> <tr> <td rowspan="5">2.2 Secondary Containment</td> <td>Rainwater present in containment</td> <td><input type="checkbox"/> Yes* <input type="checkbox"/> No</td> </tr> <tr> <td>Visible signs of leakage</td> <td><input type="checkbox"/> Yes* <input type="checkbox"/> No</td> </tr> <tr> <td>Sheen or Product?</td> <td><input type="checkbox"/> Sheen <input type="checkbox"/> Product</td> </tr> <tr> <td>Treatment employed (describe in comments)</td> <td><input type="checkbox"/> Yes <input type="checkbox"/> No</td> </tr> <tr> <td>Containment drained</td> <td>Time Opened: _____ Time Closed: _____</td> </tr> <tr> <td>2.3 Surrounding Soil</td> <td>Visible signs of leakage</td> <td><input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A</td> <td><input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A</td> <td><input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A</td> <td><input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A</td> </tr> <tr> <td>2.4 Interstice</td> <td>Visible signs of leakage</td> <td><input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A</td> <td><input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A</td> <td><input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A</td> <td><input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A</td> </tr> <tr> <td colspan="6"><b>3.0 Tank Equipment</b></td> </tr> <tr> <td rowspan="2">3.1 Valves</td> <td>a. 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Both visual and mechanical devices must be inspected for physical damage.</td> <td><input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A</td> <td><input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A</td> <td><input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A</td> <td><input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A</td> </tr> <tr> <td>b. Check that the device is easily readable</td> <td><input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A</td> <td><input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A</td> <td><input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A</td> <td><input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A</td> </tr> <tr> <td rowspan="2">3.4 Overfill Equipment</td> <td>a. 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Both visual and mechanical devices must be inspected for physical damage.	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	b. Check that the device is easily readable	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	3.4 Overfill Equipment	a. If equipped with a "test" button, activate the audible horn or light to confirm operation. This could be battery powered. Replace the battery if needed.	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	b. If overfill valve is equipped with a mechanical test mechanism, actuate the mechanism to confirm operation.	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	3.5 Piping Connections.	Check for leaks, corrosion and damage	<input type="checkbox"/> Yes* <input type="checkbox"/> No	<b>4.0 Tank Attachments and Appurtenances</b>						4.1 Ladder and Platform Structure	Secure with no sign of severe corrosion or damage	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	<b>5.0 Other Conditions</b>						5.1 Are there other conditions that should be addressed for the continued safe operation or that may affect the site spill prevention plan?	<input type="checkbox"/> Yes* <input type="checkbox"/> No	* Designates an item in non-conformance/unsatisfactory status; provide action in comment section to resolve problem and notify Environmental Protection Specialist if any significant deficiencies are identified.						** In accordance with Section 3.2 of the SPCC Plan (Environmental Equivalence), inspection for water in the primary tank will be conducted annually and recorded on the STI SP001 Annual Inspection Checklist.						Comments																														
Item	Task	DATE 1 Inspector	DATE 2 Inspector	DATE 3 Inspector	DATE 4 Inspector																																																																																																																																																																																						
<b>1.0 Tank Containment</b>																																																																																																																																																																																											
1.1 Containment Structure	Check for water, debris, cracks or fire hazard	<input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A																																																																																																																																																																																						
1.2 Primary Tank	Check for water	N/A		N/A																																																																																																																																																																																							
1.3 Containment drain valves	Operable and in a closed position	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A																																																																																																																																																																																						
1.4 Pathways and Entry	Clear and gates/doors operable	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A																																																																																																																																																																																						
<b>2.0 Leak Detection</b>																																																																																																																																																																																											
2.1 Tank	Visible signs of leakage	<input type="checkbox"/> Yes* <input type="checkbox"/> No																																																																																																																																																																																									
2.2 Secondary Containment	Rainwater present in containment	<input type="checkbox"/> Yes* <input type="checkbox"/> No																																																																																																																																																																																									
	Visible signs of leakage	<input type="checkbox"/> Yes* <input type="checkbox"/> No																																																																																																																																																																																									
	Sheen or Product?	<input type="checkbox"/> Sheen <input type="checkbox"/> Product																																																																																																																																																																																									
	Treatment employed (describe in comments)	<input type="checkbox"/> Yes <input type="checkbox"/> No																																																																																																																																																																																									
	Containment drained	Time Opened: _____ Time Closed: _____																																																																																																																																																																																									
2.3 Surrounding Soil	Visible signs of leakage	<input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A																																																																																																																																																																																						
2.4 Interstice	Visible signs of leakage	<input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A																																																																																																																																																																																						
<b>3.0 Tank Equipment</b>																																																																																																																																																																																											
3.1 Valves	a. Check for leaks	<input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A																																																																																																																																																																																						
	b. Tank drain valves must be kept locked	<input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A																																																																																																																																																																																						
3.2 Spill Containment boxes on fill pipe	a. Inspect for debris residue, and water in box and remove.	<input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A																																																																																																																																																																																						
	b. Drain valves must be operable and closed.	<input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes* <input type="checkbox"/> No <input type="checkbox"/> N/A																																																																																																																																																																																						
3.3 Liquid level equipment	a. Both visual and mechanical devices must be inspected for physical damage.	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A																																																																																																																																																																																						
	b. Check that the device is easily readable	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A																																																																																																																																																																																						
3.4 Overfill Equipment	a. If equipped with a "test" button, activate the audible horn or light to confirm operation. This could be battery powered. Replace the battery if needed.	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A																																																																																																																																																																																						
	b. If overfill valve is equipped with a mechanical test mechanism, actuate the mechanism to confirm operation.	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> N/A																																																																																																																																																																																						
3.5 Piping Connections.	Check for leaks, corrosion and damage	<input type="checkbox"/> Yes* <input type="checkbox"/> No																																																																																																																																																																																									
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<b>5.0 Other Conditions</b>																																																																																																																																																																																											
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MCIEAST-MCB CAMP LEJEUNE  
SPILL REPORT

01 OCT 2025

SHADED AREAS ARE FOR RCRS USE ONLY

TITLE/LOCATION					
DATE			TIME		
RESPONSE NAME/UNIT:					
SPILL CATEGORY (SELECT ONE)	<input type="checkbox"/> HAZMAT	<input type="checkbox"/> HAZWASTE	<input type="checkbox"/> POL	<input type="checkbox"/> WASTEWATER	<input type="checkbox"/> OTHER
PRODUCT SPILLED					
QUANTITY SPILLED					
LATITUDE			LONGITUDE		
HOW WAS SPILL DISCOVERED					
SOURCE OF THE SPILL					
CAUSE OF THE SPILL					
MISSION IMPACT					

WERE SAMPLES TAKEN (CHECK ONE)  YES  NO

ANALYSES REQUESTED / PERFORMED ON SAMPLES

DID THE SPILL (CHECK ONE)	ENTER A WATERWAY?	REACH WITHIN 100' OF SURFACE WATER?	REACH WITHIN 1500' OF A WATER SUPPLY WELL?	GO OFF BASE?
	<input type="checkbox"/> YES <input type="checkbox"/> NO			

HOW WAS THE SPILL CONTAINED?

WHAT DANGERS DID THE SPILL PRESENT?

WHAT WERE THE ENVIRONMENTAL IMPACTS?

WHAT RECOVERY EFFORTS WERE USED?

IF OIL SPILLED, WHAT PERCENT WAS RECOVERED?

HOW WERE RESIDUALS DISPOSED OF?

WEATHER CONDITIONS?

REPORTABLE SPILL? (CHECK ONE)	<input type="checkbox"/> YES <input type="checkbox"/> NO	WAS A REGULATORY AGENCY CONTACTED:	<input type="checkbox"/> YES <input type="checkbox"/> NO	
AGENCY NAME (IF)	<input type="checkbox"/> NCDEQ	NCDEQ REPORT#	<input type="checkbox"/> NCDEM	NCDEM REPORT#
REGULATORY DRIVER				
NRC NOTIFIED	<input type="checkbox"/> YES <input type="checkbox"/> NO	NRC INCIDENT NUMBER:		

WHAT MEASURES WERE PUT IN PLACE TO PREVENT RECURRENCE?

ADDITIONAL INFORMATION OR COMMENTS

SPILL POC  E-MAIL  PHONE

01 OCT 2025

## ENVIRONMENTAL PERSONNEL TRAINING RECORD

EMPLOYEE NAME:

**EMPLOYEE UNIT:**

**JOB TITLE/DESCRIPTION:**

**DATE ASSIGNED:**

**DATE RECORD CLOSED/ARCHIVED:**

**Signature:**

Date: \_\_\_\_\_

(Assigned Individual)

**Signature:** \_\_\_\_\_

Date:

(ECC or Supervisor)

[Reset Form](#)

[Print Form](#)