



STATE OF NORTH CAROLINA
MINERAL AND OIL AND GAS RIGHTS MANDATORY DISCLOSURE STATEMENT

Instructions to Property Owners

- The Residential Property Disclosure Act (G.S. 47E) ("Disclosure Act") requires owners of certain residential real estate such as single-family homes, individual condominiums, townhouses, and the like, and buildings with up to four dwelling units, to furnish purchasers a Mineral and Oil and Gas Rights Disclosure Statement ("Disclosure Statement"). This form is the only one approved for this purpose.
- A disclosure statement is not required for some transactions. For a complete list of exemptions, see G.S. 47E-2(a). **A DISCLOSURE STATEMENT IS REQUIRED FOR THE TRANSFERS IDENTIFIED IN G.S. 47E-2(b)**, including transfers involving the first sale of a dwelling never inhabited, lease with option to purchase contracts where the lessee occupies or intends to occupy the dwelling, and transfers between parties when both parties agree not to provide the Residential Property and Owner's Association Disclosure Statement.
- You must respond to each of the following by placing a check in the appropriate box.

MINERAL AND OIL AND GAS RIGHTS DISCLOSURE

Mineral rights and/or oil and gas rights can be severed from the title to real property by conveyance (deed) of the mineral rights and/or oil and gas rights from the owner or by reservation of the mineral rights and/or oil and gas rights by the owner. If mineral rights and/or oil and gas rights are or will be severed from the property, the owner of those rights may have the perpetual right to drill, mine, explore, and remove any of the subsurface mineral and/or oil or gas resources on or from the property either directly from the surface of the property or from a nearby location. With regard to the severance of mineral rights and/or oil and gas rights, Seller makes the following disclosures:

	Yes	No	No Representation
<u> </u> Buyer Initials	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
1. Mineral rights were severed from the property by a previous owner.			
<u> </u> Buyer Initials	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
2. Seller has severed the mineral rights from the property.			
<u> </u> Buyer Initials	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
3. Seller intends to sever the mineral rights from the property prior to transfer of title to the Buyer.			
<u> </u> Buyer Initials	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. Oil and gas rights were severed from the property by a previous owner.			
<u> </u> Buyer Initials	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
5. Seller has severed the oil and gas rights from the property.			
<u> </u> Buyer Initials	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
6. Seller intends to sever the oil and gas rights from the property prior to transfer of title to Buyer.			

Note to Purchasers

If the owner does not give you a Mineral and Oil and Gas Rights Disclosure Statement by the time you make your offer to purchase the property, or exercise an option to purchase the property pursuant to a lease with an option to purchase, you may under certain conditions cancel any resulting contract without penalty to you as the purchaser. To cancel the contract, you must personally deliver or mail written notice of your decision to cancel to the owner or the owner's agent within three calendar days following your receipt of this Disclosure Statement, or three calendar days following the date of the contract, whichever occurs first. However, in no event does the Disclosure Act permit you to cancel a contract after settlement of the transaction or (in the case of a sale or exchange) after you have occupied the property, whichever occurs first.

Property Address: 1404 Mizpah Church Rd, Reidsville, NC 27320-8657

Owner's Name(s): Rockingham County Board of Education

Owner(s) acknowledge having examined this Disclosure Statement before signing and that all information is true and correct as of the date signed.

Owner Signature: Rockingham County Board of Education Date _____

Owner Signature: [Signature] Date 5-10-2020

Purchaser(s) acknowledge receipt of a copy of this Disclosure Statement; that they have examined it before signing; that they understand that this is not a warranty by owner or owner's agent; and that the representations are made by the owner and not the owner's agent(s) or subagent(s).

Purchaser Signature: _____ Date _____

Purchaser Signature: _____ Date _____

LEAD-BASED PAINT OR LEAD-BASED PAINT HAZARD ADDENDUM

Property : 1404 Mizpah Church Rd, Reidsville, NC 27320-8657

Seller: Rockingham County Board of Education

Buyer: _____

This Addendum is attached to and made a part of the Offer to Purchase and Contract ("Contract") between Seller and Buyer for the Property.

During the Due Diligence Period, Buyer shall have the right to obtain a risk assessment or inspection of the Property for the presence of lead-based paint and/or lead-based paint hazards* at Buyer's expense. Buyer may waive the right to obtain a risk assessment or inspection of the Property for the presence of lead-based paint and/or lead-based paint hazards at any time without cause.

***Intact lead-based paint that is in good condition is not necessarily a hazard. See EPA pamphlet "Protect Your Family From Lead in Your Home" for more information.**

Disclosure of Information on Lead-Based Paint and Lead-Based Paint Hazards

Lead Warning Statement

Every Buyer of any interest in residential real property on which a residential dwelling was built prior to 1978 is notified that such property may present exposure to lead from lead-based paint that may place young children at risk of developing lead poisoning. Lead poisoning in young children may produce permanent neurological damage, including learning disabilities, reduced intelligence quotient, behavioral problems, and impaired memory. Lead poisoning also poses a particular risk to pregnant women. The Seller of any interest in residential real property is required to provide the Buyer with any information on lead-based paint hazards from risk assessments or inspections in the Seller's possession and notify the Buyer of any known lead-based paint hazards. A risk assessment or inspection for possible lead-based hazards is recommended prior to purchase.

Seller's Disclosure (initial)

- MS (a) Presence of lead-based paint and/or lead-based paint hazards (check one below):
 - Known lead-based paint and/or lead-based paint hazards are present in the housing (explain).

 - Seller has no knowledge of lead-based paint and/or lead-based paint hazards in the housing.
- MS (b) Records and reports available to the Seller (check one)
 - Seller has provided the Buyer with all available records and reports pertaining to lead-based paint and/or lead-based paint hazards in the housing (list documents below).

 - Seller has no reports or records pertaining to lead-based paint and/or lead-based paint hazards in the housing.

Buyer's Acknowledgement (Initial)

- _____ (c) Buyer has received copies of all information listed above.
- _____ (d) Buyer has received the pamphlet *Protect Your Family from Lead in Your Home*.
- _____ (e) Buyer has (check one below):
 - Received the opportunity during the Due Diligence Period to conduct a risk assessment or inspection for the presence of lead-based paint and/or lead-based paint hazards; or
 - Waived the opportunity to conduct a risk assessment or inspection for the presence of lead-based paint and/or lead-based paint hazards.



This form jointly approved by:
North Carolina Bar Association
North Carolina Association of REALTORS®, Inc.



STANDARD FORM 2A9-T
Revised 7/2019
© 7/2019

Buyer Initials _____ Seller Initials MS

Agent's Acknowledgment (initial)

N

(f) Agent has informed the Seller of the Seller's obligations under 42 U.S.C. 4852d and is aware of his/her responsibility to ensure compliance.

Certification of Accuracy

The following parties have reviewed the information above and certify, to the best of their knowledge, that the information provided by the signatory is true and accurate.

IN THE EVENT OF A CONFLICT BETWEEN THIS ADDENDUM AND THE CONTRACT, THIS ADDENDUM SHALL CONTROL, EXCEPT THAT IN THE CASE OF SUCH A CONFLICT AS TO THE DESCRIPTION OF THE PROPERTY OR THE IDENTITY OF THE BUYER OR SELLER, THE CONTRACT SHALL CONTROL.

THE NORTH CAROLINA ASSOCIATION OF REALTORS®, INC. AND THE NORTH CAROLINA BAR ASSOCIATION MAKE NO REPRESENTATION AS TO THE LEGAL VALIDITY OR ADEQUACY OF ANY PROVISION OF THIS FORM IN ANY SPECIFIC TRANSACTION. IF YOU DO NOT UNDERSTAND THIS FORM OR FEEL THAT IT DOES NOT PROVIDE FOR YOUR LEGAL NEEDS, YOU SHOULD CONSULT A NORTH CAROLINA REAL ESTATE ATTORNEY BEFORE YOU SIGN IT.

Date: _____

Date: 5-6-2020

Buyer: _____

Seller: *[Signature]*
Rockingham County Board of Education

Date: _____

Date: _____

Buyer: _____

Seller: _____

Entity Buyer: _____

Entity Seller: _____

(Name of LLC/Corporation/Partnership/Trust/etc.)

Rockingham County Board of Education
(Name of LLC/Corporation/Partnership/Trust/etc.)

By: _____

By: _____

Name: _____
Print Name

Name: _____
Print Name

Title: _____

Title: _____

Date: _____

Date: _____

Selling Agent: _____

Listing Agent: *[Signature]*
Teresa S. Knowles

Date: _____

Date: 5/6/2020



CEI

MOLD BULK REPORT

Nonviable Methodology

Prepared for

Rockingham County Schools

CLIENT PROJECT: Everywhere I

LAB CODE: I195672

TEST METHOD: CEI Method 120

RECEIVED DATE: 12/16/19

REPORT DATE: 12/16/19

Tianbao Bai, Ph.D., CIH
Laboratory Director

All samples received in acceptable condition. Information provided by customer includes customer sample ID and location. Analytical results are not corrected for field and laboratory blanks.

Test results relate only to the items tested and cannot be extrapolated to anything larger than their original intent. This report may not be reproduced, except in full, without written approval by Eurofins CEI (CEI). CEI bears no responsibility for client sampling methods and makes no warranty representation regarding the accuracy of client supplied information in preparing and presenting analytical results. CEI maintains liability limited to the cost of analysis, except for CEI's own willful misconduct or gross negligence. Interpretation of the analytical results is the sole responsibility of the customer.



Old
Williamsburg



CEI

LABORATORY REPORT

Fungal Characterization

CLIENT: Rockingham County Schools
391 County Home Road
Reidsville, NC 27320

Lab Code: I195672
Date Received: 12-16-19
Date Analyzed: 12-16-19
Date Reported: 12-16-19
Sampling Method: Tape/Bulk/Swab

PROJECT: Everywhere I

LAB ID	CLIENT ID	SAMPLE LOCATION	BACKGROUND		IDENTIFICATION
			DEBRIS	MGR	
M124827	M-I	Jamb Foyer Left	0	5	Unspecified spores
				3	Fungal mycellal fragments
M124828	M-II	Jamb Hall Right	1	5	<i>Cladosporium</i>
				4	Fungal mycellal fragments
				3	<i>Aspergillus/Penicillium</i>
M124829	M-III	Door Gym Left	4	5	<i>Cladosporium</i>
				5	Fungal mycellal fragments
M124830	M-IV	Window Back Left Corner	1	5	<i>Cladosporium</i>
				4	Fungal mycellal fragments
				4	<i>Aspergillus/Penicillium</i>
M124831	M-V	Door Jamb - Hall Left	1	5	<i>Cladosporium</i>
				4	Fungal mycellal fragments
				3	Unspecified spores
M124832	M-VI	Back Door Hall Right	3	4	Unspecified spores
				4	<i>Aspergillus/Penicillium</i>
				4	<i>Cladosporium</i>
				3	Fungal mycellal fragments
M124833	M-VII	Cafe Door - Left	1	5	<i>Cladosporium</i>
				5	Fungal mycellal fragments
				4	<i>Aspergillus/Penicillium</i>



CEI

LABORATORY REPORT

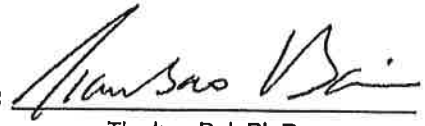
Fungal Characterization

CLIENT: Rockingham County Schools 391 County Home Road Reidsville, NC 27320 PROJECT: Everywhere I	Lab Code: I195672 Date Received: 12-16-19 Date Analyzed: 12-16-19 Date Reported: 12-16-19 Sampling Method: Tape/Bulk/Swab
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LAB ID	CLIENT ID	SAMPLE LOCATION	BACKGROUND DEBRIS	MGR	IDENTIFICATION
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* Periconia/Smuts Includes Myxomycetes

ANALYST: 
 Marti Bowers

APPROVED BY: 
 Tianbao Bai, Ph.D.
 Laboratory Director

MGR = MOLD GROWTH RATING
0 - No fungal matter was detected; Debris present is not consistent with fungal matter.
1 - Trace amount of fungal matter detected; A few random appearances of fungal matter indicated. Probably due to settling. Does not indicate active growth.
2 - Up to 25% of the sample surface is covered with fungal matter; Probably indicates active growth at some point in time.
3 - 26%-50% of the sample surface is covered with fungal matter; Indicates active growth at some point in time.
4 - 51%-75% of the sample surface is covered with fungal matter; Indicates active growth at some point in time.
5 - >75% of the sample surface is covered with fungal matter; Indicates active growth at some point in time.

BACKGROUND DEBRIS
0 - None Detected. No debris observed.
1 - Trace. Field of view obscured < 5%.
2 - Light. Field of view obscured 5% to 25%.
3 - Moderate. Field of view obscured 25% to 75%.
4 - Heavy. Field of view obscured 75% to 90%.
5 - Very Heavy. Field of view obscured >90%.



MOLD / MATERIALS IDENTIFICATION CHAIN OF CUSTODY

730 SE Maynard Road, Cary, NC 27511
Tel: 866-481-1412; Fax: 919-481-1442

LAB USE ONLY:	
ECEI Lab Code:	J195072 (P)
ECEI Lab I.D. Range:	1124827-1124833

COMPANY INFORMATION	PROJECT INFORMATION
ECEI CLIENT #:	Job Contact: ^{old} W. Williamsburg Elementary
Company: <u>Rockingham Co Schools</u>	Email / Tel: <u>KEVANS2@rock.k12.nc.us</u>
Address: <u>391 County Home Rd, Fayetteville N.C. 27320</u>	Project Name: <u>Everywhere I</u>
Email: <u>KEVANS2@rock.k12.nc.us</u>	Project ID# <u>-</u>
Tel: <u>336-634-3270</u> Fax: <u>336-634-3053</u>	PO #: <u>1193-54</u>
STATE SAMPLES COLLECTED IN:	

IF TAT IS NOT MARKED STANDARD 3 DAY TAT APPLIES.

MICROBIOLOGY	METHOD	TURN AROUND TIME						7-10 DAY
		4 HR*	6 HR*	24 HR	2 DAY	3 DAY	5 DAY	
MOLD NON-VIABLE *	TAPE LIFT, BULK, SWAB	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
MOLD NON-VIABLE *	SPORETRAP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
MOLD VIABLE	IMPACTOR							<input type="checkbox"/>
MOLD VIABLE	BULK, SWAB, DJST							<input type="checkbox"/>
DUST CHARACTERIZATION	PLM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PARTICLE IDENTIFICATION	PLM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
COMBUSTION-BY-PRODUCTS	ASTM D6602-13	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
COMBUSTION-BY-PRODUCTS WITH TEM CONFIRMATION OF SOOT	ASTM D6602-13		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OTHER:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Blanks should be taken from the same sample lot as field samples.

FIELD ID #	SAMPLE LOCATION	AREA (ln ²)	VOLUME(L)
M-I	Trunk Foyer Left		
M-II	Trunk Hall Right		
M-III	Door Gym Left		
M-IV	Window Back left Corridor		
M-V	Door 3rd Floor Hall Left		
M-VI	Back Door Hall Right		
M-VII	CASE Door - Left		
REMARKS:		<input checked="" type="checkbox"/> Accept Samples <input type="checkbox"/> Reject Samples	
Relinquished By:	Date/Time	Received By:	Date/Time
<u>Karen P. Evans</u>	<u>12/13/19 1 p.m.</u>	<u>ML</u>	<u>12-16-19 12:20</u>

By submitting samples, you are agreeing to ECEI's Terms and Conditions.
Samples will be disposed of 30 days after analysis.

UST-2 Site Investigation Report for Permanent Closure or Change-in-Service of UST

Return completed form to:

The DWM Regional Office located in the area where the facility is located. Send a copy to the Central Office in Raleigh so that the status of the tank may be changed to "PERMANENTLY CLOSED" and your tank fee account can be closed out. SEE MAP ON THE BACK OF THIS FORM FOR THE CENTRAL AND REGIONAL OFFICE ADDRESSES.

STATE USE ONLY:

I.D. # _____

Date Received _____

INSTRUCTIONS (READ THIS FIRST)

For more than five UST systems you may attach additional forms as needed.

Permanent closure - For permanent closure, complete all sections of this form.

Change-in-service - For change-in-service where UST systems will be converted from containing a regulated substance to storing a non-regulated substance, complete sections I, II, III, IV, and VIII

Effective February 1, 1995, all UST closure/change-in-service reports must be submitted in the format provided in the UST-12 form. UST closure and change-in-services must be completed in accordance with the latest version of the *Guidelines for Tank Closure*. A copy of the UST-12 form and the *Guidelines for Tank Closure* can be obtained at www.wasteno.com.

You must make sure that USTs removed from your property are disposed of properly. When choosing a closure contractor, ask where the tank(s) will be taken for disposal. Usually, USTs are cleaned and cut up for scrap metal. This is dangerous work and must be performed by a qualified company. Tanks disposed of illegally in fields or other dumpsites can leak petroleum products and sludge into the environment. If your tanks are disposed of improperly, you could be held responsible for the cleanup of any environmental damage that occurs.

NOTE: If a release from the tank(s) has occurred, the site assessment portion of the tank closure must be conducted under the supervision of a P.E. or L.G., with all closure site assessment reports bearing the signature and seal of the P.E. or L.G.

I. OWNERSHIP OF TANKS				II. LOCATION OF TANKS			
Owner Name (Corporation, Individual, Public Agency, or Other Entity) Rockingham County Schools				Facility Name or Company Old Williamsburg Elementary			
Street Address 511 Harrington Hwy				Facility ID # (if known)			
City Eden		County Rockingham		Street Address 1404 Mizpath Church Road			
State North Carolina		Zip Code 27288		City Reidsville		County Rockingham	
Phone Number 336-627-2600				Zip Code 27320		Phone Number 336-634-3270	

III. CONTACT PERSONNEL					
Contact for Facility: E.C. Stophel		Job Title: Director of Maintenance		Phone No: 336-634-3270	
Closure Contractor Name: Swain Skeen		Closure Contractor Company: A+D Environmental		Address: P.O. Box 484, High Point 27261	
Primary Consultant Name: Jeff Albano		Primary Consultant Company: A+D Environmental		Address: P.O. Box 484, High Point 27261	
				Phone No: 336-803-2264	
				Phone No: 336-804-0824	

IV. UST INFORMATION FOR REGISTERED UST SYSTEMS							V. EXCAVATION CONDITION					
Tank ID No.	Size In Gallons	Tank Dimensions	Last Contents	Last Use Date	Permanent Close Date	Change-In-Service Date	Water In excavation		Free product		Notable odor or visible soil contamination	
							Yes	No	Yes	No	Yes	No
0-030115	10,000		6,073		7-25-19		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

VI. UST INFORMATION FOR UNREGISTERED UST SYSTEMS							VII. EXCAVATION CONDITION					
Tank ID No.	Size In Gallons	Tank Dimensions	Last Contents	Last Use Date	Permanent Close Date	Tank Owner Name *	Water In excavation		Free product		Notable odor or visible soil contamination	
							Yes	No	Yes	No	Yes	No
							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

* If the tank owner address is different from the one listed in Section I., then enter the street address, city, state, zip code and telephone no. below:

VIII. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true accurate and complete.

Print name and official title of owner or owner's authorized representative E.C. Stophel, Director of Maintenance	Signature 	Date Signed 8-13-19
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UST-3 Notice of Intent: UST Permanent Closure or Change-in-Service

STATE USE ONLY

Return completed form to:

The DWM Regional Office located in the area where the facility is located. Also send a copy to the Central Office in Raleigh. SEE MAP ON THE BACK OF THIS FORM FOR THE CENTRAL AND REGIONAL OFFICE ADDRESSES.

I.D.# _____

Date Received _____

INSTRUCTIONS (READ THIS FIRST)

Complete and return a UST-3 form at least thirty (30) days prior to closure or change-in-service activities.

Completed UST closure or change-in-service site assessment reports, along with a copy of the UST-2A and/or 2B forms, should be submitted to the appropriate Division of Waste Management (DWM) Regional Office within thirty (30) days following closure activities. The UST-2 form should also be submitted to the Central Office in Raleigh so that the status of the tanks may be changed to permanently closed and your tank fee account can be closed out. Note: Tank fees may be due for unregistered tanks.

UST closure and change-in-service site assessments must be completed in accordance with the latest version of the *Guidelines for Site Checks, Tank Closure and Initial Response*. The guidelines can be obtained at <https://deq.nc.gov/about/divisions/waste-management/ust/>. Note: To close tanks in place you must obtain prior approval from the DWM Regional office located in the region where the facility is located.

You must make sure that USTs removed from your property are disposed of properly. When choosing a closure contractor, ask where the tank(s) will be taken for disposal. Usually, USTs are cleaned and cut up for scrap metal. This is dangerous work and must be performed by a qualified company. Tanks disposed of illegally in fields or other dumpsites can leak petroleum products and sludge into the environment. If your tanks are disposed of improperly, you could be held responsible for the cleanup of any environmental damage that occurs.

I. OWNERSHIP OF TANKS

II. LOCATION

Owner Name (Corporation, Individual, Public Agency, or Other Entity)

Facility Name or Company

Rockingham County Schools

Old Williamsburg Elementary

Street Address

Facility ID # (if known)

511 Harrington Hwy

City
Eden

County
Rockingham

Street Address
1404 Mizpath Church Rd

State
NC

Zip Code
27288

City
Reidsville

County
Rockingham

Zip Code
27320

Phone Number
336-627-2600

Email

Phone Number

III. CONTACT PERSONNEL

Name
E.C. Stophel

Company Name
Rockingham Co. Schools

Job Title
Director of Maintenance

Phone Number
336-634-3270

IV. TANK REMOVAL, CLOSURE IN PLACE, CHANGE-IN SERVICE

1. Contact local fire marshal.
2. Plan entire closure event.
3. Conduct Site Soil Assessment.
4. If removing tanks or closing in place, refer to API Publication 2015 *Cleaning Petroleum Storage Tanks* and 1604 *Removal and Disposal of Used Underground Petroleum Storage Tanks*.
5. Provide a sketch locating piping, tanks and soil sampling locations.
6. Submit a closure report in the format of UST-12 (including the form UST-2) within thirty (30) days following the site investigation.
7. If a release from the tanks has occurred, the site assessment portion of the tank closure must be conducted under the supervision of a P.E. or L.G., with all closure site assessment reports bearing the signature and seal of the P.E. or L.G. If a release has not occurred, the supervision, signature or seal of a P.E. or L.G. is not required.
- B. Keep closure records for three (3) years.

V. WORK TO BE PERFORMED BY

Contractor Name
Jeff Albano

Contractor Company Name
A+D Environmental Services

Address
P.O. Box 484

State
NC

Zip Code
27261

Phone No.
336-804-0824

Primary Consultant Name
N/A

Primary Consultant Company Name
N/A

Consultant Phone No.
N/A

VI. TANKS SCHEDULED FOR CLOSURE OR CHANGE-IN-SERVICE

Tank ID No.	Size In Gallons	Last Contents	Proposed Activity		
			Removal	Closure Abandonment In Place *	Change-In-Service New Contents Stored
0030615	10,000	6,073	<input type="checkbox"/>	<input checked="" type="checkbox"/>	McMichael High
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	

* Prior written approval to abandon a tank in place must be received from a DWM Regional Office.

VII. OWNER OR OWNER'S AUTHORIZED REPRESENTATIVE

Has a release from a UST system occurred at this location? Yes No Unknown

I understand that I can be held responsible for environmental damage resulting from the improper disposal of my USTs.

Print name and official title:

Signature 

Date Signed

3-13-19

SCHEDULED REMOVAL DATE

7-25-19

Notify your DWM Regional Office 48 hours before this date if scheduled removal date changes



A&D Environmental Services

Bill of Lading / Material Manifest

A&D Job No: <i>1111</i>	Generator ID Number	Page 1 of	Emergency Response Phone	Tracking Number 32357
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Generator's Name and Mailing Address <i>1111</i>	Generator's site address (if different from mailing address) <i>1111</i>
Generator's Phone	

Transporter 1 <input type="checkbox"/> 2 <input type="checkbox"/>	Company Name A&D Environmental Services, Inc.	US EPA ID No: NCD986232221
Transporter 1 <input type="checkbox"/> 2 <input type="checkbox"/>	Company Name A&D Environmental Services (SC), LLC	US EPA ID No: SCD987898331
Transporter 1 <input type="checkbox"/> 2 <input type="checkbox"/>	Company Name	US EPA ID No:

<input type="checkbox"/> Designated Facility	<input type="checkbox"/> Designated Facility	<input type="checkbox"/> Designated Facility (Please insert facility information below)
A&D Environmental Services, Inc. 2718 Uwharrie Road Archdale, NC 27263 336-434-7750 NCD986232221	A&D Environmental Services, Inc. 3149 Lear Drive Burlington, NC 27215 336-229-0068 NCR000138628	<i>1111</i>

HM	Hazardous Materials Shipping Name and Description (if applicable)	No.	Type	QTY	Wt/Vol	Profile Number
	Petroleum Products for Recycle					
X	NA1993, Diesel fuel, 3, III EGR# 128					
X	NA 1993, Fuel oil (No. 1,2,4,5 or 6), 3, III EGR# 128	1	27	3,084	G	
X	UN1203, Gasoline, 3, II EGR# 128					
	USED OIL (Not a USDOT Hazardous Material)					
	Petroleum Contact Water (Not a USDOT Hazardous Material)					

HM	No.	Type	Est. Wt.	Count	Shipping Name and Description (if applicable)	Common Name	Discrepancy
X					RQ, UN3506, Mercury contained in manufactured articles, 8 (6.1), RQ ERG# 172	Mercury Devices	
X					RQ, UN3432, Polychlorinated biphenyls, solid, 9, II EGR# 171	TSCA Exempt PCB Lamp Ballasts	
X					UN2800, Batteries, wet nonspillable, 8 EGR# 164	Sealed Lead Acid Batteries	
X					UN2794, Batteries, wet, filled with acid, 8 EGR# 164	Lead Acid Batteries	
X					UN2795, Batteries, wet, filled with alkali, 8 EGR# 164	Wet NiCad Batteries	
X					UN3090, Lithium metal batteries, 9 EGR# 138	Lithium Metal Batteries	
X					UN3480, Lithium ion batteries, 9 EGR# 147	Lithium Ion Batteries	
X					Batteries, dry, sealed n.o.s.	Alkaline Batteries	
X					Batteries, dry, sealed n.o.s.	Dry NiCad Batteries	
					Universal Waste Lamps (Not DOT-Regulated per 49 CFR 173.164 (e))	Fluorescent lamps (4-Ft. and Under)	
					Universal Waste Lamps (Not DOT-Regulated per 49 CFR 173.164 (e))	Fluorescent lamps (Over 4-Ft.)	
					Universal Waste Lamps (Not DOT-Regulated per 49 CFR 173.164 (e))	Circular/U-tube lamps	
					Universal Waste Lamps (Not DOT-Regulated per 49 CFR 173.164 (e))	Compact Lamps	
					Universal Waste Lamps (Not DOT-Regulated per 49 CFR 173.164 (e))	Shielded Lamps	
					Universal Waste Lamps (Not DOT-Regulated per 49 CFR 173.164 (e))	HID/MVUV Lamps	
					Universal Waste Lamps (Not DOT-Regulated per 49 CFR 173.164 (e))	Incandescent Lamps	
					Non-PCB Light Ballasts for Recycle (Not DOT-Regulated)	Non-PCB Light Ballasts/Capacitors	
					Electronic Equipment for Recycle (Not DOT-Regulated)	e-Waste	

Generator's Certification: This is to certify that the above-named materials are properly classified, described, packaged, marked, and labeled, and are in proper condition for transport according to the applicable regulations of the Department of Transportation. I further certify that none of the materials described above are hazardous waste as defined by EPA 40CFR Part 261 or any applicable state law, and unless specifically identified above the materials contain less than 1,000 ppm total halogens and do not contain quantifiable levels (2ppm) of PCBs as defined by EPA 40 CFR Parts 278 and 781.

Generator's/ Offeror's Printed/Typed Name <i>Michael J. ...</i>	Signature <i>Michael J. ...</i>	Month	Day	Year
Transporter 1 Printed/Typed Name	Signature	Month	Day	Year
Transporter 2 Printed/Typed Name	Signature	Month	Day	Year

Discrepancy Indication / Additional Information:

Designated Facility Certification: I hereby acknowledge receipt of the materials covered by this manifest except for any discrepancy indicated above.

Printed/Typed Name	Signature	Month	Day	Year
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GENERATOR'S/SHIPPER'S INITIAL COPY



A&D Environmental Services

Bill of Lading / Material Manifest

A&D Job No: 1907-0204 Generator ID Number: _____ Page 1 of _____ Emergency Response Phone: _____ Tracking Number: 20761

Generator's Name and Mailing Address: Rockingham Co School
Reidsville N.C.
Generator's site address (if different from mailing address): 1404 Mizpah Church Rd
Reidsville N.C.

Transporter 1 2 Company Name: A&D Environmental Services, Inc. US EPA ID No: NCD98623221

Transporter 1 2 Company Name: A&D Environmental Services (SC), LLC US EPA ID No: 9CD807888331

Designated Facility	Designated Facility	Designated Facility	Designated Facility
A&D Environmental Services, Inc. 2718 Uwharrie Road Archdale, NC 27263 336-434-7750 NCD98623221	A&D Environmental Services, Inc. 3148 Lear Drive Burlington, NC 27215 336-228-0088 NCR000138628	A&D Environmental Services (SC), LLC 1741 Callis Ferry Road Lexington, SC 29073 803-957-9175 SCD987590331	A&D Environmental Services (SC), LLC 1321 White Horse Road, Suite C Greenville, SC 29605 864-234-6056 <u>608 US Hwy 135</u> <u>Myrtle Beach N.C.</u> <u>Michael High School</u>

HM	Hazardous Materials Shipping Name and Description (if applicable)	No.	Type	QTY	WI/Vol	Profile Number
	Petroleum Products for Recycle					
X	NA1993, Diesel fuel, 3, III ERG# 128					
X	NA1993, Fuel oil (No. 1, 2, 4, 5 or 6), 3, III ERG# 128	1	TT	2474	6	
X	UN1203, Gasoline, 3, II ERG# 128					
	USED OIL (Not a USDOT Hazardous Material)					
	Petroleum Contact Water (Not a USDOT Hazardous Material)					

HM	No.	Type	Est. Wt.	Count	Shipping Name and Description (if applicable)	Common Name	Discrepancy
X					RQ, UN2809, Mercury contained in manufactured articles, 8, III ERG# 172	Mercury Containing Articles	
X					RQ, UN3432, Polychlorinated biphenyls, solid, 9, II ERG# 171	TSCA Exempt PCB Lamp Ballasts	
X					UN2800, Batteries, wet, nonspillable, 8, III ERG# 154	Sealed Lead Acid Batteries	
X					UN2794, Batteries, wet, filled with acid, 8, III ERG# 154	Lead Acid Batteries	
X					UN2705, Batteries, wet, filled with alkali, 8, III ERG# 154	Wet NiCad Batteries	
X					UN3090, Lithium batteries, 9, II ERG# 138	Lithium Batteries	
X					UN3028, Batteries, dry, containing potassium hydroxide solid, 8, III ERG# 154	Alkaline Batteries	
X					UN3028, Batteries, dry, containing potassium hydroxide solid, 8, III ERG# 154	NiCad Batteries	
					Universal Waste Lamps (Not DOT-Regulated per 49 CFR 173.164(e))	Fluorescent lamps 4' or <	
					Universal Waste Lamps (Not DOT-Regulated per 49 CFR 173.164(e))	Fluorescent lamps 4'	
					Universal Waste Lamps (Not DOT-Regulated per 49 CFR 173.164(e))	Circular/U-tube lamps	
					Universal Waste Lamps (Not DOT-Regulated per 49 CFR 173.164(e))	Compact Lamps	
					Universal Waste Lamps (Not DOT-Regulated per 49 CFR 173.164(e))	Shatterproof	
					Universal Waste Lamps (Not DOT-Regulated per 49 CFR 173.164(e))	HID/MVUV Lamps	
					Universal Waste Lamps (Not DOT-Regulated per 49 CFR 173.164(e))	Incandescent Lamps	
					Non-PCB Light Ballasts for Recycle (Not DOT-Regulated)	Non-PCB Light Ballasts	
					Electronic Equipment for Recycle (Not DOT-Regulated)	Electronics	

Generator's Certification: This is to certify that the above-named materials are properly classified, described, packaged, marked, and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation. I further certify that none of the materials described above are a hazardous waste as defined by EPA 40CFR Part 261 or any applicable state law, and unless specifically identified above the materials contain less than 1,000 ppm total halogens and do not contain quantifiable levels (2ppm) of PCBs as defined by EPA 40 CFR Parts 278 and 701.

Generator's/Driver's Printed/Typed Name <u>Dennis M. Jeffries</u>	Signature <u>Dennis M. Jeffries</u>	Month <u>7</u>	Day <u>25</u>	Year <u>19</u>
Transporter 1 Printed/Typed Name <u>John Glover</u>	Signature <u>John Glover</u>	Month <u>7</u>	Day <u>25</u>	Year <u>19</u>

Discrepancy Indication / Additional Information:

Designated Facility Certification: I hereby acknowledge receipt of the materials covered by this manifest except for any discrepancy indicated above.

Printed/Typed Name: _____ Signature: _____ Month: _____ Day: _____ Year: _____



A&D Environmental Services

Bill of Lading / Material Manifest

A&D Job No: 19070204	Generator ID Number	Page 1 of	Emergency Response Phone	Tracking Number 20758
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Generator's Name and Mailing Address Rockingham Co School Reidsville N.C	Generator's site address (if different from mailing address) 1404 Mizpah Church Rd Reidsville N.C.
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Transporter <input checked="" type="checkbox"/> 2 <input type="checkbox"/> Company Name A&D Environmental Services, Inc.	US EPA ID No: NCD066232221
Transporter 1 <input type="checkbox"/> 2 <input type="checkbox"/> Company Name A&D Environmental Services (SC), LLC	US EPA ID No: SCD067590331

<input checked="" type="checkbox"/> Designated Facility A&D Environmental Services, Inc. 2718 Uwharrie Road Archdale, NC 27263 336-434-7760 NCD066232221	<input type="checkbox"/> Designated Facility A&D Environmental Services, Inc. 3149 Lear Drive Burlington, NC 27215 336-229-0060 NCR000138628	<input type="checkbox"/> Designated Facility A&D Environmental Services (SC), LLC 1741 Calks Ferry Road Lexington, SC 29073 803-957-9175 SCD067590331	<input type="checkbox"/> Designated Facility A&D Environmental Services (SC), LLC 1321 White Horse Road, Suite C Greenville, SC 29605 864-234-6055
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HM	Hazardous Materials Shipping Name and Description (if applicable)	No.	Type	QTY	WI/Vol	Profile Number
	Petroleum Products for Recycle					
X	NA1993, Diesel fuel, 3, III					ERG# 128
X	NA1993, Fuel oil (No. 1, 2, 4, 5 or 6), 3, III					ERG# 128
X	UN1203, Gasoline, 3, II					ERG# 128
	USED OIL (Not a USDOT Hazardous Material)					
	Petroleum Contact Water (Not a USDOT Hazardous Material)	5/4 dx	TI	310	G	

HM	No.	Type	Est. Wt.	Count	Shipping Name and Description (if applicable)	Common Name	Discrepancy
X					RQ, UN2809, Mercury contained in manufactured articles, 8, III	ERG# 172	Mercury Containing Articles
X					RQ, UN3432, Polychlorinated biphenyls, solid, 8, II	ERG# 171	TSCA Exempt PCB Lamp Ballasts
X					UN2800, Batteries, wet, nonspillable, 8, III	ERG# 154	Sealed Lead Acid Batteries
X					UN2794, Batteries, wet, filled with acid, 8, III	ERG# 154	Lead Acid Batteries
X					UN2795, Batteries, wet, filled with alkali, 8, III	ERG# 154	Wet NiCad Batteries
X					UN3090, Lithium batteries, 8, II	ERG# 138	Lithium Batteries
X					UN3026, Batteries, dry, containing potassium hydroxide solid, 8, III	ERG# 154	Alkaline Batteries
X					UN3026, Batteries, dry, containing potassium hydroxide solid, 8, III	ERG# 154	NiCad Batteries
					Universal Waste Lamps (Not DOT-Regulated per 49 CFR 173.164(e))		Fluorescent lamps 4' or <
					Universal Waste Lamps (Not DOT-Regulated per 49 CFR 173.164(e))		Fluorescent lamps 4'
					Universal Waste Lamps (Not DOT-Regulated per 49 CFR 173.164(e))		Circular/U-tube lamps
					Universal Waste Lamps (Not DOT-Regulated per 49 CFR 173.164(e))		Compact Lamps
					Universal Waste Lamps (Not DOT-Regulated per 49 CFR 173.164(e))		Shattershield
					Universal Waste Lamps (Not DOT-Regulated per 49 CFR 173.164(e))		HiD/MVUV Lamps
					Universal Waste Lamps (Not DOT-Regulated per 49 CFR 173.164(e))		Incandescent Lamps
					Non-PCB Light Ballasts for Recycle (Not DOT-Regulated)		Non-PCB Light Ballasts
					Electronic Equipment for Recycle (Not DOT-Regulated)		Electronics

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Generator's/Officer's Printed/Typed Name Went Van Rockingham Co School	Signature <i>Went Van</i>	Month 7	Day 25	Year 19
Transporter 1 Printed/Typed Name John Glover	Signature <i>John Glover</i>	Month 7	Day 25	Year 19
Transporter 2 Printed/Typed Name	Signature	Month	Day	Year

Discrepancy Indication / Additional Information:

Designated Facility Certification: I hereby acknowledge receipt of the materials covered by this manifest except for any discrepancy indicated above.

Printed/Typed Name	Signature	Month	Day	Year