2600-FM-BECB0013 Rev. 11/2017
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pennsylvania
DEPARTMENT OF ENVIRONMENTAL
PROTECTION

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF ENVIRONMENTAL CLEANUP AND BROWNFIELDS

NARRATIVE REPORT FORM

Facility Name: Washington Crossing water odor					Primary Facility ID:			
Inspection Date: 1-9-25 In		nspection Time:			Lat/Long:			
Program:ECB	⊠ Stora	ge Tanks	☐ HSC	A		LRP		
Owner Name:			Inspection ID:		Sit	e ID:		
Facility Location (911) Address:				Municipality: Upper Makefield Twp.				
Washington Crossing, PA 18977				County: Bucks				
Responsible Official Name:				Responsible Official Address:				
Title:								
Responsible Official Telephone:					Interviewee Name:			
Email Address:				Affiliation:				
				Email Address:				
Narrative: Olivia Budnovich and I met with Denise Burmester who is the Director of Planning and Zoning and Code Enforcement Officer for Upper Makefield Township at the township building. We arrived around 9:40am. We had a discussion of what the complaints were and who they were submitting them. Denise printed out the so we could call ahead and let the residents know that we were coming out to speak with them regarding the petroleum odors in their water. Residents in this area rely on their own potable well. I was able to speak with them regarding the petroleum odors in their water. Residents in this area rely on their own potable well. I was able to speak with them regarding the petroleum odors in their water. Residents in this area rely on their own potable well. I was able to speak with them regarding the petroleum odors in their water. Residents in this area rely on their own potable well. I was able to speak with them regarding the petroleum odors in their water. Residents in this area rely on their own potable with a whole water was a faint petroleum odor in water they also taked that the well water goes through before it gets used. Where we spoke with the carbon units need to be changed. We asked to smell their water to determine there were any detectable odors. Based on my experience, the odor was more of that from No.2 fuel oil/heating oil. There was a faint petroleum odor in water that was poured into a glass but dissipated quickly. They are currently using bottled water. Sample Well and use GPR radar to determine if there were any hidden anomalies in yard, none were detected. The well water results were shown to us. There were exceedance for the residential MSCs for benzene. Informed us that they just had a second well water sample collected that got sent out to be analyzed. I left my business card with so they can contact me if they have any additional questions. We went to next who live at also informed us that the residents at also have odors in their water. I suggested that have had their well								
Signature by the person interviewed does not necessarily imply concurrence w					Telephone. 16 12 65 61 16			
the person was shown the Interviewee Name	report or t	that a copy was left with the pe Interviewee Signature	rson.	Title		Date:		
TIOTHOO HAITIG				inde		Telephone:		

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Facility Name: Washington Crossing water Odor

Primary Facility ID:

Narrative (continued):							
We went next to and spoke with state and state and spoke with state and							
We did not smell a sample of well water as it a carbon unit is currently installed. Sunoco did sample well water last year, but There were no detection of any contaminants in the PADEP shortlist of No.2 fuel oil parameters. also informed me that Sunoco also installed some test pits near pipeline to determine if it was leaking. There was no evidence of a leak observed. I also left my business card if wanted to ask me any questions.							
It was observed that all the potable well heads were in the front yard of the residences.							
We departed the residence around 12:40pm.							

DEP Representative Name	DEP Representative Signature	Title	Date: 1-9-25					
Rebecca Flannery		Geoscientist	Telephone: 484-250-5779					
Signature by the person interviewed does not necessarily imply concurrence with the findings on this report, but does acknowledge that the person was shown the report or that a copy was left with the person.								
Interviewee Name	Interviewee Signature	Title	Date:					
			Telephone:					