Monthly Stationary Generator Run Time Report

Report Due to CES/CEIE by the Tenth of the M	Month!	Reporting	Reporting Period (Month & Year):					
Reporting Activity:				Page 1 of:				
Function	Generator Location	Prior Month's Reading (Hours & Tenths)	Current Month's Reading (Hours & Tenths)	Difference				
Tunction	Generator Eccution	(Hours & Tenens)	(Hours & Tenens)	0.0				
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Insert Additional Rows as needed				0.0				
I certify that the reported information being su	ibmitted is complete and accurate. I und	lerstand that I am subject to potential civil	or criminal enforcement for making false cer					
			_					
AEC Phone Number:	Certifying Da	te:						
			Signature of Activity Environmental Coordin	nator (AEC)				
AEC Email:			AEC Name and Grade					
			AEC Name and Grade					
Commander/Director Name & Grade:		Commander/Director Em	nail:					



IDG® Services Monthly Report Date

Customer Information

Customer: JBLE-Eustis Bldg 1427

Location: JBLE-Eustis

Fort Eustis, VA 23604

Runtime Information

Dominion Power Load Management Runs

None

	Unit #1	Unit #2	Unit #3	Unit #4
Monthly Load Management Run Hours	0	0	0	0
Monthly Stand-by Hours	0	0	0	0
Monthly Testing Hours	0	0	0	0
Monthly MWHrs	0	0	0	0
YTD total run hours	0	0	0	0

Monthly Peak Generator Run Time Report

Fuel Fills This Month None Alarm Information Date Unit Type Action Alarm History None Active Alarms None Notes Section

10-5-11 Unit #3 and #4 tested successfully with load for 30 minutes. Unit #1 and #2 are out of auto.

10-19-11 Unit #3 and #4 tested successfully with load for 30 minutes. Unit #1 and #2 are out of auto.

PowerSecure, Inc. IDG® Monitoring Bureau

Power Secure

Monthly Fuel Combustors Report

Report Due to CES/CEIE by the Tenth of the	e Month!	Reporting Peri	Reporting Period (Month & Year):					
Reporting Activity:				Page 1 of:				
Function	Combuster's Location	Prior Month's Reading	Current Month's	Difference				
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Insert Additional Rows as needed				0.0				
I certify that the reported information being	submitted is complete and accurate. I unde	erstand that I am subject to potential civil o	r criminal enforcement for making fa					
AEC Phone Number:	Certifying Date	e:						
		Sig	nature of Activity Environmental Coo	rdinator (AEC)				
AEC Email:			AEC Name and Grade					
			AEC Name and Grade					
Commander/Director Name & Grade:		Commander/Director Ema	il:					

Monthly Marine and Helicopter Engine Run Time Report

Report Due to CES/CEIE by the Tenth of the Month! Reporting Period (Month & Year):						
Reporting Activity:				Page 1 of:		
Function	Location	Prior Month's Reading (Hours & Tenths)	Current Month's Reading (Hours & Tenths)	Difference		
Marine Engine				0.0		
Helicopter Engine				0.0		
-				0.0		
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Insert Additional Rows as needed				0.0		
I certify that the reported information being subn	nitted is complete and accurate. I un	nderstand that I am subject to potential civil	or criminal enforcement for making false cer	tifications.		
AEC Phone Number:	Certifying D	ate:				
			Signature of Activity Environmental Coordin	nator (AEC)		
AEC Email:			AEC Name and Grade			
Commander/Director Name & Grade:		Commander/Director Em	nail:			

Monthly Fuel Dispensing Report

Facility:			Location: Reporting Period (Month & Year):									
Reporti	ng Dates:	From:		To:			Report Due to CES/CEIE by the Tenth of the Month!					
Reporting A	Activity:									Pa	ge 1 of:	
Reported in Gallons	Fuel Types		UNL (MRR) Mogas		Aviation JET- A		DSL (DS2) Diesel		Open		Open	
	tion											
Opening Invento	ry											
Receipts		_										
Issues		- -								=		
Closing Book Ba	lance	_ •	0.00	-	0.00		0.00		0.00		0.00	
Physical Closing	Inventory	_										
Monthly Gain/Lo	oss		0.00	-	0.00		0.00	•	0.00		0.00	
I certify that the ren	orted information h	oing submitt	ed is complete and a	ccurate I	understand that I am	subject to	notential civil or cri	minal enfor	rcement for making fa	ke certificati	ions	
r certify that the rep	orted information b	ang subiniti	eu is complete and a	iccurate. 1	unuerstanu that i am	subject to	potential civil of cit	iiiiiai eiiioi	tement for making fa	ise certificat	ions.	
AEC Phone Number	r:			Certifying	g Date:		Signat	ure of Activ	rity Environmental Co	oordinator (A	AEC)	
AEC Email:								A	AEC Name and Grade	:	<u> </u>	
Commander/Directo	or Name & Grade:					Command	er/Director Email:					

Monthly Paint Booth Report

Report Due to C	ES/CEIE by the Tenth of the Month!		Reporti	ing Period	(Month	& Year):_			
Repo	rting Activity:	Reporting Location:	_					Page 1 of:	
Item Product Name			MSDS	Uni	t of Issu	e (U/I): pi	int, gallon,	ounce, po	ounds, etc.
Number	(Paints and Solvents)	NSN or Product Number	MSDS Number	Amount Issued	Unit of Issue	Amount Inssued Gallons		Lbs per Gallon	Issue Weight Lbs
1									
3 4 5									
4									
5									
6									
7									
8									
8 9 10									
11									
12									
13									
14									
15									
16									
17									
18									
I certify that the	reported information being submitted is con	nplete and accurate. I understand that I am	subject to potential	civil or crim	inal enfor	cement for n	naking false	certification	ıs.
AEC Phone Nun	nber:	Certifying Date:							
				Signatu	ire of Acti	vity Enviror	nmental Coo	ordinator (A	EC)
AEC Email:									
						AEC Name	and Grade		
Commander/Dir	rector Name & Grade:		Commander/Direc	ctor Email:					

Monthly Stationary Abrasive Blasting Report

Report Due to CES/CEIE by the Te	enth of the Month!		Reporting Period (Month & Year):					
Reporting Activity:						Page 1 of:		
Facility	Location		Containers		Total Weight			
racinty	Building Number	Number	Size	Weight in Lbs	Lbs			
		-		-	_			
Leastify that the venested informati	on being submitted is complete and acco	unate Lundowstand the	Lam subject to no	tontial sixil or ariminal si	aforecoment for making false	ontifications		
			i i am subject to po	tential civil of criminal e	norcement for making raise c	er uncations.		
AEC Phone Number:	Ce	rtifying Date:		Signature of Ac	tivity Environmental Coordin	ator (AEC)		
AEC Email:								
					AEC Name and Grade			
Commander/Director Name & Grac	de:		Commander/I	Director Email:				

Quarterly Solvent Sinks and Parts Washers

Report Due to CES/CEIE b	by the Tenth of the Month!		Reporting	Reporting Period (CY Quarter & Year):					
Reporting Activi	ty:				Pa	nge 1 of:			
Facility	Location Building Number	Equipment Type	Manufacture	Serial Number	Solvent Type with MSDS	Solvent Capacity Gallons			
	nformation being submitted is		lerstand that I am subject to pot	ential civil or criminal enforce	ment for making false certific	ations.			
AEC Phone Number:		Certifying Da	te:	Signature of Activity I	Environmental Coordinator (AEC)			
AEC Email:				AEC	Name and Grade				
Commander/Director Nam	ne & Grade:		Commander/D	irector Email:					