

STATE OF WASHINGTON DEPARTMENT OF ECOLOGY

4601 N Monroe Street • Spokane, Washington 99205-1295 • (509)329-3400

April 15, 2019

Bryce Robbert Avista 1411 East Mission Avenue Spokane, WA 99220-3727

Re: Acceptance of VCP Application for the following Contaminated Site:

• Site Name: Avista Corp Spokane Service Center

• Site Address: 1411 E Mission Ave, Spokane

Cleanup Site ID: 3512
Facility/Site ID: 31739484
VCP Project ID: EA0343

Dear Mr. Robbert:

The Department of Ecology (Ecology) has accepted your Voluntary Cleanup Program (VCP) application for the Avista Corp Spokane Service Center facility (Site). We applied your initiative and welcome your interest in the VCP. This letter confirms your entry into the VCP and provides important information on how we will manage the VCP Cleanup Project (Project) and the Site.

Agreement

Ecology has completed and signed the VCP Agreement governing the Project on April 15, 2019. This is the effective date of the Agreement. Enclosure A includes a copy of the Agreement. Please review it carefully.

Identification

Ecology has assigned a unique name and number to the **Site**. We have also assigned a unique number to your **Project** at the Site. You can find this information in the box at the bottom of the first page of the Agreement. When contacting us, please use this information to identify your Project.

Designated Managers

Please direct communications between Ecology and Avista through the designated managers to the maximum extent possible.

• Ecology

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Ted Uecker

Department of Ecology
Toxic Cleanup Program, Eastern Regional Office
4601 N. Monroe
Spokane, WA 99205

Phone: (509) 329-3522

E-mail: ted.uecker@ecy.wa.gov

Avista

The application designated you, Bryce Robbert, as the project manager for Avista. We will therefore respond only to your requests. If someone replaces you as the project manager or your contact information changes, please submit a Change of Contact Form. You can download the Form from our VCP web site: www.ecy.wa.gov/programs/tcp/vcp/vcpmain.htm.

Requests for Written Opinions

In your application, you requested a written opinion on the sufficiency of your completed remedial actions. Ecology will review the documents you submitted and provide you a written response within about 90 days.

As the cleanup of the Site progresses, you may request written opinions on your planned or completed remedial actions by submitting to Ecology the following:

- Request for Opinion Form, which you can download from our VCP web site: www.ecy.wa.gov/programs/tcp/vcp/vcpmain.htm.
- Plans or reports documenting the remedial action.

Reporting Requirements

When requesting written opinions on planned or completed remedial actions, please comply with the following reporting requirements:

- Licensing. You must submit documents containing geologic, hydrologic, or engineering work under the seal of an appropriately licensed professional, as required by Chapters 18.43 and 18.220 RCW.
- **Data Submittal.** You must submit environmental sampling data in both a printed form and an electronic form capable of being transferred into our Environmental Information

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Management (EIM) system. For an overview of data submittal requirements, please refer to **Enclosure B**, which includes a copy of Toxics Cleanup Program Policy 840. For instructions on how to submit data, please refer to the following web site: www.ecy.wa.gov/programs/tcp/data submittal/data requirements.htm.

Failure to comply with these requirements may result in unnecessary delays.

Payment

Ecology will send monthly invoices to the billing contact designated in the Application Form. If someone replaces the billing contact or their contact information changes, please submit a Change of Contact Form. You can find the Form on the VCP web site.

The invoice will include a summary of the costs incurred, payments received, identity of staff involved, and the amount of time spent on the Project during the previous month. Payment is due within thirty days of the invoice date. For more information on the billing system, please refer to the VCP web site.

Contact Information

We are committed to working with you to accomplish the prompt and effective cleanup of the Site. Again, if you have any questions about the VCP or your Project, please contact Ted Uecker at (509) 329-3522.

Sincerely,

Kathy Falconer Section Manager

Toxics Cleanup Program, ERO

KF: TU

Enclosures (2): A - Copy of VCP Agreement

B – Toxics Cleanup Program Policy 840: Data Submittal Requirements

cc: Josh Lee, GeoEngineers

Joanna Richards, Ecology Fiscal Office

VCP AGREEMENT



INSTRUCTIONS: Submit this Agreement (original) to Ecology as part of your Application. Before submitting, enter the Customer's name and the Site's address on the first page and sign the Agreement on the second page. If your Application is accepted, then Ecology will do the following: 1) identify the Site and VCP project in the box below; 2) sign the Agreement; and 3) send you a copy of the completed Agreement.

This document constitutes an Agreement between the State of Washington Department of Ecology (Ecology) and _ Aนางหล ใจ ภาคาสารา

(Customer) to provide informal site-specific technical consultations under the Voluntary Cleanup Program (VCP) for the Site identified below and associated with the following address:

1411 East Mission Allene, Spokene, 44 99202

The purpose of this Agreement is to facilitate independent remedial action at the Site. Ecology is entering into this Agreement under the authority of the Model Toxics Control Act (MTCA), Chapter 70.105D RCW, and its implementing regulations, Chapter 173-340 WAC. If a term in this Agreement is defined in MTCA or Chapter 173-340 WAC, then that definition shall govern.

Services Provided by Ecology

Upon request, Ecology agrees to provide the Customer informal site-specific technical consultations on the independent remedial actions proposed for or performed at the Site consistent with WAC 173-340-515(5). Those consultations may include assistance in identifying applicable regulatory requirements and opinions on whether the remedial actions proposed for or conducted at the Site meet those requirements.

Ecology may use any appropriate resource to provide the Customer with the requested consultative services. Those resources may include, but shall not be limited to, those of Ecology and the Office of the Attorney General. However, Ecology shall not use independent contractors unless the Customer provides Ecology with prior written authorization.

In accordance with RCW 70.105D.030(1)(i), any opinions provided by Ecology under this Agreement are advisory only and not binding on Ecology. Ecology, the state, and officers and employees of the state are immune from all liability. Furthermore, no cause of action of any nature may arise from any act or omission in providing, or failing to provide, informal advice and assistance under the VCP.

Payment for Services by Customer

The Customer agrees to pay all costs incurred by Ecology in providing the informal site-specific technical consultations requested by the Customer consistent with WAC 173-340-515(6) and 173-340-550(6). Those costs may include the costs incurred by attorneys or independent contractors used by Ecology to provide the requested consultative services. Ecology's hourly costs shall be determined based on the method in WAC 173-340-550(2).

Ecology shall mail the Customer a monthly itemized statement of costs (invoice) by the tenth day of each month (invoice date) that there is a balance on the account. The invoice shall include a summary of the costs incurred, payments received, identity of staff involved, and amount of time staff spent on the project.

The Customer shall pay the required amount by the due date, which shall be thirty (30) calendar days after the invoice date. If payment has not been received by the due date, then Ecology shall withhold

FOR	Facility / Site Name:	Avista Corp	Spokane	Service Center	an army of the Section
BY	Facility / Site No.:	31739484			
ECOLOGY ONLY	VCP Project No.:	EA0343	er e	esti Alexande	

any requested opinions and notify the Customer by certified mail that the debt is past due. If payment has not been received within sixty (60) calendar days of the invoice date, then Ecology shall stop all work under the Agreement and may, as appropriate, assign the debt to a collection agency under Chapter 19.16 RCW. The Customer agrees to pay the collection agency fee incurred by Ecology in the course of debt collection.

Reservation of Rights / No Settlement

This Agreement does not constitute a settlement of liability to the state under MTCA. This Agreement also does not protect a liable person from contribution claims by third parties for matters addressed by the Agreement. The state does not have the authority to settle with any person potentially liable under MTCA except in accordance with RCW 70.105D.040(4). Ecology's signature on this Agreement in no way constitutes a covenant not to sue or a compromise of any Ecology rights or authority.

Ecology reserves all rights under MTCA, including the right to require additional or different remedial actions at the Site should it deem such actions necessary to protect human health and the environment, and to issue orders requiring such remedial actions. Ecology also reserves all rights regarding the injury to, destruction of, or loss of natural resources resulting from the release or threatened release of hazardous substances at the Site.

Effective Date, Modifications, and Severability

The effective date of this Agreement shall be the date on which this Agreement is signed by the Toxics Cleanup Program's Section Manager or delegated representative. This Agreement may be amended by mutual agreement of Ecology and the Customer. Amendments shall be in writing and shall be effective when signed by the Toxics Cleanup Program's Section Manager or delegated representative. If any provision of this Agreement proves to be void, it shall in no way invalidate any other provision of this Agreement.

Termination of Agreement

Either party may terminate this Agreement without cause by sending written notice by U.S. mail to the other party. The effective date of termination shall be the date Ecology sends notice to the Customer or the date Ecology receives notice from the Customer, whichever occurs first. Unless otherwise directed, issuance of a No Further Action opinion, either for the Site as a whole or for a portion of the real property located within the Site, shall constitute notice of termination by Ecology.

Under this Agreement, the Customer is only responsible for costs incurred by Ecology before the effective date of termination. However, termination of this Agreement shall not affect any right Ecology may have to recover its costs under MTCA or any other provision of law.

Representations and Signatures

The undersigned representative of the Customer hereby certifies that he or she is fully authorized to enter into this Agreement and to execute and legally bind the Customer to comply with the Agreement.

STATE OF WASHINGTON		Bryce Rubbent, on behalf of Autim Con,	Avent
DEPARTMENT OF ECOLOGY		Name of Customer	
Lathy Silconer		Garine Mussint	
Signature	controlled (College Section Controlled College Section College	Signature	
KATHY talconer		Bryce Robbert	
Printed Name		Printed Name of Signatory	
Section Manager, Eastern Regional	office	Environmental Scientist	
Toxics Cleanup Program	Section	Title of Signatory	
Date: 4/15/2019		Date: 4/11/7019	

If you need this document in an alternative format, please call the Toxics Cleanup Program at 360-407-7170. Persons with hearing loss can call 711 for Washington Relay Service. Persons with a speech disability can call 877-833-6341.

ECY 070-324 (revised July 2008)



Voluntary Cleanup Program

Washington State Department of Ecology
Toxics Cleanup Program

APPLICATION FORM

Under the Voluntary Cleanup Program (VCP), the Department of Ecology (Ecology) may provide informal site-specific technical consultations to persons conducting independent remedial actions at a hazardous waste site. Ecology may provide such consultations under the authority of the Model Toxics Control Act (MTCA), Chapter 70.105D RCW, and its implementing regulations, Chapter 173-340 WAC.

To enter the VCP, complete and submit to Ecology a VCP Application. The Application consists of the following two documents:

- 1. Application Form (including required attachments). THIS DOCUMENT
- 2. Agreement.

For guidance on how to complete your Application, please refer to the Application Instructions, which are available separately on the VCP web site: www.ecy.wa.gov/programs/tcp/vcp/vcpmain.htm.

Part 1 - ADMINISTRATION	
	The Customer is the person or organization requesting services from responsible for paying the costs incurred by Ecology. The authority and led in the Agreement.
Name of Customer: Avista	(orp
What type of entity is the Custon	ner?
☐ Person	If the Customer is a "person," then the Customer shall serve as both the Project Manager and the Project Billing Contact. Please identify this person and their contact information in both Parts 1B and 1C.
☐ Organization	If the Customer is an "organization," then please identify the Project Manager in Part 1B and the Project Billing Contact in Part 1C. Both persons must be employed by the Customer organization.
What is the Customer's involvem	ent at the Site? Please check all that apply.
Property owner Past property ov Future property Property lessee Other – please s	owner Consultant
If not the current property owner	, is the Customer acting as the agent for the property owner?
🛛 Yes 🗌 No	
If not the current property owner	, is the Customer authorized to grant access to the property?
🛛 Yes 🗌 No	

Part 1 – ADMINISTRATION continued

B. Project Manager Information. Ecology will person must either be the Customer or be emplindependent contractor hired by the Customer. Please of the customer of the customer.	oyed by the Cu	ıstomer, T	his person may not be an
Name: Bryce Robbert	·	Title: Env	pronunce Scientist
Mailing address: 1411 East Mission Auenn	1. MSC-21		
City: Smulane	State: WA		Zip: 99202
Phone: 569 - 495 - 4096 Fax:		E-mail: b.	yee- Mobbert @ ausstacurs.
C. Project Billing Contact Information. Ecology must either be the Customer or be employed by the contractor hired by the Customer. Please enter the	e Customer. Th	nis person r	may not be an independent
Name: Haylu utt		Title: Env	prondental books autor
Mailing address: 141 Enot Missin Ayını,	MSC-ZI		
City: Spokene	State: w/		Zip: 98202
Phone: Fax:			ilee into Caroshware con
D. Project Consultant Information.		-	
Is the Customer a consultant? Yes If you answered "YES," the If you answered "NO" and independent remedial actions.	d the Custome	r hired a d	consultant to conduct the
Name: Josh Lee	n, men enter me	T	mun-in-Training
Organization: (ecuensineers, Inc.		1	Factoring .
Mailing address: 523 East Scoool Aucant		Attacement of the second of th	
City: Spoknac	State: WA		Zip: 99702
Phone: 509-363-3125 Fax:			he a geoenginus. com
Do you want Ecology to contact the Project Consulta ☐ Yes ☒ No	ant?	- Annual	
E. Property Owner Information.			
s the Customer the owner of the property where ind Yes If you answered "YES," then No If you answered "NO," then p	enter the type o	f entity and	skip to the next question.
Name: Scott morris		***************************************	- Excensine office-
Organization: Avista uplities		C-10/07	Amman unan .mm
Mailing address: [411 Bust Missin Aucum			
City: Saukane	State: hA	Į	Zip: 997v2
Phone: 960-227-9197 Fax:		E-mail:	

Part 1 - ADMINISTRATION continued What type of entity is the property owner? Please check only one. Private County Municipal Tribal Mixed Federal Public School State Other – please specify: F. Request for Written Opinion. Are you requesting a written opinion at this time? X Yes No If you answered "YES," on what planned or completed remedial action do you want a written opinion? The Constituted Avista service center garage reneglial action. Please attach to this Application any additional remedial action plans or reports you want Ecology to review. Ecology will base its opinion on the information contained in the Site file, including any information attached to this Application. If you answered "NO," please explain why you are enrolling in the VCP at this time and when you expect to request a written opinion from Ecology. CSID # 3512 remident action - reports susmitted on 3/28/19 Originally Supristed as on INAI Site. Attach additional pages if necessary. G. Reporting Requirements. Please comply with the following reporting requirements when requesting written opinions on planned or completed remedial actions: ☑ Licensing. Documents submitted containing geologic, hydrologic, or engineering work must be under the seal of an appropriately licensed professional, as required by Chapters 18.43 and 18,220 RCW. Data Submittal. Environmental sampling data must be submitted in both a printed form and an electronic form capable of being transferred into Ecology's data management systems. For instructions on how to submit the data, please refer to the following Ecology web site: www.ecy.wa.gov/programs/tcp/data_submittal/Data_Requirements.htm. Failure to comply with these requirements may result in unnecessary delays. Ecology will not issue a No Further Action (NFA) opinion unless these requirements are satisfied.

Madding Colored Colore				
Part 2 - DESC	RIPTION OF THE	SITE		
A. Name of the Otherwise, enter	e Site. If Ecology her a suggested nam	nas already identific e for the Site. You	ed the Site, enter the r may also include an	name provided by Ecology. alternate name.
Name: Autun	h born stoken	m Scrutte Cu	ntr	
Alternate Name	: Washinstru un	eten poner (un	A). Swide Cons	or lenrage
B. Location of The "source pro	Property where the proper petroleum was rele	ne Releases Occu rty where hazardou	rred (Source Proper us substances were re	
Do you know or	which property the	releases occurred	1?	
Ø	Yes If you and answering	swered "YES," th the following quest	nen please refer to ions.	the source property when
□ 1	No If you answ remedial ac	wered "NO," then ction (cleanup) whe	please refer to the pen answering the follow	property addressed by your ving questions.
Physical Addre	ss. Please enter th	e physical address	of the property below	,
Street Address:	1411 Enst 2333	in Alume		
City: Smukma			State: WA	Zip: 9775L 74,00
Geographic Po Juidance on hov	sition. Please en v to complete this p	ter the geographic art, please refer to	al position of the pro instructions on the VC	perty below. For additional P web site.
COORDINATES	LATITUDE:	Degrees: ५기	Minutes: (_72	Seconds: 54
OOONDINATES	Longitude:	Degrees: - 117	Minutes: 3 84	Seconds: 41
	ATION ON PROPERTY: elease or center of parcel	Foutprint ut fu.	mor flut busiding	
	OLLECTION METHOD: SPS or address matching]	Address mother	Twg:	
C	OLLECTION SOURCE: [i.e., map scale]	washington Stal	r Deat. of Ecologic	Toptes clanny sin page
	HORIZONTAL DATUM: ce for coordinate system]	inwhowm		
	ACCURACY LEVEL: [i.e., +/- feet or meters]	4- 12 fut		The state of the s
egal Description			***************************************	
TRS DAT	Ta: Township: 25 A	✓ Range: ५3 €	Section: 9	Quarter-Quarter:
TAX PARCEL #(s): 35093. 20	06		

An " prop	dentification of Properties affected by the Releases (Affected Properties). 'affected property" is a property affected by the release of hazardous substances on the source perty. For example, petroleum released from a leaking UST on one property (source property) may rate through the soil or ground water onto an adjacent property (affected property).
Do a	any of the releases affect any properties adjacent to the source property?
	If you answered "YES," then please identify below each property that you know has been affected by the releases on the source property. If you need to identify additional properties, please attach additional pages.
	No If you answered "NO," then skip to the next question.
	Unknown If you answered "UNKNOWN," then skip to the next question.
1.	Address: 1411 East Missia Aucume. Saulume, LA 49 202
• •	Tax Parcel(s): うらゅう. つのし
2.	Address:
£4.	Tax Parcel(s):
3.	Address:
0.	Tax Parcel(s):
4.	Address:
7.	Tax Parcel(s):
D. Id	lentification of Public Right-of-Ways affected by the Releases.
Do ar	ny of the releases affect any public right-of-ways (e.g., streets)?
	☐ Yes ☒ No ☐ Unknown
If you	answered "YES" above, please specify below. Otherwise, skip to the next question.
Attack	h additional pages if necessary.
***************************************	xtent of the Site.
vviial	is the approximate areal extent of the Site? Please check only one.
	 < 5,000 square feet < > 5,000 square feet, but < 1 acre < > 1 acre, but < 10 acres < > 10 acres
	☐ Unknown

F. Description of Release(s) at the Site.
Source of Release(s).
What are the source(s) of the release(s) at the Site? Please check all that apply.
Point source (e.g., leaking tank) Non-point source (e.g., contaminated soil used as fill) Area-wide lead and arsenic soil contamination (see questions below) Other – please specify: Unknown
To the extent known, please describe the source(s) of the release(s):
Ity brante fluxe release as described in the astudal site Harand
Annua Assessment 8/01/1948.
Attach additional pages if necessary. All 15th Corp Shorton Scrum Centur 5: to Haral Assusance
Circumstances of Release(s). To the extent known, please describe below the circumstances of the release(s).
Beginning in 1944 during the replanement of one of the garage's hydronom lista,
petrolina bont minutin um entomatand in Soils and grand below the last.
Attach additional pages if necessary.
Circumstances of Release Discovery. To the extent known, please describe below the circumstances of the discovery of the release(s).
Initial and Subsequent sugestigators were comboted through December 1995 with
The removal of fun removing hydraula lasts to determine the extent of
Contamination. Un April 5, 1496 Cooksy was hotelow in mosting regulating
the retions of petrolim products.
Attach additional pages if necessary.

Area-Wide Soil Contamination. For inform refer to the following web site: www.ecv information about the Tacoma Smelter Plum to the following web site:
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Drinking Water.
Does any of the contamination at the Site pose a threat or potential threat to an existing drinking water source (ground water or surface water)?
☐ Yes ☒ No ☐ Unknown
If you answered "YES" above, what type of drinking water system is threatened by the contamination? Please check all that apply.
☐ Single Family ☐ Public Drinking Water Supply
If you checked "Public Drinking Water Supply" above, is the contamination located within or upstream of a 10-year wellhead protection area?
☐ Yes ☐ No ☐ Unknown
To help answer the above question or if you answered "Yes" to that question, then go to https://fortress.wa.gov/doh/eh/dw/swap/maps/ or call (800) 521-0323.
Indoor Air.
Are contaminant odors present in any buildings, manholes, or other confined spaces?
☐ Yes ☒ No ☐ Unknown
If you answered "YES" above, please specify:
Attach additional pages if necessary.
H. Maps of the Site.
Please attach to this application map(s) that identify, to the extent known, the following:
The location of the site. The properties, and any public right-of ways, affected by the site. The source(s) of the release(s) at the site. The nature and extent of contamination at the site. Any human or ecological receptors impacted by the site (e.g., drinking water wells). The physical characteristics of the site (e.g., property lines, building and road outlines, surface water bodies, water supply wells, ground water flow direction, and utility right-of-ways). The properties adjacent to the site and the uses of those properties (e.g., gas station, dry cleaner, residential).

Part 3 – OPERATIONAL HI	STORY OF THE SITE							
A. Current Use of Source Property, not other properties								
Current Property Owners. T	o the extent known, plea	se iden	tify below the c	urrent owner of the source				
Name: Scott Maris Title: check Executive officer								
Organization: Avista Luca	tu afta		W. C. W. W. C.					
Mailing address: 기니니 문때								
City: Spuline		State:	wa	Zip code: 9922				
Phone: 806 - 227 - 9187								
Current Business Owner (O) the business located on the so		nown, p	lease identify l	pelow the current owner of				
Name: Shoff mornis			Title: Chief Exa	contract Offrer				
Organization: 4424 loss	Ur or find true							
Mailing address: 4 East			THE STATE OF THE S					
City: Spurme		State:	WA	Zip code: 49 202				
Phone: 860-227-9187			······································	and a manifestation of the second				
Current Business Operation the business located on the so		please	identify below	the current operations of				
What is the current land use of	f the source property? Pl	ease ch	neck all that app	oly.				
☐ Residential ☐ Commercial ☐ Industrial ☐ Agricultural ☐ Other – please	☐ School ☐ Childcare facility ☐ Park specify: <u>{ LL</u> rru wvt-r	nl gas	ntiit					
Is there a currently operationa	l commercial or industrial	busine	ss located on t	he source property?				
🛚 Yes 🗌 No	Unknown							
	If you answered "YES" above, please identify in the following table the current business operations using the North American Industry Classification System (NAICS) codes and specifying the operations.							
NAICS CODE	DESCRIPTION OF OPERATION	IS						
EX: 447110	Gasoline Stations with Con	venienc	e Stores					
221122	Elletric Services	<u> </u>						
22/2/0.	Natural Gas Ofitis	bre trum						
								

Part 3 - OPERATIONAL HISTORY OF THE SITE continued Is there a solid waste handling facility located on the Source Property? ☐ Yes X No Unknown If you answered "YES" above, please identify: Attach additional pages if necessary. Is there a dangerous waste treatment, storage, or disposal facility located on the Source Property? Yes X No Unknown If you answered "YES" above, please identify: Attach additional pages if necessary. Regulation of Current Business Operations. Does the business operate under any federal, state, or local permits related to the release of hazardous substances into the environment (e.g., NPDES permit)? Yes X No Unknown If you answered "YES" above, please specify the regulated operation, the name of the permit, and the date it was issued in the table below. REGULATED OPERATION PERMIT **DATE ISSUED** EX: Wastewater discharge NPDES permit 02/02/02 Has a state or federal notice of enforcement action (e.g., notice of violation) ever been issued related to the release of hazardous substances at the business? V Yes □ No ☐ Unknown If you answered "yes" above, please specify (notice and year issued): ビルい いけん いんしょ しんしょうしゅん Have business operations resulted in any other spills or other unpermitted releases on the source property? X Yes □ No Unknown If you answered "YES" above, please specify in the table below. RELEASE DATE OF RELEASE STATUS OF RELEASE Diesel release to Storm domain reactioned 6/25/11 Remotert.

Part 3 - OPERATIONAL HISTORY OF THE SITE continued

Storage Tank Information. In table below, please identify all above ground storage tanks (AST) and underground storage tanks (UST) that have been used for storing hazardous substances on the source property, irrespective of whether the tanks are still in use or in place. *If you are unable to provide answers to specific questions regarding a tank, please enter "U" for unknown.*

IDENTIFICATION				STATUS AND CLOSURE				RELEASES	
Hazardous Substance	Type (AST/UST)	Size (Gallons)	TANK ID	Date Install	IN USE (Y/N)	DATE CLOSED	CLOSURE METHOD (*)	Past (Y/N)	CURRENT (Y/N)
EX: Diesel	UST	10,000	4	02/87	N	05/98	Removed	Y	N
Scran transform uil	457	7, 300	TIN	07/14	Y			N	N
Schap trumshionment	A) T	7. TOO	TIE	67/14	У	~		1/	N
p:wet	411	3,500	Bulu list	64/13	Y	paraller .		N	N
Start transform u.T	A>7	2,500	1,2,3,4	06/42	Y	, wanter	1	N	N
New transform of	411	10,000	516	06/92	7			11	11

(*) Options = Removed or Closed in Place

B. Past Use of Source Property. Note that the following questions refer only to the Source Property, not other properties affected by the Site. Please answer these questions to the best of your ability.

Past Property Owners. To the extent known, please identify below the owner of the source property at the time the release occurred.

at the time the release occurred						
Name: Washington linter	Phone	Title	:			
Organization:		**************************************				
Mailing address:				5 (c) 1 (t) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c		
City:		State:		Zip code:		
Phone:	Fax:		E-mail:			
Past Business Owners (Operations) business (operator) at the time the	ors). To the extent kr e release occurred.	nown, please	identify be	low the owner of the		
Name: washington unto	Minne	Title	•			
Organization:			***************************************			
Mailing address:			,			
City:	31 1113000	State:	, , , , , , , , , , , , , , , , , , ,	Zip code:		
Phone:	Fax:	E-mail:				
Identification of Past Business of businesses located on the sour (NAICS) codes and/or specifying	ce property using the	identify in the North Ameri	e following t can Industr	able the past operations y Classification System		
NAICS CODE	DESCRIPTION OF OPERATIONS					
EX: 447110	Gasoline Stations with Convenience Stores					
211122	Electric Service	3				
22/2/0	Natural Cas Di	stribution				

Part 3 – OPERATIONAL HISTORY OF THE SITE continued

C. Future Use of Source and Affected Properties. The following questions refer to both source and affected properties. Please answer these questions to the best of your ability.
Will any ownership interest in the source or affected properties be conveyed prior to, or upon completion of, the cleanup?
☐ Yes ☐ Unknown
If you answered "YES" above, please specify:
Attach additional pages if necessary.
Will any of the source or affected properties, or portions of those properties, be redeveloped as part of the cleanup?
🛚 Yes 🗌 No 📋 Unknown
If you answered "YES" above, please specify the proposed land use below. Please check all that apply.
 ☐ Residential ☐ Commercial ☐ Childcare facility ☐ Industrial ☐ Park ☐ Agricultural ☑ Other – please specify:
Please also specify the activities proposed for that land use:
5-Story Concrete parking garage structure for aboutground parking
Attach additional pages if necessary.

Part 4 – ADMINISTRATIVE HISTORY OF THE SITE
Have you previously reported the release(s) of hazardous substances at the Site to Ecology? [X] Yes – If so, when?
Has the cleanup of the Site, or any portion of the Site, ever been managed under the VCP? Yes – If so, please specify the VCP Project Number: 17 / Faviling 5th 17# No Unknown
Has the cleanup of the Site, or any portion of the Site, ever been managed under a federal or state order or decree? Yes – If so, please specify the type and docket number: No Unknown
Part 5 – DESCRIPTION OF INDEPENDENT REMEDIAL ACTIONS AT THE SITE A. Scope of Remedial Actions.
Do you plan to characterize and address all of the contamination at the Site, including any contamination located on affected adjacent properties, as part of the VCP project? ☐ Yes ☑ No ☐ Unknown
If you answered "NO" above, please describe below the scope of the VCP project, including the contamination (properties, portions of a property, media and/or hazardous substances) that you DO NOT plan on characterizing and/or addressing as part of the VCP project. Please include additional pages if necessary.
Attach additional pages if necessary.

Part 5 – DESCRIPTION OF INDEPENDENT REMEDIAL ACTIONS AT THE SITE continued

B. Status of Remedial Actions.

What is the current status of remedial actions at the site? Please check all that apply in the table below.

REMEDIAL ACTION	PLANNED	Ongoing	COMPLETED	NOT APPLICABLE
INITIAL RESPONSE (UST ONLY)			V	
INTERIM ACTION				
REMEDIAL INVESTIGATION			L.	
FEASIBILITY STUDY				~
CLEANUP ACTION			i.	·

C. Documentation of Remedial Actions.

Please list in the table below all known remedial action plans or reports produced for the site, including:

- The title of the plan or report,
- The author (e.g. consulting firm) of the plan or report,
- The date the plan or report was produced,
- Whether the plan or report has been submitted to Ecology,
- The date the plan or report was submitted to Ecology.

	TITLE	AUTHOR	DATE	SUBMITTED TO ECOLOGY	
				Y/N?	DATE
Ex:	John Doe's Site: Remedial Investigation Work Plan	Mom's Consulting Firm	02/20/05	NO	N/A
1.	UST 5th ASSESSMENT Acoust, Auth Affitis	LFR	08/21/09	Y	8/28/2004
2.	Massiba Avenu Wit Cleaned Altown Alm	Johnson Ench Jerus	12/19/09	Y	12/23/2009
3.	Alish served Center lever menere Action	Georgina	3/22/14	γ	3/261-2014
4.					
5.					
6.	,		***************************************	·····	
7.					
8.	·				
9,					
10.					***************************************

Part 6 – STATEMENT AND SIGNATURE							
A. Statement and Signature. The undersigned application is true and accurate to the best of high than the Customer may sign this Application Fo	is or her knowledge. F						
Name: Bryce Nobbert	Title: (unitrohumand Scientest					
Signature: Garme Yolhuna		Date: 4/4/7014					
Organization: Environmental Scientist							
Mailing address: [411 East Mission, Mi	56-21						
City: Spokmi	State: ha	Zip code: ዓናъኒ					
Phone: 559-445-4686 Fax:		E-mail: Irgu. Not bund Wandman					
B. Affiliation.							
What is the signatory's involvement at the Site? Please check all that apply.							
☐ Customer ☐ Property Owner ☐ Consultant ☐ Attorney ☑ Other – please specify:	let Avanuser						

If you need this publication in an alternate format, please call the Toxics Cleanup Program at 360-407-7170. Persons with hearing loss can call 711 for Washington Relay Service. Persons with a speech disability can call 877-833-6341.