



STATE OF WASHINGTON  
**DEPARTMENT OF ECOLOGY**

Eastern Region Office

4601 North Monroe St., Spokane, WA 99205-1295 • 509-329-3400

February 22, 2023

John Parker  
Central Valley School District  
2218 North Molter Road  
Liberty Lake, WA 99019

**Re: Application Acceptance – Voluntary Cleanup Program**

- **Site name:** Spokane Gun Club
- **Site address:** 19615 E Sprague Ave #9656, Spokane Valley
- **Facility/Site ID:** 50340
- **Cleanup Site ID:** 14851
- **VCP Project ID:** EA0374

Dear John Parker:

The Department of Ecology (Ecology) accepted your application to the standard process of the Voluntary Cleanup Program (VCP) for the Spokane Gun Club facility (Site). We applaud your initiative and welcome your interest in the VCP. This letter provides important information on how we will review your VCP cleanup project (project) at the Site.

**Agreement**

We completed and signed your standard VCP agreement for the project on February 22, 2023. This date is the effective date of the agreement. A copy of your signed agreement is [enclosed](#).

**Identification Numbers**

We have assigned a unique name and number to your Site. This information is listed on the first page of your standard VCP agreement ([enclosed](#)). When contacting us, please reference this information to identify your project.

## Communications

Unless otherwise requested, we will communicate directly with you as project manager, as listed on your VCP application form. If you replace your project manager, or the contact information changes, please submit a completed [change of contact form](#).<sup>1</sup>

The following site manager is our point of contact for your project:

Ted Uecker  
Toxics Cleanup Program, Eastern Regional Office (ERO)  
Department of Ecology  
4601 N Monroe St  
Spokane, WA 99205  
509-342-5564  
[ted.uecker@ecy.wa.gov](mailto:ted.uecker@ecy.wa.gov)

## Request for Written Opinion

In your application, you requested a written opinion on the sufficiency of your completed Remedial Investigation and Feasibility Study. We will review your submitted document and expect to provide a written response within approximately 90 calendar days.

As your cleanup progresses, you may request a written opinion on your planned or completed remedial actions by submitting to Ecology:

- A completed [request for opinion form](#)<sup>2</sup>
- Remedial action plans and/or reports.

## Reporting Requirements

When requesting written opinions, you must comply with the following reporting requirements to avoid unnecessary delays in the VCP process:

- **Licensing.** You must submit documents containing geologic and hydrogeologic work and engineering work under the seal of an appropriately licensed professional, as required in chapters [18.220](#)<sup>3</sup> and [18.43](#)<sup>4</sup> RCW, respectively.
- **Data Submittal.** You must submit environmental data to our [Environmental Information Management](#) (EIM) system.<sup>5</sup> The [Toxics Cleanup Program Policy](#)

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<sup>1</sup> <http://www.ecy.wa.gov/programs/tcp/vcp/vcpmain.htm>

<sup>2</sup> <https://fortress.wa.gov/ecy/publications/SummaryPages/ecy070219.html>

<sup>3</sup> <https://apps.leg.wa.gov/RCW/default.aspx?cite=18.220>

<sup>4</sup> <https://apps.leg.wa.gov/RCW/default.aspx?cite=18.43>

<sup>5</sup> <https://ecology.wa.gov/eim>

[840](#)<sup>6</sup> describes data submittal requirements. Please visit the [EIM Submit Data webpage](#) for data submittal instructions.

## **Payment**

We will send monthly invoices to the billing contact listed in your VCP application form. Payment is due within 30 calendar days of the date of each invoice. Our invoices include a summary of costs incurred, payments received, names of staff billing to the project, and the time spent on the project during the previous month.

If you replace your billing contact, or their contact information changes, you must submit a completed [change of contact form](#).

## **Independent remedial action grants and cultural resource compliance review**

You may qualify for an Independent Remedial Action Grant from Ecology after completing an independent cleanup and receiving a no further action opinion from us. We accept grant applications continuously. Visit our [Applying for or managing a grant or loan](#) webpage<sup>7</sup> for information about this program and how to apply.

Under Governor's Executive Order 21-02, we may not fund ground-disturbing remedial actions unless we or another state or federal agency consults with the [Washington State Department of Archaeology and Historic Preservation](#) and affected Tribes, before the remedial actions are performed. The consultation's purpose is to identify potential impacts on cultural resources.

Under the VCP, you may request that we perform the specified consultation by completing and submitting the [Cultural Resources Review Form](#).<sup>8</sup> For more information about compliance with Washington's cultural resource laws, see our [Washington Cultural Resource Regulations: Summary for Independent Cleanup Sites](#).<sup>9</sup>

## **Contact Information**

We are committed to working with you to reach the prompt and effective cleanup of your Site. If you have any questions, please contact me at [ted.uecker@ecy.wa.gov](mailto:ted.uecker@ecy.wa.gov), or call 509-342-5564.

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<sup>6</sup> <https://fortress.wa.gov/ecy/publications/SummaryPages/1609050.html>

<sup>7</sup> <https://ecology.wa.gov/About-us/How-we-operate/Grants-loans#Apply>

<sup>8</sup> <https://fortress.wa.gov/ecy/publications/documents/ecy070537.pdf>

<sup>9</sup> <https://fortress.wa.gov/ecy/publications/SummaryPages/1909059.html>

Sincerely,

A handwritten signature in black ink, appearing to read "Ted Uecker", written in a cursive style.

Ted M. Uecker  
VCP Coordinator  
Toxics Cleanup Program, ERO

tu:hg

Enclosure: Copy of signed VCP Agreement

cc: Jay Rowell, Central Valley School District  
John Haney, Haley & Aldrich, Inc.  
TCP Cost Recovery Coordinator, Ecology Fiscal Office (by email)  
Nicholas Acklam, Ecology *NA*

**Enclosure**

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Copy of Signed Standard VCP Agreement

# 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 Central Valley School District (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:

Spokane Gun Club; 19615 E Sprague Ave #9656, Spokane Valley, WA 99016

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 COMPLETION BY ECOLOGY ONLY	Facility / Site Name: Spokane Gun Club
	Facility / Site No.: 50340
	VCP Project No.: EA0374

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  
DEPARTMENT OF ECOLOGY

  
\_\_\_\_\_  
Signature

Nicholas M. Acklam

Printed Name

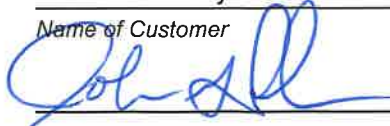
Section Manager, Eastern Regional Office  
Toxics Cleanup Program

Section

Date: February 22, 2023

Central Valley School District

Name of Customer



Signature

John Parker

Printed Name of Signatory

Superintendent

Title of Signatory

Date: 2-14-23

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.



# 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: <https://ecology.wa.gov/Spills-Cleanup/Contamination-cleanup/Cleanup-process/Cleanup-options/Voluntary-cleanup-program>

#### Part 1 - ADMINISTRATION

**A. Customer Information.** The Customer is the person or organization requesting services from Ecology under the VCP, and is responsible for paying the costs incurred by Ecology. The authority and duty of the Customer are explained in the Agreement.

Name of Customer:

What type of entity is the Customer?

☐ 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 involvement at the Site? Please check all that apply.

☒ Property owner

☐ Business owner (operator)

☐ Past property owner

☐ Mortgage holder

☒ Future property owner

☐ Consultant

☐ Property lessee

☐ Attorney

☐ Other – please specify: \_\_\_\_\_

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 send this person all official correspondence. This person must either be the Customer or be employed by the Customer. This person may not be an independent contractor hired by the Customer. Please enter the required information below.

Name: John Parker		Title: Superintendent	
Mailing address: Central Valley School District; 2218 N. Molter Road			
City: Liberty Lake		State: WA	Zip: 99019
Phone: 509.558.5400	Fax:		E-mail: jparker@cvsd.org

**C. Project Billing Contact Information.** Ecology will send this person monthly invoices. This person must either be the Customer or be employed by the Customer. This person may not be an independent contractor hired by the Customer. Please enter the required information below.

Name: Jay Rowell		Title: Director of Special Projects	
Mailing address: Central Valley School District; 2218 N. Molter Road			
City: Liberty Lake		State: WA	Zip: 99019
Phone: 509.558.5400	Fax:		E-mail: jrowell@cvsd.org

**D. Project Consultant Information.**

Is the Customer a consultant?

- ☐ Yes    *If you answered "YES," then skip to the next question.*
- ☒ No    *If you answered "NO" and the Customer hired a consultant to conduct the independent remedial action, then enter the required information below.*

Name: John Haney, PE		Title: Principal Engineer	
Organization: Haley & Aldrich, Inc.			
Mailing address: 505 West Riverside Avenue, Suite 205			
City: Spokane		State: WA	Zip: 99201
Phone: 509.960.7422	Fax:		E-mail: jhaney@haleyaldrich.com
Do you want Ecology to contact the Project Consultant?			
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

**E. Property Owner Information.**

Is the Customer the owner of the property where independent remedial action is being conducted?

- ☒ Yes    *If you answered "YES," then enter the type of entity and skip to the next question.*
- ☐ No    *If you answered "NO," then please enter all of the required information below.*

Name:		Title:	
Organization:			
Mailing address:			
City:		State:	Zip:
Phone:	Fax:		E-mail:

**Part 1 – ADMINISTRATION continued**

What type of entity is the property owner? Please check only one.

- |  |   |
|--|---|
| <input type="checkbox"/> Private                       | <input type="checkbox"/> County                   |
| <input type="checkbox"/> Tribal                        | <input type="checkbox"/> Municipal                |
| <input type="checkbox"/> Federal                       | <input type="checkbox"/> Mixed                    |
| <input type="checkbox"/> State                         | <input checked="" type="checkbox"/> Public School |
| <input type="checkbox"/> Other – please specify: _____ |   |

#### F. Request for Written Opinion.

Are you requesting a written opinion at this time?

- ☒ Yes ☐ No

If you answered “**YES**,” on what planned or completed remedial action do you want a written opinion?

"Remedial Investigation/Feasibility Study; Spokane Gun Club" (Hart Crowser, 20 September 2021)

**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.

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: <https://ecology.wa.gov/Research-Data/Data-resources/Environmental-Information-Management-database/EIM-submit-data> 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.**

## Part 2 - DESCRIPTION OF THE SITE

**A. Name of the Site.** If Ecology has already identified the Site, enter the name provided by Ecology. Otherwise, enter a suggested name for the Site. You may also include an alternate name.

Name: Former Spokane Gun Club

Alternate Name:

### B. Location of Property where the Releases Occurred (Source Property).

The "source property" is the property where hazardous substances were released into the environment. For example, if petroleum was released from a leaking UST, the source property is the property where the UST was located.

Do you know on which property the releases occurred?

☒ Yes

*If you answered "YES," then please refer to the source property when answering the following questions.*

☐ No

*If you answered "NO," then please refer to the property addressed by your remedial action (cleanup) when answering the following questions.*

**Physical Address.** Please enter the physical address of the property below.

Street Address: 19615 E Sprague Ave #9656

City: Spokane Valley

State: WA

Zip: 99016

**Geographic Position.** Please enter the geographical position of the property below. For additional guidance on how to complete this part, please refer to instructions on the VCP web site.

COORDINATES	LATITUDE:	Degrees: 47	Minutes: 39	Seconds: 12N
	LONGITUDE :	Degrees: 117	Minutes: 8	Seconds: 26.33W
LOCATION ON PROPERTY: [e.g., point of release or center of parcel]		Gun range shot/clay pigeon shotfall zone and accumulation		
COLLECTION METHOD: [e.g., GPS or address matching]		Address matching		
COLLECTION SOURCE: [i.e., map scale]		Google Earth		
HORIZONTAL DATUM: [i.e., base reference for coordinate system]		WGS84		
ACCURACY LEVEL: [i.e., +/- feet or meters]		15 meters		

### Legal Descriptions.

TRS DATA:	Township: 25N	Range: 45E	Section: 17	Quarter-Quarter: SWSE
TAX PARCEL #(s):	55174.9208; 55174.9210; 55174.9211			

## Part 2 - DESCRIPTION OF THE SITE continued

### C. Identification of Properties affected by the Releases (Affected Properties).

An "affected property" is a property affected by the release of hazardous substances on the source property. For example, petroleum released from a leaking UST on one property (source property) may migrate through the soil or ground water onto an adjacent property (affected property).

Do any of the releases affect any properties adjacent to the source property?

☐ Yes

*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:
	Tax Parcel(s):
2.	Address:
	Tax Parcel(s):
3.	Address:
	Tax Parcel(s):
4.	Address:
	Tax Parcel(s):

### D. Identification of Public Right-of-Ways affected by the Releases.

Do any 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.

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Attach additional pages if necessary.

### E. Extent of the Site.

What 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

## Part 2 - DESCRIPTION OF THE SITE continued

### 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: Pb and PAHs
- ☐ Unknown

To the extent known, please describe the source(s) of the release(s):

Contaminants of concern include lead (from lead shot) and PAHs (from clay pigeon targets) from skeet and trap shooting range operations.

Attach additional pages if necessary.

**Circumstances of Release(s).** To the extent known, please describe below the circumstances of the release(s).

Typical gun range operations.

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).

Phase II Environmental Site Assessment activities during due diligence period of property sale.

Attach additional pages if necessary.

## Part 2 - DESCRIPTION OF THE SITE continued

**Area-Wide Soil Contamination.** For information about the area-wide soil contamination project, please refer to the following web site: <https://ecology.wa.gov/Spills-Cleanup/Contamination-cleanup/Dirt-Alert-program>. For information about the Tacoma Smelter Plume (TSP) and the associated Management Plan, please refer to the following web site: <https://ecology.wa.gov/Spills-Cleanup/Contamination-cleanup/Cleanup-sites/Toxic-cleanup-sites/Tacoma-smelter>

Is the Site located within an area affected by smelter emissions, such as the TSP area?

☐ Yes ☒ No ☐ Unknown

To determine whether your Site is located within the TSP area, please refer to the map on the TSP web site identified above.

Is the Site located on a former apple or pear orchard in operation prior to 1947?

☐ Yes ☒ No ☐ Unknown

Is the Site impacted by area-wide arsenic and/or lead soil contamination?

☐ Yes ☒ No ☐ Unknown

**G. Nature and Extent of Hazardous Substances Released at the Site.** The following questions refer to conditions after the release, but prior to any cleanup, of the hazardous substances at the Site.

**Hazardous Substances and Affected Media.** To the extent known, please identify in the following table the hazardous substances released at the Site and the media (e.g., soil) impacted by those substances. Use the codes at the bottom of the table.

HAZARDOUS SUBSTANCE	AFFECTED MEDIA				
	SOIL	GROUND WATER	SURFACE WATER	SEDIMENT	AIR
EXAMPLE: Benzene	C	S	N/A	N/A	B
Lead	C	N/A	N/A	N/A	N/A
PAH	C	N/A	N/A	N/A	N/A

When identifying the affected media in the table above, please use one of the following codes:

- C = confirmed, above cleanup level
- B = confirmed, below cleanup level
- O = confirmed, not present
- S = suspected
- N/A = not suspected
- U = unknown

## Part 2 - DESCRIPTION OF THE SITE continued

### ***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:

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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 HISTORY OF THE SITE

**A. Current Use of Source Property.** *Note that the following questions refer only to the Source Property, not other properties affected by the Site. Answer these questions to the best of your ability.*

**Current Property Owners.** To the extent known, please identify below the current owner of the source property.

Name:	Title:	
Organization: Central Valley School District		
Mailing address: See above		
City:	State:	Zip code:
Phone:		

**Current Business Owner (Operator).** To the extent known, please identify below the current owner of the business located on the source property.

Name: NA	Title:	
Organization:		
Mailing address:		
City:	State:	Zip code:
Phone:		

**Current Business Operations.** To the extent known, please identify below the current operations of the business located on the source property.

What is the current land use of the source property? Please check all that apply.

- |   |   |
|---|---|
| <input type="checkbox"/> Residential                                      | <input type="checkbox"/> School             |
| <input type="checkbox"/> Commercial                                       | <input type="checkbox"/> Childcare facility |
| <input type="checkbox"/> Industrial                                       | <input type="checkbox"/> Park               |
| <input type="checkbox"/> Agricultural                                     |   |
| <input checked="" type="checkbox"/> Other – please specify: <u>vacant</u> |   |

Is there a currently operational commercial or industrial business located on the 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 OPERATIONS
EX: 447110	Gasoline Stations with Convenience Stores



### Part 3 – OPERATIONAL HISTORY OF THE SITE continued

Is there a solid waste handling facility located on the Source Property?

☐ Yes ☒ 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 ☒ 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 ☒ 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?

☐ Yes ☒ No ☐ Unknown

If you answered "yes" above, please specify (notice and year issued): \_\_\_\_\_

Have business operations resulted in any other spills or other unpermitted releases on the source property?

☒ Yes ☐ No ☐ Unknown

If you answered "YES" above, please specify in the table below.

RELEASE	DATE OF RELEASE	STATUS OF RELEASE
Lead (from shot)	1948 to July 2021	stable
PAH (from clay pigeon targets)	1948 to July 2021	stable

### 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

(\*) 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.

Name:		Title:
Organization: Spokane Gun Club		
Mailing address:		
City:	State:	Zip code:
Phone: 509.926.6505	Fax:	E-mail: information@spokanegunclub.org

**Past Business Owners (Operators).** To the extent known, please identify below the owner of the business (operator) at the time the release occurred.

Name:		Title:
Organization: Spokane Gun Club		
Mailing address:		
City:	State:	Zip code:
Phone:	Fax:	E-mail:

**Identification of Past Business Operations.** Please identify in the following table the past operations of businesses located on the source property using the North American Industry Classification System (NAICS) codes and/or specifying the operations.

NAICS CODE	DESCRIPTION OF OPERATIONS
EX: 447110	Gasoline Stations with Convenience Stores
713990	Recreational shooting (trap/skeet)

### 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    ☐ No    ☐ Unknown

If you answered "YES" above, please specify:

Remediated, surplus property will be divested to help pay for cleanup. Likely future use will be residential development.

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.

- |  |   |
|--|---|
| <input type="checkbox"/> Residential             | <input type="checkbox"/> School             |
| <input type="checkbox"/> Commercial              | <input type="checkbox"/> Childcare facility |
| <input type="checkbox"/> Industrial              | <input type="checkbox"/> Park               |
| <input type="checkbox"/> Agricultural            |   |
| <input type="checkbox"/> Other – please specify: |   |

Please also specify the activities proposed for that land use:

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?

☒ Yes – If so, when? Oct 2018 ☐ No ☐ Unknown

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: EA0350  
☐ 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

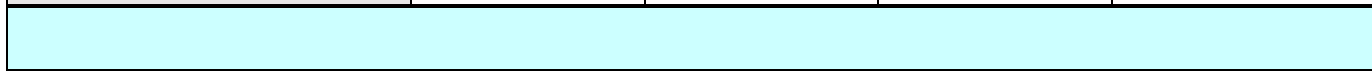
If you answered "NO" above, please describe below the scope of the VCP project, including the contamination (properties, portions of a property, media and/or hazardous substances) that you DO plan on characterizing and/or addressing as part of the VCP project. Please include additional pages if necessary.

Attach additional pages if necessary.



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

				X
			X	
			X	
	X			



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.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

## Part 6 – STATEMENT AND SIGNATURE

**A. Statement and Signature.** The undersigned affirms that the information contained in this application is true and accurate to the best of his or her knowledge. Please note that someone other than the Customer may sign this Application Form.

Name: John Parker

Title: Superintendent

Signature: 

Date: 2-14-23

Organization: Central Valley School District;

Mailing address: 2218 N. Molter Road

City: Liberty Lake

State: WA

Zip code: 99019

Phone: 509.558.5400

Fax:

E-mail: jparker@cvsd.org

### B. Affiliation.

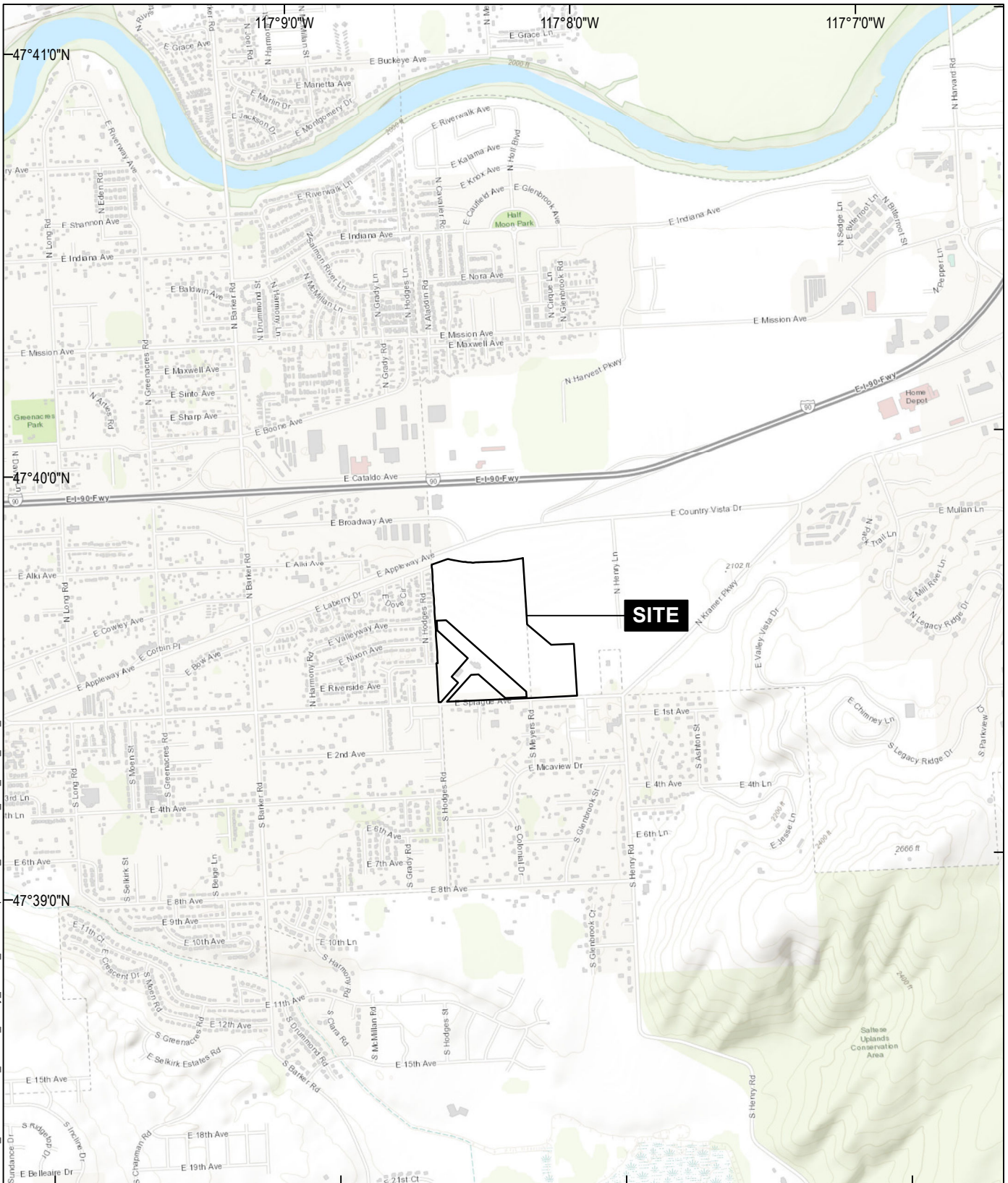
What is the signatory's involvement at the Site? Please check all that apply.

- ☐ Customer
- ☐ Property Owner
- ☐ Consultant
- ☐ Attorney
- ☒ Other – please specify: Owner representative

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.



GIS FILE PATH: C:\Users\raumann\Desktop\LOCAL\_DATA\135500\_Central\_Valley\_School\_District\Mapa2021\_02\135500\_000\_0001\_SITE\_VICINITY.mxd — USER: raumann — LAST SAVED: 9/16/2021 11:14:26 AM



MAP SOURCE: ESRI  
SITE COORDINATES: 47°39'34\"/>

**HARTCROWSER**  
A division of Haley & Aldrich

SPOKANE GUN CLUB  
GREENACRES, WASHINGTON

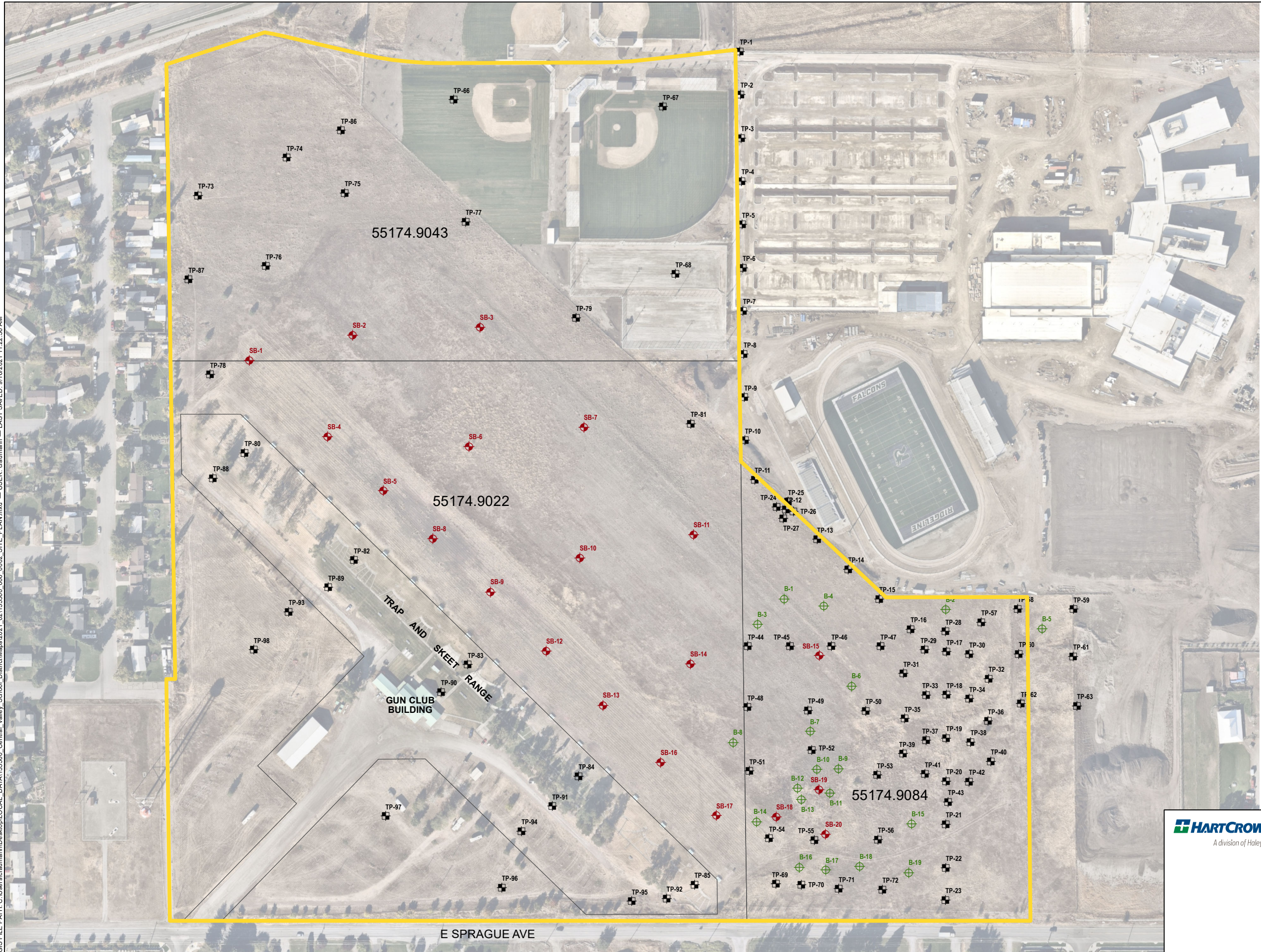
## SITE VICINITY

APPROXIMATE SCALE: 1 IN = 2000 FT  
SEPTEMBER 2021

FIGURE 1



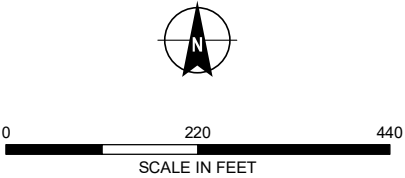
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- LEGEND**
- PUSH PROBE BORING
  - SONIC BORING
  - TEST PIT
  - PARCEL BOUNDARY
  - SITE

**NOTE**

AERIAL IMAGERY SOURCE: NEARMAP,  
30 SEPTEMBER 2020



**HARTCROWSER** SPOKANE GUN CLUB  
A division of Haley & Aldrich GREENACRES, WASHINGTON

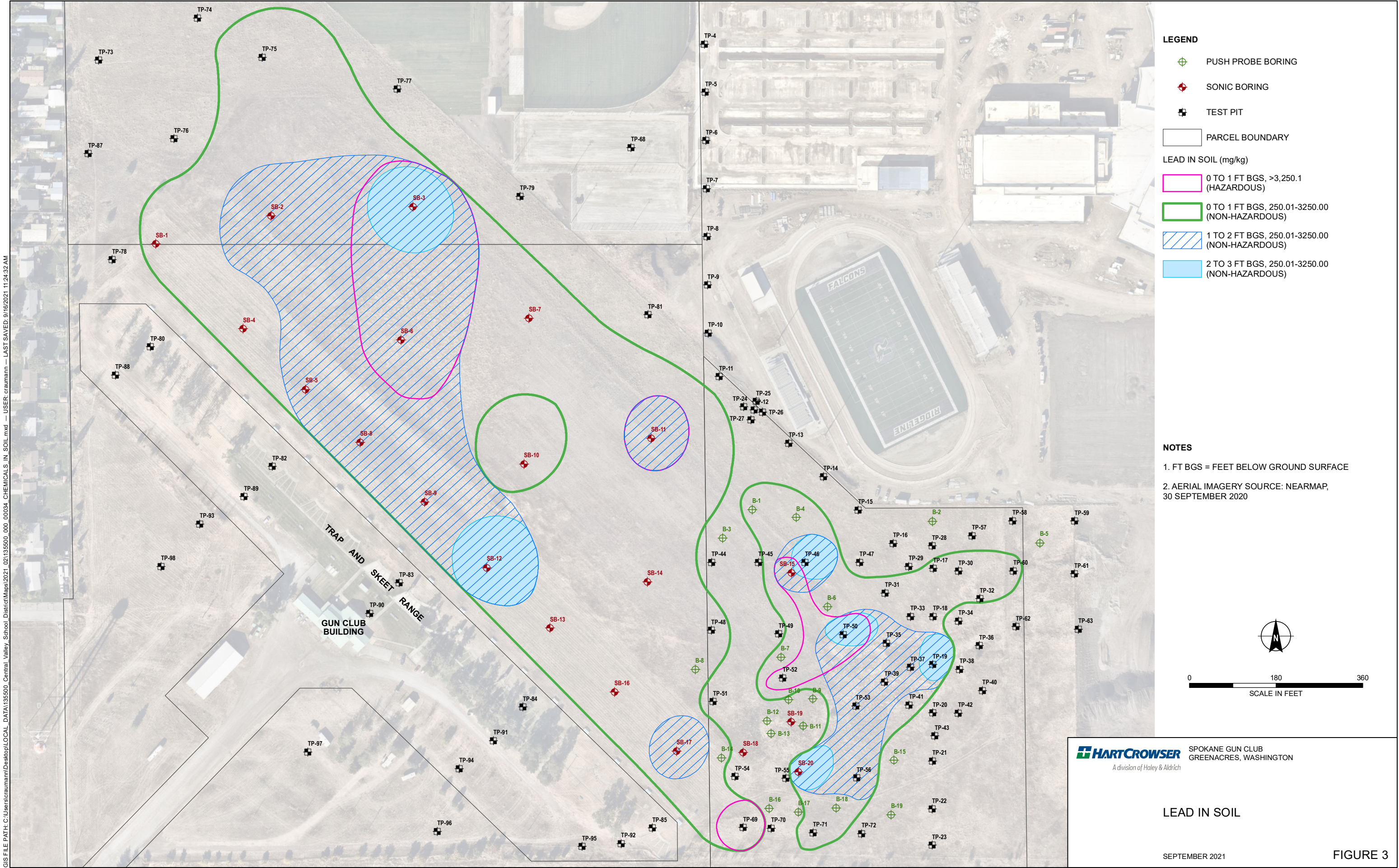
**SITE PLAN**

SEPTEMBER 2021

**FIGURE 2**



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