

# **Voluntary Cleanup Program**

Washington State Department of Ecology Toxics Cleanup Program

# **REQUEST FOR OPINION FORM**

Use this form to request a written opinion on your planned or completed independent remedial action under the Voluntary Cleanup Program (VCP). Attach to this form the plans or reports documenting the remedial action. Please submit only one form for each request.

Step 1: IDENTIFY HAZARDOUS WASTE SITE	
Please identify below the hazardous waste site for which you are requesting a written opinion under the VCP. This information may be found on the VCP Agreement.	
VCP Project No.:	
Step 2: REQUEST WRITTEN OPINION ON PLAN OR REPORT	
What type of independent remedial action plan or report are you submitting to Ecology for review under the VCP? Please check all that apply.	
Remedial investigation report	
Feasibility study report	
Property cleanup* plan (* cleanup of one or more parcels located within the Site)	
nse to Further Action Letter	
h a written opinion on the planned or completed	
nited to:	
Whether the planned or completed remedial action at the site meets the substantive requirements of the Model Toxics Control Act (MTCA), and/or	
Whether further remedial action is necessary at the site under MTCA.	

## Step 3: REPRESENTATIONS AND SIGNATURE

The undersigned representative of the Customer hereby certifies that he or she is fully authorized to request services from Ecology under the Agreement for this VCP Project.

Name: Josh Owen Title: Senior Project Manager

Signature: Date: 11/27/23

Organization: Martin S. Burck Assoc., Inc.

Mailing address: 200 N Wasco Ct.

City: Hood River State: OR Zip code:97031

Phone: (541) 387-4422 | Fax: (541) 387-4813 | E-mail: JOwen@MSBAenvironmental.com

### Step 4: SUBMITTAL

Please mail your completed form and the independent remedial action plan or report that you are requesting Ecology review to the site manager Ecology assigned to your Site. If a site manager has not yet been assigned, please mail your completed form to the Ecology regional office for the County in which your Site is located.



#### Northwest Region:

Attn: VCP Coordinator 3190 160th Ave. SE Bellevue, WA 98008-5452

#### Southwest Region:

Attn: VCP Coordinator P.O. Box 47775 Olympia, WA 98504-7775

#### Central Region:

Attn: VCP Coordinator 1250 West Alder St. Union Gap, WA 98903-0009

#### Eastern Region:

Attn: VCP Coordinator N. 4601 Monroe Spokane WA 99205-1295

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.

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