Apply to the Expedited VCP process

You may apply for the **Expedited VCP** process only during periods specified by Ecology. To see when Ecology is accepting **Expedited VCP** applications, see the <u>Expedited VCP webpage</u>⁵ or subscribe to our **Expedited VCP** <u>email list</u>.

To apply for the Expedited VCP process, you must submit to Ecology all the following:

- <u>Expedited VCP agreement</u>,⁶ signed by applicant
- <u>Agency determination checklist</u>, completed
- Remedial investigation report or equivalent, meeting the elements of our <u>remedial investigation</u> <u>checklist</u>, and other reports you want us to review (one searchable pdf file and one hard copy each)
- Electronic environmental data submitted to the <u>Environmental Information Management</u> (EIM) system,⁷
 which provides automatically generated email as confirmation
- Project schedule.

See the <u>Voluntary Cleanup Program (VCP): Guidance for the Expedited VCP Process</u>⁸ for additional information.

To submit your **Expedited VCP** application to Ecology, upload electronic files to <u>Box.com</u>,⁹ after creating your online account. Send hard copy materials to:

Sarah Wollwage, Expedited VCP Planner Toxics Cleanup Program Department of Ecology PO Box 47600 Lacey, WA 98504-7600

Do not send your Expedited VCP application materials to an Ecology regional office.

You **must pay** the **nonrefundable application fee** within seven calendar days of receiving our invoice, or we may reject your **Expedited VCP** application. After receiving the complete application, we will send the invoice to the email listed for the project billing contact in **Part 1.C** of this form. We will not process your application until we have received payment. Contact <u>Sarah Wollwage</u> at <u>Sarah.Wollwage@ecy.wa.gov</u> or (360) 407-7141 for additional information.

Part 1 – Administration

1.A		applicant is the person or organization requesting services from Ecology, and is aying Ecology's incurred costs incurred. The agreement explains the applicant's y.
Name	of applicant: Walls	s Property Management
What ty	pe of entity is the	applicant?
Per		rson applicant must serve as the project billing contact. Identify this person and contact information in both Parts 1.B and 1.C .
🛛 Org		rganization applicant must identify the project manager in Part 1.B and the oct billing contact in Part 1.C. The organization must employ both persons.

9 https://account.box.com/login

⁵ https://ecology.wa.gov/Spills-Cleanup/Contamination-cleanup/Voluntary-Cleanup-Program/VCP-Expedited

⁶ http://ecyapfass/Biblio2/SummaryPages/ECY070633.html

⁷ https://ecology.wa.gov/Research-Data/Data-resources/Environmental-Information-Management-database/EIMsubmit-data

⁸ https://fortress.wa.gov/ecy/publications/summarypages/2009053.html

Part 1 – Administration

What is	the applicant's involv	ement at the site? Cl	neck all that apply.			
☐ pas ☐ futu ☐ pro	perty owner t property owner re property owner perty lessee er – specify:	 business owner mortgage holder consultant attorney 	pr	ivate pe	roperty owner rson / organization ncy / organization	
facility of	or have a contractual	right to purchase, rec	cant must have an own levelop, or reuse the fa ne Expedited VCP pro	cility. A	nterest in or operate the gents for the property	
If not th	e current property ow	ner, is the applicant a	authorized to grant prop	perty acc	cess? 🛛 yes 🗌 no	
1.B	1.B Project manager. We will send the project manager all official correspondence. The project manager must be either the applicant or employed by the applicant. The project manager may not be an independent contractor hired by the applicant. Enter the required information.					
Name:	Mr. Shad Bernhoft		Title: Real Es	state De	velopment Manager	
Mailing	address: 5210 Russ	ell Avenue NW #100	i i			
City: Se	attle		State: WA		Zip: 98107	
Phone:	425-260-5602	Email: shad@walls	propertymanagement.c	om	Fax:	
1.C	Project billing contact. We will send the project billing contact monthly invoices. The project billing contact must be either the applicant or employed by the applicant. The project billing contact may not be an independent contractor hired by the applicant. Enter the required information.					
Name:	Same as above		Title:			
Mailing	address:			•		
City:			State:		Zip:	
Phone:		Email:			Fax:	
1.D	Project consultant.					
Is the a	pplicant a consultant?	>	🗌 yes 🖾 no			
lf "yes"	, skip to Part 1.E .					
	and the applicant hir d information.	ed a consultant to co	nduct the independent	remedia	al action, enter the	
Name:	Scott Rose		Title: Senior	Hydroge	eologist	
Organiz	zation: Associated Er	vironmental Group	I , <u>,,,,,</u> ,,,			
Mailing	address: 2633 Parkr	nont Lane SW, Suite	A			
City: O	lympia		State: WA		Zip: 98502-5751	
Phone:	360-352-9835	Email: srose@aegv	va.com		Fax:	
Do you	want us to contact th	e project consultant?	🛛 yes 🗌 no			

Part 1 – Administration

1.E Property owner.	
Is the applicant the owner of the property where independent remedial action is	being conducted?
 yes If "yes", enter the type of entity and skip to Part 1.F. No If "no", enter below all of the required information. 	
Name: Title:	
Organization: Chinook Ballard, LLC	_
Mailing address: 5210 Russell Avenue NW #100	
City: Seattle State: WA	Zip: 98107
Phone: Email:	Fax:
What type of entity is the property owner? Check one.	
Image: Second system Image: Second system <td< td=""><td></td></td<>	
1.F Request for written opinion.	
Are you requesting a written opinion at this time? If "yes", list the report(s) or plan(s) below you are requesting a written opinion f must meet the requirements on our <u>Working with the Voluntary Cleanup Progra</u> Attach to this application additional remedial action reports or plans you want	am. ¹⁰
base our opinion on the information in the site file, including information attache1.G Reporting requirements. Comply with the following two reporting requirements.	
written opinions on planned or completed remedial actions.	
1.G.1 Professional licensing. Documents submitted containing geologic, hydengineering work must be stamped by of an appropriately licensed pro Chapters 18.220 and 18.43 RCW.	
1.G.2 Data submittal to EIM . You must submit all site environmental samplin electronic format that meets our requirements for transfer into our <u>EIM</u> webpage for instructions on how to apply for an account and submit you with these requirements may result in unnecessary delays.	system. Refer to our <u>EIM</u>
For Expedited VCP applications only , the study ID and CSV file name "XVC" in the title. Do not use spaces or hyphens in either the study ID o	

¹⁰ https://ecology.wa.gov/Spills-Cleanup/Contamination-cleanup/Voluntary-Cleanup-Program/Working-with-VCP

Part 1 – Administration

Have you submitted all the site's environmental data to EIM?

🗌 yes 🖂 no

yes If "yes", enter the study ID and CSV file name below.

no If **"no"**, and data need to be submitted, submit your data to EIM first, and then complete the required information below.

We will not accept your Expedited VCP application unless you have satisfied these requirements.

We will not issue a no further action (NFA) opinion, unless you have satisfied these requirements.

Study ID	CSV File name	Submitted to EIM? (y/n)
Ex: XVCNW9999	Ex: XVCnw9999_June20_results.csv	
Study ID:	CSV File name:	
Study ID:	CSV File name:	
Study ID:	CSV File name:	
Study ID:	CSV File name:	
Study ID:	CSV File name:	
Study ID:	CSV File name:	
Study ID:	CSV File name:	
Study ID:	CSV File name:	

Part 2 – Site description

2.A	Site name. If we have already identified the site, enter the site name we provided. Otherwise, enter a suggested name for the site. You may also include an alternative name.					
Name:	Chinook Development					
Aiterna	tive name:					
2.B	Source property. The source property is the property where hazardous substances were released into the environment. For example, for an underground storage tank (UST) release, the source property is where the underground storage tank is located that caused the release.					
Do you	know on which property the	releases occurred?	? 🛛 yes 🖾 no 🖉	(See attached cover letter)		
below.	", refer to the source propert	·				
	, refer to the property addres phic position below.	sed by your cleanu	p when identifying the	e physical address and		
2.B.1	Physical address. Enter th	ne property's physic	al address.			
- Calendra - C	Physical address. Enter the oddress: 1446 NW 53rd Stree	n sente de reserve des la contra de la serve en la contra de la contra de la contra de la contra de la contra La contra de la contr	al address.			
1.00000000	ddress: 1446 NW 53 rd Stree	n sente de reserve des la contra de la serve en la contra de la contra de la contra de la contra de la contra La contra de la contr	al address. State: WA	Zip: 98107		
Street a City: S	ddress: 1446 NW 53 rd Stree	t .	State: WA	Zip: 98107		
Street a City: S	address: 1446 NW 53 rd Stree eattle Geographic position. Ent Latitude: 47	t .	State: WA	Zip: 98107 Seconds:		