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 <u>Pollution Liability Insurance Agency (PLIA)</u>

(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: 15410 Main St NE. Duvall. WA 98019: FS# 48143795: Town Center Mini Mart Texaco

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	Facility / Site Name: JOWN Center	Mini Mart Texaco
- BY ECOLOGY	Facility / Site No.: 48143795	
ONLY	VCP Project No.: NW2879	i i vi

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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 FOOLOGY
Banny blogowshi
Signature Burry ROGowski
Printed Name
Section Manager, <u>HQ (Hanup</u>
Toxics Cleanup Program Section
Date:6/1/17

Pollution Liability Insurance Agency (PLIA)
Name of Customer
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Signature

Carrie Pederson Printed Name of Signatory

Agency Planner

Title of Signatory

Date: 5/22/17

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:

- 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: <u>www.ecy.wa.gov/programs/tcp/vcp/vcpmain.htm</u>.

Part 1	- ADMINISTRATION	
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	The Customer is the person or organization requesting services from responsible for paying the costs incurred by Ecology. The authority and ned in the Agreement.
Name of Customer: Pollution Li	ability Insurance Agency (PLIA)
What type of entity is the Custor	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 involver	nent at the Site? Please check all that apply.
 Property owner Past property of Future property Property lessee Other – please 	wner 🗌 Mortgage holder
If not the current property owne	r, is the Customer acting as the agent for the property owner?
🗌 Yes 🖾 No	· _,
If not the current property owne	r, is the Customer authorized to grant access to the property?

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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: Carrie Pederson, PLIA		Title:				
Mailing address: 330 Desmond Drive						
City: Lacey		State: WA	State: WA Zip: 98504			
Phone: 360-407-0519	Fax:		E-mail: carrie.pederson@plia.wa.gov			
must either be the Customer or be	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: same as above	<u>^</u>		Title:			
Mailing address:						
City:		State: TX		Zip:		
Phone:	Fax:		E-mail:			
D. Project Consultant Information	on.	n an ann agu agu an	e'r	n na ser		
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: Eric Marhofer Title:					
Organization: Aspect Consulting,						
Mailing address: 401 2nd Avenue City: Seattle	5., Suite 201	State: WA		Zin: 09104		
	·····	State. VVA	Zip: 98104			
Phone: 206-838-6582	no' 7/16_838_6587 [Fov		emarhofer@aspectconsulting.com			
Do you want Ecology to contact the Project Consultant?						
E. Property Owner Information.			 	a		
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: Owner				ner		
Organization: Ondal LLC				<u> </u>		
Mailing address: 15410 Main Stre	et					
City: Duvall		State:WA		Zip: 98019		
Phone:	Fax:		E-mail:			
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Part 1 – ADMINISTRATION continued
What type of entity is the property owner? Please check only one.
Private County Tribal Municipal . Federal Mixed State Public School Other – please specify:
F. Request for Written Opinion.
Are you requesting a written opinion at this time?
If you answered "YES," on what planned or completed remedial action do you want a written opinion? Remedial Investigation & Focused Feasibility Study (RI/FFS), Town Center Mini Mart, prepared by Aspect Consulting dated April 21, 2017.
~
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: 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.

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Part 2 - DESCRI	PTION 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: Town Center	Mini Mart Texaco	0			
Alternate Name: F	arwest Petroleur	n Company		-	
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 w	hich property the	releases occurre	ed?		
Xes If you answered "YES," then please refer to the source property wher answering the following questions.				to the source property when	
No.			n please refer to t hen answering the fo	he property addressed by your blowing questions.	
Physical Address	Please enter th	e physical addre	ss of the property be	elow.	
Street Address: 15	410 Main Street				
City: Duvall	City: Duvall State: WA Zip: 98019				
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:	Minutes:	Seconds:	
GUORDINATES	LONGITUDE :	Degrees:	Minutes:	Seconds:	
LOCATION ON PROPERTY: [e.g., point of release or center of parcel]					
COLLECTION METHOD: [e.g., GPS or address matching] Ecology database & King County Assessor				sor	
	LECTION SOURCE:			·· ·	
	[i.e., map scale] DRIZONTAL DATUM:				
[i.e., base reference for coordinate system] ACCURACY LEVEL:					
[i.e., +/- feet or meters]					
Legal Description		······································		، ۱ <u>ــــــــــــــــــــــــــــــــــــ</u>	
	Township: 26N	Range: 6E	Section: 13	Quarter-Quarter:	
TAX PARCEL #(S)	132606-9012				

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Par	t 2 - DESCRIPTION	OF THE SITE continued				
An " prop	affected property" is erty. For example, p	erties affected by the Releases (Affected Properties). a property affected by the release of hazardous substances on the source etroleum released from a leaking UST on one property (source property) may ground water onto an adjacent property (affected property).				
Do a	any of the releases aff	ect 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. Io	dentification of Publ	ic Right-of-Ways affected by the Releases.				
Do a	ny of the releases affe	ect any public right-of-ways (e.g., streets)?				
	🛛 Yes 🗌	No 🗌 Unknown				
lf you	u answered "YES " ab	ove, please specify below. Otherwise, skip to the next question.				
Pote	entially under Main St	reet (Hwy 203)				
•						
Attac	h additional pages if neces	ssary.				
E. E	xtent of the Site.					
What	t is the approximate a	real extent of the Site? Please check only one.				
		square feet				
	> 5,000 square feet, but < 1 acre > 1 acre, but < 10 acres					
	> 10 acres					
	Unknown					

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Part 2 - DESCRIPTION OF THE SITE continued
F. Description of Release(s) at the Site.
Source of Reléase(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):
The release is associated with former underground storage tanks at the Site.
Attach additional pages if necessary. In February 2005, a Phase II was conducted and found soil and groundwater concentrations above MTCA A Cleanup levels for TPH-G/BTEX.
<i>Circumstances of Release(s).</i> To the extent known, please describe below the circumstances of th release(s).
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· · · ·
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).
······································
Attach additional pages if necessary.

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Part 2 - DESCRIPTION OF THE SITE continued

Area-Wide Soil Contamination. For information for the following web site: www.ecy information about the Tacoma Smelter Plume to the following web site: www.ecy.wa.gov/pressite: www.ecy.wa.gov/pres	.wa.gov/pro e (TSP) and ograms/tcp/	grams/tcp/ar the associa sites/tacoma	rea .wide/arc ted Manage smelter/ts	ea wide hp.h ment Plan, p hp.htm	<u>ıtml</u> . För
Is the Site located within an area affected by	smelter em	issions, sucl	n as the TSF	^o area?	
🖓 🗌 Yes 🔲 No 🛛 Unkn	own				
To determine whether your Site is located wi site identified above.	thin the TS	P area, pleas	se refer to th	ne map on the	e TSP web
Is the Site located on a former apple or pear	orchard in (pperation price	or to 1947?		
🗌 Yes 🔲 No 🛛 Unkn					
Is the Site impacted by area-wide arsenic an	d/or lead sc	il contamina	tion?		
Yes No 🛛 Unkn				-	
G. Nature and Extent of Hazardous Subst to conditions after the release, but prior to an					
Hazardous Substances and Affected Medi table the hazardous substances released at t substances. Use the codes at the bottom of t	he Site and				
	<pre> * * * * * * * * * * * * * * * * * * *</pre>	, A	FFECTED ME	DIA X	анан тараалан байлаган алан алан алан алан алан алан алан ал
HAZARDOUS SUBSTANCE	Śóil	GROUND WATER	SURFACE WATER	SEDIMENT	Air
EXAMPLE: Benzene	Û .	Ŝ	N/A	N/A	B.
Gasoline	С	С			
Benzene	C	C			
Toluene	С	C			
Ethylbenzene	С	C			
Total Xylenes	C	С			-
					e
 When identifying the affected media in the table above, please C = confirmed, above cleanup level B = confirmed, below cleanup level 	: use one of the	following codes:			
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 <u>https://fortress.wa.gov/doh/eh/dw/swap/maps/</u> 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). 				
 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).				

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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: Own	ner			
Organization: Ondal LLC	Organization: Ondal LLC						
Mailing address: 15410 Main	Street						
City: Duvall		State:	WA	Zip code: 98019			
Phone:							
Current Business Owner (Op the business located on the so	perator). To the extent k surce property.		olease ideni	tify below the current owner of			
Name:			Title:				
Organization:							
Mailing address:			- 				
City:	,	State:		Zip code:			
Phone:	· · · · · ·		-	L			
Current Business Operation the business located on the so		, pleas	e identify b	elow the current operations of			
What is the current land use of	f the source property? Pl	ease c	heck all tha	t apply.			
Residential School Commercial Childcare facility Industrial Park Agricultural Other – please specify:							
Is there a currently operationa	l commercial or industria	l busine	ess 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 Cor						
447110	Gasoline Stations with Cor	nvenien	ce Stores				
·	. <u> </u>			<u> </u>			

	<u> </u>	·						
Part 3 – OPERATIONAL HISTO	ORY OF THE SITE continued							
Is there a solid waste handling fac	ility 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 treatm	ent, storage, or disposal facility loc	ated on the Source Property?						
🗌 Yes 🖾 No	📋 Unknown	:						
If you answered "YES" above, plea	ase identify:							
		· · · · · · · · · · · · · · · · · · ·						
Attach additional pages if necessary.	:							
Regulation of Current Business	Operations.							
Does the business operate under substances into the environment (related to the release of hazardous						
🗌 Yes 🔲 No	🛛 Unknown							
If you answered "YES" above, ple date it was issued in the table belo		on, the name of the permit, and the						
REGULATED OPERATION	Permit	DATE ISSUED						
EX: Wastewater discharge	NPDES permit	02/02/02						
		· · · · · · · · · · · · · · · · · · ·						
Has a state or federal notice of en the release of hazardous substance		plation) ever been issued related to						
🗌 Yes 🔲 No	🗌 Unknown							
If you answered "yes" above, pleas	se specify (notice and year issued)	:						
Have business operations resulte property?	ed in any other spills or other un	permitted releases on the source						
🗌 Yes 🔲 No	🖾 Unknown							
If you answered "YES" above, plea	ase specify in the table below.							
RELEASE	DATE OF RELEASE	STATUS OF RELEASE						
reny tennen men tib 44/2 fit fite in the state propagation of path any state and a fit	anne an ann an ann an ann an ann an ann an							
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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	Ý	N	
Gasoline	UST	12k	REG UNLEAD	12/15/09	Y					
Gasoline	UST	8k	SUP UNLEAD	12/15/09	Y					
gasoline	UST		1-reg	8/10/87	n	12/3/09	removed			
gasoline	ust		2-sup	8/10/87	n	12/3/09	removed			
gasoline	ust	-	3-u/l	8/10/87	n	12/3/09	removed			
			-	-		(*) Op	tions = Removed of	or Closed	in Plac	

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:

Phone:

Organization:

Mailing address:			
City:	State	e:	Zip code:

E-mail:

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:

Fax:

Organization:

organizationi

Mailing address:

City:		State:		Zip code:	
Phone:	Fax:	E-r	nail:		

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
447110	Gasoline Station with Convenience Store

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Part 3 – OPERATIONAL HISTORY OF THE SITE continued

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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:
·
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 School Commercial Childcare facility Industrial Park Agricultural Other – please specify:
Please also specify the activities proposed for that land use:
· · · · · · · · · · · · · · · · · · ·
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Attach additional pages if necessary.

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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? <u>10/7/99</u> No  ⊠_ Unknown							
Has the cleanup of the Site, or any portion of the Site, ever been managed under the VCP?							
<ul> <li>Yes – If so, please specify the VCP Project Number:</li> <li>No</li> <li>Unknown</li> </ul>							
Has the cleanup of the Site, or any portion of the Site, ever been managed under a federal or state order or decree?							
<ul> <li>Yes – If so, please specify the type and docket number:</li> <li>No</li> <li>Unknown</li> </ul>							
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.							
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Attach additional pages if necessary.							

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

### **B.** Status of Remedial Actions.

REMEDIAL ACTION	PLANNED	ONGOING	COMPLETED	NOT APPLICABLE
INITIAL RESPONSE (UST ONLY)				×
INTERIM ACTION				
REMEDIAL INVESTIGATION		X		
FEASIBILITY STUDY		X		
CLEANUP ACTION		X		

#### 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 AUTHO	AUTHOR	DATE	SUBMITTED TO ECOLOGY	
	IIILE	Admor		Y/N?	DATE
Ex:	John Doe's Site: Remedial Investigation Work Plan	Mom's Consulting Firm	02/20/05	NO	N/A
1.	Remedial Investigation and Focused Feasibility Study	Aspect Consulting	4/21/17	Y	5/23/17
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: Carrie Pederson							
Signature: (1) Date: 5/23/17							
Organization: PLIA							
Mailing address: 330 Desmond D	)rive		Ϋ́,				
City: Lacey		State: V	VA		Zip code: 98504		
Phone: 360-407-0519	Fax: 360-407-0509			E-mail: carrie.pe	derson@plia.wa.gov		
B. Affiliation.	- <u> </u>		;				
What is the signatory's involveme	nt at the Site? Please	e check a	Il that	apply.	<u>د</u> .		
Customer  Property Owner  Consultant Attorney  Other – please specify:							

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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