



STATE OF WASHINGTON
DEPARTMENT OF ECOLOGY

Northwest Regional Office • 3190 160th Ave SE • Bellevue, WA 98008-5452 • 425-649-7000
711 for Washington Relay Service • Persons with a speech disability can call 877-833-6341

October 6, 2015

Mr. Brian Anderson
The Boeing Company
PO Box 3707, M/C 1W-12
Seattle, WA 98124

Re: Determination of Potentially Liable Person Status

Dear Mr. Anderson:

On August 13, 2015, the Department of Ecology (Ecology) sent you written notice regarding your proposed status as a potentially liable person (PLP) for a release of hazardous substances at the following site:

- Name: Port of Seattle Terminal 115 South
- Address: 6000 W. Marginal Way S., Seattle, WA 98134
- County Assessor's Parcel Number(s) 5367202505
- Facility/Site No.: FS 98422914

The 30-day comment period on this preliminary notice expired on September 18, 2015.

We have received and evaluated your comments. Based on the information available to date, Ecology finds that credible evidence exists which supports your status as a potentially liable person for the release at Port of Seattle Terminal 115 South. On the basis of this finding, Ecology has determined that you are a Potentially Liable Person (PLP) with regard to Port of Seattle Terminal 115 South.

Your rights and responsibilities as a PLP are outlined in Chapter 70.105D RCW, and WAC 173-340. Ecology's site manager for the facility, Donna Ortiz de Anaya, will contact you with information about how Ecology intends to proceed with the cleanup at this site.

If you have any questions regarding this notice, please contact me (425) 649-7054 or by email at rwar461@ecy.wa.gov.

Sincerely,

Robert Warren
Section Manager
Toxics Cleanup Program

By Certified Mail 7011 0470 0003 3682 4714

cc: Donna Ortiz de Anaya, Ecology
Ivy Anderson, AAG, Ecology



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits. *TC/ORTIZ*

1. Article Addressed to:

**MR BRIAN ANDERSON
PO BOX 3707 M/C 1W-12
SEATTLE WA 98124**



2. Article Number
(Transfer from service label)

7011 0470 0003 3682 3922

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
X *Mike Myers* Addressee

B. Received by (Printed Name) C. Date of Delivery
Mike Myers

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes