



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

January 25, 2019

Mr. Andrew Seitz  
7415 Stibgen Road NW  
Olympia, WA 98502

**Re: Instructions for a New VCP Application for the following Site:**

- **Site Name:** Seitz Property
- **Site Address:** Brian Lane NW, Silverdale WA 98383
- **Facility/Site No.:** 6865393
- **CS ID:** 1472

Dear Mr. Seitz:

After your meeting last week with Mr. Jim Pendowski and Bob Warren, Ecology has agreed to accept this site back into the VCP. Enclosed is a pre-filled VCP application that will need your signature and some limited information. Please fill in those areas marked with post-it notes. These notes have instructions on them to clarify what's needed. The detailed instructions are outlined below:

- Please sign and date the VCP Agreement included herein. Please understand that your application will not be accepted back into VCP if the Agreement is not signed.
- Please add the contact information of the consultant hired to work with you on page 2, Part D of the VCP Application. Please understand that your application will not be accepted back into VCP without a licensed environmental professional/consultant working with you through this process.
- Please add the title and date of the report in addition to the name and company of the licensed environmental professional/consultant producing the report you want an opinion on. Please understand that your application will not be accepted back into VCP without requesting an opinion and providing a cleanup report for Ecology's review. The report:
  - Must be stamped by the licensed environmental professional/consultant who prepared it and completed the remaining work.
  - Must be a Remedial Investigation report or an Investigation Summary equivalent to a Remedial Investigation report.
  - Must meet the requirements outlined in the Remedial Investigation checklist (enclosed).
- Please sign and date page 15 of the application.



Mr. Andrew Seitz  
January 25, 2019  
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- Please mail the originals of the completed forms with your report directly to me for processing.

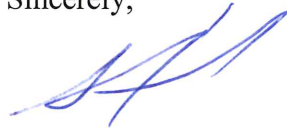
A copy of the soils report is also included with this package.

### **Contact Information**

We are committed to working with you to accomplish the prompt and effective cleanup of the Site. However, we need to ensure the requirements of the program are met. The items outlined above and that were discussed in your meeting with Mr. Pendowski and Mr. Warren are geared to make sure the paperwork is complete in order for Ecology to issue an opinion through the VCP process.

If you have any questions about the VCP or your Project, please contact me at (425) 649-7233 or e-mail me at [sofe461@ecy.wa.gov](mailto:sofe461@ecy.wa.gov).

Sincerely,



Sonia Fernández  
VCP Coordinator  
Toxics Cleanup Program, NWRO

SF:sf

Enclosures (4): Partially filled VCP Agreement  
Partially filled VCP Application  
Remedial Investigation Checklist  
Copy of Site Soil Investigation Report

cc: Jim Pendowski, Toxics Cleanup Program Program Manager (email)  
Robert Warren, NWRO Toxics Cleanup Program Section Manager (email)  
Grant Yang, Former VCP Site Manager (e-mail)  
File

# 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 Andrew Seitz (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:  
Brian Lane NW, Silverdale, WA 98383

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.

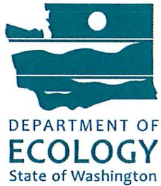
The Customer shall pay the required amount by the due date, which shall be thirty (30) calendar days after the invoice date. If payment has not been received by the due date, then Ecology shall withhold

|   |                              |
|---|------------------------------|
| <b>FOR<br/>COMPLETION<br/>BY<br/>ECOLOGY<br/>ONLY</b> | <b>Facility / Site Name:</b> |
|   | <b>Facility / Site No.:</b>  |
|   | <b>VCP Project No.:</b>      |









# 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: [www.ecy.wa.gov/programs/tcp/vcp/vcpmain.htm](http://www.ecy.wa.gov/programs/tcp/vcp/vcpmain.htm).

#### 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: Andrew Seitz

What type of entity is the Customer?

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Person | <i>If the Customer is a “<b>person</b>,” 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.</i> |
| <input type="checkbox"/> Organization      | <i>If the Customer is an “<b>organization</b>,” then please identify the Project Manager in Part 1B and the Project Billing Contact in Part 1C. <b>Both persons must be employed by the Customer organization.</b></i>     |

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

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Property owner     | <input type="checkbox"/> Business owner (operator) |
| <input type="checkbox"/> Past property owner           | <input type="checkbox"/> Mortgage holder           |
| <input type="checkbox"/> Future property owner         | <input type="checkbox"/> Consultant                |
| <input type="checkbox"/> Property lessee               | <input type="checkbox"/> Attorney                  |
| <input type="checkbox"/> 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: Mr. Andrew Seitz                |      | Title: Property Owner |            |
| Mailing address: 7415 Stibgen Road NW |      |                       |            |
| City: Olympia                         |      | State: WA             | Zip: 98502 |
| Phone: (360) 280-4707                 | Fax: | E-mail:               |            |

**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: Mr. Andrew Seitz                |      | Title: Property Owner |            |
| Mailing address: 7415 Stibgen Road NW |      |                       |            |
| City: Olympia                         |      | State: WA             | Zip: 98502 |
| Phone: (360) 280-4707                 | Fax: | E-mail:               |            |

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

Do you want Ecology to contact the Project Consultant?  
 Yes  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: Mr. Andrew Seitz |      | Title: Property Owner |      |
| 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 checked="" 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 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?

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**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.

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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](http://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.**



## 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: Seitz Property

Alternate Name: Seitz Property

### 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: Brian Lane NW

City: Silverdale

State: Washington

Zip: 98383

**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: 40 | Seconds: 9.7  |
|   | LONGITUDE : | Degrees: -122         | Minutes: 41 | Seconds: 49.6 |
| LOCATION ON PROPERTY:<br>[e.g., point of release or center of parcel] |             | Point of release      |             |               |
| COLLECTION METHOD:<br>[e.g., GPS or address matching]                 |             | USGS Topographic maps |             |               |
| COLLECTION SOURCE:<br>[i.e., map scale]                               |             | 1:24K/25K             |             |               |
| HORIZONTAL DATUM:<br>[i.e., base reference for coordinate system]     |             | NAD27                 |             |               |
| ACCURACY LEVEL:<br>[i.e., +/- feet or meters]                         |             |                       |             |               |

### Legal Descriptions.

|                  |                                      |            |            |                         |
|------------------|--------------------------------------|------------|------------|-------------------------|
| TRS DATA:        | Township: 25 N                       | Range: 1 E | Section: 8 | Quarter-Quarter: NE, SE |
| TAX PARCEL #(s): | 082501-4-025-2001, 082501-4-026-2000 |            |            |                         |

**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

**Area-Wide Soil Contamination.** For information about the area-wide soil contamination project, please refer to the following web site: [www.ecy.wa.gov/programs/tcp/area\\_wide/area\\_wide\\_hp.html](http://www.ecy.wa.gov/programs/tcp/area_wide/area_wide_hp.html). For information about the Tacoma Smelter Plume (TSP) and the associated Management Plan, please refer to the following web site: [www.ecy.wa.gov/programs/tcp/sites/tacoma\\_smelter/ts\\_hp.htm](http://www.ecy.wa.gov/programs/tcp/sites/tacoma_smelter/ts_hp.htm).

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   |
| Diesel              | O              | U            | N/A           | N/A      | N/A |
| Oil                 | O              | U            | N/A           | N/A      | N/A |
| Lead                | B              | U            | N/A           | N/A      | N/A |
| Arsenic             | C              | U            | N/A           | N/A      | N/A |
| Cadmium             | O              | U            | N/A           | N/A      | N/A |
| Chromium            | B              | U            | N/A           | N/A      | N/A |
| Mercury             | O              | U            | N/A           | N/A      | N/A |
| PAHs                | C              | U            | 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: Mr. Andrew Seitz                |           | Title: Property Owner |
| Organization:                         |           |                       |
| Mailing address: 7415 Stibgen Road NW |           |                       |
| City: Olympia                         | State: WA | Zip code: 98502       |
| Phone: (360) 280-4707                 |           |                       |

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

|                  |        |           |
|------------------|--------|-----------|
| Name:            |        | 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>Undeveloped</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:

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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:

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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 |
|---------|-----------------|-------------------|
|         |                 |                   |
|         |                 |                   |
|         |                 |                   |
|         |                 |                   |

**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: Deceased   |        | Title:    |
| Organization:    |        |           |
| Mailing address: |        |           |
| City:            | State: | Zip code: |
| Phone:           | Fax:   | 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: Not applicable. |        | Title:    |
| Organization:         |        |           |
| 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 |
|            |   |
|            |   |
|            |   |



**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:

Current owner is aware of the ongoing investigation at the Site.

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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:

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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? \_\_\_\_\_  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: NW3037  
 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 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.**

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

| 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  | 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.  | Silverdale Dump Site, Removal Site Assessment, Trip Report | Superfund Technical Assessment & Response Team | 10/30/97 | Y                    |      |
| 2.  | Buried Drum Search-Sietz Property                          | Geo-Recon International                        | 8/26/05  | Y                    |      |
| 3.  | Site Hazard Assessment                                     | Kitsap County Health District                  | 2/7/06   | Y                    |      |
| 4.  | Seitz Property Sampling and Analysis Plan                  | Kitsap County Health District                  | 11/3/05  | Y                    |      |
| 5.  | Miscellaneous Laboratory Results                           | Various  | Various  | Y                    |      |
| 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.

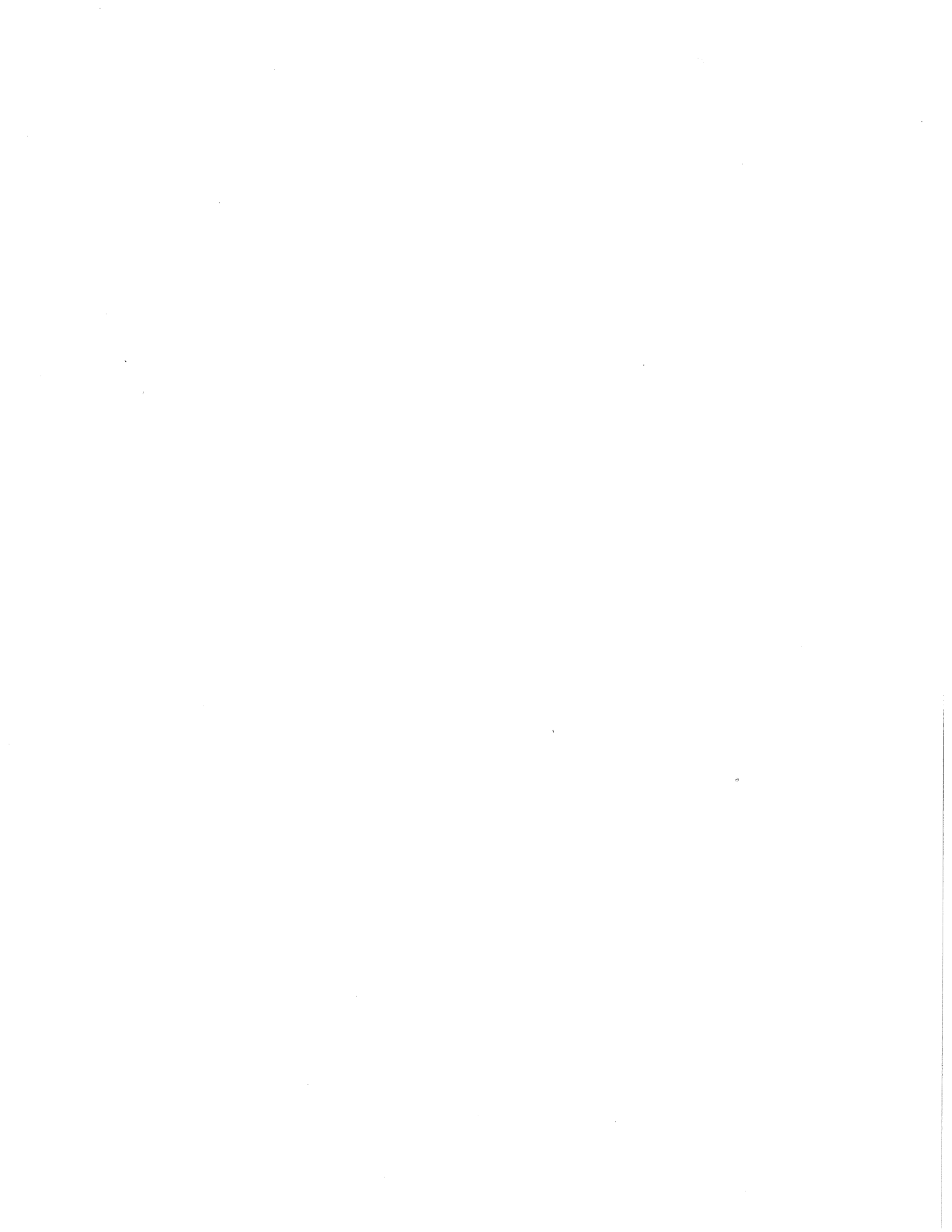
|                                       |      |                       |                 |
|---------------------------------------|------|-----------------------|-----------------|
| Name: Andrew Seitz                    |      | Title: Property Owner |                 |
| Signature:                            |      | Date:                 |                 |
| Organization:                         |      |                       |                 |
| Mailing address: 7414 Stibgen Road NW |      |                       |                 |
| City: Olympia                         |      | State: WA             | Zip code: 98502 |
| Phone: (360) 280-4707                 | Fax: |                       | E-mail:         |

### B. Affiliation.

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

- Customer
- Property Owner
- Consultant
- Attorney
- Other – please specify: \_\_\_\_\_

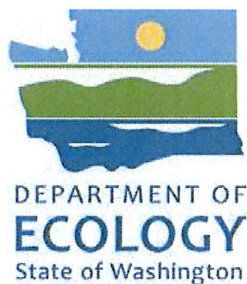
If you need this publication in an alternate format, please call the Toxics Cleanup Program at 360-407-7170. Persons with hearing loss can call 711 for Washington Relay Service. Persons with a speech disability can call 877-833-6341.





# Remedial Investigation Checklist

## Toxics Cleanup Program



May 2016

Publication No. 16-09-006

### FOR ECOLOGY USE ONLY

Site Name/FSID:

Report Name:

Date Submitted:

Reviewed By:

Review Date:



## Remedial Investigation (RI) Checklist Guidance

The Model Toxics Control Act (MTCA) regulation Washington Administrative Code (WAC) 173-340-350(7) broadly describes the elements necessary to complete a RI. The purpose of a RI is to collect and evaluate sufficient information to fully characterize the nature and extent of contamination at a site.

This RI checklist is considered guidance based on the MTCA cleanup regulation WAC 173-340. Cleanup project managers with the Washington State Department of Ecology (Ecology) have discretion when reviewing and accepting RI reports as site-specific circumstances dictate the necessary scope and breadth of each report.

## Remedial Investigation Report Body

- I. **Cover Letter.** Include a letter describing the submittal and specifying the desired department action or response.
- II. **Introduction.**
  - a. **General Site Information.** Include contact information for project coordinators (Ecology site manager, consultants, potentially liable persons (PLP), and current owner/operator). Include the site name and identification numbers, general description, and location (e.g., GPS coordinates, assessor parcel number, Quarter Section Township Range, address).
  - b. **Site History.** Describe site from earliest known time of habitation and/or development. Describe previous owners/operators, past uses of the site, and all potential/known sources (both on-site and off-site) of contamination (e.g., petroleum storage tanks, manufacturing processes, chemical storage, etc.). Include approximate dates or periods of past product and waste spills, identification of the materials spilled, and amount/location of the spill.
  - c. **Site Use.** Describe current site uses, land use/zoning, and future use plans.
- III. **Field Investigations**
  - a. **Previous Environmental Investigations.** Discuss prior work performed, samples obtained, why sampling locations were chosen, etc. Cite any previous environmental reports.
  - b. **Site Characterization.** Discuss current site characterization activities for each site media (surface water/sediments, soils, groundwater systems, air, and cultural history/archeology, if applicable). Name site contaminants of concern (COCs) and discuss why they were chosen for analysis. Describe how prior and current work efforts contribute to the understanding of the nature and extent of contamination.

| FOR ECOLOGY USE ONLY     |                          |                          |                          | Comments |
|--------------------------|--------------------------|--------------------------|--------------------------|----------|
| Adequate                 | Incomplete               | Missing                  | N/A                      |          |
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- c. **Sampling/Analytical Results.** Discussion of sampling/analytical results should include contaminants analyzed for in samples from each applicable site media (soil, groundwater, vapor, surface water). Include comparison of the results to the applicable Method (A, B, or C) cleanup level, sampling method, laboratory method, and any special sampling or analytical protocols (silica gel, filtration, etc.). Evaluate the quality of the data.

**IV. Conceptual Site Model**

- a. **Conceptual Site Model (CSM).** Discuss contaminant release, fate and transport, exposure pathways (surface water, groundwater wells, air, direct contact, etc.), and potential receptors (human, aquatic, terrestrial). Describe typical concerns for this type of environmental contamination, and include a discussion of site specific concerns (hydro-geologic setting, receptors, current or future site zoning/land use etc.).

**V. Proposed Cleanup Standards**

- a. **General.** Clearly identify proposed cleanup levels for each media and rationale for selected level. Explain/justify mixing MTCA methods for different media. Must include a demonstration of conditions that require a calculated solution if one is to be use (e.g., background calculations, use of Method B or C, etc.) and show calculation of the cleanup level, including a list of the input parameters. Include point(s) of compliance.
- b. **Terrestrial Ecological Evaluation (TEE).** A TEE should be performed, if required, as part of cleanup level selection. Reference WAC 173-340-7491 to see if the site qualifies for an exclusion.

[www.ecy.wa.gov/programs/tcp/policies/terrestrial/TEEHome.htm](http://www.ecy.wa.gov/programs/tcp/policies/terrestrial/TEEHome.htm)

**VI. Summary, Conclusions, and Recommendations**

- a. **Summary and Conclusions.** Summarize what is known about the site and contamination (updated CSM). Include discussion of COCs that exceed MTCA or are “indicator hazardous substances.” Ensure conclusions are supported by the tables and figures included with the report.
- b. **Recommendations.** Outline possible interim/remedial actions if appropriate.

**Remedial Investigation Figures**

**General** – Figures should include a north arrow, scale, complete legend, measurement units, and annotated clarification as necessary. Figures should not be cluttered and must be legible and explicable. Document text must reference figures and draw conclusions consistent with information presented on figures. Consider using multiple figures when showing large amounts of information.

| FOR ECOLOGY USE ONLY   |            |            |         |     |  |  |  |
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| Adequate   | Incomplete | Missing    | N/A     |     |  |  |  |







- c. **Site Data.** Include current and historical analytical and field-measured data. Group by media type. For larger data sets, consider making a summary table of exceedances. Tables should include proposed cleanup levels with any contaminant exceedances clearly indicated using bold font or shading. Non-detectible levels should be noted as 'U' with the numerical laboratory reporting limit (RL) provided rather than 'ND'.

**Remedial Investigation Appendices**

**General.** Appendices should contain a description of content and explain how to interpret the information for use. Not all of the following suggestions will apply to all sites.

- a. Exploratory logs, well installation diagrams, groundwater sampling logs, and field records.
- b. Analytical laboratory report and Quality Assurance/Quality Control report.
- c. **Limitations.** Explain any limitations that apply to the work.
- d. Details of field and analytical methods used in former and current investigations and remedial activities. If applicable, append Work Plan/Sampling and Analysis Plan/Quality Assurance Project Plan/Health and Safety Plan.
- e. Other documents that provide additional context or contribute to the understanding of the site – see suggested report format for additional information.

**Miscellaneous Items**

- a. **Environmental Information Management (EIM).** All sampling data must be uploaded into Ecology's EIM database. This allows Ecology to access data, check results, and/or perform additional analyses. For more information, reference: [www.ecy.wa.gov/programs/tcp/data\\_submittal/Data\\_Requirements.htm](http://www.ecy.wa.gov/programs/tcp/data_submittal/Data_Requirements.htm)
- b. **Certification (Licensed Professional Stamp).** Engineering, geologic, and hydrogeologic work must be performed under seal of an appropriately licensed professional (RCW 18.43 and 18.220).
- c. **Additional information may be requested by Ecology as required to fully define the site.**
- d. **Submittal Requirements:** Ecology requests three copies of reports submitted per WAC 173-340-850. Please contact the cleanup project manager for specific submittal requirements.

To request ADA accommodation or materials in a format for the visually impaired, call Ecology at 509-454-7834, Relay Service 711, or TTY 877-833-6341.

| <b>FOR ECOLOGY USE ONLY</b> |            |         |     | <u>Comments</u> |
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