



# Voluntary Cleanup Program

Washington State - Department of Ecology - Toxics Cleanup Program

## Request For Assistance/ Review Form

Have you discussed this site with an Ecology representative in the past? Yes

If yes, what is that person's Name? Chuck Cline, Lynn Gooding

And the approximate date? July, 2000

Is this a leaking underground storage tank site? (includes piping leaks) Yes

Please submit the following with this signed form to the appropriate Ecology office (see back of form)

<input type="checkbox"/>	Site Summary (ECY 020-73)	<input type="checkbox"/>	Any other existing reports on this site
<input checked="" type="checkbox"/>	A Check or Money Order for \$500 made out to "Department of Ecology"		
<b>Applicant completes this section:</b> (Note: The applicant is responsible for all billings)			
Applicant Name: Eric Koltes		Phone: 425-889-4747	
Applicant Address: 10940 NE 33 <sup>rd</sup> Place Suite 110			
City: Bellevue		State: WA	Zip: 98004
Site Name: Northwest Wire Rope & Equipment		Alternate Name:	
Site Address: 2301 Lincoln Avenue			
City: Tacoma		State: WA	Zip: 98421 County: <u>King Pierce</u>
Site Owner Name: Mr. Ron Kline			
Site Owner Address: 2301 Lincoln Avenue		Phone: 253-572-8981	
City: Tacoma		State: WA	Zip: 98421

I, Eric Koltes request the assistance of the Department of Ecology. With this Application I have enclosed \$500. I understand that: this payment is the equivalent of approximately eight (8) hours of staff review and/or assistance on the cleanup of my contaminated site; actual charges will depend on specific staff and charge-out rates of that staff; if total charges are greater than \$500, I will be billed for and I agree to pay the remainder; and any excess payments will be refunded to me.

[Signature]  
Signature of Applicant

11/7/00  
Date

Note: The applicant is responsible for all billings.

<b>For Office Use only:</b>			
Date:	Hours:	Rate:	Staff Name:
Date:	Hours:	Rate:	Staff Name:
Date:	Hours:	Rate:	Staff Name:
Date:	Hours:	Rate:	Staff Name:
<b>For Office Use only: Receipts</b>		<b>For FISCAL USE ONLY</b>	
Amount	Date Pd	Rec. #	
			173-02-94-005000-5000-
			(LUST/Non-LUST) (Office)
			<b>LUST/Non-LUST:</b> LUST - 30 Non-LUST - 20
			<b>OFFICE:</b> NWRO - 40 SWRO - 50 ERO - 60
			CRO - 70 IND - 80 HDQR - 90



# Voluntary Cleanup Program

Washington State - Department of Ecology - Toxics Cleanup Program

## Site Summary

This Summary is a required component of your request for assistance under the Voluntary Cleanup Program

Which of the following apply?

<input type="checkbox"/>
<input checked="" type="checkbox"/>
<input type="checkbox"/>

- Requesting assistance on a planned cleanup
- Requesting assistance on an ongoing cleanup.
- Requesting review of a completed cleanup.

Note: If you submitted your Request for Assistance (ECY 020-74) previously without a Site Summary (this form) or this is a revised Site Summary, Please provide this completed form to Ecology at least five (5) working days prior to the meeting/site visit/documentation review (whichever comes first).

### A) Site Identification:

Name of Site: Northwest Wire Rope & Equipment

Alternate Name(s) for Site:

Street Address of Site: 2301 Lincoln Avenue

City: Tacoma

State: WA

Zip: 98421

County: King Pierce

UBI Number:

Mailing Address (if different from above):

City:

State:

Zip:

Township

Range

Section

Quarter-Quarter

If Known:

Latitude: Degree 47 Minute 15 Second 34

Longitude: Degree 122 Minute 24 Second 00

Method used to calculate Latitude and Longitude: Microsoft Streets Plus 98

How large (in acres) is the site? 1.55

Please attach two maps to this form.

- 1) An area map, showing general location of the site in relation to surrounding bodies of water, cities, highways, and streets. (Please mark site location.)
- 2) A site diagram showing surrounding cross-streets, labeled building outlines, sampling and well locations, etc.

### B) Person/Organization Making Request for Assistance/Review:

Name: Eric Koltes

Firm: Environmental Partners, Inc.

Street Address: 10940 NE 33<sup>rd</sup> Place Suite 110

City: Bellevue

State: WA

Zip: 98004

Telephone Number: 425-889-4747

Extension: N/A

Fax Number: 425-889-4755

e-mail address: erick@epi-wa.com

**Which best describes your involvement with the site? (Check as many as apply.)**

Current Owner ☐ Former Owner ☐ Potential Purchaser ☐  
 Current Operator ☐ Former Operator ☐ Other (specify) ☐  
 Environmental Consultant for Mr. Ron Kline (Northwest Wire Rope & Equipment)  
 Attorney for  
 Insurance Carrier for  
 Other (specify) for

**C) Release Information:**

Date of Release (if known): Date of Discovery: October 1991

**Drinking Water:** Number of Drinking Water Supply Wells within 1/2 mile

Are there any drinking water systems affected? ☐ yes ☒ no

If yes, has alternate drinking water been provided? ☐ yes ☐ no

If Drinking Water systems are affected, are the systems public, private, or both?

**Aquatics:** Are there an creeks, streams, ponds, wetlands, or shorelands...

on or adjacent to the site? ☐ yes ☒ no

Within 1/4 mile of the site? ☐ yes ☒ no

Where are they located?

Are they impacted by contamination from the site? ☐ yes ☐ no

General Hazardous Substance Categories: Please complete the chart below. List the contaminants known or suspected at the site prior to cleanup, and mark the appropriate medium (i.e. soil) with: **C** (confirmed and above MTCA); **B** (confirmed but below MTCA); **S** (suspected); **N/A** (not-applicable); **O** (tested and not present); or **U** (unknown).

Contaminant	Class (for office Use)	Affected Soil	Media: Ground-Water	Surface Water	Air	Sediment	Date of Release (if known)
Example: Lead		C	O	S	U	S	1967-82
1) GRO		C	B				
2) Lead		B	B				
3)							
4)							
5)							
6)							

**D) Report Information of Assessment or Remediation Work Done to Date**

**Assessment:**

Has site assessment work been done at this site? yes ☒ no ☐ In-progress ☐

If yes, when? 1991 Through 1996 Were results reported to Ecology? yes ☒ no ☐ Date October 1993

Describe: (list reports in "E" below)

## Remediation:

Has any site cleanup work been done at the site? yes ☒ no ☐ in-progress ☐

If yes, please continue to answer the remaining questions in this section to the best of your ability.

When was the cleanup work done? 1991 through 1996

Were results reported to Ecology? yes ☒ no ☐ date October 1993

Describe: (list reports in "E" below)

Excavation of petroleum contaminated soil and ground water monitoring

Does contamination remain on-site after cleanup activities? yes ☒ no ☐

If yes, describe: (list reports in "E" below)

Low concentrations (under MTCA Method A) of gasoline-range petroleum hydrocarbons (GRO) remain in ground water at the site. At the time of UST closure (1991), one soil sample had a confirmed concentration (330 mg/kg) of GRO which exceeded the MTCA Method A Cleanup Level of 100 mg/kg. Approximately 14 yards of soil were removed from the site.

For each contaminant listed in **Part C) Release Information (above)**, please describe the quantity of the contaminant (in pounds) which was removed or treated as a result of the cleanup activities:

Contaminant	Class (for office Use	Pounds of Contaminant:		Removed	Treated	Contained)
		Incinerated	Washed			
Example: Lead		10	20	40	10	60
1) GRO				~ 220		
2)						
3)						
4)						
5)						
6)						
7)						
8)						
9)						
10)						
11)						
12)						

\* assumed 1,000 mg/kg was maximum concentration in soils removed.

## As a result of the cleanup:

How many acres of land were returned to **unrestricted** use? 1.55

How many acres of land were returned to **restricted** use? 0

How many cubic feet of contaminated soil was remediated or contained? 2,000

How many gallons of contaminated ground water was remediated or contained? 0

How many people are now at reduced risk as a result of the cleanup action? 5 to 10 workers on-site

How many pounds of potential pollution was prevented as a result of the cleanup action? Unknown

Methods/Treatments Used	Soil	Groundwater	Surface Water	Drinking Water	Air	Wastes
Method A	X	X				
Method B						
Method C						
Have these levels been met through the site ? Y or N	N	Y				
<b>Destruction or Detoxification</b>						
Carbon Adsorption <sup>1</sup>	N/A					N/A
Biological Treatment					N/A	
Chemical Destruction						
Incineration		N/A	N/A	N/A		
<sup>1</sup> Carbon followed by regeneration: use of granular activated carbon followed by landfilling would be classified in these tables as volume reduction and off-site landfill						
<b>Media Transfer</b>						
Air stripping/Air Sparging	N/A					N/A
Aeration/Vapor Extraction		N/A	N/A	N/A	N/A	
Thermal Desorption		N/A	N/A	N/A		N/A
<b>Immobilization</b>						
Vitrification		N/A	N/A	N/A		
Solidification/Stabilization		N/A	N/A	N/A		
<b>Reuse/Recycling<sup>2</sup></b>						
Specify						
<sup>2</sup> For example, reuse of free petroleum product recovered in a pump and treat system.						
<b>Separation/Volume Reduction</b>						
Solvent Extraction		N/A	N/A	N/A		
Soil Washing		N/A	N/A	N/A		
Physical Separation <sup>3</sup>						
<sup>3</sup> For example, oil/water separators.						
<b>Land Disposal/Containment</b>						
Containment or On-site Landfill			N/A			
Off-site Landfill		N/A	N/A	N/A		
<b>Institutional Controls</b>						
Specify						
<b>Others</b>						
Specify Treatment Method						

**E) Documentation:**

Please list titles of all site reports below. Include name of consulting firm and year completed. (If there is not enough room for the entire list, please attach additional page(s) as necessary.)

Title:	By:	Date
UST Removal Paperwork	Cecon Corporation	9/96
Technical Memorandum of Results of Shallow Soil Vapor and Groundwater Assessment	Shannon and Wilson, Inc.	3/92
Technical Memorandum 02 Monitoring Well Installation and Groundwater Sampling Operation	Shannon and Wilson, Inc.	9/92
First Quarterly Groundwater Sampling Activities Tacoma, Washington	Shannon and Wilson, Inc.	10/92
Technical Memorandum 04 Second Quarterly Groundwater Sampling Activities	Shannon and Wilson, Inc.	1/93
Technical Memorandum 05 Third Quarterly Groundwater Sampling Activities	Shannon and Wilson, Inc.	6/93
Technical Memorandum 06 Fourth Quarterly Groundwater Monitoring	Shannon and Wilson, Inc.	7/93
Fifth Quarter Groundwater Sampling Results	Shannon and Wilson, Inc.	10/93
Groundwater Sampling and Limited Subsurface Exploration	Shannon and Wilson, Inc.	6/96

Is additional information concerning the contaminants treated or removed, or cleanup or remediation methods used available in a data base? yes ☐ no ☒ If yes, what programming software is use?

Is a copy included for our use? yes ☐ no ☐

**F) Property Type:** Commercial ☐ Industrial ☐ Residential ☐ Other ☒ (Please specify) Port Industrial  
Property currently being used? yes ☒ no ☐

Plans for change in use? yes ☐ no ☒ If yes, please specify:

**G) Standard Industrial Classification (SIC) Codes:**

List all that apply. If none apply, or if you don't know your SIC code, list activities conducted at the site (i.e. automotive repair and maintenance, construction equipment storage, etc.).

Machinery equipment and supply rental and sales

**H) Dangerous Waste Facilities:**

Does the facility have a dangerous waste identification number? yes ☒ no ☐

If yes, what is the number? WAD096769575

**I) Tank Information:**

Complete this table for ALL tanks, whether underground (UST) or aboveground (AST), including unregulated tanks.

(\*Unleaded, leaded diesel, bunker-C, waste oil, heating oil, aviation fuel, other (identify))

(\*\* Tank status: Left in Place, Removed, Closed in Place)

Tank ID	AST/UST	Size	Was Free Product encountered?		In Excavation	**Tank Status
			*Product	On GW		
None	UST	675	No	No	No	Removed

**J) Owner/Operator History**

(Please photocopy and attach copies if additional owners and/or operators are known.)

**Type (code) of Owner/Operator ( ) below):**

Private (1) Municipal (2) County (3) Federal (4) State (5) Tribal (6) Mixed (7) Other (8) Unknown (9)  
Public Entitle Acquisition via Bankruptcy (11)

1) Current Site Owner: Ron Kline		
Street Address: 2301 Lincoln Avenue		
City: Tacoma	State: WA	ZIP: 98421
Contact Persons (if different than owner, above):		
Street Address:		
City:	State:	ZIP:
Telephone Number:	Extension:	
Fax Number:	e-mail address:	
Dates of Ownership: to		

2) Current Facility Operator: Same		Type: 1
Street Address:		
City:	State:	ZIP:
Contact Persons (if different than owner, above):		
Street Address:		
City:	State:	ZIP:
Telephone Number:	Extension:	
Fax Number:	e-mail address:	
Dates of Operation: to		

3) Former Site Owner:		Type:
Street Address:		
City:	State:	ZIP:
Contact Persons (if different than owner, above):		
Street Address:		
City:	State:	ZIP:
Telephone Number:	Extension:	
Fax Number:	e-mail address:	
Dates of Ownership: to		

4) Former Facility Operator:		Type:
Street Address:		
City:	State:	ZIP:
Contact Persons (if different than owner, above):		
Street Address:		
City:	State:	ZIP:
Telephone Number:	Extension:	
Fax Number:	e-mail address:	
Dates of Operation: to		



**K) Other Involved Parties:**

(Please photocopy and attach copies if additional parties are involved)

1) Environmental Consultant: Eric Koltes		
Representing: Mr. Ron Kline (Northwest Wire Rope & Equipment		
Firm: Environmental Partners, Inc.		
Street Address: 10940 NE 33 <sup>rd</sup> Place Suite 110		
City: Bellevue	State: WA	ZIP: 98004
Telephone Number: 425-889-4747	Extension:	
Fax Number: 425-889-4755	e-mail address: erick@epi-wa.com	

2) Site Control Person if other than Owner/Operator. (This must be a person who is on-site during normal working hours and is authorized and qualified to answer questions about the site, or a person who is available during normal business hours and has knowledge about the site and the remediations.		
Name:		
Relation to site/owner/operator:		
Firm:		
Street Address:		
City:	State:	ZIP:
Telephone Number:	Extension:	
Fax Number:	e-mail address:	
Dates of involvement with site:	to:	

3) Name:		
Relation to site/owner/operator:		
Firm:		
Street Address:		
City:	State:	ZIP:
Telephone Number:	Extension:	
Fax Number:	e-mail address:	
Dates of involvement with site:	to:	

4) Name:		
Relation to site/owner/operator:		
Firm:		
Street Address:		
City:	State:	ZIP:
Telephone Number:	Extension:	
Fax Number:	e-mail address:	
Dates of involvement with site:	to:	