



COMPREHENSIVE RESPONSE ACTION TRANSMITTAL
FORM & PHASE I COMPLETION STATEMENT

Pursuant to 310 CMR 40.0484 (Subpart D) and 40.0800 (Subpart H)

Release Tracking Number

Release Tracking Number input fields

A. SITE LOCATION:

Site Name, Street, Location Aid, City/Town, ZIP Code, Related Release Tracking Numbers, Tier Classification (Tier IA, IB, IC, II, Not Tier Classified), If a Tier I Permit has been issued, state the Permit Number

B. THIS FORM IS BEING USED TO: (check all that apply)

- Submit a Phase I Completion Statement, pursuant to 310 CMR 40.0484 (complete Sections A, B, C, G, H, I and J).
Submit a Phase II Scope of Work, pursuant to 310 CMR 40.0834 (complete Sections A, B, C, G, H, I and J).
Submit a final Phase II Comprehensive Site Report and Completion Statement, pursuant to 310 CMR 40.0836 (complete Sections A, B, C, D, G, H, I and J).
Submit a Phase III Remedial Action Plan and Completion Statement, pursuant to 310 CMR 40.0862 (complete Sections A, B, C, G, H, I and J).
Submit a Phase IV Remedy Implementation Plan, pursuant to 310 CMR 40.0874 (complete Sections A, B, C, G, H, I and J).
Submit an As-Built Construction Report, pursuant to 310 CMR 40.0875 (complete Sections A, B, C, G, H, I and J).
Submit a Phase IV Final Inspection Report and Completion Statement, pursuant to 310 CMR 40.0878 and 40.0879 (complete Sections A, B, C, E, G, H, I and J).
Submit a periodic Phase V Inspection & Monitoring Report, pursuant to 310 CMR 40.0892 (complete Sections A, B, C, G, H, I and J).
Submit a final Phase V Inspection & Monitoring Report and Completion Statement, pursuant to 310 CMR 40.0893 (complete Sections A, B, C, F, G, H, I and J).

You must attach all supporting documentation required for each use of form indicated, including copies of any Legal Notices and Notices to Public Officials required by 310 CMR 40.1400.

C. RESPONSE ACTIONS:

- Check here if any response action(s) that serves as the basis for the Phase submittal(s) involves the use of Innovative Technologies. (DEP is interested in using this information to create an Innovative Technologies Clearinghouse.)
Describe Technologies:

D. PHASE II COMPLETION STATEMENT:

Specify the outcome of the Phase II Comprehensive Site Assessment:

- Additional Comprehensive Response Actions are necessary at this Site, based on the results of the Phase II Comprehensive Site Assessment.
The requirements of a Class A Response Action Outcome have been met and a completed Response Action Outcome Statement (BWSC-104) will be submitted to DEP.
The requirements of a Class B Response Action Outcome have been met and a completed Response Action Outcome Statement (BWSC-104) will be submitted to DEP.
Rescoring of this Site using the Numerical Ranking System is necessary, based on the results of the final Phase II Report.

E. PHASE IV COMPLETION STATEMENT:

Specify the outcome of Phase IV activities:

- Phase V operation, maintenance or monitoring of the Comprehensive Response Action is necessary to achieve a Response Action Outcome. (This site will be subject to a Phase V Operation, Maintenance and Monitoring Annual Compliance Fee.)
The requirements of a Class A Response Action Outcome have been met. No additional operation, maintenance or monitoring is necessary to ensure the integrity of the Response Action Outcome. A completed Response Action Outcome Statement (BWSC-104) will be submitted to DEP.
The requirements of a Class C Response Action Outcome have been met. No additional operation, maintenance or monitoring is necessary to ensure the integrity of the Response Action Outcome. A completed Response Action Outcome Statement (BWSC-104) will be submitted to DEP.

SECTION E IS CONTINUED ON THE NEXT PAGE



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E. PHASE IV COMPLETION STATEMENT: (continued)

The requirements of a Class C Response Action Outcome have been met. Further operation, maintenance or monitoring of the remedial action is necessary to ensure that conditions are maintained and that further progress is made toward a Permanent Solution. A completed Response Action Outcome Statement (BWSC-104) will be submitted to DEP.

Indicate whether the operation and maintenance will be Active or Passive. (Active Operation and Maintenance is defined at 310 CMR 40.0006.):

Active Operation and Maintenance

Passive Operation and Maintenance

(Active Operation and Maintenance makes the Site subject to a Post-RAO Class C Active Operation and Maintenance Annual Compliance Fee.)

F. PHASE V COMPLETION STATEMENT:

Specify the outcome of Phase V activities:

The requirements of a Class A Response Action Outcome have been met and a completed Response Action Outcome Statement (BWSC-104) will be submitted to DEP.

The requirements of a Class C Response Action Outcome have been met. No additional operation, maintenance or monitoring is necessary to ensure the integrity of the Response Action Outcome. A completed Response Action Outcome Statement (BWSC-104) will be submitted to DEP.

The requirements of a Class C Response Action Outcome have been met. Further operation, maintenance or monitoring of the remedial action is necessary to ensure that conditions are maintained and that further progress is made toward a Permanent Solution. A completed Response Action Outcome Statement (BWSC-104) will be submitted to DEP.

Indicate whether the operation and maintenance will be Active or Passive. (Active Operation and Maintenance is defined at 310 CMR 40.0006.):

Active Operation and Maintenance

Passive Operation and Maintenance

(Active Operation and Maintenance makes the Site subject to a Post-RAO Class C Active Operation and Maintenance Annual Compliance Fee.)

G. LSP OPINION:

I attest under the pains and penalties of perjury that I have personally examined and am familiar with the information contained in this transmittal form, including any and all documents accompanying this submittal. In my professional opinion and judgment based upon application of (i) the standard of care in 309 CMR 4.02(1), (ii) the applicable provisions of 309 CMR 4.02(2) and (3), and (iii) the provisions of 309 CMR 4.03(5), to the best of my knowledge, information and belief,

> if Section B indicates that a **Phase I, Phase II, Phase III, Phase IV or Phase V Completion Statement** is being submitted, the response action(s) that is (are) the subject of this submittal (i) has (have) been developed and implemented in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, (ii) is (are) appropriate and reasonable to accomplish the purposes of such response action(s) as set forth in the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, and (iii) complies(y) with the identified provisions of all orders, permits, and approvals identified in this submittal;

> if Section B indicates that a **Phase II Scope of Work or a Phase IV Remedy Implementation Plan** is being submitted, the response action(s) that is (are) the subject of this submittal (i) has (have) been developed in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, (ii) is (are) appropriate and reasonable to accomplish the purposes of such response action(s) as set forth in the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, and (iii) complies(y) with the identified provisions of all orders, permits, and approvals identified in this submittal;

> if Section B indicates that an **As-Built Construction Report or a Phase V Inspection and Monitoring Report** is being submitted, the response action(s) that is (are) the subject of this submittal (i) is (are) being implemented in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, (ii) is (are) appropriate and reasonable to accomplish the purposes of such response action(s) as set forth in the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, and (iii) complies(y) with the identified provisions of all orders, permits, and approvals identified in this submittal.

I am aware that significant penalties may result, including, but not limited to, possible fines and imprisonment, if I submit information which I know to be false, inaccurate or materially incomplete.

Check here if the Response Action(s) on which this opinion is based, if any, are (were) subject to any order(s), permit(s) and/or approval(s) issued by DEP or EPA. If the box is checked, you MUST attach a statement identifying the applicable provisions thereof.

LSP Name: _____ LSP #: _____

Telephone: _____ Ext.: _____

Stamp: _____

FAX: (optional) _____

Signature: _____

Date: _____



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H. PERSON UNDERTAKING RESPONSE ACTION(S):

Name of Organization: _____
Name of Contact: _____ Title: _____
Street: _____
City/Town: _____ State: _____ ZIP Code: _____
Telephone: _____ Ext.: _____ FAX: (optional) _____

Check here if there has been a change in the person undertaking the Response Action.

I. RELATIONSHIP TO SITE OF PERSON UNDERTAKING RESPONSE ACTION(S): (check one)

RP or PRP Specify: Owner Operator Generator Transporter Other RP or PRP: _____
 Fiduciary, Secured Lender or Municipality with Exempt Status (as defined by M.G.L. c. 21E, s. 2)
 Agency or Public Utility on a Right of Way (as defined by M.G.L. c. 21E, s. 5(j))
 Any Other Person Undertaking Response Action Specify Relationship: _____

J. CERTIFICATION OF PERSON UNDERTAKING RESPONSE ACTION(S):

I, _____, attest under the pains and penalties of perjury (i) that I have personally examined and am familiar with the information contained in this submittal, including any and all documents accompanying this transmittal form, (ii) that, based on my inquiry of those individuals immediately responsible for obtaining the information, the material information contained in this submittal is, to the best of my knowledge and belief, true, accurate and complete, and (iii) that I am fully authorized to make this attestation on behalf of the entity legally responsible for this submittal. I/the person or entity on whose behalf this submittal is made am/is aware that there are significant penalties, including, but not limited to, possible fines and imprisonment, for willfully submitting false, inaccurate, or incomplete information.

By: _____ Title: _____
(signature)

For: _____ Date: _____
(print name of person or entity recorded in Section H)

Enter address of the person providing certification, if different from address recorded in Section H:

Street: _____
City/Town: _____ State: _____ ZIP Code: _____
Telephone: _____ Ext.: _____ FAX: (optional) _____

YOU MUST COMPLETE ALL RELEVANT SECTIONS OF THIS FORM OR DEP MAY RETURN THE DOCUMENT AS INCOMPLETE. IF YOU SUBMIT AN INCOMPLETE FORM, YOU MAY BE PENALIZED FOR MISSING A REQUIRED DEADLINE.