



Enclosure 1
Engineering Controls • Standby Consultant/Contractor Certification Form



Site Details		Box 1	
Site No.	130072		
Site Name Stanton Cleaners			
Site Address: 110 Cutter Mill Road		Zip Code: 11021	
City/Town: Great Neck			
County: Nassau			
Site Acreage: 0.4			
Reporting Period: November 14, 2012 to December 31, 2013			
		YES	NO
1. Is the information above correct?		<input checked="" type="checkbox"/>	<input type="checkbox"/>
If NO, include handwritten above or on a separate sheet.			
2. To your knowledge has some or all of the site property been sold, subdivided, merged, or undergone a tax map amendment during this Reporting Period?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. To your knowledge has there been any change of use at the site during this Reporting Period (see 6NYCRR 375-1.11 (d))?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. To your knowledge have any federal, state, and/or local permits (e.g., building, discharge) been issued for or at the property during this Reporting Period?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
If you answered YES to questions 2 thru 4, include documentation or evidence that documentation has been previously submitted with this certification form.			
5. To your knowledge is the site currently undergoing development?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
		Box2	
		YES	NO
6. Is the current site use consistent with the use(s) listed below? Industrial		<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. Are all ICs/ECs in place and functioning as designed?		<input checked="" type="checkbox"/>	<input type="checkbox"/>
IF THE ANSWER TO EITHER QUESTION 6 OR 7 IS NO, sign and date below and contact the DEC PM regarding the development of a Corrective Measures Work Plan to address these issues.			
_____ Signature of Standby Consultant/Contractor		_____ Date	

SITE NO. 130072

Box3

Description of Institutional Controls

Parcel
2-376-8

Owner
Alan Greenburg

Institutional Control

Monitoring Plan
Site Management Plan
O&M Plan

EPA ROD calls for groundwater use restrictions, but does not specify if it will be in the form of a deed restriction or easement.

Box4

Description of Engineering Controls

Parcel
2-376-8

Engineering Control

Groundwater Treatment System
Vapor Mitigation
Air Sparging/Soil Vapor Extraction

The Selected Remedy included:

- Upgrade of the Existing Groundwater Extraction and Treatment System
- Groundwater Plume Enhanced Capture and Treatment System with aqueous-phase discharge treatment as necessary
- Continued Operation of the Source Control SVE System, including vapor-phase discharge treatment as necessary
- A groundwater monitoring well network currently includes fifteen (15) observation wells.
- .Indoor air monitoring and vapor mitigation as appropriate

Periodic Review Report (PRR) Certification Statements

1. I certify by checking "YES" below that:

a) the Periodic Review report and all attachments were prepared under the direction of, and reviewed by, the party making the certification, including data and material prepared by previous contractors for the current certifying period, if any;

b) to the best of my knowledge and belief, the work and conclusions described in this certification are in accordance with the requirements of the site remedial program, and generally accepted engineering practices; and the information presented is accurate and complete.

YES NO

X ☐

2. If this site has an IC/EC Plan (or equivalent as required in the Decision Document), for each Institutional or Engineering control listed in Boxes 3 and/or 4, I certify by checking "YES" below that all of the following statements are true:

(a) the Institutional Control and/or Engineering Control(s) employed at this site is unchanged since the date that the Control was put in-place, or was last approved by the Department;

(b) nothing has occurred that would impair the ability of such Control, to protect public health and the environment;

(c) nothing has occurred that would constitute a failure to comply with the Site Management Plan, or equivalent if no Site Management Plan exists.

YES NO

X ☐

IF THE ANSWER TO QUESTION 2 IS NO, sign and date below and contact the DEC PM regarding the development of a Corrective Measures Work Plan to address these issues.

Signature of Standby Consultant/Contractor

Date

IC/EC CERTIFICATIONS

Box 6

Professional Engineer Signature

I certify that all information in Boxes 2 through 5 are true. I understand that a false statement made herein is punishable as a Class "A" misdemeanor, pursuant to Section 210.45 of the Penal Law.

Werner Mueller

at

HDR

One Blue Hill Plaza

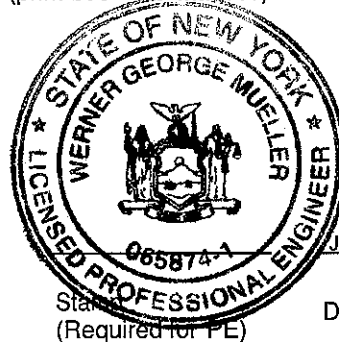
Pearl River, NY 10965

(print business address)

am certifying as a Professional Engineer.



Signature of Professional Engineer



State
(Required for PE)

June 6, 2014

Date