(47-15-11 (10/83)

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION DIVISION OF SOLID AND HAZARDOUS WASTE INACTIVE HAZARDOUS WASTE DISPOSAL SITE REPORT

PRIORITY CODE:4	SITE CODE:	360-001
NAME OF SITE: Croton Point Sanitary La	andfill	REGION: 3
STREET ADDRESS: Croton Point Avenue		
TOWN/CITY: <u>Croton-on-Hudson</u> (V)	COUNTY: <u>Westchest</u>	er
NAME OF CURRENT OWNER OF SITE: County of	of Westchester	
ADDRESS OF CURRENT OWNER OF SITE: 148 Ma	rtime Ave. White	Plains, NY 10588
TYPE OF SITE: OPEN DUMP LANDFILL X	STRUCTURE TREATMENT PON	LAGOON
ESTIMATED SIZE: 70 ACRES		
SITE DESCRIPTION:		
A sanitary landfill located on a two-mile of the Hudson River located Southwest of operated as a landfill between 1927 and la County Park, including a bathing beach	the village of trot	on-on-Hudson
HAZARDOUS WASTE DISPOSED: CONFIRMED TYPE AND QUANTITY OF HAZARDOUS WASTES DISP TYPE Various liquid industrial wastes Various solid industrial wastes Radium & uranium wastes Y	SUSPECT OSED: QUANTI unknown unknown unknown	(POUNDS, DRUMS, TY TONS, GALLONS)

Y includes a quantity of material from demolition wastes from a radium contaminated building - done under a state permit

PAGE

TIME PERIOD SITE WAS USED FOR HAZAR	DOUS WASTE DISPOSAL:
approx	51 TO 10 72 :
OMNER (3) DOKING PERIOD OF USE: COL	unty of Westchester
SITE OPERATOR DURING PERIOD OF USE:	County of Westchester
ADDRESS OF SITE OPERATOR: 148 Mart	ime Ave. White Plains NV 10588
ANALYTICAL DATA AVAILABLE: AIR SOIL	SURFACE WATER GROUNDWATER SEDIMENT NONE NONE
	DRINKING WATER AIR
SOIL TYPE: <u>sands & marshlands</u> DEPTH TO GROUNDWATER TABLE: <u>varies</u> -	older parts of landfill over marshlands
LEGAL ACTION: TYPE: STATUS: IN PROGRESS X	STATE FEDERAL X
REMEDIAL ACTION: PROPOSED	UNDER DESIGN 1972 Final judgement
IN PROGRESS X NATURE OF ACTION: Design prepared	COMPLETED Feb. 11, 1975 d remedial covering, and leachate control undertaken
ASSESSMENT OF ENVIRONMENTAL PROBLEMS	to be undertaken when addacent hall field lane 11
ASSESSMENT OF HEALTH PROBLEMS:	
•	
,	NI FIMAL DETERMINATION
PERSON(S) COMPLETING THIS FORM:	
NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION	NEW YORK STATE DEPARTMENT OF HEALTH
NAME _ T. Koch	NAME Ronald Tramontano
TITLE SWMS	TITLE Bur. Tox. Subst. Assess.
NAME R.A. Olazagasti	NAME
TITLE SWMS	TITLE
DATE: 12/83	DATE: 12/83