Division of Environmental Remediation Inactive Hazardous Waste Site Operations and Maintenance Review Report Site Name: Tool County ny Class: Number: 622*0*03 O&M Funding Source: □ State Superfund □ Federal Superfund Municipal Responsible Party **O&M** Information: 0&M Start: 11/1999 End: Annual Cost: \$ ☐ Estimated Interim Remedial Measures/Operable Units in O&M Phase: □ Drum Removal X Soil Removal □ Tank Removal X Cap/Cover X Containment Structure ✗ Fence/Security ★ Leachate Collection/Treatment □ Vapor Extraction/Treatment Air Sparging/Stripper System ☐ Treatment/Filtration Plant/System □ Potable Water Supply /System Other: Institutional Controls:

□ Deed Restriction □ Discharge Permit □ Department of Health Sampling Other: **O&M** Review Information: Reports: Inspections: Sampling: Other: Conclusions: Remedy Effective? **ROD** Compliance? ¥ Yes □ No Consent Order Compliance? X Yes ■No design moder Reviewer: Project Ma Date

Name

Region or Bureau

Telephone

Region of Bureau

Telephone