



Enclosure 1  
NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION  
Site Management Periodic Review Report Notice  
Institutional and Engineering Controls Certification Form



Site Details

Box 1

Site No. 704009B

Site Name Vestal Water Supply (Site 4-2)

Site Address: 517 Prentice Road

Zip Code: 13850

City/Town: Vestal

County: Broome

Site Acreage: 1.4

Reporting Period: August 15, 2010 to August 15, 2011

**RECEIVED**  
JUL 15 2011

NYSDEC - REGION - 7  
KIRKWOOD SUB-OFFICE

- |  | 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. 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. 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. 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"/> |
| <b>If you answered YES to questions 2 thru 4, include documentation or evidence that documentation has been previously submitted with this certification form.</b> |                                     |                                     |
| 5. Is the site currently undergoing development?   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |

Box 2

- |  | YES                      | NO                       |
|--|--------------------------|--------------------------|
| 6. Is the current site use consistent with the use(s) listed below?<br>Unrestricted, Residential, Restricted-Residential, Commercial, and Industrial | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Are all ICs/ECs in place and functioning as designed?   | <input type="checkbox"/> | <input type="checkbox"/> |

**IF THE ANSWER TO EITHER QUESTION 6 OR 7 IS NO, sign and date below and DO NOT COMPLETE THE REST OF THIS FORM.**

**A Corrective Measures Work Plan must be submitted along with this form to address these issues.**

\_\_\_\_\_  
Signature of Owner, Remedial Party or Designated Representative

\_\_\_\_\_  
Date

**SITE NO. 704009B**

**Box 3**

**Description of Institutional Controls**

Parcel

Owner

Institutional Control

**Box 4**

**Description of Engineering Controls**

Parcel

Engineering Control

**142.04-1-4**

Pump & Treat

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**Control Description for Site No. 704009B**

**Parcel: 142.04-1-4**

Air stripping system with carbon filtration backup installed at the wellhead and used to eliminate trace VOC contamination prior to distribution.

The decision document consists of Settlement Agreements/Consent Orders executed in May 1985.

**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;

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

☒ ☐

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) access to the site will continue to be provided to the Department, to evaluate the remedy, including access to evaluate the continued maintenance of this Control;

(d) nothing has occurred that would constitute a violation or failure to comply with the Site Management Plan for this Control; and

(e) if a financial assurance mechanism is required by the oversight document for the site, the mechanism remains valid and sufficient for its intended purpose established in the document.

YES NO

☒ ☐

**IF THE ANSWER TO QUESTION 2 IS NO, sign and date below and  
DO NOT COMPLETE THE REST OF THIS FORM.**

**A Corrective Measures Work Plan must be submitted along with this form to address these issues.**

\_\_\_\_\_  
Signature of Owner, Remedial Party or Designated Representative

\_\_\_\_\_  
Date

IC CERTIFICATIONS  
SITE NO. 704009B

Box 6

**SITE OWNER OR DESIGNATED REPRESENTATIVE SIGNATURE**

I certify that all information and statements in Boxes 2 and/or 3 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.

I Scott Groats at 701 Vestal PKwy West Vestal, NY  
print name print business address 13850

am certifying as Water Superintendent (Owner or Remedial Party)

for the Site named in the Site Details Section of this form.

Scott Groats  
Signature of Owner or Remedial Party Rendering Certification

7/11/11  
Date

IC/EC CERTIFICATIONS

Box 7

**Professional Engineer Signature**

I certify that all information in Boxes 4 and 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.

I Gary Campo at 133 Front St, Vestal NY 13850  
print name print business address

am certifying as a Professional Engineer for the Town of Vestal  
(Owner or Remedial Party)

Gary Campo  
Signature of Professional Engineer, for the Owner or Remedial Party, Rendering Certification



7/13/11  
Date