



DAY ENVIRONMENTAL, INC.

LETTER OF TRANSMITTAL

4653R-12

TO: Brian Sadowski, Project Manager

RE: Houdaille Industries; Strippit Division NYSDEC Site #915053

**WE ARE SENDING YOU: X ATTACHED UNDER SEPARATE COVER
THE FOLLOWING ITEMS:**

Institutional and Engineering Controls Certification Form for the February 1, 2012 – January 31, 2013 Site Management Periodic Review Report; 12975 Clarence Center Road, Akron, New York 14001

REMARKS:

Dear Mr Sadowski:

A hard copy of the Institutional and Engineering Controls Certification Form for the above referenced site is attached. If there are any questions, please do not hesitate to call.

RECEIVED
NYSDEC REGION 1

FEB 21 2013

FOR
REL UNREL

DATED: February 19, 2013

SIGNED:



Enclosure 2
NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
Site Management Periodic Review Report Notice
Institutional and Engineering Controls Certification Form



Site No. 915053	Site Details	Box 1
 Site Name Houdaille Industries; Strippit Division		
Site Address: 12975 Clarence Center Road Zip Code: 14001		
City/Town: Akron		
County: Erie		
Site Acreage: 2.5		
Reporting Period: February 1, 2012 to January 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. 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 checked="" type="checkbox"/>	<input 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.		
<i>A copy of the 2012 Annual Certification Report for SPDES Permit No. NYR00B074 is attached.</i>		
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? Closed Landfill	<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 DO NOT COMPLETE THE REST OF THIS FORM. Otherwise continue.

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. 915053

Box 3

Description of Institutional Controls

Parcel

Owner

Institutional Control

47.18-1-33./A

STRIPPIT LVD

Monitoring Plan
O&M Plan

Description of Engineering Controls

Box 4

Parcel

Engineering Control

47.18-1-33./A

Cover System
Fencing/Access Control

Control Description for Site No. 915053

Parcel: 47.18-1-33./A

IRM; construction of 40-mil HDPE and associated soil/topsoil final cover system per Part 360 regulations. A No Further Action Record of Decision (ROD) was issued in March 1995. A Deed Restriction was not required. Post-closure maintenance and monitoring are required that includes cover system integrity inspections and groundwater quality sampling to ensure long term effectiveness of the remedy and to provide early detection should failure occur. The site is fenced.

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. Otherwise continue.**

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. 915053

Box 6

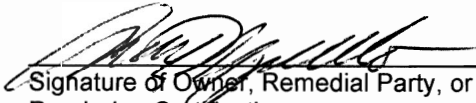
SITE OWNER OR DESIGNATED REPRESENTATIVE SIGNATURE

I certify that all information and statements in Boxes 1,2, and 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 Anthony Marzullo at Strippit, Inc., 12975 Clarence Center Road, Akron NY 14001,
print name print business address

am certifying as Owner (Owner or Remedial Party)

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


Signature of Owner, Remedial Party, or Designated Representative
Rendering Certification

2/18/2013
Date

IC/EC CERTIFICATIONS

Box 7

Qualified Environmental Professional 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 Raymond L. Kampff at Day Environmental, Inc., 1563 Lyell Avenue, Rochester, NY 14606,
print name print business address

am certifying as a Qualified Environmental Professional for the Owner
(Owner or Remedial Party)


Signature of Qualified Environmental Professional, for
the Owner or Remedial Party, Rendering Certification

Stamp
(Required for PE)

2-19-2013
Date

Annual Certification Report
SPDES Multi-Sector General Permit for Stormwater
Discharges Associated with Industrial Activity (GP-0-11-009)

The permittee shall complete this Annual Certification Report form by answering the following questions, describing improvements to the facility's Stormwater Pollution Prevention Plan (SWPPP), provide copies of monitoring results on appropriate Monitoring Reports Forms and signing the certification at the end of this form. This completed report is to be submitted each calendar year by March 31st of the following year to: Industrial Stormwater General Permit Coordinator, NYSDEC, Bureau of Water Permits, 625 Broadway, Albany, NY, 12233-3505

SECTION I: FACILITY INFORMATION

Permit I.D. No.: NYR00

B 0 7 4

Report for Calendar Year:

2 0 1 2

Owner Name

S t r i p p i t , I n c

Facility Name

SECTION II: GENERAL INFORMATION:

1. List the number of stormwater outfalls at the facility that are from areas of industrial activity. 0 0 2

2. Is the facility claiming any monitoring waivers? ☐ Yes ☒ No
 [describe and certify in your cover letter]

- ☐ Representative Outfall
- ☐ Inactive or Unstaffed Site
- ☐ Adverse Climatic Conditions
- ☐ Alternate Certification of "Not Present" or "No Exposure"

3. Is the information provided in your original Notice of Intent or Termination (NOIT) submission still accurate and up to date? If not, please submit an updated NOIT indicating the correct facility information. ☒ Yes ☐ No

4. Has a comprehensive site compliance evaluation been conducted at the facility in the past year? ☐ Yes ☐ No

5. Is the facility's Stormwater Pollution Prevention Plan (SWPPP) kept up to date and modified when necessary? ☒ Yes ☐ No

SECTION III: QUARTERLY VISUAL EXAMINATIONS AND DRY WEATHER FLOW INSPECTIONS:

6. Have the required quarterly visual examinations of stormwater at the facility been performed during this reporting period? ☒ Yes ☐ No

7. Did any of the quarterly visual examinations result in observations of color, odor, clarity, floating solids, settled solids, suspended solids, foam, oil sheen, or other indicators of stormwater pollution and contamination? ☐ Yes ☒ No

8. Was the annual dry weather flow inspection performed during this reporting period? ☒ Yes ☐ No

9. Were any indicators of stormwater pollution or unauthorized discharges identified? ☐ Yes ☒ No

10. Did any of these findings result in modification of the SWPPP? ☐ Yes ☐ No ☒ NA

SECTION IV: STORMWATER MONITORING - BENCHMARK PARAMETERS:

11. Is the permittee required to monitor stormwater at the facility for benchmark parameters? (If no, skip to Section V) ☐ Yes ☒ No
12. Were there any of the sampling results from this year higher than the cut-off values listed in the permit? ☐ Yes ☐ No
13. Were there any monitoring problems? (Answer "Yes" if storm event criteria was not met or if the laboratory indicated quality assurance/quality control problems) ☐ Yes ☐ No
14. If any of the sampling results were higher than the benchmark values listed in the permit, was the facility inspected to identify the source? ☐ Yes ☐ No ☐ NA
15. Did this result in modification of the SWPPP? ☐ Yes ☐ No ☐ NA

SECTION V: STORMWATER MONITORING - COMPLIANCE MONITORING

16. Is the permittee required to conduct compliance monitoring for storm water discharges subject to Point Source Category Effluent Limitation? ☐ Yes ☒ No
17. Is the permittee required to conduct compliance monitoring for storm water discharges from coal piles? (If no to questions 16 & 17, go to Section VI) ☐ Yes ☒ No
18. Were there any monitoring problems? (Answer "Yes" if storm event criteria was not met or if the laboratory indicated quality assurance/quality control problems) ☐ Yes ☒ No
19. Were any of the sampling results from this year higher than the effluent limitation listed in the permit? ☐ Yes ☒ No
20. If any of the sampling results were higher than the effluent limitations listed in the permit, was the facility inspected to identify the source? ☐ Yes ☐ No ☒ NA
21. Did this result in modification of the SWPPP? ☐ Yes ☐ No ☒ NA

SECTION VI: SUMMARY

Provide a brief description of any facility changes; problems identified during comprehensive compliance evaluations, quarterly visual observations or monitoring results; and action taken to improve the quality of the stormwater discharge.

CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

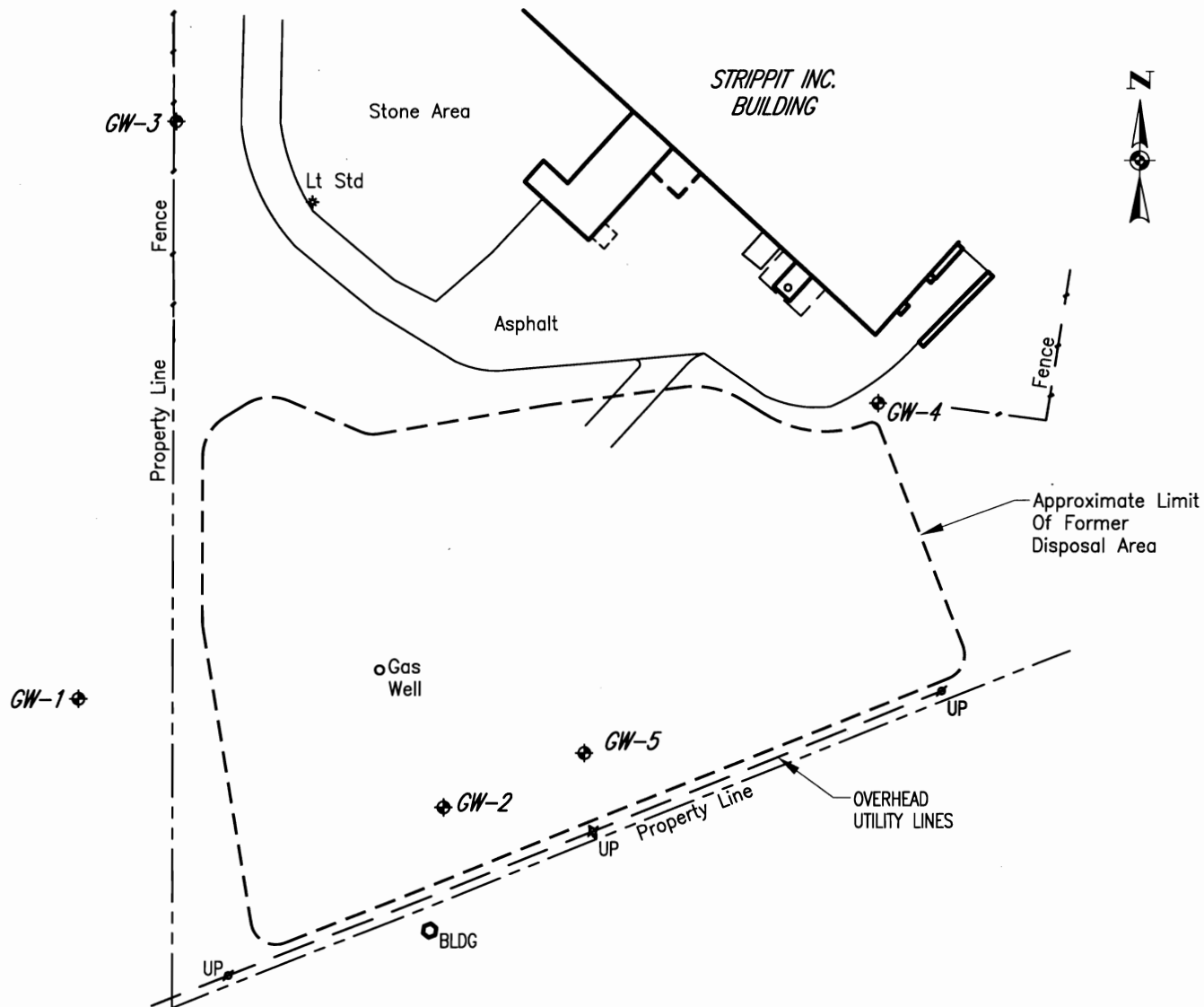
A n t h o n y
Owner/Operator First Name (please print or type) MI

..... / /
Date

M a r z u l l o
Owner/Operator Last Name (please print or type)

.....
Owner/Operator Signature

Ref1: Strip36.dwg
 Time Plotted: Monday, February 11, 2013 11:56:01 AM
 Ref2:
 Ref3: Strip37.dwg
 File Name: P:\Drawings\Strip\Strip37.dwg
 Layout: Layout1
 Pen Setting File: 800psFullcolor.ctb



NOTES:

1. This drawing produced from a drawing provided by Deborah A. Naybor, PLS, PC, entitled "Topographic Map Of Part Of Lot 5, TWP. 12, Range 5, Section 6, Town Of Newstead, County Of Erie, New York" dated 3/4/93 & revised 3/26/93.
2. No boundary survey was performed by Deborah A. Naybor, PLS, PC.

LEGEND:

- GW-1 ◆ Monitoring Well Designation
- Existing Gas Well
- Approximate Limits Of Former Disposal Area

DATE
 2-11-2013
 DRAWN BY
 RJM
 SCALE
 1" = 100'

day

DAY ENVIRONMENTAL, INC.
 ENVIRONMENTAL CONSULTANTS
 ROCHESTER, NEW YORK 14606
 NEW YORK, NEW YORK 10170

PROJECT TITLE
 STRIPPIT, INC.
 AKRON, NEW YORK

PERIODIC REVIEW REPORT

DRAWING TITLE

Site Location Map

PROJECT NO.
 4653R-12

FIGURE 2