

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



Site Details			
Sito No. P00142	AUG 0 1 2016	Box 1	
Site No. B00143	DER/HWR		
Site Name Schoepfel Chevrolet Property	Region 8		
Site Address: 7106 East Ridge Road Zip Code: 14551-	RECEIVE		
City/Town: Sodus County: Wayne	JUL 28 201		
Site Acreage: 2.3	NVC-		
Reporting Period: July 01, 2015 to July 01, 2016	ENV REMEDIAT	i 8 ION	
		YES	NO
Is the information above correct?		D'	
			ANT DECIM
If NO, include handwritten above or on a separate sheet.			
2. Has some or all of the site property been sold, subdivided tax map amendment during this Reporting Period?	d, merged, or undergone a		Ø
	Demonstrat Deviced	\$30.50	•
Has there been any change of use at the site during this (see 6NYCRR 375-1.11(d))?	Keponing Period		D/
Have any federal, state, and/or local permits (e.g., buildir	ng, discharge) been issued		100 10000 a a
for or at the property during this Reporting Period?			Z
If you answered YES to questions 2 thru 4, include d			
that documentation has been provintisty stimmitted to	ith this certification form		
that documentation has been previously submitted w	vith this certification form.		~
Is the site currently undergoing development?	vith this certification form.		Ø
	vith this certification form.		
	vith this certification form.	Box 2	
	vith this certification form.		
		Box 2	
 5. Is the site currently undergoing development? 6. Is the current site use consistent with the use(s) listed be 		Box 2	NO
Is the site currently undergoing development? Is the current site use consistent with the use(s) listed be Commercial and Industrial	elow? NO, sign and date below and	Box 2	NO 🗆
 5. Is the site currently undergoing development? 6. Is the current site use consistent with the use(s) listed be Commercial and Industrial 7. Are all ICs/ECs in place and functioning as designed? IF THE ANSWER TO EITHER QUESTION 6 OR 7 IS 	elow? NO, sign and date below and M. Otherwise continue.	Box 2 YES	NO -
 Is the site currently undergoing development? Is the current site use consistent with the use(s) listed be Commercial and Industrial Are all ICs/ECs in place and functioning as designed? IF THE ANSWER TO EITHER QUESTION 6 OR 7 IS DO NOT COMPLETE THE REST OF THIS FORI 	elow? NO, sign and date below and M. Otherwise continue.	Box 2 YES	NO -
 Is the site currently undergoing development? Is the current site use consistent with the use(s) listed be Commercial and Industrial Are all ICs/ECs in place and functioning as designed? IF THE ANSWER TO EITHER QUESTION 6 OR 7 IS DO NOT COMPLETE THE REST OF THIS FORI 	NO, sign and date below and M. Otherwise continue. with this form to address these	Box 2 YES	NO -

SITE NO. B00143

Box 3

Description of Institutional Controls

Parcel

Owner

69117-07-694785

Wayne County

Institutional Control

Ground Water Use Restriction

Soil Management Plan

Landuse Restriction

- Appropriate soil characterization for future excavations
- SVI evaluations for new buildings
- Maintenance of asphalt paving
- Annual certification
- Commercial or Industrial usage only
- Groundwater use restrictions

Box 4

Description of Engineering Controls

Parcel

69117-07-694785

Engineering Control

Cover System - remove

-1	-	-	

Periodic Review Report (PRR) Certification Statements

	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 compete. 					
**	YES NO					
	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. B00143

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.

Dohn A +	40 plenas at 63	Drchard Turr print business address	Solus My 14551
am certifying as	Owner		_(Owner or Remedial Party)
for the Site named in the Signature of Owner, Reme	Hadis		7 5 16 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.

(Owner or Remedial Party)

Date

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

Stamp (Required for PE)

No report needed-owner just needs
to update DEC if any construction
has completed at site during
PRR period.
Owner can sign-cover system is
not engineered so don't need
PE stamp > should also be
taken out of Engineering control