

# **NEW YORK EXPRESS DRY CLEANERS**

**QUEENS, NEW YORK**

---

## **Final Engineering Report**

**NYSDEC BCP Number: C241050**

**Prepared for:**

MacArthur Holding B, Inc.  
140 South Dearborn Street, Suite 1100  
Chicago, Illinois 60603

**Prepared by:**

MACTEC Engineering and Consulting, P.C.  
453 Route 146 – Suite 201  
Clifton Park, NY 12065

---

**MAY 2016**

## **CERTIFICATIONS**

I, Brent O'Dell, am currently a registered professional engineer licensed by the State of New York, I had primary direct responsibility for implementation of the remedial program activities, and I certify that the Remedial Action Work Plan (RAWP) was implemented and that all construction activities were completed in substantial conformance with the New York State Department of Environmental Conservation (NYSDEC)-approved RAWP.

I certify that the data submitted to the NYSDEC with this Final Engineering Report demonstrates that the remediation requirements set forth in the RAWP and in all applicable statutes and regulations have been or will be achieved in accordance with the time frames, if any, established in for the remedy.

I certify that all use restrictions, Institutional Controls, Engineering Control, and/or any operation and maintenance requirements applicable to the Site are contained in an environmental easement created and recorded pursuant ECL 71-3605 and that all affected local governments, as defined in ECL 71-3603, have been notified that such easement has been recorded.

I certify that a Site Management Plan has been submitted for the continual and proper operation, maintenance, and monitoring of the Engineering Control employed at the Site, including the proper maintenance of all remaining monitoring wells, and that such plan has been approved by NYSDEC.

I certify that all documents generated in support of this report have been submitted in accordance with the DER's electronic submission protocols and have been accepted by the NYSDEC.

*Final Engineering Report  
New York Express Dry Cleaners  
Fresh Meadows, New York  
Project No. 3485050051*

*May 2016*

I certify that all data generated in support of this report have been submitted in accordance with the NYSDEC's electronic data deliverable and have been accepted by the NYSDEC.

I certify that all information and statements in this certification form 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, Brent O'Dell, of MACTEC Engineering & Consulting, P.C. am certifying as Owner's Designated Site Representative for the site.

069876

NYS Professional Engineer #

6/3/16

Date



Signature



## TABLE OF CONTENTS

<b>CERTIFICATIONS.....</b>	<b>I</b>
<b>TABLE OF CONTENTS .....</b>	<b>I</b>
<b>LIST OF TABLES .....</b>	<b>III</b>
<b>LIST OF FIGURES .....</b>	<b>IV</b>
<b>LIST OF ACRONYMS .....</b>	<b>V</b>
<b>FINAL ENGINEERING REPORT .....</b>	<b>1</b>
<b>1.0 BACKGROUND AND SITE DESCRIPTION.....</b>	<b>1</b>
<b>2.0 SUMMARY OF SITE REMEDY.....</b>	<b>2</b>
<b>2.1 REMEDIAL ACTION OBJECTIVES .....</b>	<b>2</b>
2.1.1 Soil RAOs.....	2
2.1.2 Soil Vapor .....	2
<b>2.2 DESCRIPTION OF SELECTED REMEDY .....</b>	<b>2</b>
<b>3.0 DESCRIPTION OF REMEDIAL ACTIONS PERFORMED .....</b>	<b>4</b>
<b>3.1 GOVERNING DOCUMENTS .....</b>	<b>4</b>
3.1.1 Site Specific Health & Safety Plan (HASP) .....	5
3.1.2 Quality Assurance Project Plan (QAPP) .....	5
3.1.3 Community Air Monitoring Plan (CAMP) .....	6
3.1.4 Community Participation Plan .....	7

<b>4.0 REMEDIAL PROGRAM ELEMENTS .....</b>	<b>9</b>
<b>4.1 CONTRACTORS AND CONSULTANTS.....</b>	<b>9</b>
<b>4.2 SITE PREPARATION .....</b>	<b>9</b>
4.2.1 General Site Controls .....	10
4.2.2 CAMP results .....	10
<b>4.3 REMEDIAL PERFORMANCE/DOCUMENTATION SAMPLING .....</b>	<b>10</b>
<b>4.4 CONTAMINATION REMAINING AT THE SITE .....</b>	<b>12</b>
<b>4.5 SSDS .....</b>	<b>13</b>
<b>4.6 INSTITUTIONAL CONTROLS.....</b>	<b>17</b>
<b>4.7 DEVIATIONS FROM THE REMEDIAL ACTION WORK PLAN.....</b>	<b>18</b>

## **LIST OF TABLES**

Table 1 - Summary of the Analytical Results for Soil Samples

Table 2 - Summary of IAQ, Sub-Slab and Outdoor Sample Results

Table 3 - Summary of Groundwater Analytical Results

## **LIST OF FIGURES**

Figure 1 - Site Location Map

Figure 2 - Figure of Site and Site Boundaries

Figure 3 - Remaining Soil Contamination Summary

Figure 4 - Remaining Soil Vapor Data

Figure 5 - Remedial Investigation Groundwater Contamination Summary

## **LIST OF APPENDICES**

Appendix A - Environmental Easement and Metes and Bounds

Appendix B - Electronic Copy of the Final Engineering Report

Appendix C - Sample Health and Safety Plan

Appendix D - EC Drawings of Record

## LIST OF ACRONYMS

Acronym	Definition
BCA	Brownfield Cleanup Agreement
BCP	Brownfield Cleanup Program
bgs	Below ground surface
CAMP	Community Air Monitoring Plan
CQAP	Construction Quality Assurance Plan
COC	Certification of Completion
ECL	Environmental Conservation Law
ESA	Environmental Site Assessment
FER	Final Engineering Report
HASP	Health and Safety Plan
IAQ	Indoor Air Quality
IRM	Interim Remedial Measure
MHB	MacArthur Holding B.
NYSDEC	New York State Department of Environmental Conservation
NYSDOH	New York State Department of Health
O & M	Operation and Maintenance
PCE	Tetrachloroethene
QAPP	Quality Assurance Project Plan
RAO	Remedial Action Objectives
RAWP	Remedial Action Work Plan
RI	Remedial Investigation
scfpm	Standard cubic feet per minute
SCG	Standards, criteria, and guidelines
SoMP	Soil/Materials Management Plan
SMP	Site Management Plan
SRIWP	Supplemental Remedial Investigation Work Plan
SSDS	Sub Surface Depressurization System (SSDS)
SVE	Soil Vapor Extraction
SVOC	Semi-Volatile Organic Compounds
SWPPP	Storm Water Pollution Prevention Plan
TAGM	Technical Administrative Guidance Memorandum
TCE	Trichloroethylene
USGS	United States Geologic Survey
UST	Underground Storage Tank

UUSCOs	Unrestricted Use Soil Cleanup Objectives	
VOC	Volatile Organic Compound	

## **FINAL ENGINEERING REPORT**

### **1.0 BACKGROUND AND SITE DESCRIPTION**

MacArthur Holding B, Inc. (MHB) entered into a Brownfield Cleanup Agreement (BCA) with the New York State Department of Environmental Conservation (NYSDEC) to remediate an approximately 0.03-acre property located in Fresh Meadows, Queens, New York. This BCA required the Remedial Party, MHB, to investigate and remediate contaminated media at the Site. Figure 1 presents the Site's location and Figure 2 presents the boundaries of this approximately 0.03-acre area subject to this report and referred to as the Site. The Site was remediated to Track 2 residential use (which also allows restricted residential, commercial and industrial use) and will continue to be used as part of a commercial shopping center (the 73rd Avenue Shopping Center).

The Site is located in the County of Queens, Fresh Meadows, Queens, New York and is identified as a portion of Block 7115 and Lot 30 on the Queens Tax Map. Figure 1 shows the location of the Site on the United States Geological Survey (USGS) topographical 7.5' Jamaica quadrangle. The Site is situated on an approximate 3.5-acre property bounded by an entrance/exit driveway to the north, 73rd Avenue to the south, 188th Street to the east, and a building occupied by an automotive repair facility and pre-school to the west. Figure 2 shows the Site plan and adjacent properties. The boundaries of the Site are fully described in Appendix A, Metes and Bounds.

An electronic copy of this Final Engineering Report (FER) with all supporting documentation is included as Appendix B.

## **2.0 SUMMARY OF SITE REMEDY**

### **2.1 REMEDIAL ACTION OBJECTIVES**

Based on the results of the Remedial Investigation, the following Remedial Action Objectives (RAOs) were identified for the Site.

#### **2.1.1 Soil**

##### *RAOs for Public Health Protection*

- Prevent inhalation of or exposure from contaminants volatilizing from contaminants in soil.

#### **2.1.2 Soil Vapor**

##### *RAOs for Public Health Protection*

- Mitigate impacts to public health resulting from existing, or the potential for, soil vapor intrusion into buildings adjacent to the Site.

### **2.2 DESCRIPTION OF SELECTED REMEDY**

In March 2002, the NYSDEC and MHB executed a Voluntary Cleanup Agreement (VCP) for the remediation at the Site. A SVE system was designed and installed at the Site in January 2006 under the VCP to remediate the PCE and TCE impacted soil beneath the Site. The system was designed to extract soil vapor from two extraction wells, SVE-1 and SVE-2, which are approximately 38 feet in depth and are screened at approximately 6 feet to 38 feet bgs. The SVE system was operated for about five years (2006 through 2010). SVE influent sample results indicated there was a significant reduction in the level of VOC in the SVE influent samples since system operation started. In July 2011, sub slab vacuum measurements were obtained from beneath the basement concrete slabs of Rite Aid Pharmacy, former Blockbuster Video, and CitiBank to demonstrate the creation of a vacuum beneath the slabs by the operation of the SVE system. Following this demonstration of vacuum influence, the SVE system was approved by the NYSDOH

for conversion into a SSDS. The SSDS uses the same equipment as the SVE system and has the same operational parameters as the SVE system.

The Site was remediated in accordance with the remedy selected by the NYSDEC in the Remedial Action Work Plan (RAWP) dated July 2013 and the Decision Document (DD) dated October 2013. The factors considered during the selection of the remedy are those listed in 6 NYCRR 375-1.8.

The following are the components of the selected remedy:

- Continued operation of an sub slab depressurization system (SSDS) (which was previously installed as a soil vapor extraction system);
- Execution and recording of an Environmental Easement to restrict land use and prevent future exposure to any contamination remaining at the Site;
- Development and implementation of a Site Management Plan (SMP) for long term management of potential remaining contamination as required by the Environmental Easement, which includes plans for: (1) EC and ICs, (2) monitoring, (3) operation and maintenance and (4) reporting; and,
- Periodic certification of the EC and ICs listed above.

### **3.0 DESCRIPTION OF REMEDIAL ACTIONS PERFORMED**

Remedial activities completed at the Site were conducted in accordance with the NYSDEC-conditionally approved Remedial Investigation/Remedial Action Workplan (RI/RAW) for the New York Express Dry Cleaners dated July 2013, the NYSDEC-approved RAWP for the New York Express Dry Cleaners dated July 2013, and the Decision Document dated October 2013. No deviations from the RI/RAW and RAWP were made.

#### **3.1 INTERIM REMEDIAL MEASURES**

A soil vapor extraction (SVE) test was conducted during the period from May to October 2004 by connecting a portable SVE system to one of two vapor extraction wells (SVE-1 and SVE-2) and collecting field data for air flow rates, vacuum influence, and VOC concentrations. Significant vacuum influence was measured in all test wells, indicating a relatively large radius of influence (approximately 110 feet). Based on the testing with the portable SVE system, a SVE system was designed and installed at the Site in January 2006 to remediate the chlorinated solvent impacted soil in the area of concern. The system was designed to extract soil vapor from two extraction wells, SVE-1 and SVE-2, which are approximately 38 feet in depth and are screened at approximately 6 feet to 38 feet below ground surface (bgs). A Rotron® six horsepower regenerative blower was used for the vacuum extraction of soil vapor. The SVE system operated at approximately 80 inches (in.) water column (w.c.) to 100 in. w.c. and produces 80 standard cubic feet per minute (scfm).

The SVE system was operated for about five years (2006 through 2010). The SVE influent sample results indicated there was a significant reduction in the level of VOC in the SVE influent samples since system operation started. PCE decreased from 81,374  $\mu\text{g}/\text{m}^3$  in October 2004 (collected during a pilot study) to 1,670  $\mu\text{g}/\text{m}^3$  in September 2009; while, TCE decreased from 6,449  $\mu\text{g}/\text{m}^3$  to 93  $\mu\text{g}/\text{m}^3$  and cis-DCE from 5,700

$\mu\text{g}/\text{m}^3$  to  $80.1 \mu\text{g}/\text{m}^3$  during the same period. Indoor air quality (IAQ) sampling slab soil conducted in the basement spaces of the CitiBank, former Blockbuster Video, and the Rite Aid Pharmacy during the heating seasons of 2010 evidenced no exceedance of the NYSDOH indoor air guideline of  $30 \mu\text{g}/\text{m}^3$  for PCE and  $2 \mu\text{g}/\text{m}^3$  for TCE.

In July 2011, sub slab vacuum measurements were obtained from beneath the basement concrete slabs of Rite Aid Pharmacy, former Blockbuster Video, and CitiBank to demonstrate the creation of a vacuum beneath the slabs by the operation of the SVE system. Following this demonstration of vacuum influence, the SVE system was approved by the NYSDOH for conversion into a SSDS. The SSDS uses the same equipment as the SVE system and has the same operational parameters as the SVE system.

## **3.2 GOVERNING DOCUMENTS**

### **3.2.1 Site Specific Health & Safety Plan (HASP)**

All remedial work performed under this Remedial Action was in full compliance with governmental requirements, including Site and worker safety requirements mandated by Federal Occupational Safety and Health Administration (OSHA).

A Health and Safety Plan (HASP) was complied with for all remedial and invasive work performed at the Site. An example of a HASP used for the Site is in Appendix C of the SMP.

### **3.2.2 Quality Assurance Project Plan (QAPP)**

The QAPP provided a framework of procedures, functional activities, and organization to be used during the execution of environmental work at this Site. The procedures and criteria outlined in the QAPP described the level of performance required to achieve the project objectives.

The objectives of the QAPP were as follows:

- Provide a consistent framework for collecting samples and generating analytical data throughout the project;
- Identify detection limit and quality control (QC) goals for analytical methodologies used to generate chemistry data;
- Set forth review procedures used to demonstrate that the analytical systems are achieving project objectives;
- Set forth record-keeping procedures for field activities, sample collection and handling, and analytical data reporting;
- Provide for generation and documentation of data of known and acceptable quality; and,
- Set forth procedures that limit the effect of non-laboratory activities on analytical data.

The QAPP assured the documentation of Site activities so that field and analytical measurements could be verified. Quality assurance (QA) activities included the use of a management system to produce valid data in support of the program and a system of checks and reports that monitored the attainment of data quality objectives (DQOs). This management system included plans that allowed for the traceability, completeness, and security of field and analytical documents, procedures, and the evaluation of data quality relative to DQOs. QC included specific technical activities performed by field or laboratory personnel to demonstrate that system performance was maintained within established criteria. QC activities were included within this QA system to document precision, accuracy, and comparability of results.

### **3.2.3 Community Air Monitoring Plan (CAMP)**

A Community Air Monitoring Plan (CAMP) was prepared prior to conducting a Supplemental Remedial Investigation (SRI) in July and August 2011 because there was some potential remaining contamination in soil. The CAMP required real-time monitoring for volatile and semi-volatile organic compounds (VOCs and SVOCs) and

particulates (i.e., dust) at the downwind perimeter of the Site when investigation activities were in progress. The CAMP was not intended for use in establishing action levels for worker respiratory protection. Rather, its intent was to provide a measure of protection for the downwind community (i.e., off-site receptors including residences and businesses and onsite workers not directly involved with invasive activities) from a potential airborne contaminant. The action levels in the CAMP required increased monitoring, corrective actions to abate emissions, and/or work shutdown. Additionally, the CAMP helped to confirm that work activities did not spread contamination off-site through the air.

#### **3.2.4 Citizen Participation Plan**

The purpose of the Citizen Participation Plan (CP Plan) for the Site was to provide information that would promote and facilitate citizen participation as required in the legislation that created the Brownfields Cleanup Program (BCP). MHB performed environmental investigations and remediation on the Site to characterize and remove organic constituents identified in the soil that were associated with dry cleaning operations.

The objectives of the CP Plan were as follows:

1. Inform the public of planned and/or ongoing actions, the nature of environmental conditions, responses under consideration, and progress;
2. Create opportunities for the public to provide information, opinions and perspectives on the Site's technical decisions;
3. Ensure open communication among the public, the project staff, and state/local decision makers throughout the remedial progress; and
4. Coordinate public outreach efforts within the involved governmental agencies to best serve the public.

Opportunities for public participation were provided when notices announcing investigative and remedial activities were published in the Environmental Notice

Bulletin. Opportunities for public participation were provided when Fact Sheets were distributed that discussed the proposed plans for investigation or remediation.

MHB has prepared a Site Contact List which included the names of persons required by the BCP to be included on the Site Contact List. This list will be updated as necessary to include the names of any parties that identify themselves to MHB or NYSDEC as interested in being on the list.

MHB also established a public document repository at which it placed copies of documents and other information pertaining to the investigation and remediation of the Site, including technical data and reports submitted to the NYSDEC. The information was kept current and included reports, data, maps and other information gathered during the various stages of investigative and remedial activities at the Site. Fact Sheets were also available at the repository. The repository for the Site is listed below:

Queens Borough Public Library  
The Central Library  
89-11 Merrick Boulevard  
Jamaica, New York 11432  
(718) 990-0778

Hours: Monday-Friday 9:00 am - 9:00 pm,  
Saturday 10:00am - 5:30 pm, and  
Sunday 12:00 pm -5:00 pm

In addition, complete project records were also kept at the following location:

NYSDEC Region 2 Office  
47-40 21<sup>st</sup> Street  
Long Island City, New York 11101  
Telephone: (718) 482-4897

Hours: Monday-Friday 9:00 am – 3:00 pm  
By appointment only, call Ms. Mandy Yau

## **4.0 REMEDIAL PROGRAM ELEMENTS**

### **4.1 CONTRACTORS AND CONSULTANTS**

A listing of contractors who performed work at the Site and their associated tasks is presented below:

- S & D Environmental Services, Inc., Edison, New Jersey / UST removal contractor;
- TPI Environmental, Inc., New Hope, Pennsylvania / Utility location and drilling services;
- Northgate Electric Corporation, New York, New York / Electrical contractor service;
- Zebra Environmental Corporation, Lynbrook, New York / Utility location and drilling services;
- Pioneer Paving Inc., Kings Park, New York / Asphalt paving services; and,
- Aquifer Drilling and Testing, Inc., New York, New York / Drilling services.

The certifying Engineer of Record for the work was Brent O'Dell, P.E.

### **4.2 SITE PREPARATION**

Generally, the work performed at the Site required the following tasks:

- Mobilization;
- Overhead and subsurface utility clearance; and,
- Acquisition of NYSDEC and NYSDOH approvals.

#### **4.2.1 General Site Controls**

Highly visible and reflective traffic control cones were used to provide site safety and security during remedial activities at the Site. Remedial activities were documented in a dedicated field logbook. Equipment was decontaminated prior to entering the Site, during its use on the Site, and following its use. Soil was screened with a photoionization detector (PID) during all invasive subsurface remedial activities. Soil cuttings from borings were screened and placed in 55-gallon drums for storage and disposal, if PID readings indicated high readings.

#### **4.2.2 CAMP results**

The air monitoring performed during the SRI in July and August 2011 did not indicate any exceedance of action levels and did not require response actions.

The results of the SRI were reported daily to the NYSDEC via email during the investigation. Later the procedures, results, and conclusions of the SRI were presented in a report dated September 2, 2011. Monthly Progress Reports are prepared and submitted monthly to the NYSDEC.

#### **4.3 REMEDIAL PERFORMANCE/DOCUMENTATION SAMPLING**

An out of service 1,250-gallon heating oil underground storage tank (UST) was removed from the Site in November 1997. No oil staining or indications of light non-aqueous phase liquids (LNAPL) were observed within the tank bed; however, evidence of chlorinated VOC, including tetrachloroethene (PCE) and trichloroethene (TCE), contamination was detected in surrounding soils. Based on observations during UST removal and the analytical results of the soil samples, MHB notified the NYSDEC Spills and Remediation Division and Spills Hotline of an apparent release (NYSDEC Spill # 97-096 84).

It was concluded that a spill or spills of PCE and TCE occurred in the vicinity of the former UST and that the likely source of these compounds was not the subject tank. The soils overlying the tank and immediately below the concrete sidewalk appeared to be solvent contaminated and the residual tank fluid and wastes were primarily oily water and petroleum sludge. Approximately 30 to 40 cubic yards of soil, including contaminated soil, was removed during UST closure activities and disposed offsite; however, due to access restrictions created by the building and building foundations, remedial excavation was limited and a portion of the impacted soils could not be removed.

In March 2002, the NYSDEC and MHB executed a Voluntary Cleanup Agreement for the remediation at the Site.

A SVE system was designed and installed at the Site in January 2006 to remediate the PCE and TCE impacted soil beneath the Site. The system was designed to extract soil vapor from two extraction wells, SVE-1 and SVE-2, which are approximately 38 feet in depth and are screened at approximately 6 feet to 38 feet bgs. A Rotron® six horsepower regenerative blower was used for the vacuum extraction of soil vapor. The SVE system operated at approximately 80 inches (in.) w.c. to 100 in. w.c. and produced 80 standard cubic feet per minute (scfm).

In July and August 2011, a SRI was conducted. The results and conclusions of the SRI were presented in a report dated September 2, 2011 and are summarized below.

- The analytical results of confirmatory soil samples indicate that the SVE system installed as an IRM in January 2006 effectively remediated the VOCs previously detected in the soil beneath the Site, specifically TCE, PCE, cis-DCE, naphthalene, and sec-butyl benzene. Figure 3 presents the 2011 SRI soil sample analytical results.
- Benzo(a)anthracene, benzo(a)pyrene, and chrysene were detected in soil sample SB-1 (15 – 15.5) at concentrations exceeding their respective UUSCOs, near the former fuel oil UST area located adjacent to the northwestern corner of New York Express.

- Based on the results of sub-slab vacuum measurements, it was determined that the SVE system adequately depressurized the slab beneath the adjacent retail stores and will effectively control the potential migration of VOCs in soil gas. Figure 4 presents a summary of the 2011 SRI soil vapor analytical results.
- The soil vapor extraction (SVE) system was converted into a SSDS to create negative pressure in the soil beneath the slab of the adjacent retail stores and thereby preclude vapor intrusion from any potential remaining contamination at the Site.
- Concentrations of VOC in groundwater decreased significantly to below the NYSDEC Technical and Operational Guidance Series (TOGS) Ambient Water Quality Standards and Guidance Values since the groundwater samples that were collected in September and October 2004 and the operation of the SVE system. Figure 5 presents a summary of the 2011 SRI groundwater analytical results.

Table 1 presents a summary of the analytical results for soil samples, Table 2 presents a summary of IAQ, sub-slab and outdoor sample analytical results, and Table 3 presents a summary of groundwater sample analytical results.

#### **4.4 CONTAMINATION REMAINING AT THE SITE**

The analytical results of the post remediation confirmatory soil sampling program indicated that only the SVOCs benzo(a)anthracene, benzo(a)pyrene, and chrysene were detected at concentrations that exceeded utilized unrestricted soil cleanup objectives (UUSCOs). These SVOCs were detected in only one soil sample, SB-1 (15 – 15.5), which was collected from boring SB-1 in native soil at a depth interval of 15 to 15.5 feet bgs. No other parameters, including PCE and TCE, metals, pesticides, and PCB, were detected in any of the soil samples at concentration that exceeded the UUSCOs. Figure 3 presents the analytical results of the post remediation confirmatory soil sampling program.

Since potential remaining contaminated soil and soil vapor remains beneath the Site after completion of the Remedial Action, an EC and ICs are required to protect human health and the environment. The EC and ICs are described in the following sections. Long-

term management of the EC and ICs and potential remaining contamination will be performed under the SMP approved by the NYSDEC.

#### **4.5 SSDS**

The SVE system was converted to an SSDS to mitigate possible soil vapor intrusion into the basements of the adjacent retail stores by creating negative pressure in the soil beneath the basements. The SSDS was designed to extract soil vapor from two extraction wells, SVE-1 and SVE-2. The SVE wells are approximately 38 feet in depth and are screened at approximately 6 feet to 38 feet bgs. A Rotron six horsepower regenerative blower is used for the vacuum extraction of soil vapor. The SSDS operates at approximately 80 inches water column to 100 inches water column and produces 80 standard cubic feet per minute (scfm). The SSDS radius of influence was previously demonstrated to extend 90 to 100 feet beyond the Site. As-built drawings of the former SVE, now SSDS are in Appendix D.

Sub slab vacuum measurements were obtained from beneath the basement concrete slabs of the adjacent retail stores in July 2011 to confirm vacuum beneath the slabs by the operation of the SVE system. Following this demonstration of vacuum influence, the SVE was approved by the NYSDEC and NYSDOH to operate as an SSDS. The SSDS has been in operation at the Site since July 2011.

The SSDS is a simple and reliable system, with few operation and maintenance requirements. The system consists of a Rotron six horsepower regenerative blower, an electric/control panel, an extraction influent side, and an effluent discharge side. The extraction influent side has the following components:

- Two extraction piping lines, one line to each of the two extraction wells, SVE 1 and SVE 2;
- Two motor operated valves, one valve on each extraction influent piping line;

- A water/moisture knockout tank to which the extraction piping lines are manifolded;
- A vacuum gauge on the extraction influent line between the knockout tank and the regenerative blower;
- A discharge line between the knockout tank and a granular activated carbon (GAC) water treatment drum;
- A transfer pump affixed to the discharge line between the knockout tank and the GAC drum; and,
- A short length of extraction piping between the knockout tank and the blower, with a vacuum gauge.

The discharge effluent side has the following components:

- A discharge piping line, with an air flow gauge; and,
- A vent line.

The SSDS is within a lockable metal shed, which is enclosed by a six-foot high gated and lockable chain link fence.

The SSDS has been in almost continual operation since August 2011. In the fall of 2012, the SSDS shut down as a result of power loss due to Hurricane Sandy, but was soon restarted. The startup procedures for the SSDS are as follows:

Check to see if there is power to the electric/control panel;

- If there is no electric power to the system, but there is electric power to the shopping center, make sure the activation switch is in the off position, check the electric panel in the basement of the former New York Express Cleaners and if the breaker switch is off, put it in the on position; and,
- If there is electric power, check for an alarm condition on the electric/control panel, and if there is an alarm condition, make sure the activation switch is in the off position, press the reset button, and turn the activation switch to the automatic position.

Once the SSDS has been restarted, the following testing should be performed:

- Listen for audible sounds of operation and wear on the regenerative blower;
- Check for flow in the piping lines; and,
- Inspect the system gauges (vacuum and air flow gauges) for readings.

An Operation and Maintenance Manual is kept in the metal shed with the SSDS.

The primary routine operation and maintenance duties of the SSDS are as follows:

- Check for alarms on the electric/control panel;
- Listen for audible sounds of operation and wear on the regenerative blower;
- Inspect the extraction influent, effluent discharge piping, and other lines for any distortion, leaks, or vibrations and check for flow from the effluent vent line;
- Check for flow through the two motor operated valves on the extraction influent piping lines;
- Inspect the vacuum gauge vacuum gauge on the extraction line between the knockout tank and the regenerative blower;
- Read the vacuum gauge and compare the vacuum reading to previous readings;
- Inspect the air flow gauge on the discharge effluent line between the blower and the vent line;
- Read the air flow gauge and compare the air flow reading to previous readings;
- Check the water/moisture knock out tank for any water; and;
- Check the high level switch (in the knockout tank) and transfer pump for operation and listen for audible sounds of operation and wear.

An Operation and Maintenance Manual is kept in the metal shed with the SSDS.

Routine maintenance will be performed quarterly or when the system alarms (either as a result of a malfunction or severe weather conditions).

There is little equipment maintenance associated with the SSDS. The primary routine equipment maintenance duties of the SSDS are as follows:

- Inspect the filters in the two motor operated valves on the extraction influent lines, and clean, if necessary;
- Inspect the filter in the pressure relief valve on the regenerative blower and clean, if necessary; and,
- Inspect the filters in any solenoid valves and clean, if necessary.

An Operation and Maintenance Manual, with the manufacture's equipment maintenance recommendations is kept in the metal shed with the SSDS.

Routine maintenance will be performed every two years or when routine operation inspections indicate a possible problem with the equipment.

The primary non-routine equipment maintenance duties of the SSDS are as follows:

- Damage to the SSDS as a result of vandalism or severe weather conditions, such as electrical power surges or flooding;
- Reduced effectiveness as a result of piping line blockage or equipment malfunctions; and,
- Component replacement due to breakage.

Generally, remedial processes are considered completed when effectiveness monitoring indicates that the remedy has achieved the remedial action objectives identified by the decision document, which is to mitigate impacts to public health resulting from existing, or the potential for, soil vapor intrusion into buildings. The framework for determining when remedial processes are complete is provided in Section 6.6 of NYSDEC DER-10.

After conferring with the NYSDEC and NYSDOH, IAQ and sub slab soil vapor samples will be collected from the basements of the Rite Aid Pharmacy, former Blockbuster Video, and CitiBank. The results of three consecutive rounds of IAQ and sub slab sampling, conducted during heating seasons and following a temporary shutdown of the SSDS, will be used to help determine whether the concentrations of PCE and TCE are preventative of the potential for soil vapor intrusion and protective of human health.

Approval from the NYSDEC and NYSDOH to terminate SSDS operation will be based on the data and site specific considerations.

The active SSDS will not be discontinued unless prior written approval is granted by the NYSDEC and NYSDOH. In the event that monitoring data indicates that the SSDS is no longer required, a proposal to discontinue the SSDS will be submitted by MHB to the NYSDEC and NYSDOH.

#### **4.6 INSTITUTIONAL CONTROLS**

A series of ICs are required to: (1) implement, maintain and monitor an EC system; (2) prevent future exposure to remaining contamination by controlling disturbances of the subsurface contamination; and, (3) limit the use and development of the Site to residential, restricted residential, commercial and industrial uses only. Adherence to these ICs on the Site is required by the Environmental Easement and will be implemented under this Site Management Plan. These ICs are as follows:

- Compliance with the Environmental Easement and the SMP by the Grantor and the Grantor's successors and assigns;
- The EC (the SSDS) must be operated and maintained as specified in the SMP for the Site;
- The EC on the Site must be inspected at a frequency and in a manner defined in the SMP for the Site;
- Soil vapor monitoring must be performed as defined in the SMP for the Site;
- Data and information pertinent to the management of the Site must be reported at the frequency and in a manner defined in the SMP.

ICs identified in the Environmental Easement may not be discontinued without an amendment to or extinguishment of the Environmental Easement.

The Site has a series of ICs in the form of site restrictions. Adherence to these ICs is required by the Environmental Easement. Site restrictions that apply to the Site are:

- The Site may only be used for residential, restricted residential, commercial and industrial uses provided that the long-term EC and ICs included in the SMP for the Site are employed.
- All future activities on the Site that will disturb remaining contaminated material must be conducted in accordance with the SMP for the Site;
- The use of the groundwater underlying the Site is prohibited without treatment rendering it safe for intended use;
- MHB will submit to NYSDEC a written statement that certifies, under penalty of perjury, that: (1) controls employed at the Site are unchanged from the previous certification or that any changes to the controls were approved by the NYSDEC; and, (2) nothing has occurred that impairs the ability of the controls to protect public health and environment or that constitute a violation or failure to comply with the SMP. NYSDEC retains the right to access the Site at any time in order to evaluate the continued maintenance of any and all controls. This certification shall be submitted annually, or an alternate period of time that NYSDEC may allow and will be made by an expert that the NYSDEC finds acceptable.

The environmental easement for the site was executed by the NYSDEC on June 15, 2015, and filed with the Office of the City Register on April 12, 2016. The County Recording Identifier number for this filing is 2016000127317. A copy of the easement and proof of filing is provided in Appendix A.

#### **4.7 DEVIATIONS FROM THE REMEDIAL ACTION WORK PLAN**

There were no deviations from the RAWP.

## **TABLES**

**Table 1 - Summary of the Analytical Results for Soil Samples**  
**New York Express Dry Cleaners**  
**Fresh Meadows, New York**

MACTEC Sample ID:				SB-1 (15-15.5)
Lab Sample ID:				JA82254-12
Date Sampled:				7/29/2011
Units:				mg/kg
	NYSDEC Unrestricted Use Soil Cleanup Objectives (375-6.8(b))	NYSDEC Restricted Use Soil Cleanup Objectives for Commercial Areas (375-6.8(b))	NYSDEC Restricted Use Soil Cleanup Objectives Protection of Groundwater (375-6.8(a))	
	mg/kg	mg/kg	mg/kg	
Benzo(a)anthracene	1	5.6	1	<u>1.53</u>
Benzo(a)pyrene	1	1	22	<u>1.36</u>
Benzo(b)fluoranthene	1	5.6	1.7	1.36
Benzo(k)fluoranthene	0.8	56	1.7	0.917
Chrysene	1	56	1	<u>1.52</u>
Indeno (1,2,3-cd)pyrene	0.5	5.6	8.2	0.717

**Notes:**

Analysis results are shown in milligrams per kilogram (mg/kg).  
Bold-faced and underlined type indicates sample exceeded either Restricted Use Soil Cleanup Objectives (SCO) for Commercial Areas or Protection of Groundwater.

Prepared/Date: VMB 8/25/2011  
Checked/Date: DMS 9/2/2011

Table 2: Summary of IAQ and Sub-Slab Results  
New York Express Dry Cleaners  
Fresh Meadows, New York

	NYSDOH Air Background Values (ug/m <sup>3</sup> )	NYSDOH Air Guideline Values (ug/m <sup>3</sup> )	Citibank					
			IAQ			Subslab		
			2/16/2006	1/17/2007	3/10/2008	3/17/2008	3/30/2010	3/30/2010
Compound (ug/m <sup>3</sup> )								
Vinyl Chloride	<0.9	na	nd (0.54)	nd (0.040)	nd (0.51)	nd (0.51)	nd (0.51)	nd (0.51)
Trichloroethene	<1.2-1.2	5	0.70	0.64	0.81 J	nd (0.21)	1	0.70
Tetrachloroethene	<1.9-5.9	100	11	15	18	13	12	129

	NYSDOH Air Background Values (ug/m <sup>3</sup> )	NYSDOH Air Guideline Values (ug/m <sup>3</sup> )	Blockbuster					
			IAQ			Subslab		
			2/16/2006	1/17/2007	3/10/2008	3/17/2008	3/30/2010	3/30/2010
Compound (ug/m <sup>3</sup> )								
Vinyl Chloride	<0.9	na	nd (0.47)	nd (0.47)	0.15	nd (0.51)	nd (0.51)	nd (0.51)
Trichloroethene	<1.2-1.2	5	5.1	5.1	14	53	2.5	5.9
Tetrachloroethene	<1.9-5.9	100	12	12	20	12	5.7	243

	NYSDOH Air Background Values (ug/m <sup>3</sup> )	NYSDOH Air Guideline Values (ug/m <sup>3</sup> )	Rite Aid					
			IAQ			Subslab		
			2/16/2006	1/17/2007	3/10/2008	3/17/2008	3/30/2010	3/30/2010
Compound (ug/m <sup>3</sup> )								
Vinyl Chloride	<0.9	na	2.5	nd (0.043)	nd (0.51)	nd (0.51)	nd (0.51)	nd (1.4)
Trichloroethene	<1.2-1.2	5	2.7	3.7	3.7	7	0.43	12
Tetrachloroethene	<1.9-5.9	100	8.8	130	82.7	10	0.60	557

na not applicable  
nd (0.054) indicates compound was not detected at the given minimum detection limit (MDL)  
J indicates an estimated value  
IAQ Indoor Air Quality

Prepared by: JG  
Checked by: DMS

**Table 3 - Summary of Groundwater Analytical Results**  
New York Express Dry Cleaner  
Fresh Meadows, New York

Well ID:	NY Ambient	MW-1	MW-2	DUP-1 (MW-2)	MW-3	MW-4	MW-6
Sampling Date:	Water Quality Standards	8/10/2011	8/10/2011	8/10/2011	8/10/2011	8/10/2011	8/10/2011
Compound (ug/L)							
Chloroform	7	ND (1.0)	0.33 J	0.37 J	0.26 J	ND (1.0)	ND (1.0)
cis-1,2-Dichloroethene	3	ND (1.0)	0.47 J	0.61 J	ND (1.0)	ND (1.0)	ND (1.0)
Methyl Tert Butyl Ether	NS	1.4	0.39 J	0.39 J	1.3	ND (1.0)	0.42 J
Tetrachloroethene	5	ND (1.0)	4.8	4.5	1.6	2.4	1.2
Toluene	5	2.9	ND (1.0)	ND (1.0)	ND (1.0)	ND (1.0)	ND (1.0)
Trichloroethene	5	ND (1.0)	0.40 J	0.36 J	ND (1.0)	ND (1.0)	ND (1.0)

Prepared By: JMG 8/26/11  
Checked By: DMS 8/27/11

**NOTES:**

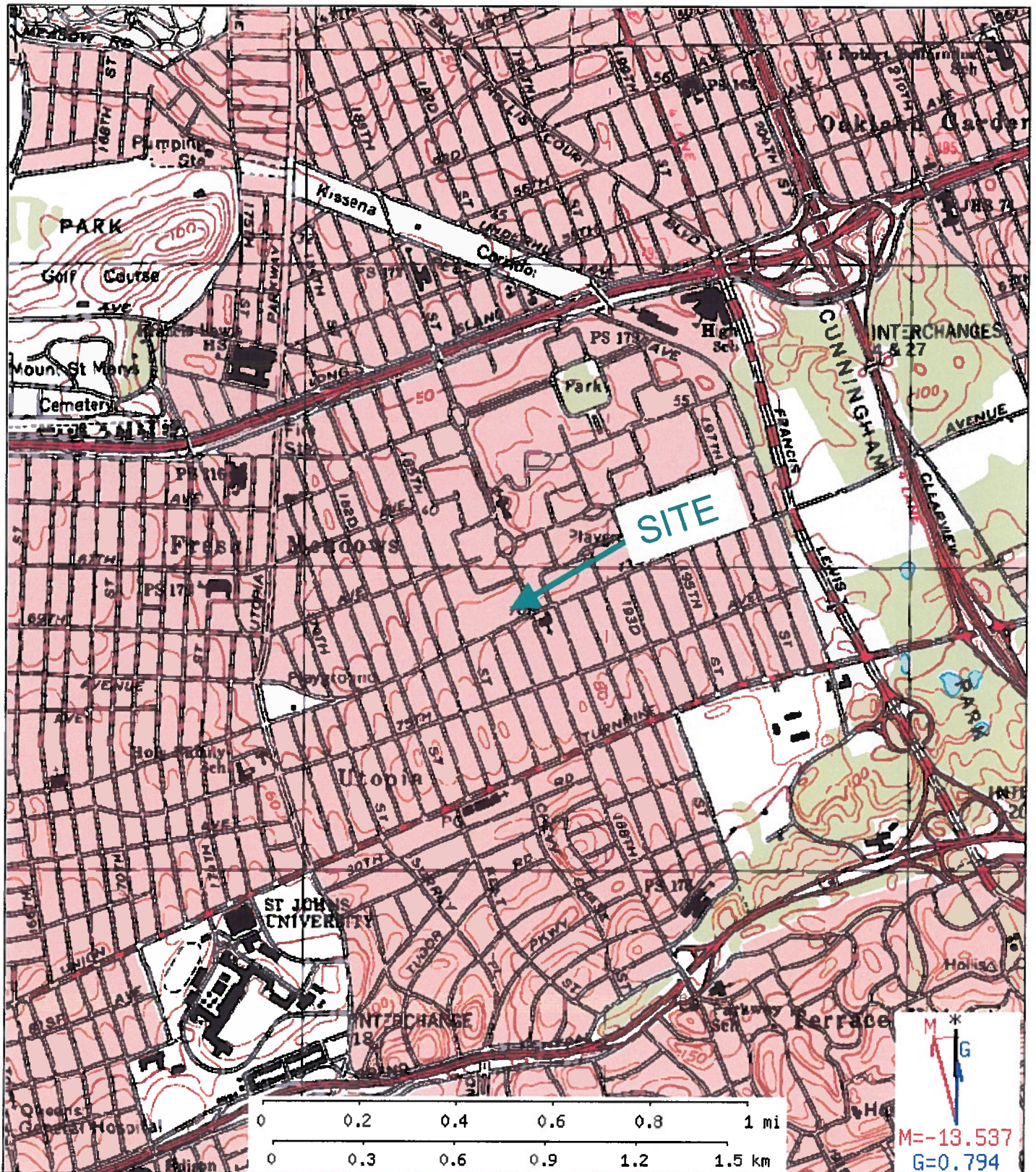
Concentrations reported in micrograms per liter (ug/L).

Bold-typeface items indicate the analyte exceeds the NY TOGS for Ambient Water Quality Standards and Guidance Values

J - Analyte was found at estimated values below the method detection limit.

NS - No Standard

## **FIGURES**



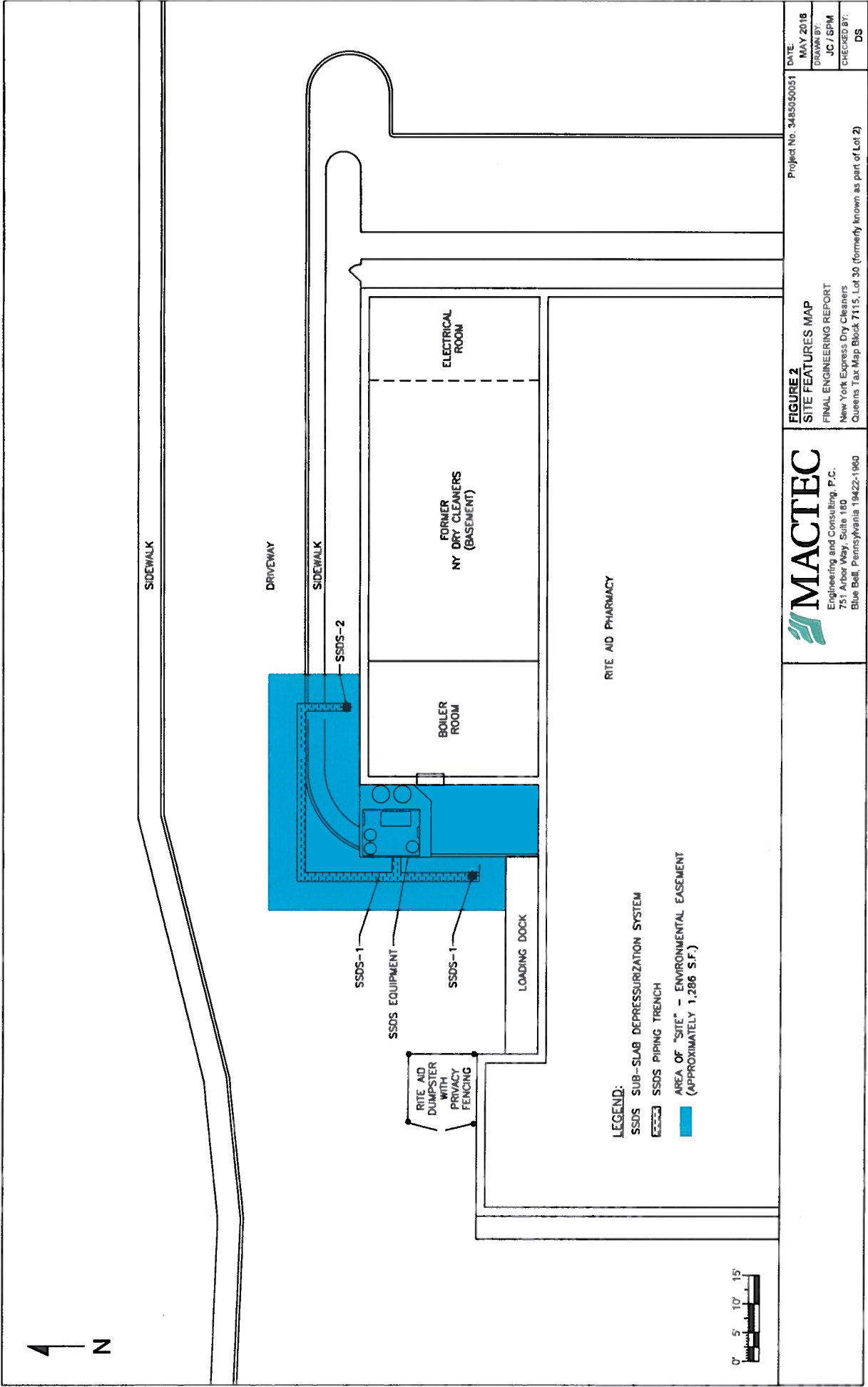
Engineering and Consulting, P.C.  
751 Arbor Way, Suite 180  
Blue Bell, Pennsylvania 19422-1960

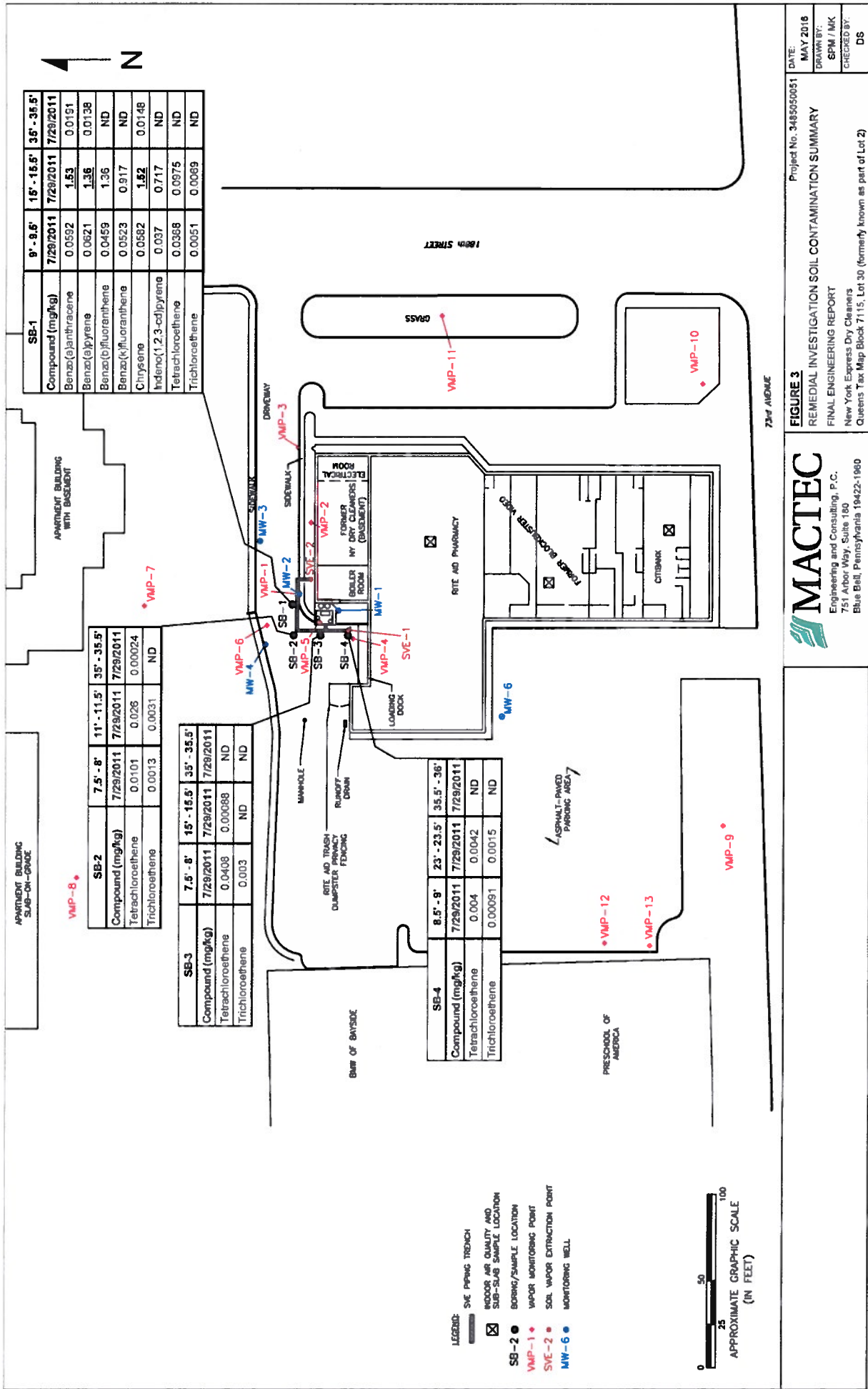
# **FIGURE 1** **SITE LOCATION MAP**

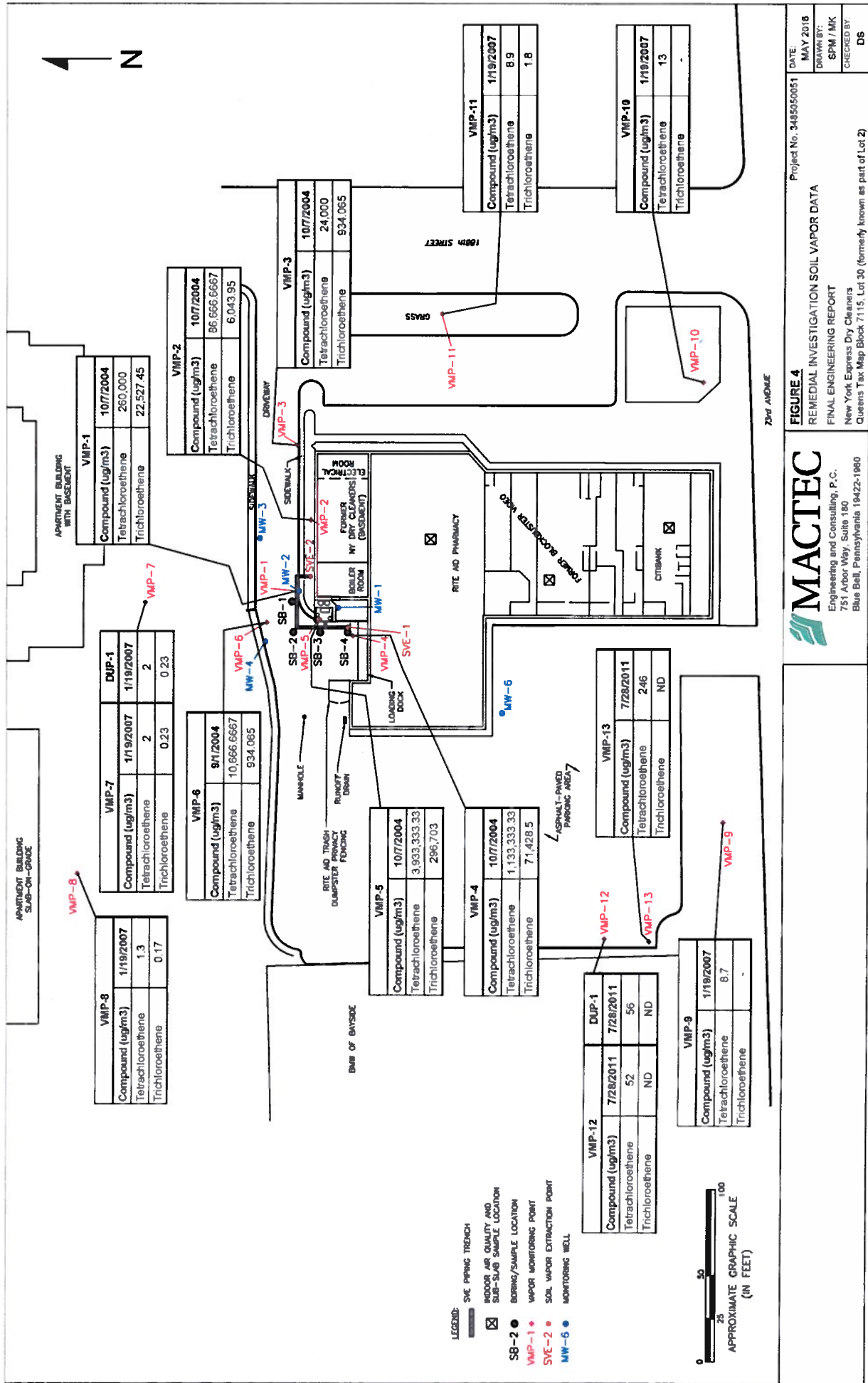
FINAL ENGINEERING REPORT

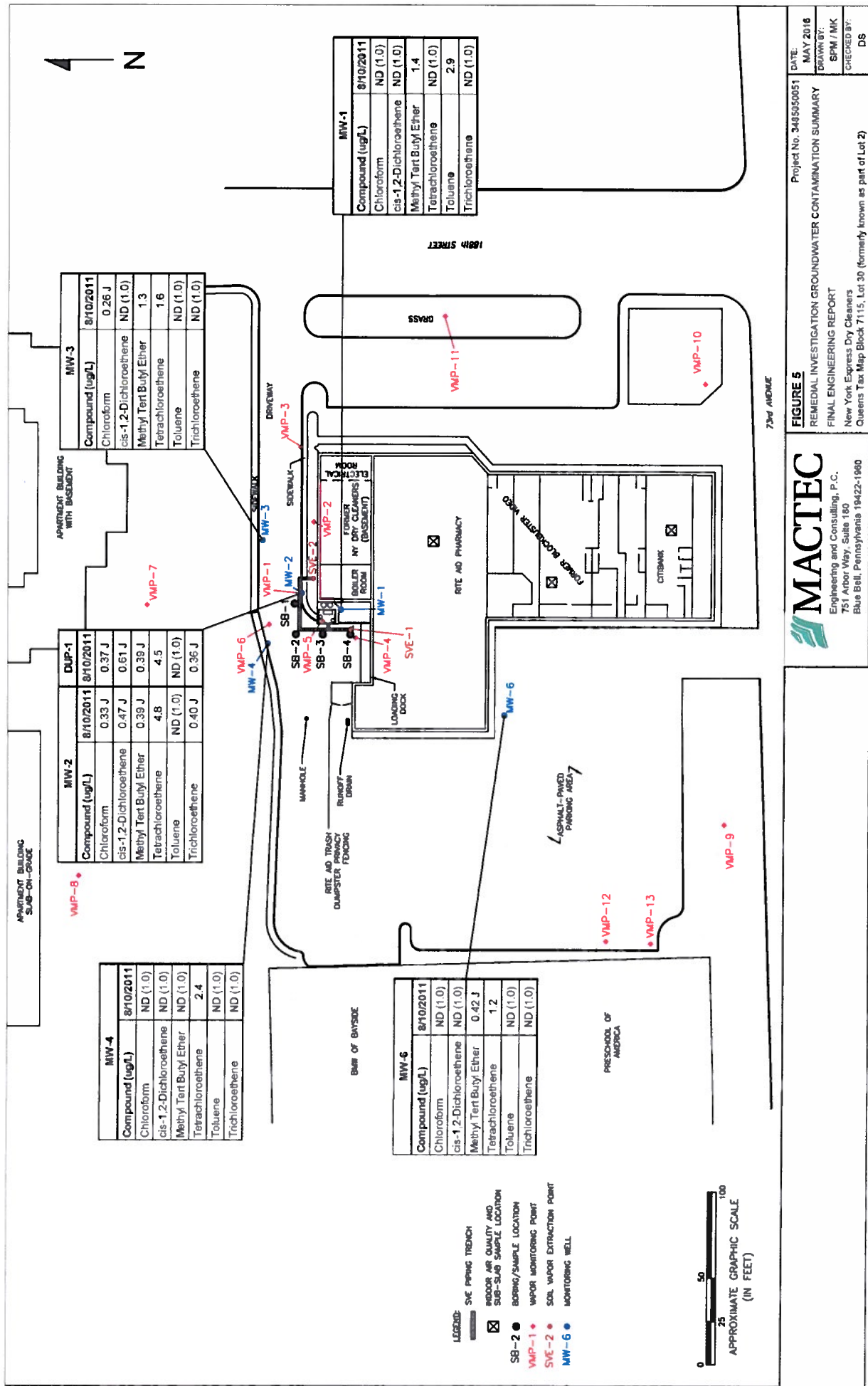
New York Express Dry Cleaners  
69-60 188th STREET, QUEENS, NEW YORK

MACTEC PROJECT NO.: 3485050051 DRN. BY: DS CHKD. BY: JG









## **APPENDIX A**

### **ENVIRONMENTAL EASEMENT AND METES AND BOUNDS**

**ENVIRONMENTAL EASEMENT GRANTED PURSUANT TO ARTICLE 71, TITLE 36  
OF THE NEW YORK STATE ENVIRONMENTAL CONSERVATION LAW**

**THIS INDENTURE** made this 15<sup>th</sup> day of June, 2015 between Owner(s) Street Retail, Inc., having an office at 1626 East Jefferson Street, Rockville, Maryland, County of Montgomery, State of Maryland (the "Grantor"), and The People of the State of New York (the "Grantee."), acting through their Commissioner of the Department of Environmental Conservation (the "Commissioner", or "NYSDEC" or "Department" as the context requires) with its headquarters located at 625 Broadway, Albany, New York 12233,

**WHEREAS**, the Legislature of the State of New York has declared that it is in the public interest to encourage the remediation of abandoned and likely contaminated properties ("sites") that threaten the health and vitality of the communities they burden while at the same time ensuring the protection of public health and the environment; and

**WHEREAS**, the Legislature of the State of New York has declared that it is in the public interest to establish within the Department a statutory environmental remediation program that includes the use of Environmental Easements as an enforceable means of ensuring the performance of operation, maintenance, and/or monitoring requirements and the restriction of future uses of the land, when an environmental remediation project leaves residual contamination at levels that have been determined to be safe for a specific use, but not all uses, or which includes engineered structures that must be maintained or protected against damage to perform properly and be effective, or which requires groundwater use or soil management restrictions; and

**WHEREAS**, the Legislature of the State of New York has declared that Environmental Easement shall mean an interest in real property, created under and subject to the provisions of Article 71, Title 36 of the New York State Environmental Conservation Law ("ECL") which contains a use restriction and/or a prohibition on the use of land in a manner inconsistent with engineering controls which are intended to ensure the long term effectiveness of a site remedial program or eliminate potential exposure pathways to hazardous waste or petroleum; and

**WHEREAS**, Grantor, is the owner of real property located, and having a legal address known as 69-62 188th Street (address where the easement is located has a business address of 69-60 188th Street) in the City of New York, County of Queens and State of New York, known and designated on the tax map of the New York City Department of Finance as tax map parcel number: Block 7115 Part of Lot 30, being the same as that property conveyed to Grantor by deed dated December 4, 1997 and recorded in the County Clerk's Office in Reel 4753, Page 996. The property subject to this Environmental Easement (the "Controlled Property") comprises approximately 0.02952 +/- acres, and is hereinafter more fully described in the Land Title Survey dated May 14, 2013 and revised November 6, 2014 prepared by Roguski Land Surveying, P.C., which will be attached to the Site Management Plan. The Controlled Property description is set forth in and attached hereto as Schedule A; and

**WHEREAS**, the Department accepts this Environmental Easement in order to ensure the protection of public health and the environment and to achieve the requirements for remediation

established for the Controlled Property until such time as this Environmental Easement is extinguished pursuant to ECL Article 71, Title 36; and

**NOW THEREFORE**, in consideration of the mutual covenants contained herein and the terms and conditions of Brownfield Cleanup Agreement Index Number: W2-1010-04-06, Grantor conveys to Grantee a permanent Environmental Easement pursuant to ECL Article 71, Title 36 in, on, over, under, and upon the Controlled Property as more fully described herein ("Environmental Easement")

1. **Purposes.** Grantor and Grantee acknowledge that the Purposes of this Environmental Easement are: to convey to Grantee real property rights and interests that will run with the land in perpetuity in order to provide an effective and enforceable means of encouraging the reuse and redevelopment of this Controlled Property at a level that has been determined to be safe for a specific use while ensuring the performance of operation, maintenance, and/or monitoring requirements; and to ensure the restriction of future uses of the land that are inconsistent with the above-stated purpose.

2. **Institutional and Engineering Controls.** The controls and requirements listed in the Department approved Site Management Plan ("SMP") including any and all Department approved amendments to the SMP are incorporated into and made part of this Environmental Easement. These controls and requirements apply to the use of the Controlled Property, run with the land, are binding on the Grantor and the Grantor's successors and assigns, and are enforceable in law or equity against any owner of the Controlled Property, any lessees and any person using the Controlled Property.

A. (1) The Controlled Property may be used for:

**Residential as described in 6 NYCRR Part 375-1.8(g)(2)(i), Restricted Residential as described in 6 NYCRR Part 375-1.8(g)(2)(ii), Commercial as described in 6 NYCRR Part 375-1.8(g)(2)(iii) and Industrial as described in 6 NYCRR Part 375-1.8(g)(2)(iv)**

(2) All Engineering Controls must be operated and maintained as specified in the Site Management Plan (SMP);

(3) All Engineering Controls must be inspected at a frequency and in a manner defined in the SMP;

(4) The use of groundwater underlying the property is prohibited without necessary water quality treatment as determined by the NYSDOH or the New York City Department of Health and Mental Hygiene to render it safe for use as drinking water or for industrial purposes, and the user must first notify and obtain written approval to do so from the Department;

(5) Groundwater and other environmental or public health monitoring must be performed as defined in the SMP;

(6) Data and information pertinent to Site Management of the Controlled

Property must be reported at the frequency and in a manner defined in the SMP;

(7) All future activities on the property that will disturb remaining contaminated material must be conducted in accordance with the SMP;

(8) Monitoring to assess the performance and effectiveness of the remedy must be performed as defined in the SMP;

(9) Operation, maintenance, monitoring, inspection, and reporting of any mechanical or physical components of the remedy shall be performed as defined in the SMP;

(10) Access to the site must be provided to agents, employees or other representatives of the State of New York with reasonable prior notice to the property owner to assure compliance with the restrictions identified by this Environmental Easement.

B. The Controlled Property shall not be used for raising livestock or producing animal products for human consumption, and the above-stated engineering controls may not be discontinued without an amendment or extinguishment of this Environmental Easement.

C. The SMP describes obligations that the Grantor assumes on behalf of Grantor, its successors and assigns. The Grantor's assumption of the obligations contained in the SMP which may include sampling, monitoring, and/or operating a treatment system, and providing certified reports to the NYSDEC, is and remains a fundamental element of the Department's determination that the Controlled Property is safe for a specific use, but not all uses. The SMP may be modified in accordance with the Department's statutory and regulatory authority. The Grantor and all successors and assigns, assume the burden of complying with the SMP and obtaining an up-to-date version of the SMP from:

Site Control Section  
Division of Environmental Remediation  
NYSDEC  
625 Broadway  
Albany, New York 12233  
Phone: (518) 402-9553

D. Grantor must provide all persons who acquire any interest in the Controlled Property a true and complete copy of the SMP that the Department approves for the Controlled Property and all Department-approved amendments to that SMP.

E. Grantor covenants and agrees that until such time as the Environmental Easement is extinguished in accordance with the requirements of ECL Article 71, Title 36 of the ECL, the property deed and all subsequent instruments of conveyance relating to the Controlled Property shall state in at least fifteen-point bold-faced type:

**This property is subject to an Environmental Easement held by the New York State Department of Environmental Conservation pursuant to**

**Title 36 of Article 71 of the Environmental Conservation Law.**

F. Grantor covenants and agrees that this Environmental Easement shall be incorporated in full or by reference in any leases, licenses, or other instruments granting a right to use the Controlled Property.

G. Grantor covenants and agrees that it shall, at such time as NYSDEC may require, submit to NYSDEC a written statement by an expert the NYSDEC may find acceptable certifying under penalty of perjury, in such form and manner as the Department may require, that:

(1) the inspection of the site to confirm the effectiveness of the institutional and engineering controls required by the remedial program was performed under the direction of the individual set forth at 6 NYCRR Part 375-1.8(h)(3).

(2) the institutional controls and/or engineering controls employed at such site:

(i) are in-place;

(ii) are unchanged from the previous certification, or that any identified changes to the controls employed were approved by the NYSDEC and that all controls are in the Department-approved format; and

(iii) that nothing has occurred that would impair the ability of such control to protect the public health and environment;

(3) the owner will continue to allow access to such real property to evaluate the continued maintenance of such controls, said access to include any exterior portion of the deeded property reasonably necessary to permit direct access to the Controlled Property referenced herein;

(4) nothing has occurred that would constitute a violation or failure to comply with any site management plan for such controls;

(5) the report and all attachments were prepared under the direction of, and reviewed by, the party making the certification;

(6) to the best of his/her 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

(7) the information presented is accurate and complete.

3. Right to Enter and Inspect. Grantee, its agents, employees, or other representatives of the State may enter and inspect the Controlled Property in a reasonable manner and at reasonable times to assure compliance with the above-stated restrictions.

4. Reserved Grantor's Rights. Grantor reserves for itself, its assigns, representatives, and successors in interest with respect to the Property, all rights as fee owner of the Property, including:

A. Use of the Controlled Property for all purposes not inconsistent with, or limited by the terms of this Environmental Easement;

B. The right to give, sell, assign, or otherwise transfer part or all of the underlying fee interest to the Controlled Property, subject and subordinate to this Environmental Easement;

5. Enforcement

A. This Environmental Easement is enforceable in law or equity in perpetuity by Grantor, Grantee, or any affected local government, as defined in ECL Section 71-3603, against the owner of the Property, any lessees, and any person using the land. Enforcement shall not be defeated because of any subsequent adverse possession, laches, estoppel, or waiver. It is not a defense in any action to enforce this Environmental Easement that: it is not appurtenant to an interest in real property; it is not of a character that has been recognized traditionally at common law; it imposes a negative burden; it imposes affirmative obligations upon the owner of any interest in the burdened property; the benefit does not touch or concern real property; there is no privity of estate or of contract; or it imposes an unreasonable restraint on alienation.

B. If any person violates this Environmental Easement, the Grantee may revoke the Certificate of Completion with respect to the Controlled Property.

C. Grantee shall notify Grantor of a breach or suspected breach of any of the terms of this Environmental Easement. Such notice shall set forth how Grantor can cure such breach or suspected breach and give Grantor a reasonable amount of time from the date of receipt of notice in which to cure. At the expiration of such period of time to cure, or any extensions granted by Grantee, the Grantee shall notify Grantor of any failure to adequately cure the breach or suspected breach, and Grantee may take any other appropriate action reasonably necessary to remedy any breach of this Environmental Easement, including the commencement of any proceedings in accordance with applicable law.

D. The failure of Grantee to enforce any of the terms contained herein shall not be deemed a waiver of any such term nor bar any enforcement rights.

6. Notice. Whenever notice to the Grantee (other than the annual certification) or approval from the Grantee is required, the Party providing such notice or seeking such approval shall identify the Controlled Property by referencing the following information:

County, NYSDEC Site Number, NYSDEC Brownfield Cleanup Agreement, State Assistance Contract or Order Number, and the County tax map number or the Liber and Page or computerized system identification number.

Parties shall address correspondence to:      Site Number: C241050  
Office of General Counsel  
NYSDEC  
625 Broadway  
Albany New York 12233-5500

With a copy to:      Site Control Section  
Division of Environmental Remediation  
NYSDEC  
625 Broadway  
Albany, NY 12233

All notices and correspondence shall be delivered by hand, by registered mail or by Certified mail

and return receipt requested. The Parties may provide for other means of receiving and communicating notices and responses to requests for approval.

7. **Recordation.** Grantor shall record this instrument, within thirty (30) days of execution of this instrument by the Commissioner or her/his authorized representative in the office of the recording officer for the county or counties where the Property is situated in the manner prescribed by Article 9 of the Real Property Law.

8. **Amendment.** Any amendment to this Environmental Easement may only be executed by the Commissioner of the New York State Department of Environmental Conservation or the Commissioner's Designee, and filed with the office of the recording officer for the county or counties where the Property is situated in the manner prescribed by Article 9 of the Real Property Law.

9. **Extinguishment.** This Environmental Easement may be extinguished only by a release by the Commissioner of the New York State Department of Environmental Conservation, or the Commissioner's Designee, and filed with the office of the recording officer for the county or counties where the Property is situated in the manner prescribed by Article 9 of the Real Property Law.

10. **Joint Obligation.** If there are two or more parties identified as Grantor herein, the obligations imposed by this instrument upon them shall be joint and several.

IN WITNESS WHEREOF, Grantor has caused this instrument to be signed in its name.

Street Retail, Inc.:

By:  \_\_\_\_\_

Print Name: Dawn M. Becker

Title: VP-Chief Operating Officer Date: 6/5/2015

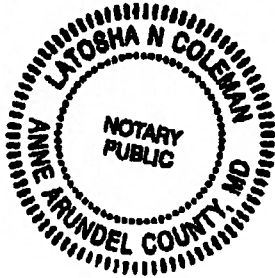
**Grantor's Acknowledgment**

STATE OF Maryland )  
COUNTY OF Montgomery ) ss:

On the 5<sup>th</sup> day of June, in the year 2015, before me, the undersigned, personally appeared Dawn M. Becker, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

  
Notary Public - State of

LATOSHA N COLEMAN  
NOTARY PUBLIC STATE OF MARYLAND  
COUNTY OF ANNE ARUNDEL  
My Commission Expires April 28, 2018



**THIS ENVIRONMENTAL EASEMENT IS HEREBY ACCEPTED BY THE PEOPLE OF THE STATE OF NEW YORK, Acting By and Through the Department of Environmental Conservation as Designee of the Commissioner,**

By:

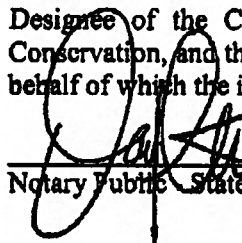


Robert W. Schick, Director  
Division of Environmental Remediation

**Grantee's Acknowledgment**

STATE OF NEW YORK     )  
  ) ss:  
COUNTY OF ALBANY     )

On the 15<sup>th</sup> day of June, in the year 2015, before me, the undersigned, personally appeared Robert W. Schick, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name is (are) subscribed to the within instrument and acknowledged to me that he/she/ executed the same in his/her/ capacity as Designee of the Commissioner of the State of New York Department of Environmental Conservation, and that by his/her/ signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.



Notary Public, State of New York

**David J. Chinsano**  
**Notary Public, State of New York**  
**No. 01CH5032146**  
**Qualified in Schenectady County**  
**Commission Expires August 22, 2016**

**SCHEDULE "A" PROPERTY DESCRIPTION**

**Easement Description**

All that certain plot, piece or parcel of land situate lying and being in the County of Queens, City and State of New York, bounded and described as follows:

BEGINNING at a point following two (2) courses and distances:

- 1) along westerly side of 188<sup>th</sup> Street distant 227.65 feet northerly from the corner formed by the intersection of the westerly side of 188<sup>th</sup> Street with the northerly side of 73<sup>rd</sup> Avenue;
- 2) westerly along part of building wall line 164.12 feet;

RUNNING THENCE westerly along building wall line 12.00 feet;

THENCE southerly along building wall line forming an exterior angle of 89 degrees 57 minutes 48 seconds with the last mentioned course, 31.28 feet;

THENCE westerly along building wall line forming an interior angle of 90 degrees 17 minutes 16 seconds with the last mentioned course, 12.15 feet;

THENCE northerly along a line forming an interior angle of 89 degrees 40 minutes 32 seconds with the last mentioned course, 5.82 feet;

THENCE westerly at right angles to the last mentioned course, 16.42 feet;

THENCE northerly at right angles to the last mentioned course, 37.53 feet;

THENCE easterly at right angles to the last mentioned course, 40.55 feet;

THENCE southerly at right angles to the last mentioned course, 12.00 feet to the point or place of BEGINNING.

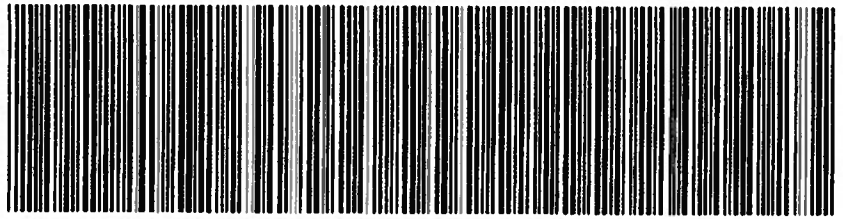
Easement area is 1286.0 sq. ft. = 0.02952 acres

Premises commonly known as 69-62 188<sup>th</sup> Street

Section 32 Block 7115 Part of Lot 30

**NYC DEPARTMENT OF FINANCE  
OFFICE OF THE CITY REGISTER**

This page is part of the instrument. The City Register will rely on the information provided by you on this page for purposes of indexing this instrument. The information on this page will control for indexing purposes in the event of any conflict with the rest of the document.



2016031600800001001E923F

**RECORDING AND ENDORSEMENT COVER PAGE**

**PAGE 1 OF 10**

**Document ID: 2016031600800001**

**Document Date: 06-15-2015**

**Preparation Date: 03-16-2016**

**Document Type: EASEMENT**

**Document Page Count: 9**

**PRESENTER:**

TITLEVEST AGENCY  
44 WALL STREET, PICKUP/R-QU-515891  
10TH FLOOR  
NEW YORK, NY 10005  
212-757-5800  
RECORDINGS@TITLEVEST.COM

**RETURN TO:**

TITLEVEST AGENCY  
44 WALL STREET, PICKUP/R-QU-515891  
10TH FLOOR  
NEW YORK, NY 10005  
212-757-5800  
RECORDINGS@TITLEVEST.COM

**Borough**

**Block Lot**

**PROPERTY DATA  
Unit Address**

QUEENS

7115 30 Entire Lot

69-62 188TH STREET

**Property Type: COMMERCIAL REAL ESTATE Easement**

**CROSS REFERENCE DATA**

CRFN \_\_\_\_\_ or DocumentID \_\_\_\_\_ or \_\_\_\_\_ Year \_\_\_\_\_ Reel \_\_\_\_\_ Page \_\_\_\_\_ or File Number \_\_\_\_\_

**PARTIES**

**GRANTOR/SELLER:**

STREET RETAIL, INC.  
1626 EAST JEFFERSON STREET  
ROCKVILLE, MD 20852

**GRANTEE/BUYER:**

THE PEOPLE OF THE STATE OF NEW YORK  
625 BROADWAY  
ALBANY, NY 12233

**FEES AND TAXES**

**Mortgage :**

Mortgage Amount: \$ 0.00

Taxable Mortgage Amount: \$ 0.00

Exemption:

TAXES: County (Basic): \$ 0.00

City (Additional): \$ 0.00

Spec (Additional): \$ 0.00

TASF: \$ 0.00

MTA: \$ 0.00

NYCTA: \$ 0.00

Additional MRT: \$ 0.00

**TOTAL:** \$ 0.00

Recording Fee: \$ 82.00

Affidavit Fee: \$ 0.00

**Filing Fee:**

\$ 0.00

NYC Real Property Transfer Tax:

\$ 0.00

NYS Real Estate Transfer Tax:

\$ 0.00

**RECORDED OR FILED IN THE OFFICE**

**OF THE CITY REGISTER OF THE**

**CITY OF NEW YORK**

Recorded/Filed 04-12-2016 12:24

City Register File No. (CRFN):

2016000127317



*Quanta M. Hill*

**City Register Official Signature**

New York City Department of Finance  
Office of the City Register

(Click help for additional instructions)  
Selecting a help option will open new window

## Detailed Document Information

## Current Search Criteria:

Borough: QUEENS  
Block: 7115  
Lot: 30 Unit: N/A  
Date Range: To Current Date  
Document Class: All Document Classes

DOCUMENT ID:	2016031600800001	CRFN:	2016000127317	COLLATERAL:	N/A
# of PAGES:	10	REEL-PAGE:	N/A-N/A	EXPIRATION DATE:	N/A
DOC. TYPE:	EASEMENT	FILE NUMBER:	N/A	ASSESSMENT DATE:	N/A
DOC. DATE:	6/15/2015	RECORDED / FILED:	4/12/2016 12:24:30 PM	SLID #:	N/A
DOC. AMOUNT:	\$0.00	BOROUGH:	MANHATTAN	MAP SEQUENCE #:	N/A
%	N/A	RPTT #:	N/A		
TRANSFERRED:					
MESSAGE:	N/A				

## PARTY 1

NAME	ADDRESS 1	ADDRESS 2	CITY	STATE	ZIP	COUNTRY
STREET RETAIL, INC	1020 EAST JEFFERSON STREET		ROCKVILLE	MD	20852	US

## PARTY 2

NAME	ADDRESS 1	ADDRESS 2	CITY	STATE	ZIP	COUNTRY
THE PEOPLE OF THE STATE OF NEW YORK	625 BROADWAY		ALBANY	NY	12233	US

## PARTY 3/Other

NAME	ADDRESS 1	ADDRESS 2	CITY	STATE	ZIP	COUNTRY
------	-----------	-----------	------	-------	-----	---------

## PARCELS

BOROUGH	BLOCK	LOT	PARTIAL	PROPERTY TYPE	EASEMENT	AIR RIGHTS	SUBTERRANEAN RIGHTS	PROPERTY ADDRESS	UNIT	REMARKS
QUEENS	7115	30	ENTIRE LOT	COMMERCIAL REAL ESTATE	Y	N	N	89-62 165TH STREET		

## REFERENCES

CRFN	DOCUMENT ID	BOROUGH	YEAR	REEL	PAGE	FILE NBR

## REMARKS

Print

View Document

Search Results

Search Options

Main Options

Go To [Finance Home Page](#) | [NYC.gov Home Page](#) | [Contact Us](#) | [Privacy Policy](#) | [Terms of Use](#)

## **APPENDIX B**

### **ELECTRONIC COPY OF THE FINAL ENGINEERING REPORT**

## **APPENDIX C**

### **SAMPLE HEALTH AND SAFETY PLAN**

## INSTRUCTIONS FOR COMPLETING THE HEALTH AND SAFETY PLAN TEMPLATE

1. Instructions for completing a section or sections that need modification are highlighted in yellow. Instructions be deleted in the final draft.
2. Complete the cover page with the site name, city, state, company name, project number, and date of completion.
3. Page i – Fill in all blanks (with the exception of amendments) and have appropriate personnel who approved the document sign on the blanks provided. If non-standard site conditions are present then the Division EH&S Manager must approve the Health and Safety Plan.
4. Page ii – Have all personnel sign the Health and Safety Plan on their first day in the field. This acknowledges that personnel present have read the Plan.
5. Page 1 – Write a Site Description Section that includes the information listed on Page 1. List the tasks to be conducted at the site and check the box to indicate which tasks involve MACTEC Employees. All tasks to be completed by MACTEC workers will need to have JHAs developed and included in Appendix B. Note: to put an “x” in the box, double click on the box and under “Default Value” click on “Checked”
6. Page 2 – Insert the site map here.
7. Page 4 – Place Xs in the appropriate blanks for your project within Sections 5.2 and 5.3.
8. Page 5 – Fill in or have personnel fill in Table 3.1 with all of their certifications and the dates of which their certifications were received.
9. Pages 6 -7 – Place Xs in the appropriate blanks for your project within Section 5.3 and follow the bold directions in Section 6.0. In addition, list the contaminants of concern for the site.
10. Page 7 – List all JHAs that are applicable to the work to be conducted by MACTEC employees. The most common JHAs are already listed. Delete those not applicable and add others not currently on the list.
11. Page 8 – Individual action limits have been established the standard contaminants at the site. This assumes that chlorinated solvents (TCE, PCE, vinyl chloride), BTEX, and nuisance dusts are contaminants of concern. Contact the Division ES&S manager if you need help developing action levels for your site.
12. Pages 8 - 10 – Re-write the written monitoring instructions and summarize the air monitoring action levels in Table 7-1. This assumes that chlorinated solvents (TCE, PCE, vinyl chloride), BTEX, and nuisance dusts are contaminants of concern. Contact the Division ES&H Manager if you need help.
13. Page 11 – Complete Table 8-1 which summarizes all the PPE to be used at the site. This can be competed by reviewing the individual JHAs for the tasks that MACTEC is to perform and including required PPE here. See the PPE selection guide below for additional information.
14. Page 12 – Double click on the appropriate boxes and change to “Checked” for section 10.3.

15. Page 13 – Prepare a map of the Route from your site to the hospital and name it Figure 10.1.
16. Page 14 – Add Names and Telephone Numbers for all personnel appropriate for your site that are listed on Table 1.1.
17. Page 15 – Double click on the appropriate boxes and change to “Checked” for section 10.4.
18. Page 17 – Double click on the appropriate boxes and change to “Checked” for sections 11.0 and 12.0. If “Yes” is checked in section 12.0, include spill containment procedures in Appendix J. In Section 13.0, ensure that the list of chemicals brought to the site is correct. If the list of chemicals is not correct then delete/add as appropriate.
19. Appendix A – Include Contaminant Fact Sheets for the contaminant of concern at your site. If you need help in developing any missing Contaminant Fact Sheets, contact the Division ES&H Manager.
20. Appendix B – Include all JHAs applicable for the tasks to be performed by MACTEC employees. Some standard JHAs have been included. Modify if needed.
21. Appendix C – Assure that the decontamination procedures outlined in Tables C1, C2 and C3 are correct for your project.
22. Appendix E – Collect the appropriate Material Safety Data Sheets for your project.
23. Appendix I – Include Spill Containment procedures if the box in section 12.0 was checked “Yes.”
24. **READ ALL SECTIONS OF THE DOCUMENT TO ASSURE THAT THE HEALTH AND SAFETY PLAN DOES NOT STATE THAT YOU WILL PERFORM AN ACTION THAT YOU ARE NOT PLANNING TO PERFORM AT YOUR SITE.**

## PPE Selection Guide

The following are guidelines to help you in the selection of PPE for the site. When selecting the appropriate PPE for the job, consider the following:

- **Safety glasses** – general eye protection – source of hazard, typically coming from straight on , required at most sites
- **Tinted Safety Glasses** – same as above, but when working in direct sunlight. May need two both tinted and untinted if working in both sunlight and shade.
- **Safety goggles** – needed for splash hazard, more severe eye exposures coming from all directions. Non-vented or indirect venting for chemical splash, non-vented for hazardous gases or very fine dust, vented for larger particulates coming from all directions.
- **Face shield** – needed to protect face from cuts, burns, chemicals (corrosives or chemicals with skin notation), etc.
- **Safety boots** – needed if danger of items being dropped on foot that could injure foot
- **Hard hat** – danger from items falling on head – any overhead work, tools, equipment, etc that is above the head and could fall on head of item fails, or falls off work platform. Typically required at most sites as a general PPE
- **Thin, chemical protective inner gloves** (e.g., thin Nitrile, PVC – do not use latex – many people are allergic to latex) –needed to protect hands from incidental contact with low risk contamination

- at very low concentrations (ppb or low ppm concentrations in groundwater or soil) or used in combination with outergloves as a last defense against contamination. Need to specify type
- **Outergloves** – thicker gloves (e.g., Nitrile, Butyl, Viton, etc.) – used when potential for high concentrations of contaminants (e.g., floating product, percent ranges of contaminant, opening drums, handling pure undiluted chemicals, etc.). Need to specify type.
  - **Leather gloves, leather palm, cotton** – good in protecting hands against cuts – no protection from chemicals. May be used in combination with chemical protective gloves.
  - **Boot Covers** – when there is contamination in surface soils or wading surface in general. When safety boots need protection from contact with contaminants.
  - **White (uncoated) Tyveks** – protect clothing from getting dirty, good for protection against solid, non-volatile chemicals (e.g., asbestos, metals) – no chemical protection.
  - **Polycoated Tyveks** – least protective of chemical protective clothing. Used when some risk of contamination getting on skin or clothing. Usually, lower ppm ranges of contaminants.
  - **Saranex** – Greater protection against contamination than Polycoated Tyveks. Used to protect against PCBs or higher concentrations of contaminants in the soil or groundwater.
  - **Other Chemical protective clothing** – if significant risk of dermal exposure, contact H&S to determine best kind.
  - **Long sleeved shirts, long pants** – if working in areas with poison ivy/oak/sumac, poisonous insects, etc. and no chemicals exposure. May want to use uncoated Tyveks for work in areas where poisonous plants are known to be to protect clothing.
  - **Cartridge Respirator (Level C PPE)** – Need to calculate change schedule (contact Division EH&S Manager for this) to determine length of use. To be able to use cartridge respirators, need to know contaminants, estimate levels to be encountered in the breathing zone, need to ensure that cartridge will be effective against COCs, and need to be able to monitor for COCs using PID, FID, Dräger tubes, etc.. If can't do any of these, then Level B PPE is probably going to be needed.
  - **SCBA or Airline Respirator (Level B PPE)** – Needed for high concentrations of contaminants, for when COCs are unknown, when Cartridge respirators can't be used or are unfeasible.
  - **High Visibility Vest** – needed for any road work (within 15 feet of a road) or when working on a site with vehicular traffic. Needed if work tasks would take employee concentration away from movement of vehicles and workers would have to rely on the other driver's ability to see the employee in order not to hit them. This includes heavy equipment as well as cars and trucks, on public roads or the jobsite.
  - **Reflective Vest** – see above, but for use at night.
  - **Fall Protection Harness and lifeline** – need type with two "D" rings in back to take double lanyards. Needed if working at heights over 6 feet if no guard rails are required, if working on an aerial lift, etc.
  - **Hearing Protection** – needed if working at noise levels above 85 dBA on a time weighted average. If noise measurements are not available, use around noisy equipment, or in general, if you have to raise your voice to be heard when talking to someone standing two feet away.
  - **Protective Chaps** – required when using a machete or chain saw or any other cut hazard with legs.

# **SITE-SPECIFIC HEALTH & SAFETY PLAN**

## **NEW YORK EXPRESS DRY CLEANERS**

**73<sup>rd</sup> AVENUE SHOPPING CENTER  
FRESH MEADOWS, NEW YORK**

**3485050051**

**Prepared by:**

**MACTEC, Inc.**

**1787 Sentry Parkway West, Suite 120  
Blue Bell, PA 19422**

**March 2011**

## SITE-SPECIFIC HEALTH & SAFETY PLAN (HASP)

Project Name: 73<sup>rd</sup> Avenue Shopping Center  
 Project Location: Fresh Meadows, New York  
 Project No.: 3485050051 Task No: \_\_\_\_\_

This HASP, which must be kept on site, addresses the health and safety hazards of each task conducted by MACTEC employees for this project, including the requirements and procedures for worker protection (per 29 CFR 1910.120 and the MACTEC ES&H Program 2.9.A - Hazardous Waste Operations and Emergency Response (HAZWOPER) Program). The HASP was developed based on the hazards know or suspected to be present at the site, specifically as they relate to the work to be conducted by MACTEC employees. The hazards and controls within this HASP do not necessarily address all the hazards associated with subcontractor personnel. Subcontractors may adopt this HASP; however they will be responsible for reviewing and revising/amending the HASP to ensure that it addresses hazards unique to their operations.

The Site Health and Safety Officer (SHSO) can change or amend this document only with agreement from the Division Environmental Health and Safety Manager (DEHSM). The SHSO must initial any change made to the HASP at the relevant section and document the amendment date below.

Prepared by: Victoria Bisbing MACTEC Managing Office: Plymouth Meeting

Approved by:	<u>Dave Side</u>	
	SHSO	Date
	<u>Jesse Garvey</u>	
	Field Lead	Date
	<u>Dave Side</u>	
	Project Manager	Date

Date(s) of  
 Amendment(s): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

All site workers shall read this HASP. A pre-entry briefing conducted by the SHSO shall be held prior to initiating this project. Items to be covered during the briefing can be found on the Site Safety Orientation form (Appendix F). All applicable sections of this HASP shall be reviewed during this briefing. The SHSO shall review the information covered in the pre-entry briefing meeting with any worker not in attendance at the initial meeting prior to commencing work. Brief meetings will be held at the beginning of each work day to discuss important safety and health issues concerning tasks performed on that day and documented on the Daily Safety Meeting checklist (Appendix G). After reading the HASP and attending a pre-entry briefing, workers shall sign the following acknowledgment statement:

**MACTEC Field Team Review:** I acknowledge that I have read the requirements of this HASP, and agree to abide by the procedures and limitations specified herein. I also acknowledge that I have been given an opportunity to have my questions regarding the HASP and its requirements answered prior to performing field activities. Health and safety training and medical surveillance requirements applicable to my field activities at this site are current and will not expire during on-site activities.

[illegible]

## TABLE OF CONTENTS

		<u>Page</u>
<b>1.0</b>	<b>SITE DESCRIPTION.....</b>	<b>1</b>
<b>2.0</b>	<b>KEY PERSONNEL AND HEALTH AND SAFETY RESPONSIBILITIES.....</b>	<b>4</b>
<b>3.0</b>	<b>WORKER TRAINING .....</b>	<b>6</b>
<b>4.0</b>	<b>MEDICAL SURVEILLANCE .....</b>	<b>6</b>
<b>5.0</b>	<b>SITE CONTROL.....</b>	<b>6</b>
5.1	WORK ZONES .....	6
5.2	BUDDY SYSTEM .....	6
5.3	SITE ACCESS.....	6
5.4	GENERAL SAFE WORK PRACTICES .....	6
<b>6.0</b>	<b>HAZARD ANALYSIS.....</b>	<b>7</b>
6.1	CONTAMINANTS OF CONCERN .....	7
6.2	JOB HAZARD ANALYSIS .....	8
<b>7.0</b>	<b>AIR MONITORING.....</b>	<b>9</b>
<b>8.0</b>	<b>DUST CONTROL.....</b>	<b>ERROR! BOOKMARK NOT DEFINED.</b>
<b>9.0</b>	<b>PERSONAL PROTECTIVE EQUIPMENT.....</b>	<b>10</b>
<b>10.0</b>	<b>DECONTAMINATION .....</b>	<b>13</b>
<b>11.0</b>	<b>EMERGENCY RESPONSE.....</b>	<b>13</b>
11.1	HOSPITALS/CLINICS .....	13
11.2	EMERGENCY CONTACTS.....	13
11.3	EMERGENCY RESPONSE EQUIPMENT.....	13
11.4	COMMUNICATIONS .....	14
11.5	EMERGENCY RESPONSE PROCEDURES.....	15
11.5.1	MACTEC Triage Program.....	16
11.6	BLOODBORNE PATHOGENS .....	17
11.6.1	Universal Precautions .....	17
11.6.2	Decontamination/Laundrying .....	17
11.6.3	Vaccines, Evaluation, Follow-Up .....	18
<b>12.0</b>	<b>CONFINED SPACE ENTRY .....</b>	<b>22</b>

## TABLE OF CONTENTS

	<u>Page</u>
<b>13.0 SPILL CONTAINMENT .....</b>	<b>22</b>
<b>14.0 HAZARD COMMUNICATION .....</b>	<b>22</b>
<b>15.0 RECORD KEEPING.....</b>	<b>23</b>

## LIST OF TABLES

<b>Table</b>	<u>Page</u>
Table 2.1 Key Personnel and Health and Safety Responsibilities.....	4
Table 3.1 Training/Medical Surveillance/Respiratory .....	5
Table 5.1 General Safe Work Practices.....	7
Table 7-1 Action Levels per Monitoring Instrument .....	9
Table 7-2 Air Monitoring Action Level Summary.....	11
Table 8-1 PPE and Monitoring Requirements Summary.....	12
Table 11.1 Emergency Contacts .....	16
Table 11.2 Emergency Procedures .....	17

## LIST OF FIGURES

<b>Figure</b>	<u>Page</u>
Figure 1.1 Site Map.....	2
Figure 2.1 Project Organizational Chart .....	3
Figure 11.1 Hospital Route Map.....	14
Figure 11.2 Clinic Route Map.....	15
Figure 11.3 Triage Program Flow Diagram.....	20

## **TABLE OF CONTENTS**

### **LIST OF APPENDICES**

#### **Appendix**

APPENDIX A	CONTAMINANT FACT SHEETS
APPENDIX B	JOB HAZARD ANALYSIS PER TASK(S)
APPENDIX C	DECONTAMINATION PROCEDURES & EQUIPMENT PER TASK(S)
APPENDIX D	INCIDENT ANALYSIS FORMS
APPENDIX E	MATERIAL SAFETY DATA SHEETS
APPENDIX F	SITE SAFETY ORIENTATION FORM
APPENDIX G	DAILY TAILGATE SAFETY MEETING CHECKLIST
APPENDIX H	WEEKLY SITE SAFETY AND HEALTH CHECKLIST

## **1.0 SITE DESCRIPTION**

The 73<sup>rd</sup> Avenue Shopping Center is a small shopping center located on 73<sup>rd</sup> Avenue and 188<sup>th</sup> Street in Fresh Meadows, New York. The shopping center is currently comprised of a Chinese food store, a nail salon, a branch of CitiBank, a Blockbuster Video store, a Rite Aid Pharmacy store, and the former New York Express Dry Cleaners (New York Express), which had operated retail dry cleaning on their premises. New York Express was located at the north end of the shopping center and is adjacent to the Rite Aid Pharmacy.

The present configuration of Long Island is primarily the result of the last ice age, the Wisconsin, which ended about ten thousand years ago. Two advances of the Wisconsin ice sheet during the Upper Pleistocene of the Quaternary Period caused the island to be blanketed with till, ice contact stratified drift, and outwash deposits. The terminal moraines and the north shore are composed primarily of stratified drift, with some till. The area between the moraines and south of them are mostly the outwash deposits. The surficial geology of Central and South Long Island is of glaciofluvial origin.

Groundwater occurs and flows within the Pleistocene sediments that underlie the Site. The direction of groundwater flow is to the northwest towards the nearest bodies of surface water, and appears to mimic the local topography.

Based on a review of the USGS topographic map for the area, the elevation at the Site is approximately 70 feet above mean sea level (msl). The topography of the Site is downward sloping primarily from southeast to northwest.

Meadow and Willow Lakes are approximately two and three-quarter miles west of the Site, respectively. Kissena Lake is located a mile and one-half northwest of the Site. Shallow ground water typically flows towards the nearest stream, river, or other surface water body.

Soil sampling will be conducted adjacent to the former UST location. The highest concentrations of the VOC PCE, TCE, and cis-DCE were previously detected in soil samples collected in this area. Elevated concentrations of SVOC were also detected in soil samples collected in this area. Metals analysis, polychlorinated biphenyl (PCB) analysis and pesticide and herbicide analysis, all of which are now required under the NYSDEC Brownfields Program, were not conducted because the Site was not in the program during the performance of the previous investigations and NYSDEC did not require such analyses. Soil samples collected under this SRIWP will be submitted for the following analyses:

- VOC analysis in accordance with USEPA Method 8260
- SVOC analysis in accordance with USEPA Method 8270
- PCB analysis in accordance with USEPA Method 8082
- Metals analysis in accordance with USEPA Method 6010B/7000
- TCL Pesticides in accordance with USEPA Method 8081A
- Herbicides (full list) in accordance with SW Method 846/USEPA Method 8151A

There are currently five monitoring wells at the Site. The monitoring wells are designated MW-1 through MW-4, and MW-6. Monitoring well MW-5 was abandoned. All five of the monitoring wells will be sampled in the proposed groundwater-sampling event. A low flow purging and sampling method consistent with the USEPA Region I Low Stress Purging and Sampling Procedure for the collection of Groundwater Samples from Monitoring Wells, July 30, 1996, will be used to collect groundwater samples

at the Site. Groundwater samples will be collected for volatile organic compound (VOC) analysis in accordance with USEPA Method 8260 The groundwater sample will be collected in labeled 40-milliliter (ml) glass vials, with Teflon septum and preserved with hydrochloric acid.

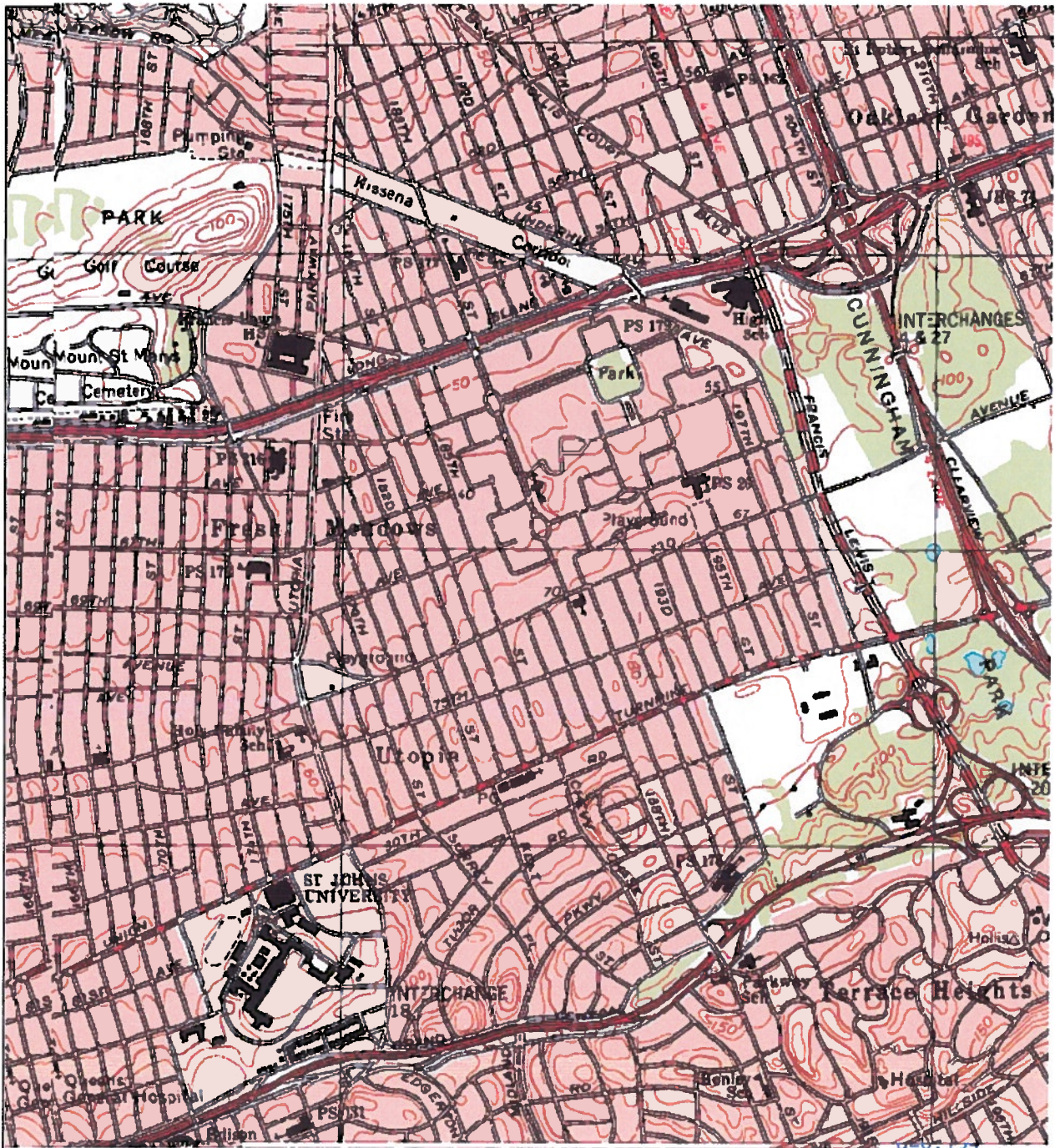
The following tasks are to be performed at the site. Check the box to show if a task is to be conducted by either MACTEC or our Subcontractor and that a JHA has been developed and included with this HASP.

MAC-TEC	Sub	Tasks	JHA Developed	Initial Level of PPE
<input checked="" type="checkbox"/>	<input type="checkbox"/>	▪ Groundwater Sampling	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	▪ Soil Boring and Sampling	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	▪	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	▪	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	▪	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	▪	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	▪	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	▪	<input type="checkbox"/>	

Expected start date: Spring to early summer 2011.

Expected duration of project: Two to three weeks of field activities.

Expected average number of workers on site per day: Three to four workers per day.



1787 Sentry Parkway, Suite 120  
Blue Bell, Pennsylvania 19422

**Figure 1-1**

**SITE LOCATION MAP**

73 Avenue Shopping Center

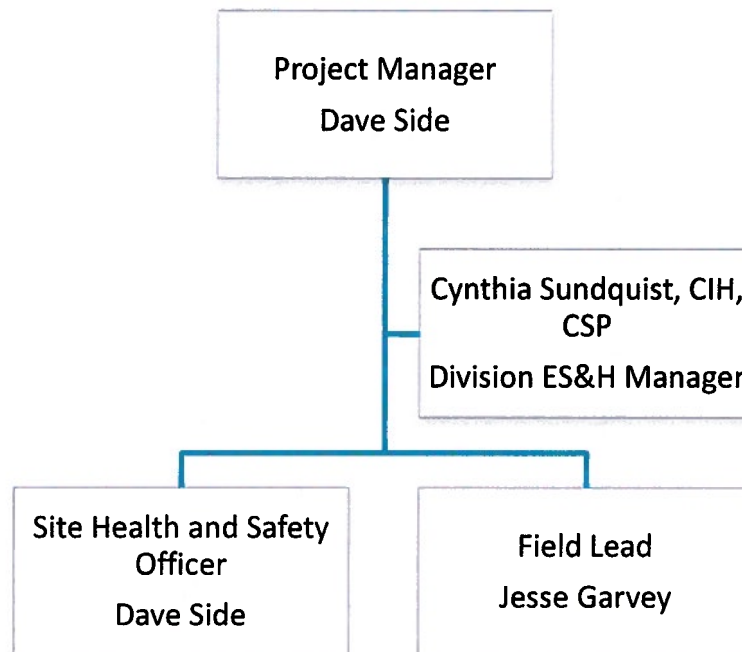
69-60 188<sup>th</sup> STREET, Fresh Meadows, NEW YORK

MACTEC E&C PROJECT NO.: 3485050051

## 2.0 KEY PERSONNEL AND HEALTH AND SAFETY RESPONSIBILITIES

Figure 2.1 shows the project organizational chart. Table 2.1 describes health and safety responsibilities for key project personnel.

**Figure 2.1 - Project Organization Chart**



**TABLE 2.1**  
**KEY PERSONNEL HEALTH AND SAFETY RESPONSIBILITIES**

<b>DIVISION ENVIRONMENTAL HEALTH AND SAFETY MANAGER</b>  <b>Cindy Sundquist, CIH, CSP</b>	<b>FIELD LEAD (FL)</b>  <b>Name: Jesse Garvey</b>	<b>SITE HEALTH &amp; SAFETY OFFICER (SHSO)</b>  <b>Name: Dave Side</b>	<b>PROJECT PERSONNEL</b>  <b>Name: Victoria Bisbing</b>
<ul style="list-style-type: none"> <li>▪ Implement appropriate corporate health and safety policies, or environmental projects</li> <li>▪ Approve HASP and Amendments</li> <li>▪ Maintain exposure monitoring records</li> <li>▪ Notify Corporate ES&amp;H Manager in the event of an emergency situation</li> <li>▪ Verify that corrective actions recommended on Incident Analysis Forms have been implemented</li> </ul>	<ul style="list-style-type: none"> <li>▪ See that personnel receive this plan, are aware of its provisions, and are aware of the potential hazards associated with site operations, are instructed in safe work practices, and are familiar with emergency procedures, and these actions are documented</li> <li>▪ Determine that appropriate monitoring and personnel protective equipment are available</li> <li>▪ Monitor the Field Logbooks to ensure the health and safety work practices are employed</li> <li>▪ Coordinate with SHSO so that emergency response procedures are implemented</li> <li>▪ Ensure corrective actions recommended on Incident Analysis Forms are implemented</li> </ul>	<ul style="list-style-type: none"> <li>▪ Implement project HASP; report to the Project Manager for action if any deviations from the anticipated conditions exist, and authorize the cessation of work at site investigations if necessary</li> <li>▪ Confirm that prior to a hazardous waste site visit, site personnel meet the proper medical requirements and have the health and safety training to qualify them to perform their assigned tasks. Identify all site personnel with special medical conditions.</li> <li>▪ Conduct pre-entry briefing and tailgate safety meetings. Document meetings on Daily Tailgate Safety Meeting Checklist (See Appendix G)</li> <li>▪ Verify that all monitoring equipment and personal protective equipment is operating correctly according to manufacturer's instructions and such equipment is utilized by on-site personnel. Calibrate or verify calibration of all monitoring equipment and record results.</li> <li>▪ Conduct weekly inspections of jobsite using the Weekly Site Safety And Health Checklist (See Appendix H)</li> <li>▪ Implement site emergency and follow-up procedures</li> </ul>	<ul style="list-style-type: none"> <li>▪ Be familiar with and abide by the HASP</li> <li>▪ Notify the SHSO of any special medical conditions (e.g., allergies)</li> <li>▪ Immediately report any accidents and/or unsafe conditions to the SHSO</li> <li>▪ No individual shall go on site where he/she does not have the required safety training</li> </ul>

### **3.0 WORKER TRAINING**

Upon designation of a specific project team, Table 3.1 will be completed to summarize the training experience of the project team with respect to 29 Code of Federal Regulations (CFR) 1910.120(e), 29 CFR 1910.38, and 29 CFR 1910.1200 and MACTEC ES&H Programs and Procedures: Environment, Safety and Health (ESH) 2.9.A – Hazardous Waste Operations and Emergency Response Program and ESH 2.9.E – Hazard Communication Program..

### **4.0 MEDICAL SURVEILLANCE**

Upon designation of a specific project team, Table 3.1 will be completed to indicate the workers who participate in the company's Medical Surveillance Program (MACTEC ESH 2.13.1, 29 CFR 1910.120(f)). All workers who could potentially be exposed to concentrations of contaminants above the Occupational Safety and Health Administration (OSHA) Permissible Exposure Limits (PELs) for 30 days per year or more must be included in the Medical Surveillance Program. Any site specific medical surveillance conducted for site workers will also be listed on the table.

**TABLE 3.1**  
**TRAINING/MEDICAL SURVEILLANCE/RESPIRATORY PROTECTION RECORDS**  
(Add any other training required for the site)

Role:	Required?	Names of Field Team Members					
		Field Operations Lead: Jesse Garvey	Site Health and Safety Officer: Dave Side	Other Field Personnel Victoria Bisbing	Dates	Dates	Dates
Training/Medical		Dates	Dates	Dates	Dates	Dates	Dates
Medical Surveillance		June 22, 2010	December 2010	October 2010			
Site Specific Medical Testing: _____							
40-Hour Initial	X	November 2005	April 1985	June 2008			
8-Hour Supervisor <sup>1</sup>							
8-Hour Refresher	X	6/21/2010	6/21/2010	October 2009			
First Aid/CPR <sup>1, 2</sup>		6/21/2010	6/21/2010				
Respirator Fit Test <sup>1</sup>							
Respirator Brand <sup>1</sup>							
Hazard Communication							
Confined Space Entry <sup>1</sup>							
Fall Protection <sup>1</sup>							
Ladder Safety <sup>1</sup>							
Biological Hazards <sup>1</sup>							
Excavation Safety <sup>1</sup>							
Client Required <sup>1</sup>							

<sup>1</sup> If Applicable  
<sup>2</sup> At least one worker must be trained in First Aid/CPR and have received Bloodborne Pathogen training.  
<sup>3</sup> Required if acting as LF or SSHO

## 5.0 SITE CONTROL

Site control procedures, as required by 29 CFR 1910.120(d) and MACTEC ESH 2.9.A - Hazardous Waste Operations and Emergency Response Program, will be implemented before the start of site tasks to control worker exposures to contaminants.

### 5.1 WORK ZONES

Work zones are to be determined at the site by the SHSO. At this time it is anticipated that the work zones will be defined relative to the location of the work activity. The Exclusion Zone is considered the area within a 10-foot diameter of the sampling location. The Contamination Reduction Zone is considered to be the area within a 20-foot diameter of the sampling location. The decontamination zone will be located upwind of the work area. Work zones will be maintained through the use of:

- ☐ Warning Tape
- ☒ Cones and/or Barricades
- ☒ Visual Observations

### 5.2 BUDDY SYSTEM

When required by contract or when conditions exist that could be dangerous to life and health, a buddy system shall be implemented.

- Yes    No
- ☐    ☒ Buddy System required?

### 5.3 SITE ACCESS

Access to the site will be controlled using the following method(s):

- ☐ Sign in/sign out log      ☐ Guard
- ☐ Identification badges    ☒ Other: Predetermined meeting area.

### 5.4 GENERAL SAFE WORK PRACTICES

General safe work practices to be implemented during work activities at this site are included in Table 5.1.

**TABLE 5.1**  
**GENERAL SAFE WORK PRACTICES**

- Minimize contact with excavated or contaminated materials. Plan work areas, decontamination areas, and procedures accordingly. Do not place equipment or drums on the ground. Do not sit on drums or other materials. Do not sit or kneel on the ground in the Exclusion Zone or CRZ. Avoid standing in or walking through puddles or stained soil.
- Smoking, eating, or drinking after entering the work zone and before decontamination will not be allowed. Use of illegal drugs and alcohol are prohibited.
- Practice good housekeeping. Keep everything orderly and out of potentially harmful situations.
- In an unknown situation, always assume the worst conditions.
- Be observant of your immediate surroundings and the surroundings of others. It is a team effort to notice and warn of impending dangerous situations. Withdrawal from a hazardous situation to reassess procedures is the preferred course of action.
- Conflicting situations may arise concerning safety requirements and working conditions and must be addressed and resolved rapidly by the SHSO, Field Lead and Project Manager to relieve any motivations or pressures to circumvent established safety policies.
- Unauthorized breaches of specified safety protocol will not be allowed. Workers unwilling or unable to comply with the established procedures will be discharged.

## 6.0 HAZARD ANALYSIS

### 6.1 CONTAMINANTS OF CONCERN

Pertinent site information (e.g. records of chemicals used, records of disposal) and previous sampling data (e.g. groundwater, soil, sediment) have been reviewed to determine the contaminants of concern for this project. The known or suspected contaminants for the site are:

Contaminants of Concern (Attach Fact Sheets)	Maximum Concentrations		PEL/TLV
	Soil (mg/kg)	Water/Groundwater (µg/l)	
Trichloroethene	4.7	64	100/50 ppm
Tetrachloroethene	49	24	100/25 ppm
Cis-1,2-Dichloroethene	NA	68	300/200 ppm

Appendix A contains Contaminant Fact Sheets for each of these contaminants of concern. **ENSURE THAT YOU HAVE CORRECT CONTAMINANT FACT SHEETS – See Portland P: drive under NDIV H&S.**

Health hazards shall be evaluated using air monitoring equipment (Section 7.0) and controlled by implementing personal protective equipment (Section 8.0).

## 6.2 JOB HAZARD ANALYSIS

Job Hazard Analyses (JHA) have been conducted for each task associated with this project in compliance with the MACTEC ESH 2.9.1 – Risk Assessment and Job Hazard Analysis Procedure. The following JHAs can be found in Appendix B.

**JHAs: Check and attach all that apply (add applicable JHAs not already listed) delete those not applicable**

### Activity Specific JHAs:

<input checked="" type="checkbox"/>	Mobilization/Demobilization and Site Preparation
<input checked="" type="checkbox"/>	Field Work - General
<input type="checkbox"/>	Field Work - Oversight
<input checked="" type="checkbox"/>	Decontamination
<input checked="" type="checkbox"/>	Groundwater Sampling
<input checked="" type="checkbox"/>	Soil Sampling
<input type="checkbox"/>	Drilling Operation (MACTEC Driller)
<input type="checkbox"/>	Geoprobe (MACTEC Geoprobe Operator)
<input type="checkbox"/>	Excavations and Backfilling
<input type="checkbox"/>	Stream/Wetlands Work
<input type="checkbox"/>	
<input type="checkbox"/>	

### Hazard Specific JHAs:

<input checked="" type="checkbox"/>	Insect Stings and Bites
<input checked="" type="checkbox"/>	Gasoline
<input checked="" type="checkbox"/>	Working with Preservatives (Acids)
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	

## 7.0 AIR MONITORING

**NOTE:** This section is written for petroleum products, chlorinated solvents (TCE, PCE), benzene, vinyl chloride and nuisance dust as the contaminant of concern (COC). If these are not the COCs for your site, then revise. Contact C. Sundquist for help. Section 6.1 lists the known and suspected contaminant of concern at the site. Table 7-1 table lists the monitoring instruments and upgrade/action limits that will be used at the site:

**Table 7-1**  
**Action Levels per Monitoring Instrument**

		Upgrade/Action Levels			
	Meter	Level D	Level C	Level B	Action
<input checked="" type="checkbox"/>	Photoionization Detector <sup>1</sup>				
	<input type="checkbox"/> 10.0-10.6 eV	< 4 ppm	≥ 4 ppm	≥ 75 ppm	
	<input checked="" type="checkbox"/> 11.0-11.7 eV		≥	≥	
<input type="checkbox"/>	Flame Ionization Detector <sup>1</sup>		≥	≥	
<input checked="" type="checkbox"/>	Detector Tubes <sup>1</sup>				
	<input checked="" type="checkbox"/> Benzene	< 0.5 ppm	≥ 0.5 ppm	≥ 5 ppm	
	<input checked="" type="checkbox"/> Vinyl Chloride	< 0.5 ppm	< 0.5 ppm	> 0.5 ppm	
<input checked="" type="checkbox"/>	Dust Meter <sup>1</sup>				
	<input checked="" type="checkbox"/> Respirable	< 1.5 mg/m <sup>3</sup>	≥ 1.5 mg/m <sup>3</sup>	≥ 15 mg/m <sup>3</sup>	
	<input type="checkbox"/> Total	< 5 mg/m <sup>3</sup>	≥ 5 mg/m <sup>3</sup>	≥ 50 mg/m <sup>3</sup>	
<input checked="" type="checkbox"/>	LEL/O <sub>2</sub> Meter				
	<input type="checkbox"/> LEL <sup>2</sup>				> 10% back off
	<input type="checkbox"/> Oxygen <sup>1</sup>	19.5% - 23.5%	19.5% - 23.5%	< 19.5% or > 23.5%	
<input type="checkbox"/>	Hydrogen Sulfide Meter <sup>1</sup>	< 5 ppm	< 5 ppm	≥ 5 ppm	
<input type="checkbox"/>	Carbon Monoxide <sup>1</sup>	< 12 ppm	< 12 ppm	≥ 12 ppm	
<input type="checkbox"/>					

<sup>1</sup> Monitor breathing zone

<sup>2</sup> Monitor source (e.g., well, cuttings, borehole, etc.)

Periodic monitoring shall be conducted when the possibility of an Immediately Dangerous to Life and Health (IDLH) condition or flammable atmosphere has developed or when there is indication that exposures may have risen over permissible exposure limits or published exposure levels since prior monitoring. Situations where it shall be considered whether the possibility that exposures have risen are as follows:

- When work begins on a different portion of the site.
- When contaminants other than those previously identified are being handled.
- When a different type of operation is initiated (e.g., drum opening as opposed to exploratory well drilling.)
- When employees are handling leaking drums or containers or working in areas with obvious liquid contamination (e.g., a spill or lagoon.)

Each borehole, drill cuttings, well, etc., will be screened using the Photoionization Detector (PID) to give an indication of the potential for the presence of organic vapors. Detector tubes (DTs) for benzene and vinyl chloride and the PID will be used in the breathing zone upon the detection of PID readings above background levels in the immediate vicinity of the borehole, drill cuttings, well, etc. Action guides regarding the screening of the breathing zone and the required PPE are presented in the Table 7-2

If sustained PID readings exceed 5 ppm or benzene readings (as measured by detector tubes) exceed 4 ppm or vinyl chloride readings (as measured by detector tubes) exceed 0.5 ppm, work will be stopped, the area evacuated, and the SSHO notified. If work is stopped due to elevated levels of benzene or organic vapors, then consideration will be given to proceedings with the work using Level B PPE.

All monitoring equipment will be calibrated before each day of use. Results will be documented in the Field Logbook.

Areas of airborne dust and odor should be avoided. Skin contact with soil, sediment, surface water and ground water should be avoided.

## **8.0 PERSONAL PROTECTIVE EQUIPMENT**

The initial level of protection required for each task is provided in Section 1.0 and Table 9-1. The individual PPE required for each task is listed in the JHAs. Table 9-1 summarizes the PPE required for all tasks to be conducted by MACTEC workers. The level of protection may be upgraded or downgraded according to the action guidelines provided in Section 7.0. Level of PPE used each day shall be indicated in the Field Logbook. When using PPE, workers must adhere to the company's Personal Protective Equipment Program (ESH Program 2.9.D) and OSHA regulations (29 CFR 1910.120[g] and 29 CFR 1910 Subpart I).

If respirators are worn, workers must adhere to the company's Respiratory Protection Program (ESH Program 2.9.C) and OSHA regulations (29 CFR 1910.134). Table 3.1 provides a record of the site

**Table 7-2**  
**Air Monitoring Action Level Summary**  
**THE ACTION LEVELS BELOW ARE FOR THE CONTAMINANTS OF CONCERN IDENTIFIED ABOVE. ADJUST FOR THE SPECIFIC CONTAMINANTS AT YOUR SITE**

PID/FID Reading <sup>1,2</sup>	Detector Tube <sup>1</sup> Benzene	Detector Tube <sup>1</sup> Vinyl Chloride	Dust Meter <sup>1</sup>	LEL <sup>2</sup> /O <sub>2</sub> <sup>1</sup>	Action	Level of PPE
< 0.5 ppm <sup>2</sup>	—	--	< 1.5 mg/m <sup>3</sup>		Continue to monitor with PID	Level D / Modified Level D
≥ 0.5 ppm <sup>1</sup>	< 0.5 ppm	< 0.5 ppm			Begin monitoring breathing zone with PID and benzene DT.	Level D / Modified Level D
0.5 – 4 ppm <sup>1</sup>	< 0.5 ppm	< 0.5 ppm	< 1.5 mg/m <sup>3</sup>		Continue to monitor with PID and DT	Level D / Modified Level D
≥ 4 ppm <sup>1</sup> to 75 ppm	≥ 0.5 ppm to 5 ppm	< 0.5 ppm	≥ 1.5 mg/m <sup>3</sup>		Continue to monitor with PID and DT	Level C
≥ 75 ppm <sup>1</sup>	≥ 5 ppm	≥ 0.5 ppm	≥ 15 mg/m <sup>3</sup>		Stop work and evacuate area, Notify SSHO	Level B
				> 10% LEL <sup>2</sup>	Stop work. Evacuate area. If action levels continue to be exceeded, contact SHSO, consider return with ventilation system and spark proof/intrinsically safe equipment.	Back Off
				< 19.5% O <sub>2</sub> <sup>1</sup> > 23.5% O <sub>2</sub> <sup>1</sup>	Stop work and evacuate area, Notify SSHO	Level B

<sup>1</sup> Monitor breathing zone

<sup>2</sup> Monitor source (e.g., well, cuttings, borehole, etc.)

**Table 9-1**  
**PPE and Monitoring Requirements Summary**  
 To select PPE, double click on boxes and change the default value to "checked"

<b>Initial Level of PPE *</b>				
<input type="checkbox"/> Level D	<input checked="" type="checkbox"/> Modified Level D	<input type="checkbox"/> Level C	<input type="checkbox"/> Level B	<input type="checkbox"/> Level A
<b>Standard PPE</b>				
<input checked="" type="checkbox"/> Hard Hat	<input checked="" type="checkbox"/> Safety shoes	<input checked="" type="checkbox"/> Safety glasses	<input type="checkbox"/> Boot Covers	<input type="checkbox"/> Rubber Boots
			<input type="checkbox"/> Aprons	<input checked="" type="checkbox"/> High Visibility Vest
<b>Eye and Face Protection</b>				
<input type="checkbox"/> Welding glasses	<input type="checkbox"/> Welding helmet	<input type="checkbox"/> Face shield	<input type="checkbox"/> Chemical goggles	<input type="checkbox"/> Welding screens
<b>Hearing Protection</b>				
<input checked="" type="checkbox"/> Ear plugs	<input type="checkbox"/> Ear Muffs	<input type="checkbox"/> Ear plugs and muffs	<input type="checkbox"/> Other _____	
<b>Respiratory Protection</b>				
<input checked="" type="checkbox"/> None	<input type="checkbox"/> Upgrade Only	<input type="checkbox"/> Full Face APR	<input type="checkbox"/> Half Face APR	Cart. Type: <u>MSA GMC or Equivalent</u>
<input type="checkbox"/> PAPR				
<input type="checkbox"/> Airline respirator	<input type="checkbox"/> SCBA	<input type="checkbox"/> Dust mask	<input type="checkbox"/> _____	
<b>Protective Clothing</b>				
<input type="checkbox"/> Tyvek® coveralls	<input type="checkbox"/> Poly-coated Tyvek®	<input type="checkbox"/> Saranex® Coveralls	<input type="checkbox"/> Fully encapsulating suit	
<input type="checkbox"/> Cotton coveralls	<input type="checkbox"/> Modesty Clothing	<input type="checkbox"/> Fire resistant clothing	<input type="checkbox"/> Other _____	
<b>Hand Protection</b>				
<input type="checkbox"/> None	<input type="checkbox"/> Cotton gloves	<input checked="" type="checkbox"/> Leather gloves	<input type="checkbox"/> Cut-resistant gloves	<input type="checkbox"/> Glove liners
<b>Outer Gloves</b>				
<input type="checkbox"/> Nitrile	<input type="checkbox"/> Viton®	<input type="checkbox"/> Butyl	<input type="checkbox"/> Neoprene	<input type="checkbox"/> Other _____
<b>Inner Gloves</b>				
<input checked="" type="checkbox"/> Nitrile	<input type="checkbox"/> Vinyl	<input type="checkbox"/> Latex	<input type="checkbox"/> Other _____	
<b>Monitoring Requirements</b>				
<input type="checkbox"/> Oxygen	<input type="checkbox"/> Flammable gases/vapors	<input type="checkbox"/> Toxic Gas/vapors	<input type="checkbox"/> Hydrogen Sulfide	Carbon Monoxide
<input type="checkbox"/> Asbestos	<input type="checkbox"/> Full time IH coverage	<input type="checkbox"/> Part time IH coverage	<input type="checkbox"/> Be, Hg, Cr, Pb	
<input type="checkbox"/> Metals Specify: _____				
<input type="checkbox"/> Organic Vapors Specify: _____				
<input type="checkbox"/> None	<input type="checkbox"/> TLD required	<input type="checkbox"/> CAM	<input type="checkbox"/> Radon	
<input type="checkbox"/> Full time RCT coverage	<input type="checkbox"/> Part time RCT coverage	<input type="checkbox"/> Radioactive air particulates	<input type="checkbox"/> Other _____	
<input type="checkbox"/> Other _____		<input type="checkbox"/> Other _____		

workers' last annual fit test. Beards (e.g., facial hair interfering with the respirator seal) are not allowed when respirators are worn.

## 9.0 DECONTAMINATION

PPE shall be decontaminated as per 29 CFR 1910.120(k) and MACTEC ESH 2.9.A. The decontamination procedures, equipment, and decontamination solution required for each task are provided in Appendix C and the JHA – Decontamination.

Re-usable safety gear will be washed with soap and water prior to re-use or removing from the work zone. Sampling tools, etc. will be decontaminated as described in the *Work Plan*, or as directed by the SHSO. All drilling fluids and cuttings will be handled in accordance with the *Work Plan*. The disposition of this material and disposable safety gear will be the responsibility of the site owner. Safety gear that cannot be decontaminated will be disposed of as an investigative derived waste (IDW) in accordance with the *Work Plan*.

## 10.0 EMERGENCY RESPONSE

The following emergency response information is provided as per 29 CFR 1910.120(j), MACTEC ESH 2.9.A – Hazardous Waste Operations an Emergency Response Program..

### 10.1 HOSPITALS/CLINICS

A nearby Hospital (for emergency injuries needing immediate treatment) and a clinic (for non-emergency injuries) have been identified.

The hospital to be used for emergency treatment is (See Figure 11.1 for Route Map to Hospital):.

Parkway Hospital, 7335 113<sup>th</sup> St., Flushing, NY 11375, 781-990-4100

The clinic to be used for non-emergency treatment is (See Figure 11.2 for Route Map to Clinic):

Urgent Care Clinic, 8212 151<sup>st</sup> Ave, Howard Beach, NY 11414, 718-843-5100

### 10.2 EMERGENCY CONTACTS

A list of contacts and telephone numbers for the applicable local off-site emergency responders is provided in Table 11.1. The nature of the site work and contaminants of concern should be reviewed and the ability of off-site responders to respond to reasonably anticipated emergencies should be confirmed. If there are any concerns with off-site responsibilities they should be contacted directly.

### 10.3 EMERGENCY RESPONSE EQUIPMENT

The following emergency response equipment is required for this project and shall be readily available.

- ☒ Field First Aid Kit (including Bloodborne Pathogen kit/supplies)
- ☒ Fire Extinguisher
  - ☐ Type A (Combustible materials)
  - ☐ Type B (Flammable liquids and gases)

- ☐ Type C (Doesn't conduct electricity – to be used on electrical equipment)  
☒ Type ABC  
☐ Eyewash (Note: 15 minutes of free-flowing fresh water)  
☐ SCBA  
☐ Shower  
☐ Other: Respirator

TABLE 11.1

## EMERGENCY CONTACTS

NAME	TELEPHONE NUMBERS		DATE OF PRE-EMERGENCY NOTIFICATION (if applicable)
Fire Department:	911		
Hospital:	718-990-4100		
Police Department:	911		
Site Health And Safety Officer: Dave Side	Office: 215-619-0292	Cell: 610-496-0854	
Client Contact: Mike Curtis	Office: 312-917-0310		
Project Manager: Dave Side	Office: 215-619-0292	Cell: 610-496-0854	
Division ES&H Manager: Cindy Sundquist	Office: 207-828-3309	Home: 207-892-4402 Cell: 207-650-7593	
EPA (if applicable):			
OTHER: Ambulance	911		

## 10.4 COMMUNICATIONS

On-site communications will be conducted through the use of:

- ☒ Verbal  
☐ Two-way radio

- ☒ Cellular telephone
- ☒ Hand signals
  - Hand gripping throat \_\_\_\_\_ Out of air, can't breathe
  - Grip partner's wrist or both hands around waist \_\_\_\_\_ Leave area immediately
  - Hands on top of head \_\_\_\_\_ Need assistance
  - Thumbs up \_\_\_\_\_ OK, I am all right, I understand
  - Thumbs down \_\_\_\_\_ No, negative
- ☐ Horn/Siren
- ☐ Other: \_\_\_\_\_

Off-site communications will be conducted through the use of:

- ☒ Cellular telephone
- ☐ Landline/Pay phone - location: \_\_\_\_\_
- ☐ Other: \_\_\_\_\_

## 10.5 EMERGENCY RESPONSE PROCEDURES

In the event that an on-site emergency develops, the procedures delineated in Table 11.2 are to be immediately followed.

**TABLE 11.2**  
**EMERGENCY PROCEDURES**

- The SHSO (or alternate) should be immediately notified via the on-site communication system. The SHSO assumes control of the emergency response.
- The SHSO notifies the Project Manager and client contact of the emergency. The SHSO shall then contact the Northern Division Environment, Health, and Safety (ES&H) Manager who will then contact the Corporate Director of ES&H.
- If applicable, the SHSO shall notify off-site emergency responders (e.g. fire department, hospital, police department, etc.) and shall inform the response team as to the nature and location of the emergency on-site.
- If applicable, the SHSO evacuates the site. Site workers should move to the predetermined evacuation point (See Site Map).
- For small fires, flames should be extinguished using the fire extinguisher. Large fires should be handled by the local fire department.
- In an unknown situation or if responding to toxic gas emergencies, appropriate PPE, including SCBAs, should be donned.
- If chemicals are accidentally spilled or splashed into eyes or on skin, use eyewash and/or shower.

- If a worker is injured, first aid shall be administered by certified first aid provider.
- Before continuing site operations after an emergency involving toxic gases, the SHSO shall don a Self Contained Breathing Apparatus (SCBA) and utilize appropriate air monitoring equipment to verify that the site is safe.
- An injured worker shall be decontaminated appropriately.
- After the response, the SHSO shall follow-up with the required company reporting procedures, including the Incident Analysis Forms (Appendix D).

Injuries requiring medical treatment beyond first aid (as well as work-related vehicle incidents) will require the employee to submit a post incident drug test. It is the responsibility of the Supervisor/PM to ensure that the employee who has had an on-the-job incident as defined in MACTEC Human Resource Policy HR4-02B, Drug and Alcohol-Free Workplace Policy for Employees (in Section 3.2), submits to this required testing. The policy is located on the MACTEC Intranet under Human Resources for further information. The *Procedures for Post Accident and Reasonable Suspicion Testing* may be found on the Intranet (via the Incident Reporting Procedures link under "Medical Treatment"). Contact Cindy Sundquist, NDIV ES&H Manager, at (207) 828-3309, or Collette Myers at 770-360-0607, if you have any questions on incident-related drug testing.

#### 10.5.1 MACTEC Triage Program

If the emergency involves an injury to a MACTEC employee, the LHSR or Field Lead are to implement the MACTEC Triage program. Employees whose injuries are true emergencies and who need immediate medical attention will bypass this program and are to be immediately sent/taken to the hospital identified in Section 10.1.

For non-emergency injuries, the Supervisor (Field Lead or PM if on site) and the injured employee will contact the MACTEC Triage Management and Reporting Line at **1-800-350-4511** "Report an Injury for MACTEC" at AllOne Health (AOH) and speak to a nurse case manager. The case nurse manager will perform the intake process and ask for information including the following:

- Description of injury and details of incident
- Pertinent employee contact information and job information

From this, a collaborative decision will be made between the nurse and employee on the most appropriate place for treatment; either the hospital (see the hospital identified in section 11.1), a clinic (see clinic identified in section 11.1) or onsite first aid

If the employee is to be sent to a clinic or hospital, the nurse will call ahead to explain the situation, the need for testing, and advises options to avoid OSHA recordable & considerations for return to work & transitional/modified duty. The Nurse will also arrange for drug and alcohol testing to be conducted at the hospital/clinic. If the employee is to be treated on site (First Aid), the Nurse will advise the employee to call if injury gets worse. Figure 11.3 is a flow diagram that describes this procedure.

**Within 24 hours after any emergency response, the Incident Analysis Report (and Vehicle Incident Report if vehicle incident), provided in Appendix D, shall be completed and returned to the Division ES&H Manager, who will forward a copy to the Corporate ES&H Manager and General Counsel.**

## 10.6 BLOODBORNE PATHOGENS

In the absence of an infirmary, clinic, hospital, or physician, that is reasonably accessible in terms of time and distance to the worksite, a person who has a valid certificate in first-aid training shall be available at the worksite to render first aid or CPR. Provisions shall be made, prior to commencement of the project, for prompt medical attention in case of serious injury. All employees who work on a site where bloodborne pathogens are known to be present or who have been designated, as a part of their work duties at the site, to respond to all first aid injuries, will have received bloodborne pathogen training at the time of initial assignment and annually thereafter.

### 10.6.1 Universal Precautions

Universal precautions is a method of infection control, which operates on the assumption that all human blood and bodily fluids are to be treated as if they are known to be infectious for Human immunodeficiency Virus, Hepatitis B virus, Hepatitis C virus, or other bloodborne pathogens. Universal Precautions will be observed to prevent contact with blood or other potentially infectious materials. All body fluids are to be considered potentially infectious materials.

Universal precautions consist of the following practices:

- All workers will protect their skin and mucous membranes against contact with blood or other bodily fluids. At a minimum, gloves and safety glasses shall be donned prior to administering first aid or otherwise touching blood and body fluids, mucous membranes, or non-intact skin and for handling items or surfaces contaminated with blood or bodily fluids. Note: the gloves used selected to be used at this site to protect against chemical exposure will also protect against bloodborne pathogens.
- All first aid procedures involving blood or other potentially infectious materials will be performed in such a manner as to minimize splashing, spraying, spattering, and generation of droplets and aerosols of these substances.
- When there is a risk of exposure to the eyes, nose and mucous membranes from the generation of droplets of blood or other body fluids, masks and face shields shall be worn.
- Uncoated or polycoated Tyveks (or the suits provided in some bloodborne pathogen kits, shall be worn during procedures that are likely to generate splashes of blood or other body fluids.
- Hands and other skin surfaces shall be washed immediately and thoroughly if contaminated with blood or other bodily fluids. Flush mucous membranes with water immediately or as soon as feasible following contact of such body areas with blood or other potentially infectious materials.
- Hands must be washed with soap and water immediately or as soon as feasible after removal of gloves or other PPE used to perform first aid. When provision of hand washing facilities is not feasible, use appropriate antiseptic hand cleanser in conjunction with clean cloth/paper towels or antiseptic towelettes. When antiseptic hand cleansers or towelettes are used, hands shall be washed with soap and running water as soon as feasible.
- CPR masks or other ventilation devices will be available for use in areas in which the need for resuscitation is foreseeable.

All site first aid kits shall include bloodborne pathogen kits or supplies. These kits typically include, at a minimum, the CPR mask, gloves, safety glasses, and a red bag.

### 10.6.2 Decontamination/Laundering

If a garment(s) is penetrated by blood or other potentially infectious materials, the garment(s) shall be removed immediately or as soon as feasible. All PPE shall be removed prior to leaving the work area. When PPE is removed it shall be placed in an appropriately designated area or container for storage, washing, decontamination or disposal. In many States where waste is incinerated, if the blood doesn't drip from a material when

compressed or if there is no risk of it flaking off during handling, the materials can be disposed of in the regular trash and does not need to be handled as bio-hazardous materials.

If personal clothing should become contaminated with blood or other body fluids, it shall be collected, bagged or containerized and appropriately labeled. Contaminated laundry shall be handled as little as possible with a minimum of agitation.

All equipment and environmental/working surfaces shall be cleaned and decontaminated with an appropriate disinfectant immediately after contact with blood or other potentially infectious materials or as soon as feasibly possible. A solution of one part bleach to nine parts water can be mixed and used as a disinfectant to clean/wipe down equipment and other surfaces.

Broken glassware or other sharps which may be contaminated shall not be picked up directly with the hands. It shall be cleaned up using mechanical means, such as a brush and dust pan, tongs, or forceps and disposed of in a sturdy container.

#### **10.6.3 Vaccines, Evaluation, Follow-Up**

Hepatitis B vaccines will be available to all MACTEC employees who may have an occupational exposure. Post-exposure evaluation and follow-up will be conducted on all employees who have had an exposure incident.

# **FIGURE 11.1** **Directions to Hospital**

Total Time: 9 minutesTotal Distance: 4.48 miles

A: 6960 188th St, Fresh Meadows, NY 11365-3771

1: Start out going SOUTH on 188TH ST/SAUL WEPRIN ST toward 73RD AVE. 0.8 mi



2: Merge onto GRAND CENTRAL PKWY W via the ramp on the LEFT toward TRIBORO BR. 2.6 mi



3: Take the UNION TPKE exit, EXIT 15, toward RT-25 W/QUEENS BLVD. 0.2 mi



4: Stay STRAIGHT to go onto UNION TURNPIKE. 0.2 mi



5: Take the QUEENS BLVD ramp toward RT-25 W. 0.1 mi



6: Turn RIGHT onto QUEENS BLVD. 0.3 mi



7: Turn RIGHT onto 76TH RD. 0.0 mi



8: Turn LEFT onto 113TH ST. 0.2 mi



9: End at 7335 113th St Flushing, NY 11375

B: 7335  113th St, Flushing, NY 11375

Total Time: 9 minutesTotal Distance: 4.48 miles

**FIGURE 11.2**

## Directions to Clinic



188th St

Queens, NY 11365

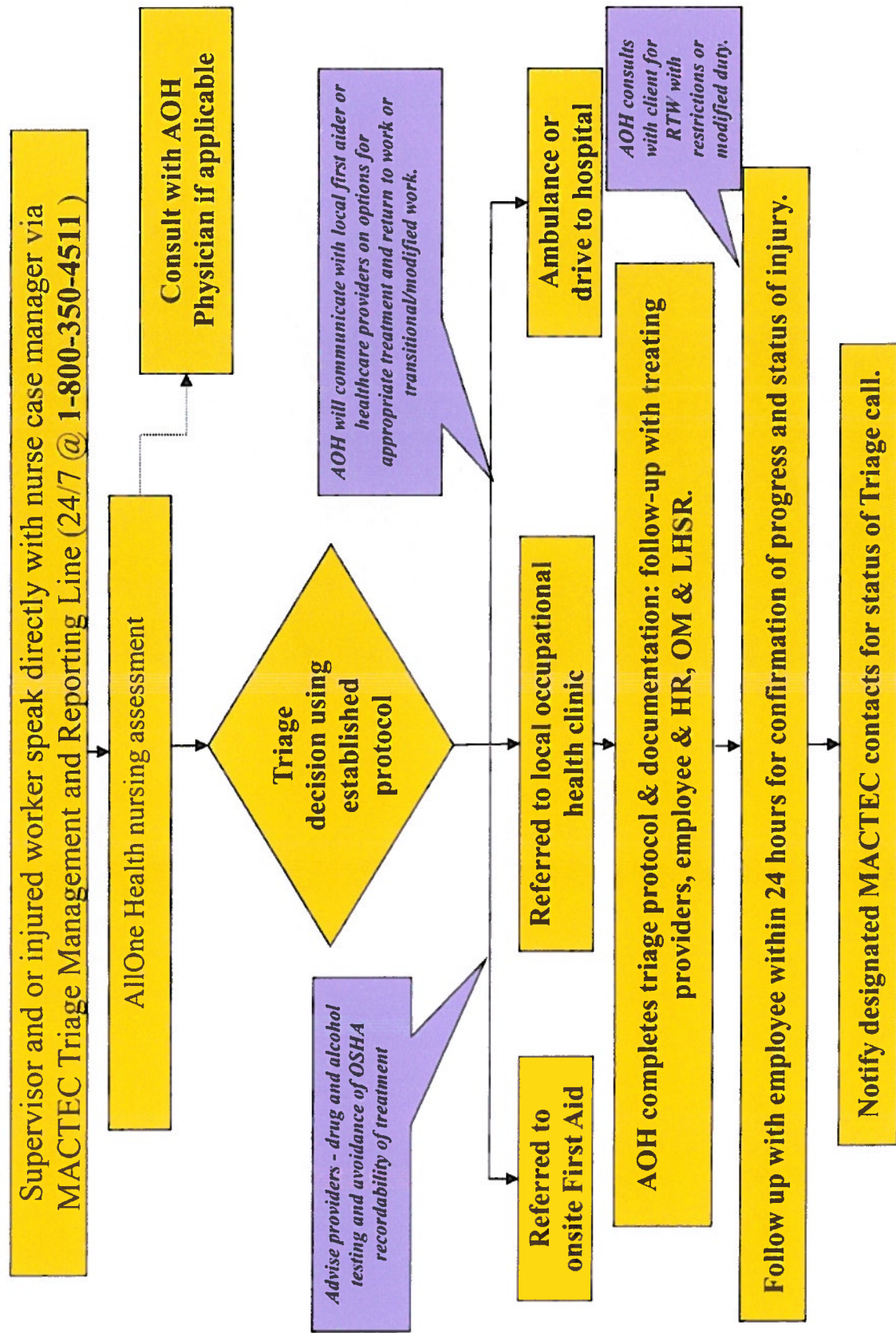
1. Head **west** on **Horace Harding Expy** toward **187th St** 0.7 mi
2. Merge onto **I-495 W** via the ramp on the left to **L I Expy/Midtown Tun** 2.1 mi
3. Take exit **22A** for **Grand Central Pkwy** toward **108 St** 0.3 mi
4. Keep left at the fork to continue toward **Grand Central Pkwy** 0.2 mi
5. Keep right at the fork, follow signs for **Grand Central Pkwy/Kennedy Airport** 0.3 mi
6. Keep left at the fork to continue toward **Grand Central Pkwy** and merge onto **Grand Central Pkwy** 1.9 mi
7. Take exit **13S** to merge onto **I-678 S** toward **Kennedy Airport** 3.4 mi
8. Take exit **1W** toward **Verrazano Bridge** 0.4 mi
9. Slight right at **N Conduit Ave** 1.9 mi
10. Take the exit toward **Cross Bay Blvd** 0.2 mi
11. Turn left at **Cross Bay Blvd** 0.1 mi
12. Turn right at **153rd Ave** 0.2 mi
13. Take the 1st right onto **151st Ave** 0.4 mi



82-12 151st Ave

Queens, NY 11414

**FIGURE 11.3**  
**TRIAGE PROGRAM FLOW DIAGRAM**



### 11.0 CONFINED SPACE ENTRY

Yes   No

☐   ☒ The task(s) for this project involve confined space entry.

If yes, see applicable JHA in Appendix B.

### 12.0 SPILL CONTAINMENT

Yes   No

☐   ☒ The task(s) for this project involve drum/tank/container sampling, excavation, transportation, etc.

If yes, see Appendix J for spill containment procedures. Refer to MACTEC ESH Procedure 2.14.3 – Spill Containment for further information

### 13.0 HAZARD COMMUNICATION

The following procedures shall be followed for all chemicals brought on site (e.g., decontamination solution, sample preservatives, etc.): **MAKE SURE THAT THE NAME OF CHEMICALS LISTED BELOW THAT ARE BROUGHT TO THE SITE EXACTLY MATCH THE NAME AS SHOWN ON THE LABEL AND MSDS!**

- Chemical containers (primary and secondary) shall be correctly and clearly labeled with the name of the chemical and the hazard(s) associated with that chemical (e.g. flammable, corrosive, etc.).
- If chemicals are transferred to a secondary container, that container will be labeled with the name of the chemical and the hazard warnings.
- Workers will have received training on the hazards of these chemicals as indicated in Table 3.1.
- A Material Safety Data Sheet (MSDS) for each chemical listed below is included in Appendix E.

Acetone	
Alconox	
Bentonite	
Diesel fuel	
Gasoline	
Hydrochloric Acid (HCl)	
Liquinox	
Methanol	
Silica Cement	

\_\_\_\_\_  
\_\_\_\_\_  
When chemicals are used on site, workers must adhere to the company's Hazard Communications Program (ESH Program 2.9.E) and the OSHA regulation (29 CFR 1910.1200).

#### **14.0 RECORDKEEPING**

At the end of the project, the following items shall be maintained in the project file:

- ☒ HASP
- ☒ Incident Analysis/Vehicle Incident Forms (if applicable)
- ☒ Industrial Hygiene/Air Monitoring information (results and documentation - send copies to C. Sundquist)
- ☒ Log notebooks

**APPENDIX A**  
**CONTAMINANT FACT SHEETS**





**APPENDIX B**

**JOB HAZARD ANALYSIS PER TASK(S)**



## CORPORATE ES&H PROCEDURE

---

ISSUED:	1/23/06	EFFECTIVE:	1/24/06	ESH-2.9.1 Revision 2
OWNER:	H.J. GORDON	APPROVER:	S. D. RIMA	Page 28 of 6

**APPENDIX C**  
**DECONTAMINATION PROCEDURES & EQUIPMENT**  
**PER TASK(S)**

## APPENDIX C1

### DECONTAMINATION PROCEDURES & EQUIPMENT

Task(s) \_\_\_\_\_  
 Decontamination Solution: **Detergent and Water**

LEVEL D		
Station 1:	Equipment Drop	Deposit equipment used on-site (tools, sampling devices and containers, monitoring instruments, radios, etc. on plastic drop cloths. Segregation at the drop reduces the probability of cross contamination. During hot weather operations, a cool-down station may be set up within this area.
Station 2:	Outer Boots, and Gloves Wash and Rinse (if worn)	Scrub outer boots, and outer gloves decon solution or detergent water. Rinse off using copious amounts of water.
Station 3:	Outer Boot and Glove Removal (if worn)	Remove outer boots and gloves. Deposit in plastic bag.
Station 4:	Inner glove removal	Remove inner gloves and place in plastic bag.
Station 5:	Field Wash	Hands and face are thoroughly washed. Shower as soon as possible.

## APPENDIX C2

### DECONTAMINATION PROCEDURES & EQUIPMENT

Task(s) \_\_\_\_\_

Decontamination Solution: **Detergent and Water**

MODIFIED LEVEL D & LEVEL C		
Station 1:	Equipment Drop	Deposit equipment used on-site (tools, sampling devices and containers, monitoring instruments, radios, etc. on plastic drop cloths. Segregation at the drop reduces the probability of cross contamination. During hot weather operations, a cool-down station may be set up within this area.
Station 2:	Outer Garment, Boots, and Gloves Wash and Rinse	Scrub outer boots, outer gloves, and splash suit with decon solution or detergent water. Rinse off using copious amounts of water.
Station 3:	Outer Boot and Glove Removal	Remove outer boots and gloves. Deposit in container with plastic liner.
Station 4: (Level C only)	Canister or Mask Change	If worker leaves exclusion zone to change canister (or mask), this is the last step in the decontamination procedure. Worker's canister is exchanged, new outer gloves and boot covers are donned, joints are taped, and worker returns to duty.
Station 5:	Boot, Gloves and Outer Garment Removal	Boots, chemical resistant splash suit, and inner gloves are removed and deposited in separate containers lined with plastic.
Station 6: (Level C only)	Face Piece Removal	Facepiece is removed. Avoid touching face with fingers. Facepiece is deposited on plastic sheet.
Station 7:	Field Wash	Hands and face are thoroughly washed. Shower as soon as possible.

### APPENDIX C3

#### DECONTAMINATION PROCEDURES AND EQUIPMENT

Task(s) \_\_\_\_\_  
 Decontamination Solution: Detergent and Water

LEVEL B		
Station 1:	Equipment Drop	Deposit equipment used on site (tools, sampling devices and containers, monitoring instruments, radios, etc.) on plastic drop cloths. Segregation at the drop reduces the probability of cross contamination. During hot weather operations, a cool-down station may be set up within this area.
Station 2:	Outer Garment, Boots, and Gloves Wash and Rinse	Scrub outer boots, outer gloves, and splash suit with decon solution or detergent water. Rinse off using copious amounts of water.
Station 3:	Outer Boot and Glove Removal	Remove outer boots and gloves. Deposit in container with plastic liner.
Station 4:	Tank Change	If worker leaves exclusion zone to change air tank, this is the last step in the decontamination procedure. Worker's air tank is exchanged, new outer gloves and boot covers are donned, joints are taped, and worker returns to duty.
Station 5:	SCBA Backpack, Boot, Gloves and Outer Garment Removal	SCBA backpack is removed and placed on plastic sheets. Boots, chemical resistant splash suit, and inner gloves are removed and deposited in separate containers lined with plastic.
Station 6:	Face Piece Removal	SCBA facepiece is removed. Avoid touching face with fingers. Facepiece is deposited on plastic sheet.
Station 7:	Field Wash	Hands and face are thoroughly washed. Shower as soon as possible.

**APPENDIX D**  
**INCIDENT ANALYSIS FORMS**



CORPORATE ES&H PROCEDURE

Check one

Initial Report: ☐

Update: ☐ Date: \_\_\_\_\_

Final Report: ☐

ISSUED: 3/23/06 EFFECTIVE: 3/23/06 ESH-2.0.1 Revision 1

OWNER: H.J. GORDON APPROVER: S. RIMA Page 1 of 5

Category C: ☐

Category B: ☐

Category A: ☐

**INCIDENT ANALYSIS REPORT**

**Attorney-Client Work Product Prepared in Anticipation of Litigation**

(Review instructions on page 9 prior to completing this form)

Local Office ID Number: \_\_\_\_\_

**To: Office of the General Counsel**

This information has been prepared at your request and under your direction in anticipation of litigation so that you may prove appropriate legal advice to the undersigned and the management of the Company.

**Section 1 – General Information**

Report Date: \_\_\_\_\_ Incident Date: \_\_\_\_\_ Time of incident: \_\_\_\_\_

Employee Name: \_\_\_\_\_ Sex: ☐ M ☐ F

Job Title: \_\_\_\_\_ Hire Date: \_\_\_\_\_ Time employee began work: \_\_\_\_\_

Department: \_\_\_\_\_ Project Manager: \_\_\_\_\_ Client: \_\_\_\_\_

Office where employee works from: \_\_\_\_\_ Immediate Supervisor: \_\_\_\_\_ Hours employee worked during last 7 days: \_\_\_\_\_ hrs

Location where incident occurred: \_\_\_\_\_ Is this a Company controlled work site: ☐ Yes ☐ No

**Section 2 – Incident Type** (mark all that apply)

A. Type of incident being reported:

- ☐ Near Miss ☐ First-aid Case ☐ Medical Treatment ☐ Hospitalization ☐ Day Away Case ☐ Restricted/Transfer Case  
☐ Fatality ☐ Vehicle Incident ☐ Notice of Violation ☐ Regulatory Inspection ☐ Environmental Release  
☐ Property Damage ☐ Other (please describe): \_\_\_\_\_

B. If an **injury or illness** - describe the part of the body that was affected and how it was affected:

\_\_\_\_\_

C. If an **environmental release** - describe the quantity and name and CAS# of material released into the environment:

\_\_\_\_\_

D. If an **inspection by a regulatory agency** - what agency, who were the inspectors, and supply inspector contact information:

\_\_\_\_\_

**Section 3 – Incident Description** (Attach and number additional pages, as needed, to ensure all details related to the incident are captured.)

A. List the names of all persons involved in the incident, and employer information:

\_\_\_\_\_

B. List the names of any witnesses, their employer, and a local/company telephone number or address:

\_\_\_\_\_

C. What was the employee(s) doing just prior to the incident?

\_\_\_\_\_

D. Explain in **detail** what happened?

\_\_\_\_\_

E. Explain in **detail** what object or substance directly harmed the employee?

\_\_\_\_\_

F. List any damaged equipment or property (other than motor vehicles) model and serial number **and** estimated costs to repair/replace damaged equipment or property, if applicable:

\_\_\_\_\_

## Section 4 - Incident Analysis

A. Was a Job Hazard Analysis (JHA) completed for the work being performed? YES ☐ NO ☐ Who prepared the JHA?

B. When and who was the last safety officer (i.e. LHSR, supervisor, Division ES&H Manager, etc.) at your work site?

C. When and what safety training directly related to the incident has the person(s) involved had?

## Section 5 - Incident Investigation Results

#	Causal Factors (Attach and number any additional pages as needed to completely address this section)
1	
2	
3	
4	
5	

**Root Cause(s) Analysis** (The below items represent major root cause categories which have been determined to be Less Than Adequate (LTA). A more detailed determination of the root cause will be facilitated, if needed, by your Division's ES&H Manager.)

1. Equipment Reliability Program Implementation	5. Training
2. Administrative / Management Systems	6. Immediate Supervision
3. Procedures	7. Communications
4. Human Factors Engineering	8. Personal Performance

Root Cause #	Corrective Actions to be taken (Attach additional pages as needed to completely address this section)	Responsible Person	Proposed Completion Date	Closed on Date	Verified by and Date Verified

## Section 6 - Notifications, Certification & Approvals

Check the appropriate boxes indicating the applicable reports have been made to the following organizations:

Auto Lessor ☐ Insurer ☐ Workers' Compensation Administrator ☐

Post-incident Substance Abuse Testing Has Been Performed ☐

Incident investigated by (signatures):			
Employee(s):	Date:	Employee's Supervisor:	Date:
Project Manager:	Date:	Office Manager:	Date:
LHSR:	Date:	Division ES&H Manager:	Date:

## ATTACHMENT 2 VEHICLE INCIDENT REPORT

*Attorney-Client Work Product Prepared in Anticipation of Litigation*  
(Review instructions on page 12 prior to completing this form)

### Section 1 - General Information

Date of incident: \_\_\_\_\_

Time incident occurred: \_\_\_\_\_ ☐ AM ☐ PM Illumination: ☐ Dark ☐ Light Road Condition: ☐ Dry ☐ Wet ☐ Icy/snow

Were police summoned to scene? ☐ Yes ☐ No Police Department and Location: \_\_\_\_\_

Report #: \_\_\_\_\_ Officer's Name and Badge Number: \_\_\_\_\_

### Section 2 - Company Driver and Vehicle

Driver's name: \_\_\_\_\_ D/L # \_\_\_\_\_ State: \_\_\_\_\_

Driver's home office address: \_\_\_\_\_ Driver's Phone # \_\_\_\_\_

Company Vehicle # \_\_\_\_\_ Year \_\_\_\_\_ Model \_\_\_\_\_ License # \_\_\_\_\_ State \_\_\_\_\_

Company car? ☐ Yes ☐ No Owned by employee? ☐ Yes ☐ No

Leased/rented from \_\_\_\_\_

Passenger/Witness Name(s) \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Passenger/Witness Name(s) \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Passenger/Witness Name(s) \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Damage to vehicle: \_\_\_\_\_

Injuries to employee(s): \_\_\_\_\_

Injuries to others: \_\_\_\_\_

Vehicle was being used for: Company business ☐ Yes ☐ No Personal business ☐ Yes ☐ No

Towed: ☐ Yes ☐ No By Whom: \_\_\_\_\_ To Where: \_\_\_\_\_

### Section 3 - Other Driver and Vehicle Information

Driver's Name: \_\_\_\_\_ D/L # \_\_\_\_\_ State \_\_\_\_\_

Current Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Telephone Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

Reg. Owner's Name: \_\_\_\_\_ Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_  
(verify registration document)

The Other Vehicle: Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ License # \_\_\_\_\_ State \_\_\_\_\_



CORPORATE ES&H PROCEDURE

ISSUED: 3/23/06 EFFECTIVE: 3/23/06 ESH-2.0.1 Revision 1  
 OWNER: H.J. GORDON APPROVER: S. RIMA Page 4 of 5

Insurance company name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone # \_\_\_\_\_

Policy No. \_\_\_\_\_ Contact Person \_\_\_\_\_ Phone # \_\_\_\_\_

Passenger/Witness Name(s) \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Passenger/Witness Name(s) \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Damage: (Make note of pre-existing damage and take pictures if possible. Attach additional pages as needed)

Injuries to other driver/passengers:

**Section 4 – Approvals (signatures required)**


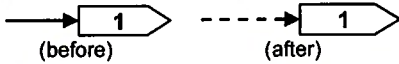

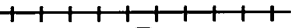

Form completed by: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

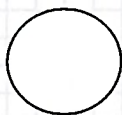
**Things to Do First In The Event Of a Motor Vehicle Incident**

1. Most important: **STOP.**
2. **Call 911 if there are injuries.**
3. Call for an officer if the incident occurred on public property (streets, highways or roads). Disputes often arise between the parties involved as to who was at fault; therefore, a police report is important. If an officer is unable to attend the scene of the accident, a counter police report may be filed at most stations. Insurance companies rely on police reports to determine liability.
4. Complete the Incident Investigation Report and the Vehicle Incident Report forms. It is important that both these forms are completed in detail. Include a diagram of the incident on the back of the report. Incomplete information may lead to delays in processing associated claims and in helping to prevent this type of incident from occurring again.
5. Express no opinion as to who was at fault. This is for the insurance companies to determine.
6. Give only information that is required by the authorities or as directed by MACTEC contractual requirements.
7. Sign only those statements required by the authorities or as directed by MACTEC contractual requirements. Do not sign away your rights or the company's rights.
8. If you are injured or think you were injured, tell your supervisor and see a physician. Your supervisor will notify MACTEC's Worker's Compensation insurance carrier, your Division's ES&H Manager and the Corporate Director of ES&H by phone, email or fax. For additional instructions on what to do, go to MACTEC's ES&H website on the intranet at:  
[http://intranet.mactec.com/EnvSafetyHealth/HealthSafety\\_Claims\\_Reporting.htm](http://intranet.mactec.com/EnvSafetyHealth/HealthSafety_Claims_Reporting.htm)
9. Your supervisor will forward both completed incident reports immediately to your Division's ES&H Manager.

## Vehicle Crash Diagram

### Instructions:

1. Number each vehicle and show directions 
2. Use a solid line to show path before incident and use a dotted line to show path after incident  

3. Show pedestrian/non-motorist by: 
4. Show railroad by: 
5. Indicate north by arrow as: 
6. Show street or highway names or numbers
7. Show signs, signals, warning and traffic controls.



Indicate North  
by Arrow

Prepared by: \_\_\_\_\_ Date: \_\_\_\_\_

**APPENDIX E**  
**MATERIAL SAFETY DATA SHEETS**

**(MSDS folder kept in all MACTEC vehicles)**



**APPENDIX F**  
**SITE SAFETY ORIENTATION FORM**

## SITE SAFETY ORIENTATION

Project: \_\_\_\_\_

Site: \_\_\_\_\_

Project Number: \_\_\_\_\_

Date: \_\_\_\_\_

*All applicable items listed below are to be reviewed on the first day of site activities and when new workers arrive on site. Training provider, please initial each item covered in the training, or note "NA" as applicable.*

General Supervisor: \_\_\_\_\_

Site Health and Safety Supervisor (SHSS): \_\_\_\_\_

Employees' direct supervisor: \_\_\_\_\_

Location of HASP and MSDS on site: \_\_\_\_\_

Review of Contents of HASP \_\_\_\_\_

HazCom labeling system if different from Local Operation: \_\_\_\_\_

Site-specific medical surveillance requirements: \_\_\_\_\_

Site control measures (location of exclusion zone, etc.): \_\_\_\_\_

Safety and health hazards on site: \_\_\_\_\_

The Level of Protection and specific PPE to be used: \_\_\_\_\_

Work practices to be used on site to minimize exposure: \_\_\_\_\_

Decontamination procedures: \_\_\_\_\_

How to effectively use site/task engineering controls: \_\_\_\_\_

Applicable elements of the site emergency response plan: \_\_\_\_\_

Any other site-specific health and safety related requirements: \_\_\_\_\_

Participating employees must print and sign their name in the spaces provided below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**APPENDIX G**  
**DAILY TAILGATE SAFETY MEETING CHECKLIST**

# MACTEC ENGINEERING AND CONSULTING, INC.

## DAILY TAILGATE SAFETY MEETING CHECKLIST

Project: _____	Site: _____
Date: _____	Location: _____
<b>To be reviewed on the first day of site activities and when new workers arrive on site:</b>	
Alternate for Health & Safety: _____	
Location of on-site HASP: _____	
Site training requirements:	See HASP
Specific medical surveillance requirements:	See HASP

### Agenda:

*During the project, one or more of the agenda items could be selected for the required daily site training.*

**Check-off:**  
**Date**

1. Planned work for this day (discuss)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Physical hazards and controls (discuss/review)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Chemical hazards and controls (discuss/review)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Biological hazards and controls (discuss/review)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Personal protective equipment <u>Modified D</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Personal protective equipment required per the hazard assessment:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>SPECIFY TYPE</b>					
Protective coveralls	_____				
Safety glasses/goggles	ANSI approved				
Hard hat	ANSI approved				
Foot protection	Safety toe boots & overboots				
Work gloves	_____				
Chemical gloves	Neoprene outer, nitrile inner				
Hearing protection	_____				
Other	_____				
7. Review inspection, decontamination, and maintenance procedures and the limitations of the above stated PPE.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Decontamination procedure (discuss/review)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Exclusion zone maintained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Site emergency response plan (discuss/review)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Signs and symptoms of overexposure to chemicals anticipated on site	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. General health and safety rules	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Specific health and safety requirements relating to site activities including: (discuss/review)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Drilling/boring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. UST	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Excavations (including UG utility locations)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Heavy equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. Slips, trips, and falls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Lockout/tagout	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Working in temperature extremes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Rain or other weather advisories	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. Other health & safety issues (discuss/note)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## DAILY TAILGATE SAFETY MEETING CHECKLIST

I have participated in the daily safety meeting discussing the topics indicated on the reverse and fully understand my responsibility for complying with all health and safety requirements. I have had the opportunity to have my questions on site health and safety issues and procedures answered.

**Employee Name**

**Employee Signature**

**Date**[illegible]

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

[illegible]

Name and Signature of person conducting training

Date \_\_\_\_\_

**APPENDIX H**  
**WEEKLY HEALTH AND SAFETY CHECKLIST**

**Site:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Project Number:** \_\_\_\_\_ **Project Manager:** \_\_\_\_\_

**Conducted by:** \_\_\_\_\_

**Names of MACTEC employee's onsite:** \_\_\_\_\_

	Y	N	NA
<b>HASP, Training and Documentation:</b>			
1. Are emergency phone numbers posted?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Are directions to the nearest emergency medical care posted?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Is the OSHA Poster posted?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Is there a SSHP at the site?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a. Is it current and address all tasks?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Does it address all know/suspected hazards?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Are JHAs included for <u>all</u> tasks?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Are employees following the procedures as outlined in the JHAs?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Is it approved?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Have all field members signed off that they have read it?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Are there MSDSs for required materials/chemicals brought to the site?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Are all containers properly labeled, as to content, hazard?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Is there list of chemicals brought to the site? Do the names on the list match the name on the label and MSDS?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Do applicable workers have their 40-hour initial training and are current in their refreshers?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Do the Field Lead and Health and Safety Officer have Supervisory training?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Are all applicable workers current in their physicals?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Are Tailgate Safety Meetings taking place and documented?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are there means to minimize heat or cold stress on-site?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Is eating, drinking, smoking, etc. only done in areas free from toxic materials?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Are two people used to lift equipment or materials weighting more than 50 lbs.?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Are the locations of electrical power lines and other utilities identified prior to digging or drilling?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>PPE and Monitoring Instruments:</b>			
16. Does the PPE being worn match what is required in the HASP and JHAs?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Is hearing protection worn when noise makes conversation difficult at a distance of 2 feet?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. Are approved respirators and cartridges worn when needed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a. Are cartridges changed daily, unless specified otherwise in the HASP?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Are cartridges appropriate for the contaminants at the site?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Are <u>all</u> air monitoring instruments identified in the HASP being used and calibrated daily, as required?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a. Do employees know upgrade/downgrade action levels?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>First Aid:</b>			
20. Are there eyewash bottles on-site? Solution not expired?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Are first aid kits on-site and adequately stocked (including bloodborne pathogen equipment)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. Is there always at least one person on site current in their first aid/CPR training?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Fire Safety:</b>			
23. Is there a charged fire extinguisher on-site?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a. Have MACTEC workers, who would use extinguishers, received fire extinguisher training in past year?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Are fire extinguishers visually inspected monthly and are the inspections documented?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Have fire extinguishers been professionally inspected within the past year?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24. Are flammable liquids (e.g., gasoline) being stored safely (e.g., in safety cans and 20 feet from combustibles)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25. Are flammable liquid dispensing systems bonded (metal to metal)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Compressed Gas:</b>			
26. Are cylinders stored in a secure manner, with caps on, upright and protected from damage?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27. Are cylinders protected from snow, rain, etc.?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
28. Are cylinder caps in place before cylinders are moved?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29. Are fuel gas and oxygen cylinders stored a minimum of 20 feet apart?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30. Are propane cylinders stored and used only outside of buildings?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Vehicles:</b>			
31. Are employees wearing their seat belts and not talking on cell phones while car is in motion?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Do Company vehicles have the "How's my Driving" decals?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Y	N	NA
33. Are vehicles parked in a safe manner? Are traffic cones used, if required?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
34. Are company vehicle inspected weekly and the inspections documented?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Are materials stored in vehicles in a neat, orderly and secure manner so that they won't become a distraction to the driver, become a projectile hazard in the event of a sudden stop or crash or fall from the vehicle when in transport?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Electrical:</b>			
36. Is at least a 10 foot clearance maintained between equipment and power lines?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
37. Are all electrically operated tools grounded?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
38. Are GFCI's used?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
39. Are exposed wiring and cords in good condition (not frayed or deteriorated)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
40. Do extension cords have a grounding conductor?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Are extension cords only used in one continuous length (not daisy chained)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
42. Are extension cords kept out of wet areas?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
43. Has a lockout/tagout system been established, if required?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Hand and Power Tools:</b>			
44. Are tools and equipment used by employees in good condition or tagged out of service?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
45. Are guards and safety devices in place on power tools?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Walking and Working Surfaces:</b>			
46. Do stairways into trailers/buildings that have 4 steps or more, have hand rails?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
47. Is good housekeeping being maintained at the site?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
48. Are all ladders in good condition, stored against damage and properly secured when in use?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Are approved manlifts provided for the lifting of personnel (e.g., cherry pickers, scissor lifts, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
50. Are personnel in manlifts wearing approved fall protection devices when required?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
51. Is fall protection used when working at elevations greater than 6 feet?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
52. Are ladders inspected prior to use?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
53. Are all ladders in good condition and defective ladders tagged out of service?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Scaffolding:</b>			
54. Is scaffolding placed on a flat, firm surface?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
55. Are scaffold planks free of mud, ice, grease, etc.?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
56. On scaffolds where platforms are overlapped, is planking overlapped a minimum of 12 inches?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
57. Does scaffold planking extend over end supports between 6 to 18 inches (dependent upon platform length)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Are employees restricted from working on scaffolds during storms and high winds?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Is required perimeter guarding (top rail, mid rail, and toe board) present?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Has a competent person been designated to oversee scaffold construction and inspect daily?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Excavations:</b>			
61. Has entrance into excavations greater than 4 feet deep prohibited unless the following precautions are taken?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a. The sides of excavations sloped or shored to prevent cave ins if over 5 feet deep?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Excavations greater than 4 feet deep been monitored for hazardous atmospheres (i.e., LEL/O2)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Ladders or ramps used in excavations over 4 feet deep?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Means of egress available so as to require no more than 25 feet of lateral travel?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Excavation inspected daily by competent persons and documented?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Is excavated material placed a minimum of 24 inches from the excavation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Heavy Equipment:</b>			
63. Is heavy equipment shut down for fueling and maintenance?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
64. Are backup alarms installed and working on mobile equipment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
65. Are riders prohibited on heavy equipment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
66. Are guards and safety appliances in place and used?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
67. Are operators using the "three point" system when mounting/dismounting equipment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Confined Space Entry:</b>			
68. Are there confined spaces at the site that MACTEC will be entering? If yes:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a. Is the permit completely filled out and approved prior to entry?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Are confined spaces thoroughly emptied of the hazardous substances prior to entry?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Is ventilation provided prior to entry?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Is air within the confined space tested for oxygen deficiency, LEL and toxic substances in that order?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Is there an assigned safety standby outside the space who is adequately trained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Has a rescue plan been established?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Is an entry supervisor present at each permit-required entry?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



## WEEKLY SITE SAFETY AND HEALTH CHECKLIST

**h. Are required extraction/fall protection devices being used?**

**Y**      **N**      **NA**  
☐    ☐    ☐

### Decontamination:

**69. Are decontamination stations set up on site?**

□ □ □

70. Is decontamination water properly contained and disposed of?



71. Are all pieces of equipment inspected for proper decontamination before leaving the site?

□ □ □

### Working on or Near Water:

72. Has a float plan been filed if working from a boat?

☐ ☐ ☐

**73. Are personal floatation devices available and being used?**

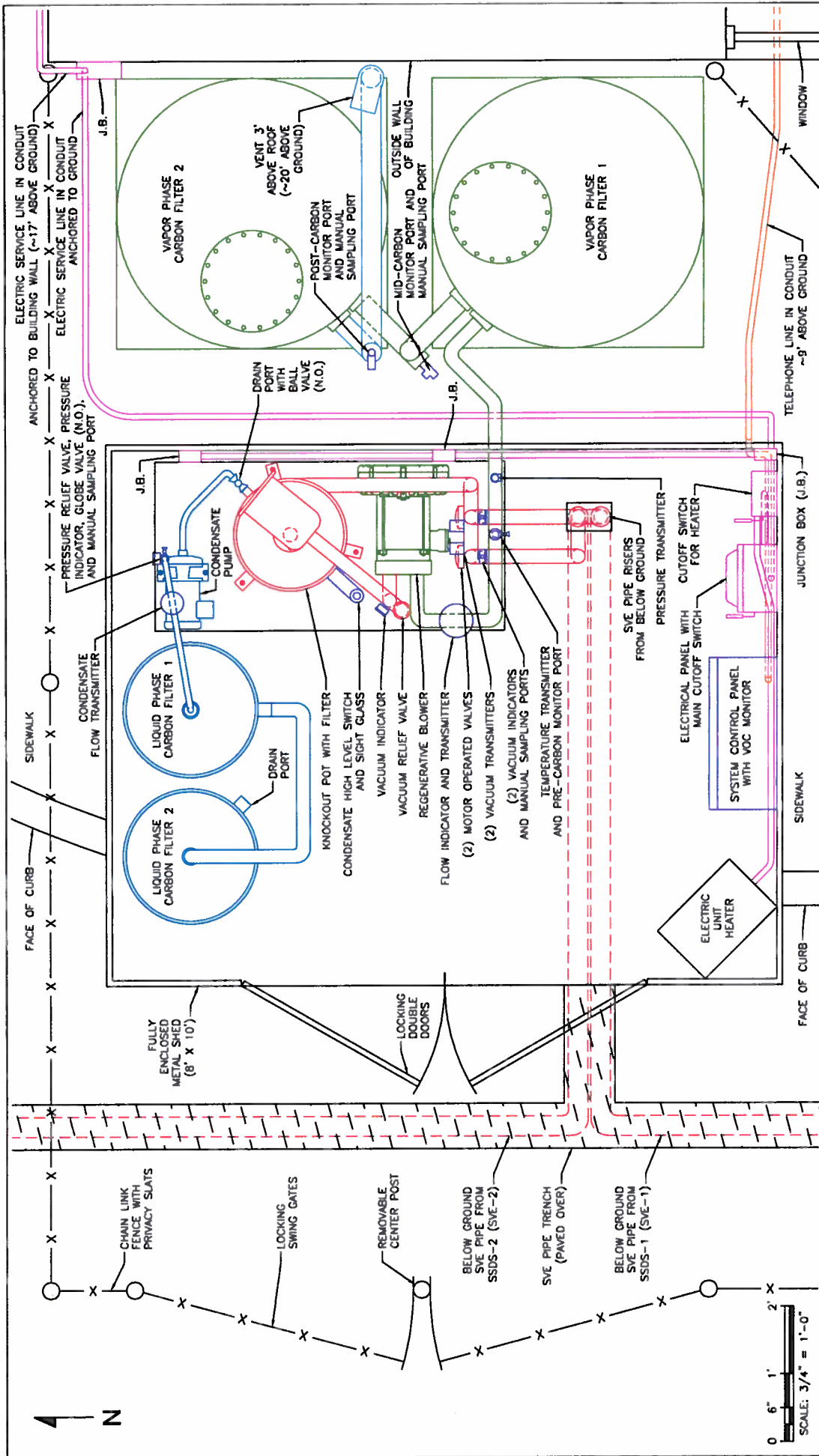
☐ ☐ ☐

74. Are Coast Guard requirements being followed when boating on navigable waters?

[illegible]

Findings	Corrected on
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	

**APPENDIX D**  
**EC DRAWINGS OF RECORD**



DATE: MAY 2016

DRAWN BY: SPM

CHECKED BY: DS

Project No. 3485050051

APPENDIX D

SSDS RECORD DRAWING

FINAL ENGINEERING REPORT

New York Express Dry Cleaners

Queens Tax Map Block 7115, Lot 30 (formerly known as part of Lot 2)

MACTEC

Engineering and Consulting, P.C.

751 Arbor Way, Suite 180

Blue Bell, Pennsylvania 19422-1960

LEGEND:

SVE PUMP INLET PIPING

SVE PUMP OUTLET PIPING

FILTERED AIR DISCHARGE

CONDENSATE PIPING

ELECTRICAL SERVICE

TELEPHONE SERVICE

INSTRUMENTATION, CONTROL, AND SAMPLING

DOQ

N.O.

J.B.

BALL VALVE

NORMALLY OPEN

JUNCTION BOX