



29 June 2007

New York State Department of
Environmental Conservation
Division of Environmental Remediation
625 Broadway
Albany, NY 12233-7020

Attn: Chief, Site Control Section

**Re: Brownfield Cleanup Program Application
Terra Cotta, LLC
Silvercup West NYPA Site
Long Island City, New York**

Dear Chief, Site Control Section:

Langan Engineering and Environmental Services, P.C., on behalf of Terra Cotta, LLC, is pleased to submit the original and two copies of our Brownfield Cleanup Program Application (BCPA). An electronic copy of the BCPA and readily available electronic versions of the attachments have been compiled on the compact disk enclosed in the cover sleeve of the original BCPA hard copy. We would be pleased to provide you with additional hard copy versions of the attachments if necessary.

We look forward to working closely with the NYSDEC on a successful Brownfield Cleanup Program remediation for the Silvercup West development site.

Sincerely,

Langan Engineering and Environmental Services, P.C.

Joel Landes, P.E.
Senior Associate

cc. Mark Gold – Silvercup Studios
Paul Cassowitz – Sive, Paget & Riesel
Daniel Walsh – NYSDEC, Region 2

David T. Gockel, P.E., P.P.
George P. Kelley, P.E.
George E. Derrick, P.E.
Michael A. Semeraro, Jr., P.E.
Nicholas De Rose, P.G.
Andrew J. Ciancia, P.E.
George E. Leventis, P.E.
Rudolph P. Frizzi, P.E.
Ronald A. Fuerst, C.L.A.
Colleen Costello, P.G.
Cristina M. González, P.E.
Gerald J. Zambrella, C.E.M.

Gregory L. Biesiadecki, P.E.
Marc Gallagher, P.E.
Donald J. Hodson, P.E.
Joel B. Landes, P.E.
Alan R. Poeppel, P.E.



NEW YORK STATE
DEPARTMENT OF ENVIRONMENTAL CONSERVATION



BROWNFIELD CLEANUP PROGRAM (BCP)

ECL ARTICLE 27 / TITLE 14

7/06

DEPARTMENT USE ONLY
BCP SITE #: _____

Section 1: Requestor Information			
NAME Terra Cotta LLC			
ADDRESS 42-22 22nd Street			
CITY/TOWN Long Island City, NY		ZIP CODE 11101	
PHONE (718) 906 2400	FAX (718) 906 2585	E-MAIL mgold@silvercupstudios.com	
NAME OF REQUESTOR'S REPRESENTATIVE Stuart Match Suna			
ADDRESS Same as above			
CITY/TOWN		ZIP CODE	
PHONE	FAX	E-MAIL	
NAME OF REQUESTOR'S CONSULTANT Joel Landes - Langan Engineering and Environmental Services, PC			
ADDRESS 21 Penn Plaza, 360 W. 31st Street, 8th floor			
CITY/TOWN New York, NY		ZIP CODE 10001	
PHONE (212) 479 5400	FAX (212) 479 5444	E-MAIL jlandes@langan.com	
NAME OF REQUESTOR'S ATTORNEY Paul Casowitz - Sive, Paget & Riesel			
ADDRESS 460 Park Avenue			
CITY/TOWN New York, NY		ZIP CODE 10022	
PHONE (212) 421 2150	FAX (212) 421 1891	E-MAIL pcasowitz@sprlaw.com	
THE REQUESTOR MUST CERTIFY THAT HE/SHE IS EITHER A PARTICIPANT OR VOLUNTEER IN ACCORDANCE WITH ECL § 27-1405 (1) BY CHECKING ONE OF THE BOXES BELOW:			
<input type="checkbox"/> PARTICIPANT A requestor who either 1) was the owner of the site at the time of the disposal of hazardous waste or discharge of petroleum or 2) is otherwise a person responsible for the contamination, unless the liability arises solely as a result of ownership, operation of, or involvement with the site subsequent to the disposal of hazardous waste or discharge of petroleum.		<input checked="" type="checkbox"/> VOLUNTEER A requestor other than a participant, including a requestor whose liability arises solely as a result of ownership, operation of or involvement with the site subsequent to the disposal of hazardous waste or discharge of petroleum. NOTE: By checking this box, the requestor certifies that he/she has exercised appropriate care with respect to the hazardous waste found at the facility by taking reasonable steps to: i) stop any continuing discharge; ii) prevent any threatened future release; and iii) prevent or limit human, environmental, or natural resource exposure to any previously released hazardous waste.	
Requestor Relationship to Property (check one): Previous Owner Current Owner <input checked="" type="checkbox"/> Potential /Future Purchaser Other _____			
If requestor is not the site owner, requestor will have access to the property throughout the BCP project. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
(Note: proof of site access must be submitted for non-owners)			

Section II - Property Information Summary Sheet											
PROPERTY NAME: Silvercup West, NYPA Site											
ADDRESS/LOCATION 42-22 to 42-48 Vernon Boulevard CITY/TOWN Long Island City, NY ZIP CODE 11101											
MUNICIPALITY(IF MORE THAN ONE, LIST ALL): Queens											
COUNTY Queens		SITE SIZE (ACRES) 3.4									
LATITUDE (degrees/minutes/seconds) 40 · 45 · 13			LONGITUDE (degrees/minutes/seconds) 73 · 57 · 03 "								
HORIZONTAL COLLECTION METHOD: <input type="checkbox"/> SURVEY <input type="checkbox"/> GPS <input checked="" type="checkbox"/> MAP			HORIZONTAL REFERENCE DATUM: NAD1983								
FOR EACH PARCEL, FILL OUT THE FOLLOWING TAX MAP INFORMATION (if more than three parcels, attach additional information)											
Parcel Address	Parcel No.	Section No.	Block No.	Lot No.	Acreage						
42-22 to 42-48 Vernon Boulevard	1		477	24	3.4						
<p>1. Do the property boundaries correspond to tax map metes and bounds? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p style="padding-left: 40px;">If no, please attach a metes and bounds description of the property.</p> <p>2. Is the required property map attached to the application? (application will not be processed without map) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>3. Is the property part of a designated En-zone pursuant to Tax Law § 21(b)(6)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>For more information go to: http://www.nylovesbiz.com/BrownField_Redevelopment/default.asp.</p> <p>If yes, identify area (name) <u>003700</u></p> <p><input type="checkbox"/> 50% <input checked="" type="checkbox"/> 100% of the site is in the En-zone (check one)</p>											
PROPERTY DESCRIPTION NARRATIVE: See Attachment B											
List of Existing Easements (type here or attach information) <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Easement Holder</th> <th style="text-align: left; border-bottom: 1px solid black;">Description</th> </tr> </thead> <tbody> <tr> <td colspan="2">No known easements</td> </tr> </tbody> </table>						Easement Holder	Description	No known easements			
Easement Holder	Description										
No known easements											
List of Permits issued by the NYSDEC or USEPA Relating to the Proposed Site (type here or attach information) <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Type</th> <th style="text-align: left; border-bottom: 1px solid black;">Issuing Agency</th> <th style="text-align: left; border-bottom: 1px solid black;">Description</th> </tr> </thead> <tbody> <tr> <td colspan="3">No known permits</td> </tr> </tbody> </table>						Type	Issuing Agency	Description	No known permits		
Type	Issuing Agency	Description									
No known permits											

Initials of each Requestor: _____

Section III: Current Site Owner/Operator InformationOWNER'S NAME (if different from requestor) **New York Power Authority**ADDRESS **123 Main Street**CITY/TOWN **White Plains, NY**ZIP CODE **10601**PHONE **(914) 681 6200**

FAX

E-MAIL **william.slade@nypa.gov**OPERATOR'S NAME (if different from requestor or owner) **Same as above**

ADDRESS

CITY/TOWN

ZIP CODE

PHONE

FAX

E-MAIL

Section IV: Requestor Eligibility Information (Please refer to ECL § 27-1407)

If answering "yes" to any of the following questions, please provide an explanation as an attachment.

1. Are any enforcement actions pending against the requestor regarding this site? ☐ Yes ☒ No
2. Is the requestor subject to an existing order relating to contamination at the site? ☐ Yes ☒ No
3. Is the requestor subject to an outstanding claim by the Spill Fund for this site? ☐ Yes ☒ No
4. Has the requestor been determined to have violated any provision of ECL Article 27? ☐ Yes ☒ No
5. Has the requestor previously been denied entry to the BCP? ☐ Yes ☒ No
6. Has the requestor been found in a civil proceeding to have committed a negligent or intentionally tortious act involving contaminants? ☐ Yes ☒ No
7. Has the requestor been convicted of a criminal offense that involves a violent felony, fraud, bribery, perjury, theft, or offense against public administration? ☐ Yes ☒ No
8. Has the requestor knowingly falsified or concealed material facts or knowingly submitted or made use of a false statement in a matter before the Department? ☐ Yes ☒ No
9. Is the requestor an individual or entity of the type set forth in ECL 27-1407.8(f) that committed an act or failed to act, and such act or failure to act could be the basis for denial of a BCP application? ☐ Yes ☒ No

Section V: Property Eligibility Information (Please refer to ECL § 27-1405)

1. Is the property listed on the National Priorities List? ☐ Yes ☒ No
2. Is the property listed on the NYS Registry of Inactive Hazardous Waste Disposal Sites? ☐ Yes ☒ No
If yes, please provide: Site # _____ Class # _____
3. Is the property subject to a permit under ECL Article 27, Title 9, other than an Interim Status facility? ☐ Yes ☒ No
If yes, please provide: Permit type: _____ EPA ID Number: _____
Date permit issued: _____ Permit expiration date: _____
4. Is the property subject to a cleanup order under navigation law Article 12 or ECL Article 17 Title 10? ☐ Yes ☒ No
If yes, please provide: Order # _____
5. Is the property subject to a state or federal enforcement action related to hazardous waste or petroleum? ☐ Yes ☒ No
If yes, please provide explanation as an attachment.

Section VI: Project Description

Please attach a description of the project which includes the following components:

- Purpose and scope of the project See Attachment C
- Estimated project schedule

Section VII. Property's Environmental History

To the extent that existing information/studies/reports are available to the requestor, please attach the following:

1. Environmental Reports See Attachment D

A phase I environmental site assessment report prepared in accordance with ASTM E 1527 (American Society for Testing and Materials: Standard Practice for Environmental Site Assessments: Phase I Environmental Site Assessment Process), and all environmental reports related to contaminants on or emanating from the site.

If a final investigation report is included, indicate whether it meets the requirements of ECL Article 27-1415(2): ☒ Yes ☐ No

2. Sampling Data: Indicate known contaminants and the media which are known to have been affected:

Contaminant Category	Soil	Groundwater	Surface Water	Sediment	Soil Gas
Petroleum	x	x			
Chlorinated Solvents					x
Other VOCs	x				x
SVOCs	x	x			
Metals	x	x			
Pesticides	x				
PCBs	x				
Other*	x				

*Please describe: White ash layer (lead contamination)

3. Suspected Contaminants: Indicate suspected contaminants and the media which may have been affected:

Contaminant Category	Soil	Groundwater	Surface Water	Sediment	Soil Gas
Petroleum	x	x			
Chlorinated Solvents					x
Other VOCs	x	x			x
SVOCs	x	x			
Metals	x	x			
Pesticides	x				
PCBs	x				
Other*	x				

*Please describe: White ash layer (lead contamination)

4. INDICATE KNOWN OR SUSPECTED SOURCES OF CONTAMINANTS:

- | | | | |
|---|--|--|---|
| <input checked="" type="checkbox"/> Above Ground Pipeline or Tank | <input type="checkbox"/> Lagoons or Ponds | <input checked="" type="checkbox"/> Underground Pipeline or Tank | <input checked="" type="checkbox"/> Surface Spill or Discharge |
| <input checked="" type="checkbox"/> Routine Industrial Operations | <input type="checkbox"/> Dumping or Burial of Wastes | <input type="checkbox"/> Septic tank/lateral field | <input checked="" type="checkbox"/> Drums or Storage Containers |
| <input type="checkbox"/> Adjacent Property | <input type="checkbox"/> Seepage Pit or Dry Well | <input type="checkbox"/> Foundry Sand | <input type="checkbox"/> Electroplating |
| <input type="checkbox"/> Coal Gas Manufacture | <input type="checkbox"/> Industrial Accident | <input type="checkbox"/> Unknown | |

Other: _____

5. INDICATE PAST LAND USES:

- | | | | | | |
|---|---|---|--------------------------------------|---|--|
| <input type="checkbox"/> Coal Gas Manufacturing | <input checked="" type="checkbox"/> Manufacturing | <input type="checkbox"/> Agricultural Co-op | <input type="checkbox"/> Dry Cleaner | <input type="checkbox"/> Salvage Yard | <input checked="" type="checkbox"/> Bulk Plant |
| <input checked="" type="checkbox"/> Pipeline | <input checked="" type="checkbox"/> Service Station | <input type="checkbox"/> Landfill | <input type="checkbox"/> Tannery | <input type="checkbox"/> Electroplating | <input type="checkbox"/> Unknown |

Other: _____

6. Owners

A list of previous owners with names, last known addresses and telephone numbers (describe requestor's relationship, if any, to each previous owner listed. If no relationship, put "none"). See Attachment E

7. Operators

A list of previous operators with names, last known addresses and telephone number (describe requestor's relationship, if any, to each previous operator listed. If no relationship, put "none"). See Attachment E

Section VIII: Contact List Information

Please attach, at a minimum, the names and addresses of the following: **See Attachment F**

1. The chief executive officer and zoning board chairperson of each county, city, town and village in which the property is located.
2. Residents, owners, and occupants of the property and properties adjacent to the property.
3. Local news media from which the community typically obtains information.
4. The public water supplier which services the area in which the property is located.
5. Any person who has requested to be placed on the contact list.
6. The administrator of any school or day care facility located on or near the property.
7. The location of a document repository for the project (e.g., local library). In addition, attach a copy of a letter sent to the repository acknowledging that it agrees to act as the document repository for the property.

Section IX: Land Use Factors (Please refer to ECL § 27-1415(3))

Current Use: ☐ Residential ☐ Commercial ☒ Industrial ☐ Vacant ☐ Recreational (check all that apply)

Intended Use: ☐ Unrestricted ☒ Residential ☒ Commercial ☐ Industrial

Please check the appropriate box and provide an explanation as an attachment if appropriate. Provide a copy of the local zoning classifications, comprehensive zoning plan designations, and/or current land use approvals.

	Yes	No
1. Do current historical and/or recent development patterns support the proposed use? (See #12 below re: discussion of area land uses)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Is the proposed use consistent with applicable zoning laws/maps?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Is the proposed use consistent with applicable comprehensive community master plans, local waterfront revitalization plans, designated Brownfield Opportunity Area plans, other adopted land use plans?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Are there any Environmental Justice Concerns? (See §27-1415(3)(p)).	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Are there any federal or state land use designations relating to this site?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6. Do the population growth patterns and projections support the proposed use?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. Is the property accessible to existing infrastructure?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8. Are there important cultural resources, including federal or state historic or heritage sites or Native American religious sites within ½ mile?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9. Are there important federal, state or local natural resources, including waterways, wildlife refuges, wetlands, or critical habitats of endangered or threatened species within ½ mile? East River	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10. Are there floodplains within ½ mile?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11. Are there any institutional controls currently applicable to the property?	NO	
12. Describe on attachment the proximity to real property currently used for residential use, and to urban, commercial, industrial, agricultural, and recreational areas. See Attachment G		
13. Describe on attachment the potential vulnerability of groundwater to contamination that might migrate from the property, including proximity to wellhead protection and groundwater recharge areas. See Attachment G		
14. Describe on attachment the geography and geology of the site. See Attachment G		

Statement of Certification and Signatures

(By requestor who is an individual)

I hereby affirm that information provided on this form and its attachments is true and complete to the best of my knowledge and belief. I am aware that any false statement made herein is punishable as a Class A misdemeanor pursuant to section 210.45 of the Penal Law.

Date: _____ Signature: _____ Print Name: _____

(By an requestor other than an individual)

I hereby affirm that I am managing member (title) of TERA COTTA, LLC (entity); that I am authorized by that entity to make this application; that this application was prepared by me or under my supervision and direction; and that information provided on this form and its attachments is true and complete to the best of my knowledge and belief. I am aware that any false statement made herein is punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

Date: 6/27/07 Signature: [Signature] Print Name: STUART MATCH SUNA

SUBMITTAL INFORMATION:

Three (3) complete copies are required.

- Two (2) copies, one hard copy with original signatures and one electronic copy in Portable Document Format (PDF) on a CD or diskette, must be sent to:

Chief, Site Control Section
New York State Department of Environmental Conservation
Division of Environmental Remediation
625 Broadway
Albany, NY 12233-7020

- One (1) hard copy must be sent to the DEC regional contact in the regional office covering the county in which the site is located. Please check our website for the address of our regional offices: <http://www.dec.state.ny.us/website/der/index.html>

FOR DEPARTMENT USE ONLY

BCP SITE T&A CODE: _____ LEAD OFFICE: _____