



NEW YORK STATE  
DEPARTMENT OF ENVIRONMENTAL CONSERVATION



**BROWNFIELD CLEANUP PROGRAM (BCP)**

ECL ARTICLE 27 / TITLE 14

DEPARTMENT USE ONLY  
BCP SITE #:

07/2010

**Section I. Requestor Information**

NAME Eldre Corporation

ADDRESS 1500 Jefferson Road

CITY/TOWN Henrietta

ZIP CODE 14623

PHONE (585) 427-7280

FAX (866) 745-6211

E-MAIL herdle@busbar.com

Is the requestor authorized to conduct business in New York State (NYS)?

☒ Yes ☐ No

-If the requestor is a Corporation, LLC, LLP or other entity requiring authorization from the NYS Department of State to conduct business in NYS, the requestor's name must appear, exactly as given above, in the [NYS Department of State's Corporation & Business Entity Database](#). A print-out of entity information from the database must be submitted to DEC with the application, to document that the applicant is authorized to do business in NYS. **Refer to Attachment A**

NAME OF REQUESTOR'S REPRESENTATIVE See BCP Application Supplement (p. 1)

ADDRESS

CITY/TOWN

ZIP CODE

PHONE

FAX

E-MAIL

NAME OF REQUESTOR'S CONSULTANT Dan Noll, LaBella Associates, P.C.

ADDRESS 300 State St

CITY/TOWN Rochester

ZIP CODE 14614

PHONE (585) 454-6110

FAX (585) 454-3066

E-MAIL dnoll@labellapc.com

NAME OF REQUESTOR'S ATTORNEY Jean H. McCreary, Nixon Peabody LLP

ADDRESS 1300 Clinton Square

CITY/TOWN Rochester, NY

ZIP CODE 14604

PHONE (585) 263-1611

FAX (866) 743-0241

E-MAIL jmccreary@nixonpeabody.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:

☒ **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.

☐ **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 ☐ Potential /Future Purchaser ☐ Other \_\_\_\_\_

If requestor is not the site owner, requestor will have access to the property throughout the BCP project. ☐ Yes ☐ No  
-Proof of site access must be submitted for non-owners

**Section II. Property Information**Check here if this application is to request significant changes to property set forth in an existing BCA: ☐

Existing BCP site number: \_\_\_\_\_

PROPERTY NAME **Eldre Corporation**ADDRESS/LOCATION **1500 Jefferson Rd & 55 Hofstra Rd** CITY/TOWN **Henrietta** ZIP CODE **14623**

MUNICIPALITY(IF MORE THAN ONE, LIST ALL): \_\_\_\_\_

COUNTY **Monroe**SITE SIZE (ACRES) **6.824**LATITUDE (degrees/minutes/seconds) **43 ° 5 ' 15.066 "**LONGITUDE (degrees/minutes/seconds) **77 ° 35 ' 14.014 "**HORIZONTAL COLLECTION METHOD: ☐ SURVEY ☐ GPS ☒ MAPHORIZONTAL REFERENCE DATUM: **NAD\_1983\_StatePlane\_New\_York\_West\_FIPS\_3103\_Feet**

COMPLETE TAX MAP INFORMATION FOR ALL TAX PARCELS INCLUDED WITHIN THE PROPERTY BOUNDARIES. ATTACH REQUIRED MAPS PER THE APPLICATION INSTRUCTIONS.

Parcel Address Parcel No. Section No. Block No. Lot No. Acreage

See BCP Application Supplement (p. 1)

1. Do the property boundaries correspond to tax map metes and bounds? **Refer to Attachment B & C** ☒ Yes ☐ No  
If no, please attach a metes and bounds description of the property.2. Is the required property map attached to the application? (application will not be processed without map) ☒ Yes ☐ No3. Is the property part of a designated En-zone pursuant to Tax Law § 21(b)(6)? **Refer to Figure 1 & 2** ☐ Yes ☒ NoFor more information please see Empire State Development's [website](#). **Refer to Attachment D**

If yes, identify area (name) \_\_\_\_\_

Percentage of property in En-zone (check one): ☒ 0-49% ☐ 50-99% ☐ 100%4. Is this application one of multiple applications for a large development project, where the development ☐ Yes ☒ No  
project spans more than 25 acres (see additional criteria in BCP application instructions)? If yes, identify name of  
properties in related BCP applications: \_\_\_\_\_

5. Property Description Narrative:

See BCP Application Supplement (p. 1)

6. List of Existing Easements (type here or attach information)

Easement HolderDescription

See BCP Application Supplement (p. 2)

7. List of Permits issued by the NYSDEC or USEPA Relating to the Proposed Site (type here or attach information)

TypeIssuing AgencyDescription

See BCP Application Supplement (p. 3)

If any changes to Section II are required prior to application approval, a new page, initialed by each requestor, must be submitted.

Initials of each Requestor:  \_\_\_\_\_



<b>Section III. Current Property Owner/Operator Information</b>			See BCP Application Supplement (p. 3)
OWNER'S NAME <b>Eldre Corporation</b>			
ADDRESS <b>1500 Jefferson Road</b>			
CITY/TOWN <b>Henrietta</b>		ZIP CODE <b>14623</b>	
PHONE <b>(585) 427-7280</b>	FAX <b>(866) 745-6211</b>	E-MAIL <b>herdle@busbar.com</b>	
OPERATOR'S NAME <b>Eldre Corporation</b>			
ADDRESS <b>1500 Jefferson Road</b>			
CITY/TOWN <b>Henrietta</b>		ZIP CODE <b>14623</b>	
PHONE <b>(585) 427-7280</b>	FAX <b>(866) 745-6211</b>	E-MAIL <b>herdle@busbar.com</b>	
<b>Section IV. Requestor Eligibility Information (Please refer to ECL § 27-1407)</b>			
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?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
2. Is the requestor subject to an existing order relating to contamination at the site?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
3. Is the requestor subject to an outstanding claim by the Spill Fund for this site?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
4. Has the requestor been determined to have violated any provision of ECL Article 27?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
5. Has the requestor previously been denied entry to the BCP?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
6. Has the requestor been found in a civil proceeding to have committed a negligent or intentionally tortious act involving contaminants?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
<b>Section V. Property Eligibility Information (Please refer to ECL § 27-1405)</b>			See BCP Application Supplement (p. 3)
1. Is the property, or was any portion of the property, listed on the National Priorities List?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
If yes, please provide relevant information as an attachment.			
2. Is the property, or was any portion of the property, listed on the NYS Registry of Inactive Hazardous Waste Disposal Sites?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
If yes, please provide: Order # _____			
5. Is the property subject to a state or federal enforcement action related to hazardous waste or petroleum?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
If yes, please provide explanation as an attachment.			
<b>Section VI. Project Description</b>			See BCP Application Supplement (p. 5)
What stage is the project starting at? <input checked="" type="checkbox"/> Investigation <input type="checkbox"/> Remediation			
Please attach a description of the project which includes the following components:			
<ul style="list-style-type: none"> <li>Purpose and scope of the project</li> <li>Estimated project schedule</li> </ul>			

## 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

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. Refer to Attachment E

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. LABORATORY REPORTS SHOULD BE REFERENCED AND COPIES INCLUDED.

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

\*Please describe: 2-Butanone

### 3. SUSPECTED CONTAMINANTS: INDICATE SUSPECTED CONTAMINANTS AND THE MEDIA WHICH MAY HAVE BEEN AFFECTED. PROVIDE BASIS FOR ANSWER AS AN ATTACHMENT.

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

\*Please describe:

### 4. INDICATE KNOWN OR SUSPECTED SOURCES OF CONTAMINANTS (CHECK ALL THAT APPLY). PROVIDE BASIS FOR ANSWER AS AN ATTACHMENT.

☐ Above Ground Pipeline or Tank ☒ Lagoons or Ponds ☐ Underground Pipeline or Tank ☒ Surface Spill or Discharge  
☐ Routine Industrial Operations ☐ Dumping or Burial of Wastes ☐ Septic tank/lateral field ☒ Adjacent Property  
☐ Drums or Storage Containers ☐ Seepage Pit or Dry Well ☐ Foundry Sand ☒ Electroplating  
☐ Coal Gas Manufacture ☐ Industrial Accident ☒ Unknown  
Other:

### 5. INDICATE PAST LAND USES (CHECK ALL THAT APPLY):

☐ Coal Gas Manufacturing ☒ Manufacturing ☐ Agricultural Co-op ☐ Dry Cleaner ☐ Salvage Yard ☐ Bulk Plant  
☐ Pipeline ☐ Service Station ☐ Landfill ☐ Tannery ☒ Electroplating ☐ Unknown  
Other: Metal working, painting.

### 6. PROVIDE A LIST OF PREVIOUS PROPERTY OWNERS AND OPERATORS WITH NAMES, LAST KNOWN ADDRESSES AND TELEPHONE NUMBERS AS AN ATTACHMENT. DESCRIBE REQUESTOR'S RELATIONSHIP, IF ANY, TO EACH PREVIOUS OWNER AND OPERATOR. IF NO RELATIONSHIP, PUT "NONE".

See BCP Application Supplement (p. 10)



**Section VIII. Contact List Information**

See BCP Application Supplement (p. 13)

Please attach, at a minimum, the names and addresses of the following:

1. The chief executive officer and planning 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. [Refer to Figure 1](#)
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. [Refer to Attachment G](#)

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

1. Current Use: ☐ Residential ☒ Commercial ☒ Industrial ☐ Vacant ☐ Recreational (check all that apply)  
Provide summary of business operations as an attachment.
2. Intended Use Post Remediation: ☐ Unrestricted ☐ Residential ☒ Commercial ☒ Industrial (check all that apply)  
Provide specifics as an attachment.
3. Do current historical and/or recent development patterns support the proposed use? (See #14 below re: discussion of area land uses) ☒ Yes ☐ No
4. Is the proposed use consistent with applicable zoning laws/maps? [Refer to Attachment H](#) ☒ Yes ☐ No
5. 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? ☒ Yes ☐ No
6. Are there any Environmental Justice Concerns? (See §27-1415(3)(p)). [Refer to Attachment I](#) ☐ Yes ☒ No
7. Are there any federal or state land use designations relating to this site? ☐ Yes ☒ No
8. Do the population growth patterns and projections support the proposed use? ☒ Yes ☐ No
9. Is the property accessible to existing infrastructure? ☒ Yes ☐ No
10. Are there important cultural resources, including federal or state historic or heritage sites or Native American religious sites within ½ mile? [Refer to Attachment J](#) ☐ Yes ☒ No
11. 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? [Refer to Attachment K](#) ☒ Yes ☐ No
12. Are there floodplains within ½ mile? [Refer to Attachment L](#) ☒ Yes ☐ No
13. Are there any institutional controls currently applicable to the property? ☐ Yes ☒ No
14. Describe the proximity to real property currently used for residential use, and to urban, commercial, industrial, agricultural, and recreational areas in an attachment.
15. Describe the potential vulnerability of groundwater to contamination that might migrate from the property, including proximity to wellhead protection and groundwater recharge areas in an attachment.
16. Describe the geography and geology of the site in an attachment.

## Section X. Statement of Certification and Signatures

(By requestor who is an individual)

If this application is approved, I acknowledge and agree to the general terms and conditions set forth in DER-32 *Brownfield Cleanup Program Applications and Agreements* and to execute a Brownfield Cleanup Agreement (BCA) within 60 days of the date of DEC's approval letter. I also agree that in the event of a conflict between the general terms and conditions of participation set forth in DER-32 and the terms contained in a site-specific BCA, the terms in the BCA shall control. 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 President (title) of Eldre Corporation (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. If this application is approved, I acknowledge and agree to the general terms and conditions set forth in DER-32 *Brownfield Cleanup Program Applications and Agreements* and to execute a Brownfield Cleanup Agreement (BCA) within 60 days of the date of DEC's approval letter. I also agree that in the event of a conflict between the general terms and conditions of participation set forth in DER-32 and the terms contained in a site-specific BCA, the terms in the BCA shall control. 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: 3/2/12 Signature: [Signature] Print Name: Harvey Erdle

### SUBMITTAL INFORMATION:

Three (3) complete copies are required.

- **Two (2)** copies, one paper copy with original signatures and one electronic copy in Portable Document Format (PDF) on a CD, 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)** paper 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.

### FOR DEPARTMENT USE ONLY

BCP SITE T&A CODE: \_\_\_\_\_ LEAD OFFICE: \_\_\_\_\_