

**PRR APPENDIX D**

NYSDEC PRR Institutional and Engineering Controls Certification Form



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



**Site Details**

**Box 1**

**Site No.**            **C932138**

**Site Name** **GM Components Holdings, LLC**

Site Address: 200 Upper Mountain Road    Zip Code: 14094

City/Town: Lockport

County: Niagara

Site Acreage: 128.3

Reporting Period: April 23, 2019 to April 22, 2024

YES    NO

1. Is the information above correct?

**X**    ☐

If NO, include handwritten above or on a separate sheet.

2. Has some or all of the site property been sold, subdivided, merged, or undergone a tax map amendment during this Reporting Period?

☐    **X**

3. Has there been any change of use at the site during this Reporting Period (see 6NYCRR 375-1.11(d))?

☐    **X**

4. Have any federal, state, and/or local permits (e.g., building, discharge) been issued for or at the property during this Reporting Period?

☐    **X**

**If you answered YES to questions 2 thru 4, include documentation or evidence that documentation has been previously submitted with this certification form.**

5. Is the site currently undergoing development?

☐    **X**

**Box 2**

YES    NO

6. Is the current site use consistent with the use(s) listed below?  
Commercial and Industrial

**X**    ☐

7. Are all ICs/ECs in place and functioning as designed?

**X**    ☐

**IF THE ANSWER TO EITHER QUESTION 6 OR 7 IS NO, sign and date below and  
DO NOT COMPLETE THE REST OF THIS FORM. Otherwise continue.**

**A Corrective Measures Work Plan must be submitted along with this form to address these issues.**

\_\_\_\_\_  
Signature of Owner, Remedial Party or Designated Representative

\_\_\_\_\_  
Date

**Box 2A**

YES NO

8. Has any new information revealed that assumptions made in the Qualitative Exposure Assessment regarding offsite contamination are no longer valid?

☐ YES ☒ NO

**If you answered YES to question 8, include documentation or evidence that documentation has been previously submitted with this certification form.**

9. Are the assumptions in the Qualitative Exposure Assessment still valid?  
(The Qualitative Exposure Assessment must be certified every five years)

☒ YES ☐ NO

**If you answered NO to question 9, the Periodic Review Report must include an updated Qualitative Exposure Assessment based on the new assumptions.**

**SITE NO. C932138****Box 3****Description of Institutional Controls**ParcelOwnerInstitutional Control**108.13-1-1**

GM Components Holdings, LLC

Ground Water Use Restriction  
Soil Management Plan  
Landuse Restriction  
Monitoring Plan  
Site Management Plan  
O&M Plan  
IC/EC Plan

An Environmental Easement was filed with the Niagara County Clerk's Office on November 2, 2016. This easement states that the Controlled Property may be used for commercial or industrial use as long as the following engineering controls are employed and the land use restrictions specified below are adhered to: (1) all Engineering Controls must be operated and maintained as specified in the Site Management Plan (SMP); (2) all Engineering Controls must be inspected at a frequency and in a manner defined in the SMP; (3) the use of groundwater underlying the property is prohibited without necessary water quality treatment as determined by the NYSDOH or the Niagara County Department of Health 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; (4) groundwater and other environmental or public health monitoring must be performed as defined in the SMP; (5) 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; (6) all future activities on the property that will disturb remaining contaminated material must be conducted in accordance with the SMP; (7) Monitoring to assess the performance and effectiveness of the remedy must be performed as defined in the SMP; (8) Operation, maintenance, monitoring, inspection, and reporting of any mechanical or physical components of the remedy shall be performed as defined in the SMP; (9) 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.

**Box 4****Description of Engineering Controls**ParcelEngineering Control**108.13-1-1**

Vapor Mitigation  
Cover System

(1) A site cover currently exists and will be maintained to allow for commercial/industrial use of the site. Any site redevelopment will maintain the existing site cover, which consists of buildings, pavement, sidewalks and soil where the upper one foot of exposed surface soil meets the applicable soil cleanup objectives (SCOs) for commercial or industrial use.

(2) Sub-slab depressurization systems exist in Buildings 7, 7A, 8, and 10. The systems in Buildings 7, 7A, and 8 will continue to operate to prevent the migration of sub-slab soil vapor from soil and groundwater into these

buildings. Conversion of Building 10 SSD system to passive venting is recommended. Triannual (3 times per year) indoor air (IA) sampling in Building 10 is being conducted to demonstrate IA results are below NYSDOH mitigation guidance criteria.

**Box 5****Periodic Review Report (PRR) Certification Statements**

1. I certify by checking "YES" below that:

- a) the Periodic Review report and all attachments were prepared under the direction of, and reviewed by, the party making the certification;
- b) to the best of my knowledge and belief, the work and conclusions described in this certification are in accordance with the requirements of the site remedial program, and generally accepted engineering practices; and the information presented is accurate and complete.

YES NO

X ☐

2. If this site has an IC/EC Plan (or equivalent as required in the Decision Document), for each Institutional or Engineering control listed in Boxes 3 and/or 4, I certify by checking "YES" below that all of the following statements are true:

- (a) the Institutional Control and/or Engineering Control(s) employed at this site is unchanged since the date that the Control was put in-place, or was last approved by the Department;
- (b) nothing has occurred that would impair the ability of such Control, to protect public health and the environment;
- (c) access to the site will continue to be provided to the Department, to evaluate the remedy, including access to evaluate the continued maintenance of this Control;
- (d) nothing has occurred that would constitute a violation or failure to comply with the Site Management Plan for this Control; and
- (e) if a financial assurance mechanism is required by the oversight document for the site, the mechanism remains valid and sufficient for its intended purpose established in the document.

YES NO

X ☐

**IF THE ANSWER TO QUESTION 2 IS NO, sign and date below and  
DO NOT COMPLETE THE REST OF THIS FORM. Otherwise continue.**

**A Corrective Measures Work Plan must be submitted along with this form to address these issues.**

\_\_\_\_\_  
Signature of Owner, Remedial Party or Designated Representative

\_\_\_\_\_  
Date

IC CERTIFICATIONS  
SITE NO. 932113

Box 6


**SITE OWNER OR DESIGNATED REPRESENTATIVE SIGNATURE**

I certify that all information and statements in Boxes 1,2, and 3 are true. I understand that a false statement made herein is punishable as a Class "A" misdemeanor, pursuant to Section 210.45 of the Penal Law.

I Merrick Alexander at 500 Wentworth St W, Oshawa ON CA L1J 0C5,  
print name print business address

am certifying as Remediation Project Manager (Owner or Remedial Party)

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

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

June 20, 2024  
Date

IC/EC CERTIFICATIONS

Box 7

Signature

I certify that all information in Boxes 4 and 5 are true. I understand that a false statement made herein is punishable as a Class "A" misdemeanor, pursuant to Section 210.45 of the Penal Law.

Edmund Quinn Lewis

200 Town Centre Drive, Rochester, NY 14623

print name

print business address

am certifying as a Qualified Environmental Professional for the GM Components Holdings, LLC

(Owner or Remedial Party)



*Edmund Quinn Lewis*

24 JUNE 2024

Signature of , for the Owner or Remedial Party,  
Rendering Certification

Stamp  
(Required for PE)

Date