



**NEW YORK STATE
DEPARTMENT OF ENVIRONMENTAL CONSERVATION**



BROWNFIELD CLEANUP PROGRAM (BCP)

ECL ARTICLE 27 / TITLE 14

DEPARTMENT USE ONLY
BCP SITE #: _____

07/07

Section I. Requestor Information			
NAME Globe Metallurgical, Inc. and Solsil, Inc. (Co-Applicants)			
ADDRESS 1595 Sparling Road, PO Box 157			
CITY/TOWN Beverly, Ohio		ZIP CODE 45715	
PHONE 740-984-8608	FAX 740-984-8684	E-MAIL	
NAME OF REQUESTOR'S REPRESENTATIVE Mr. Jeff Bradley c/o Mr. Matthew Greene			
ADDRESS 1595 Sparling Road, PO Box 157			
CITY/TOWN Beverly, Ohio		ZIP CODE 45715	
PHONE 740-984-8608	FAX 740-984-8684	E-MAIL mgreene@globemetallurgical.com	
NAME OF REQUESTOR'S CONSULTANT Benchmark Environmental Engineering & Science, PLLC			
ADDRESS 726 Exchange Street, Suite 624			
CITY/TOWN Buffalo		ZIP CODE 14210	
PHONE 716-856-0599	FAX 716-856-0583	E-MAIL pwerthman@benchmarkees.com	
NAME OF REQUESTOR'S ATTORNEY Mr. Robert Murray, Harris Beach, PLLC			
ADDRESS 726 Exchange Street, Suite 1000			
CITY/TOWN Buffalo, New York		ZIP CODE 14210	
PHONE 716-200-5050	FAX 716-200-5224	E-MAIL bmurray@harrisbeach.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):			
<input type="checkbox"/> Previous Owner <input checked="" type="checkbox"/> Current Owner <input type="checkbox"/> Potential /Future Purchaser <input type="checkbox"/> Other _____			
If requestor is not the site owner, requestor will have access to the property throughout the BCP project.			<input 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: 3807 Highland Avenue Site

ADDRESS/LOCATION 3807 Highland Avenue CITY/TOWN Niagara Falls ZIP CODE 14305

MUNICIPALITY(IF MORE THAN ONE, LIST ALL): City of Niagara Falls

COUNTY Niagara SITE SIZE (ACRES) 25.0

LATITUDE (degrees/minutes/seconds) 43 ° 7 ' 19.89 " LONGITUDE (degrees/minutes/seconds) 79 ° 2 ' 28.1 "

HORIZONTAL COLLECTION METHOD: SURVEY GPS MAP HORIZONTAL REFERENCE DATUM: NAD 27

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

Several Parcels (please refer to previous BCP Application submitted by Globe and Solsil)

1. Do the property boundaries correspond to tax map metes and bounds? 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 No
3. Is the property part of a designated En-zone pursuant to Tax Law § 21(b)(6)? Yes No

For more information go to: http://www.nylovesbiz.com/BrownField_Redevelopment/default.asp.

If yes, identify area (name) Census Tract #020200

50% 100% of the site is in the En-zone (check one)

PROPERTY DESCRIPTION NARRATIVE:

See Attachment 01 of previously submitted Globe and Solsil BCP applications

List of Existing Easements (type here or attach information)

<u>Easement Holder</u>	<u>Description</u>
Typical utility easements (otherwise unknown)	

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

<u>Type</u>	<u>Issuing Agency</u>	<u>Description</u>
PBS #9-120316	NYSDEC	Petroleum Bulk Storage Permit
Title V Air Permit	NYSDEC	

Initials of each Requestor: JEB

Section III. Current Site Owner/Operator Information

OWNER'S NAME (if different from requestor) (Same as requestor)

ADDRESS

CITY/TOWN

ZIP CODE

PHONE

FAX

E-MAIL

OPERATOR'S NAME (if different from requestor or owner) (Same as requestor)

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?
If yes, please provide: Site # _____ Class # _____ Yes No
3. Is the property subject to a permit under ECL Article 27, Title 9, other than an Interim Status facility?
If yes, please provide: Permit type: _____ EPA ID Number: _____
Date permit issued: _____ Permit expiration date: _____ Yes No
4. Is the property subject to a cleanup order under navigation law Article 12 or ECL Article 17 Title 10?
If yes, please provide: Order # _____ Yes No
5. Is the property subject to a state or federal enforcement action related to hazardous waste or petroleum?
If yes, please provide explanation as an attachment. Yes No

Section VI. Project Description

What stage is the project starting at? investigation remediation

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

- Purpose and scope of the project
- 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

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					
Other VOCs					
SVOCs	X			x	
Metals	X			x	
Pesticides					
PCBs	X				
Other*					

*Please describe: _____

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		x	x
Chlorinated Solvents	x	x		x	x
Other VOCs					
SVOCs	X	X		x	
Metals	X	X		x	
Pesticides					
PCBs	X			x	
Other*					

*Please describe: _____

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 checked="" 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 type="checkbox"/> Bulk Plant |
| <input type="checkbox"/> Pipeline | <input type="checkbox"/> Service Station | <input checked="" 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").

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").

Section VIII. Contact List Information

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

1. The chief executive officer and planning board/dept. chair 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 (check all that apply)

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 type="checkbox"/>	<input checked="" 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?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10. Are there floodplains within ½ mile?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11. Are there any institutional controls currently applicable to the property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
12. Describe on attachment the proximity to real property currently used for residential use, and to urban, commercial, industrial, agricultural, and recreational areas.		
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.		
14. Describe on attachment the geography and geology of the site.		

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 Authorized Representative (title) of SOLSIC, INC. (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: 4/30/09 Signature: [Handwritten Signature] Print Name: Jeff Bradley

SUBMITTAL INFORMATION:

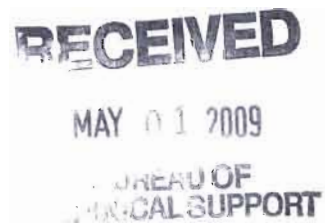
Three (3) complete copies are required.

- **Two (2)** copies, one paper copy with original signatures and one electronic copy in Portable Document Format (PDF) on a CD 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)** 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: <http://www.dec.ny.gov/about/776.html>

FOR DEPARTMENT USE ONLY

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



Statement of Certification and Signatures

(By requestor who is an individual)

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Date: _____ Signature: _____ Print Name: _____

(By an requestor other than an individual)

I hereby affirm that I am ^{Authorized} Representative (title) of GMI Inc. (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: 4/30/09 Signature: _____ Print Name: Jeff Bradley

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