



CITY OF LACKAWANNA
DEPARTMENT OF DEVELOPMENT

714 Ridge Road – Room 309
Lackawanna, NY 14218
Tel: (716) 827-6471 Fax: (716) 827-1866

E-FILED



July 17, 2013

David Szymanski, Project Manager
NYSDEC
270 Michigan Ave.
Buffalo, NY 14203-2915

Re: Site Management Periodic Report
Six Vacant Lots on Ridge Rd.
Site # E915188
113-135 Ridge Rd.
Lackawanna, NY 14218

David:

Enclosed is the required report.

Ralph D. Miranda
Director of Development

RECEIVED
NYSDEC - REGION 9

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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. E915188		
Site Name Six Vacant Lots on Ridge Road		
Site Address: 113-135 Ridge Road Zip Code: 14218		
City/Town: Lackawanna		
County: Erie		
Site Acreage: 0.8		
Reporting Period: July 19, 2012 to July 19, 2013		
		YES NO
1. Is the information above correct?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. Has there been any change of use at the site during this Reporting Period (see 6NYCRR 375-1.11(d))?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. Have any federal, state, and/or local permits (e.g., building, discharge) been issued for or at the property during this Reporting Period?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
		Box 2
		YES NO
6. Is the current site use consistent with the use(s) listed below? Commercial and Industrial	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. Are all ICs/ECs in place and functioning as designed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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

Description of Institutional Controls

<u>Parcel</u>	<u>Owner</u>	<u>Institutional Control</u>
141.43-1-10	City of Lackawanna	Ground Water Use Restriction Soil Management Plan Landuse Restriction O&M Plan
Institutional Controls:		
1) Easement - Filed 11/02/2007 - "May be used for Commercial use only..."		
2) Operation, Monitoring and Maintenance Plan (Appendix H of the Site Investigation/Remedial Alternatives Report (May 2006)+ Addendum (April 11, 2008). - Soil Cover System of (minimum) one foot clean soil. - Groundwater Use prohibition		
3) Soil/ Fill Management Protocols (Appendix G of the Site Investigation/Remedial Alternatives Report (May 2006)+ Addendum (April 11, 2008).		
141.43-1-11	City of Lackawanna	O&M Plan Ground Water Use Restriction Soil Management Plan Landuse Restriction
Institutional Controls:		
1) Easement - Filed 11/02/2007 - "May be used for Commercial use only..."		
2) Operation, Monitoring and Maintenance Plan (Appendix H of the Site Investigation/Remedial Alternatives Report (May 2006)+ Addendum (April 11, 2008). - Soil Cover System of (minimum) one foot clean soil. - Groundwater Use prohibition		
3) Soil/ Fill Management Protocols (Appendix G of the Site Investigation/Remedial Alternatives Report (May 2006)+ Addendum (April 11, 2008).		
141.43-1-6	City of Lackawanna	Ground Water Use Restriction Soil Management Plan Landuse Restriction O&M Plan
Institutional Controls:		
1) Easement - Filed 11/02/2007 - "May be used for Commercial use only..."		
2) Operation, Monitoring and Maintenance Plan (Appendix H of the Site Investigation/Remedial Alternatives Report (May 2006)+ Addendum (April 11, 2008). - Soil Cover System of (minimum) one foot clean soil. - Groundwater Use prohibition		
3) Soil/ Fill Management Protocols (Appendix G of the Site Investigation/Remedial Alternatives Report (May 2006)+ Addendum (April 11, 2008).		
141.43-1-7	City of Lackawanna	O&M Plan Ground Water Use Restriction Soil Management Plan Landuse Restriction
Institutional Controls:		
1) Easement - Filed 11/02/2007 - "May be used for Commercial use only..."		
2) Operation, Monitoring and Maintenance Plan (Appendix H of the Site Investigation/Remedial Alternatives Report (May 2006)+ Addendum (April 11, 2008). - Soil Cover System of (minimum) one foot clean soil. - Groundwater Use prohibition		
3) Soil/ Fill Management Protocols (Appendix G of the Site Investigation/Remedial Alternatives		

Report (May 2006)+ Addendum (April 11, 2008).

141.43-1-8

City of Lackawanna

O&M Plan
Ground Water Use Restriction
Soil Management Plan
Landuse Restriction

Institutional Controls:

- 1) Easement - Filed 11/02/2007
- "May be used for Commercial use only..."
- 2) Operation, Monitoring and Maintenance Plan (Appendix H of the Site Investigation/Remedial Alternatives Report (May 2006)+ Addendum (April 11, 2008).
- Soil Cover System of (minimum) one foot clean soil.
- Groundwater Use prohibition
- 3) Soil/ Fill Management Protocols (Appendix G of the Site Investigation/Remedial Alternatives Report (May 2006)+ Addendum (April 11, 2008).

141.43-1-9

City of Lackawanna

O&M Plan
Ground Water Use Restriction
Soil Management Plan
Landuse Restriction

Institutional Controls:

- 1) Easement - Filed 11/02/2007
- "May be used for Commercial use only..."
- 2) Operation, Monitoring and Maintenance Plan (Appendix H of the Site Investigation/Remedial Alternatives Report (May 2006)+ Addendum (April 11, 2008).
- Soil Cover System of (minimum) one foot clean soil.
- Groundwater Use prohibition
- 3) Soil/ Fill Management Protocols (Appendix G of the Site Investigation/Remedial Alternatives Report (May 2006)+ Addendum (April 11, 2008).

Box 4

Description of Engineering Controls

<u>Parcel</u>	<u>Engineering Control</u>
141.43-1-10	Cover System
141.43-1-11	Cover System
141.43-1-6	Cover System
141.43-1-7	Cover System
141.43-1-8	Cover System
141.43-1-9	Cover System

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

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

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. E915188

Box 6

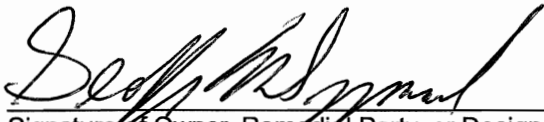
SITE OWNER OR DESIGNATED REPRESENTATIVE SIGNATURE

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 GEOFFREY M. SZYMANSKI at 714 RIDGE RD.
print name print business address

am certifying as OWNER (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

07/30/13
Date

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REL _____ UNREL _____

N/A HAS NOT BEEN IMPROVED

IC/EC CERTIFICATIONS

Box 7

Qualified Environmental Professional 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.

I _____ at _____,
print name print business address

am certifying as a Qualified Environmental Professional for the _____
(Owner or Remedial Party)

Signature of Qualified Environmental Professional, for
the Owner or Remedial Party, Rendering Certification

Stamp
(Required for PE)

Date