

OFFICE OF THE MAYOR CITY OF LACKAWANNA



Hon. Geoffrey M. Szymanski ~ Mayor

July 1st, 2016

New York State Department of Environmental Conservation 270 Michigan Avenue Buffalo, New York 14203-2915

Attn: David Szymanski

Project Manager

Re: Site Management Periodic Review Report and

IC/EC Certification Submittal5
Six Vacant Lots on Ridge Road

Site No. E915188

City of Lackawanna, New York

Dear Mr. Szymanski,

In accordance with correspondence received from your Department dated June 27, 2016, attached please find Site Management Periodic Review Report Notice Institutional, and Engineering Controls Certification Form.

If you have any questions please direct them to the City's Consultant Engineer, Kenneth J. Strell, Sr. at 716-880-7475.

Sincerely Yours,

Geoffrey M. Szymanski

Mayor



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



Site	e No. E915188	Site Details	Box 1	
Site	e Name Six Vacant Lots on Ridge Roa	d		
City Co	e Address: 113-135 Ridge Road Z v/Town: Lackawanna unty: Erie e Acreage: 0.8	ip Code: 14218		
Re	porting Period: July 19, 2015 to July 19,	2016		
			YES	NO
1.	Is the information above correct?		×	
	If NO, include handwritten above or on a	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))?			Ď.
4.	Have any federal, state, and/or local per for or at the property during this Reporting		sued	X
	If you answered YES to questions 2 t that documentation has been previous			*
5.	Is the site currently undergoing developed	ment?		X.
			Box 2	
			YES	NO
6.	Is the current site use consistent with the Commercial and Industrial	e use(s) listed below?	X	
7.	Are all ICs/ECs in place and functioning	as designed?	×	
		STION 6 OR 7 IS NO, sign and date bel ST OF THIS FORM. Otherwise continu		
5	corrective Measures Work Plan must be sometime of winer, Remedial Party or Design		ress these issues.	

SITE NO. E915188 Box 3

Description of Institutional Controls

<u>Parcel</u>

141.43-1-10

<u>Owner</u>

City of Lackawanna

Institutional Control

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

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141.43-1-6

City of Lackawanna

Ground Water Use Restriction

Soil Management Plan Landuse Restriction

O&M Plan

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141.43-1-7

City of Lackawanna

O&M Plan

Ground Water Use Restriction Soil Management Plan Landuse Restriction

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141.43-1-8

City of Lackawanna

O&M Plan

Ground Water Use Restriction Soil Management Plan

Landuse Restriction

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141.43-1-9

City of Lackawanna

O&M Plan

Ground Water Use Restriction

Soil Management Plan Landuse Restriction

Institutional Controls:

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Description of Engineering Controls Box 4				
<u>Parcel</u>	Engineering Control			
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:
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- 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 compete.

YES NO

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- 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

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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 paust be submitted along with this form to address these issues.

Signature of Owner, Remedial Party or Designated Representative

Dato

IC CERTIFICATIONS SITE NO. E915188

SITE NO. E915188

NA HAS NOT DEED 1 WHO DES

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.

print name print busidess address

am certifying as _______(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

NA HAS WOT	BEEN APPROKED BOX 7				
Qualified Environmental Profe	ssional 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 b	usiness 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 Date (Required for PE)				

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Enclosure 3 Periodic Review Report (PRR) General Guidance

- I. Executive Summary: (1/2-page or less)
 - A. Provide a brief summary of site, nature and extent of contamination, and remedial history.
 - B. Effectiveness of the Remedial Program Provide overall conclusions regarding;
 - 1. progress made during the reporting period toward meeting the remedial objectives for the site
 - 2. the ultimate ability of the remedial program to achieve the remedial objectives for the site.
 - C. Compliance
 - 1. Identify any areas of non-compliance regarding the major elements of the Site Management Plan (SMP, i.e., the Institutional/Engineering Control (IC/EC) Plan, the Monitoring Plan, and the Operation & Maintenance (O&M) Plan).
 - 2. Propose steps to be taken and a schedule to correct any areas of non-compliance.
 - D. Recommendations
 - 1. recommend whether any changes to the SMP are needed
 - 2. recommend any changes to the frequency for submittal of PRRs (increase, decrease)
 - 3. recommend whether the requirements for discontinuing site management have been met.
- II. Site Overview (one page or less)
 - A. Describe the site location, boundaries (figure), significant features, surrounding area, and the nature and extent of contamination prior to site remediation.
 - B. Describe the chronology of the main features of the remedial program for the site, the components of the selected remedy, cleanup goals, site closure criteria, and any significant changes to the selected remedy that have been made since remedy selection.
- III. Evaluate Remedy Performance, Effectiveness, and Protectiveness

Using tables, graphs, charts and bulleted text to the extent practicable, describe the effectiveness of the remedy in achieving the remedial goals for the site. Base findings, recommendations, and conclusions on objective data. Evaluations and should be presented simply and concisely.

- IV. IC/EC Plan Compliance Report (if applicable)
 - A. IC/EC Requirements and Compliance
 - 1. Describe each control, its objective, and how performance of the control is evaluated.
 - 2. Summarize the status of each goal (whether it is fully in place and its effectiveness).
 - 3. Corrective Measures: describe steps proposed to address any deficiencies in ICECs.
 - 4. Conclusions and recommendations for changes.
 - B. IC/EC Certification
 - 1. The certification must be complete (even if there are IC/EC deficiencies), and certified by the appropriate party as set forth in a Department-approved certification form(s).
- V. Monitoring Plan Compliance Report (if applicable)
 - A. Components of the Monitoring Plan (tabular presentations preferred) Describe the requirements of the monitoring plan by media (i.e., soil, groundwater, sediment, etc.) and by any remedial technologies being used at the site.
 - B. Summary of Monitoring Completed During Reporting Period Describe the monitoring tasks actually completed during this PRR reporting period. Tables and/or figures should be used to show all data.
 - C. Comparisons with Remedial Objectives Compare the results of all monitoring with the remedial objectives for the site. Include trend analyses where possible.
 - D. Monitoring Deficiencies Describe any ways in which monitoring did not fully comply with the monitoring plan.
 - E. Conclusions and Recommendations for Changes Provide overall conclusions regarding the monitoring completed and the resulting evaluations regarding remedial effectiveness.
- VI. Operation & Maintenance (O&M) Plan Compliance Report (if applicable)
 - A. Components of O&M Plan Describe the requirements of the O&M plan including required activities, frequencies, recordkeeping, etc.
 - B. Summary of O&M Completed During Reporting Period Describe the O&M tasks actually completed during this PRR reporting period.
 - C. Evaluation of Remedial Systems Based upon the results of the O&M activities completed, evaluated