



**TIER CLASSIFICATION, TIER II EXTENSION &
TIER II TRANSFER TRANSMITTAL FORM**

Pursuant to 310 CMR 40.0510 and 40.0560 (Subpart E)

REC-150/2011/6/01

SCANNED
Release Tracking Number

2 - 10067

A. DISPOSAL SITE LOCATION:

Disposal Site Name: Former Ernst & Taveras Property

Street: 38 Lancaster County Road Location Aid: _____

City/Town: Harvard ZIP Code: 01451-0000

Related Release Tracking Numbers That This Submittal Will Address: 2-13968

B. THIS FORM IS BEING USED TO: (check all that apply)

- ☐ Submit a new or revised Tier Classification Submittal for a Tier I Site, including a Numerical Ranking Scoresheet (complete Sections A, B, C, I, J, K and L).
- ☐ Submit a new or revised Tier Classification Submittal for a Tier II Site, including a Numerical Ranking Scoresheet (complete Sections A, B, C, F, G, I, J, K and L).
- ☒ Submit a Notice that an additional Release Tracking Number(s) is (are) being linked to this Tier Classified Site and rescoring is not required at this time (complete Sections A, B, J, K and L). If this submittal is for a Tier I Site, you must also submit a Minor Permit Modification Transmittal Form (BWSC-109).

List Additional Release Tracking Number(s): 2-13968

- ☐ Submit a Phase I Completion Statement supporting a Tier Classification Submittal (complete Sections A, B, I, J, K and L).
- ☐ Submit a Tier II Extension Submittal for Response Actions at a Tier II Site (complete Sections A, B, D, F, G, I, J, K and L).
- ☐ Submit a Tier II Extension Submittal for Response Actions taken after expiration of a Waiver, pursuant to 310 CMR 40.0630(4) (complete Sections A, B, D, F, J, K and L, and also complete Sections G and I or Section H).*
- ☐ Submit a Tier II Transfer Submittal for a change in person(s) undertaking Response Actions at a Tier II Site (complete Sections A, B, E, F, G, I, J, K, L, M, N and O).
- ☐ Submit a Tier II Transfer Submittal for a change in person(s) undertaking Response Actions at a Waiver Site, pursuant to 310 CMR 40.0630(6) (complete Sections A, B, E, F, J, K, L, M, N and O, and also complete Sections G and I or Section H).*

You must attach all supporting documentation required for each use of form indicated, including copies of any Legal Notices and Notices to Public Officials required by 310 CMR 40.1400.

*NOTE: The Waiver expires on the effective date of this submittal and all further Response Actions must be taken as a Tier II Site.

C. TIER CLASSIFICATION SUBMITTAL:

Numerical Ranking Score for Disposal Site: (from Numerical Ranking Scoresheet) _____

Proposed Tier Classification of Disposal Site: (check one) ☐ Tier IA ☐ Tier IB ☐ Tier IC ☐ Tier II

Check which, if any, of the Tier I inclusionary criteria are met by the Disposal Site, pursuant to 310 CMR 40.0520:

- ☐ Groundwater is located within an Interim Wellhead Protection Area or a Zone II, and there is evidence of groundwater contamination by an Oil or Hazardous Material at the time of Tier Classification at concentrations equal to or exceeding the applicable RCGW-1 Reportable Concentration set forth in 310 CMR 40.0360.
- ☐ An Imminent Hazard is present at the time of Tier Classification.
- ☐ Check here if this Tier Classification revises a previous submittal for this Disposal Site. You must include a revised Numerical Ranking Scoresheet with this submittal. If a Tier I Permit has been issued, you may also need to submit a Major Permit Modification Application (BWSC 10).

If incorporating additional Release(s) into the Disposal Site, list Release Tracking Number(s): _____

D. TIER II EXTENSION SUBMITTAL REQUIREMENTS:

State the expiration date of the Tier II Classification or Waiver for the Disposal Site, whichever is applicable: _____

Attach a statement summarizing why a Permanent or Temporary Solution has not been achieved at the Disposal Site.
A Tier II Extension is effective for a period of one year beyond the current expiration date of the Tier II Classification or Waiver.

E. TIER II TRANSFER SUBMITTAL REQUIREMENTS:

State the proposed effective date of the change in person(s) undertaking Response Actions at the Disposal Site: _____

Attach a statement summarizing the reasons for the proposed change in person(s) undertaking the Response Actions.
All Response Actions must be completed by the deadline applicable to the person who first filed either a Tier Classification Submittal for the Disposal Site or received a Waiver of Approvals.



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F. DISPOSAL SITE COMPLIANCE HISTORY SUMMARY:

- > If providing either a Tier Classification Submittal for a Tier II Site or a Tier II Extension Submittal for a Waiver Site, the person named in Section J must provide a Compliance History.
- > If providing a Tier II Extension Submittal for a Tier II Site, the person named in Section J must update their Compliance History since the effective date of the Tier II Classification.
- > If providing a Tier II Transfer Submittal for a Tier II or Waiver Site, the person named in Section M must provide a Compliance History.

Compliance History for (provide only one name per History): _____

☐ Check here if there has been no change to the Compliance History of the person named above (Extension Submittal for a Tier II Site ONLY).

List all permits or licenses that have been issued by the Department that are relevant to this Disposal Site:

PROGRAM:	PERMIT NUMBER:	PERMIT CATEGORY:	FACILITY ID:
Air Quality	_____	_____	_____
Hazardous Waste (M.G.L. c. 21C)	_____	_____	_____
Solid Waste	_____	_____	_____
Industrial Wastewater Management	_____	_____	_____
Water Supply	_____	_____	_____
Water Pollution Control/Surface Water	_____	_____	_____
Water Pollution Control/Groundwater	_____	_____	_____
Water Pollution Control/Sewer Connection	_____	_____	_____
Wetland & Waterways	_____	_____	_____

List all other Federal, state or local permits, licenses, certifications, registrations, variances, or approvals that are relevant to this Disposal Site:

ISSUING AUTHORITY OR PROGRAM, OR DOCUMENTATION TYPE:	IDENTIFICATION NUMBER:	DATE ISSUED:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

If needed, attach to this Transmittal Form a statement further describing the Compliance History of this Disposal Site. This statement must describe the compliance history of the person named above with the following:

- (1) DEP regulations; and
- (2) other laws for the protection of health, safety, public welfare and the environment administered or enforced by any other government agency.

Such a statement should identify information such as:

- (1) actions relevant to the Disposal Site taken by the Department to enforce its requirements including, but not limited to, a Notice of Noncompliance (NON), Notice of Intent to Assess Civil Administrative Penalty (PAN), Notice of Intent to Take Response Action (NORA), and an administrative enforcement order;
- (2) administrative consent orders;
- (3) judicial consent judgements;
- (4) similar administrative actions taken by other Federal, state or local agencies;
- (5) civil or criminal actions relevant to the Disposal Site brought on behalf of the DEP or other Federal, state, or local agencies; and
- (6) any additional relevant information.

For each action identified, provide the following information:

- (1) name of the issuing authority, type of action, identification number and date issued;
- (2) description of noncompliance cited;
- (3) current status of the matter; and
- (4) final disposition, if any.

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**TIER CLASSIFICATION, TIER II EXTENSION &
TIER II TRANSFER TRANSMITTAL FORM**

Pursuant to 310 CMR 40.0510 and 40.0560 (Subpart E)

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G. CERTIFICATION OF ABILITY AND WILLINGNESS:

- > If providing either a Tier II Classification Submittal or a Tier II Extension Submittal, the person who signs this certification **MUST** be the person named in Section J, or that person's agent.
- > If providing a Tier II Transfer Submittal, the person who signs this certification **MUST** be the person named in Section M, or that person's agent.

I attest under the pains and penalties of perjury that (i) I/the person(s) or entity(ies) on whose behalf this submittal is made has/have personally examined and am/is familiar with the requirements of M.G.L. c. 21E and 310 CMR 40.0000; (ii) based upon my inquiry of the/those Licensed Site Professional(s) employed or engaged to render Professional Services for the disposal site which is the subject of this Transmittal Form and of the person(s) or entity(ies) on whose behalf this submittal is made, and my/that person's(s') or entity's(ies') understanding as to the estimated costs of necessary response actions, that/those person(s) or entity(ies) has/have the technical, financial and legal ability to proceed with response actions for such site in accordance with M.G.L. c. 21E, 310 CMR 40.0000 and other applicable requirements; and (iii) that I am fully authorized to make this attestation on behalf of the person(s) or entity(ies) legally responsible for this submittal. I/the person(s) or entity(ies) on whose behalf this submittal is made is aware of the requirements in 310 CMR 40.0172 for notifying the Department in the event that I/the person(s) or entity(ies) on whose behalf this submittal is made learn(s) that it/they is/are unable to proceed with the necessary response actions.

By: _____ Title: _____
(signature)

For: _____ Date: _____
(print name of person or entity recorded in Section J or M, as appropriate)

If you are submitting either a Tier II Extension Submittal for a Waiver Site or a Tier II Transfer Submittal for a Waiver Site, you may choose to sign the alternative Ability and Willingness Certification found in Section H in place of providing the certification in Section G and the LSP Opinion in Section I.

H. ALTERNATIVE CERTIFICATION OF ABILITY AND WILLINGNESS:

- > If providing a Tier II Extension Submittal for a Waiver Site, the person who signs this certification **MUST** be the person named in Section J, or that person's agent
- > If providing a Tier II Transfer Submittal for a Waiver Site, the person who signs this certification **MUST** be the person named in Section M, or that person's agent.

I attest under the pains and penalties of perjury that (i) I/the person(s) or entity(ies) on whose behalf this submittal is made has/have personally examined and am/is familiar with the requirements of M.G.L. c. 21E and 310 CMR 40.0000; (ii) based upon my inquiry of the Consultant-of-Record for the disposal site which is the subject of this Transmittal Form and of the person(s) or entity(ies) on whose behalf this submittal is made, and my/that person's(s') or entity's(ies') understanding as to the estimated costs of necessary response actions, that/those person(s) or entity(ies) has/have the technical, financial and legal ability to proceed with response actions for such site in accordance with M.G.L. c. 21E, 310 CMR 40.0000 and other applicable requirements; and (iii) that I am fully authorized to make this attestation on behalf of the person(s) or entity(ies) legally responsible for this submittal. I/the person(s) or entity(ies) on whose behalf this submittal is made is aware of the requirements in 310 CMR 40.0172 for notifying the Department in the event that I/the person(s) or entity(ies) on whose behalf this submittal is made learn(s) that it/they is/are unable to proceed with the necessary response actions.

By: _____ Title: _____
(signature)

For: _____ Date: NOV - 1 2007
(print name of person or entity recorded in Section J or M, as appropriate)

I. LSP OPINION:

I attest under the pains and penalties of perjury that I have personally examined and am familiar with this transmittal form, including any and all documents accompanying this submittal. In my professional opinion and judgment based upon application of (i) the standard of care in 309 CMR 4.02(1), (ii) the applicable provisions of 309 CMR 4.02(2) and (3), and (iii) the provisions of 309 CMR 4.03(5), to the best of my knowledge, information and belief,

> if Section B of this form indicates that a Tier I or Tier II Classification Submittal which relies upon a previously submitted Phase I Completion Statement is being submitted, this Tier Classification Submittal has been developed in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000;

> if Section B of this form indicates that a Phase I Completion Statement or a Tier I or Tier II Classification Submittal which does not rely upon a previously submitted Phase I Completion Statement is being submitted, the response action(s) that is (are) the subject of this submittal (i) has (have) been developed and implemented in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, (ii) is (are) appropriate and reasonable to accomplish the purposes of such response action(s) as set forth in the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, and (iii) complies(y) with the identified provisions of all orders, permits, and approvals identified in this submittal;

SECTION I IS CONTINUED ON THE NEXT PAGE



**TIER CLASSIFICATION, TIER II EXTENSION &
TIER II TRANSFER TRANSMITTAL FORM**

Pursuant to 310 CMR 40.0510 and 40.0560 (Subpart E)

Release Tracking Number

2 - 10067

I. LSP OPINION: (continued)

> If Section B of this form indicates that a Tier II Extension Submittal or a Tier II Transfer Submittal is being submitted, the response action(s) that is (are) the subject of this submittal (i) is (are) being implemented in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, (ii) is (are) appropriate and reasonable to accomplish the purposes of such response action(s) as set forth in the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, and (iii) complies(y) with the identified provisions of all orders, permits, and approvals identified in this submittal.

I am aware that significant penalties may result, including, but not limited to, possible fines and imprisonment, if I submit information which I know to be false, inaccurate or materially incomplete.

☐ Check here if the Response Action(s) on which this opinion is based, if any, are (were) subject to any order(s), permit(s) and/or approval(s) issued by DEP or EPA. If the box is checked, you MUST attach a statement identifying the applicable provisions thereof.

LSP Name: _____ LSP #: _____ Stamp: _____

Telephone: _____ Ext.: _____

FAX: (optional) _____

Signature: _____

Date: _____

J. PERSON MAKING SUBMITTAL: (For Transfer Submittals describe person currently undertaking response actions, not transferee)

Name of Organization: Domestic Bank

Name of Contact: Nathaniel Baker Title: President

Street: 815 Reservoir Avenue

City/Town: Cranston State: RI ZIP Code: 02910-0000

Telephone: 401-943-1600 Ext.: _____ FAX: (optional) 401-943-6899

K. RELATIONSHIP TO DISPOSAL SITE OF PERSON MAKING SUBMITTAL: (check one)

☐ RP or PRP Specify: ☐ Owner ☐ Operator ☐ Generator ☐ Transporter Other RP or PRP: _____

☒ Fiduciary, Secured Lender or Municipality with Exempt Status (as defined by M.G.L. c. 21E, s. 2)

☐ Agency or Public Utility on a Right of Way (as defined by M.G.L. c. 21E, s. 5(j))

☐ Any Other Person Making Submittal Specify Relationship: _____

L. CERTIFICATION OF PERSON MAKING SUBMITTAL:

I, Nathaniel Baker, attest under the pains and penalties of perjury (i) that I have personally examined and am familiar with the information contained in this submittal, including any and all documents accompanying this transmittal form, (ii) that, based on my inquiry of those individuals immediately responsible for obtaining the information, the material information contained in this submittal is, to the best of my knowledge and belief, true, accurate and complete, and (iii) that I am fully authorized to make this attestation on behalf of the entity legally responsible for this submittal. I/the person or entity on whose behalf this submittal is made am/is aware that there are significant penalties, including, but not limited to, possible fines and imprisonment, for willfully submitting false, inaccurate, or incomplete information.

By: [Signature] Title: President

For: Domestic Bank Date: 10/23/01
(print name of person or entity recorded in Section J)

Enter address of the person providing certification(s), including Ability and Willingness Certification where applicable, if different from address recorded in Section J:

Street: _____

City/Town: _____ State: _____ ZIP Code: _____

Telephone: _____ Ext.: _____ FAX: (optional) _____

YOU MUST COMPLETE ALL RELEVANT SECTIONS OF THIS FORM OR DEP MAY RETURN THE DOCUMENT AS INCOMPLETE. IF YOU SUBMIT AN INCOMPLETE FORM, YOU MAY BE PENALIZED FOR MISSING A REQUIRED DEADLINE, AND YOU MAY INCUR ADDITIONAL COMPLIANCE FEES.



Massachusetts Department of Environmental Protection
Bureau of Waste Site Cleanup

BWSC-107B

**TIER CLASSIFICATION, TIER II EXTENSION &
TIER II TRANSFER TRANSMITTAL FORM**
Pursuant to 310 CMR 40.0510 and 40.0560 (Subpart E)

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Only complete and submit this page if you are providing a Tier II Transfer Submittal for a Tier II Site or a Waiver Site.

M. PERSON WHO IS TRANSFEREE:

Name of Organization: _____
Name of Contact: _____ Title: _____
Street: _____
City/Town: _____ State: _____ ZIP Code: _____
Telephone: _____ Ext.: _____ FAX: (optional) _____

N. RELATIONSHIP TO DISPOSAL SITE OF PERSON WHO IS TRANSFEREE: (check one)

- ☐ RP or PRP Specify: ☐ Owner ☐ Operator ☐ Generator ☐ Transporter Other RP or PRP: _____
☐ Fiduciary, Secured Lender or Municipality with Exempt Status (as defined by M.G.L. c. 21E, s. 2)
☐ Agency or Public Utility on a Right of Way (as defined by M.G.L. c. 21E, s. 5(j))
☐ Any Other Person Who is Transferee Specify Relationship: _____

O. CERTIFICATION OF PERSON WHO IS TRANSFEREE:

I, _____, attest under the pains and penalties of perjury (i) that I have personally examined and am familiar with the information contained in this submittal, including any and all documents accompanying this transmittal form, (ii) that, based on my inquiry of those individuals immediately responsible for obtaining the information, the material information contained in this submittal is, to the best of my knowledge and belief, true, accurate and complete, and (iii) that I am fully authorized to make this attestation on behalf of the entity legally responsible for this submittal. I/the person or entity on whose behalf this submittal is made am/is aware that there are significant penalties, including, but not limited to, possible fines and imprisonment, for willfully submitting false, inaccurate, or incomplete information.

By: _____ Title: _____
(signature)
For: _____ Date: _____
(print name of person or entity recorded in Section M)

Enter address of the person providing certification, if different from address recorded in Section M:

Street: _____
City/Town: _____ State: _____ ZIP Code: _____
Telephone: _____ Ext.: _____ FAX: (optional) _____

YOU MUST COMPLETE ALL RELEVANT SECTIONS OF THIS FORM OR DEP MAY RETURN THE DOCUMENT AS INCOMPLETE. IF YOU SUBMIT AN INCOMPLETE FORM, YOU MAY BE PENALIZED FOR MISSING A REQUIRED DEADLINE, AND YOU MAY INCUR ADDITIONAL COMPLIANCE FEES.

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Massachusetts Department of Environmental Protection
Bureau of Waste Site Cleanup

BWSC-109

Release Tracking Number

2 - 10067

TIER I MINOR PERMIT MODIFICATION TRANSMITTAL
FORM Pursuant to 310 CMR 40.0725 (Subpart G)

Permit Number 107471

RT/ER/SD/B.P. 11/46/01

Minor Permit Modification Requests are not subject to permit processing requirements under 310 CMR 40.0720 - 40.0724 or 310 CMR 4.00

A. DISPOSAL SITE LOCATION:

Site Name: Former Ernst & Taveras Property

Street: 38 Lancaster County Road Location Aid: _____

City/Town: Harvard ZIP Code: 01451-0000

Related Release Tracking Numbers That This Minor Permit Modification Request Addresses: 2-13968

B. THIS FORM IS BEING USED TO: (check all appropriate categories below)

- ☐ Submit an Alternative or Corrected Minor Permit Modification Request (also must check use(s) below). Date of Prior Submittal: _____
- ☐ Modify a Permittee Name, Address or Contact Person (complete Sections A, B, C, I, J, K and L).
- ☐ Change a Primary Representative (complete Sections A, B, D, I, J, K and L).
- ☐ Change an LSP-of-Record (complete Sections A, B, E, J, K and L).
- ☐ Correct Typographical Errors (complete Sections A, B, F, I, J, K and L).
- ☐ Correct Omissions (complete Sections A, B, G, I, J, K and L).
- ☒ Submit Other Minor Permit Modifications, including linking an additional Release Tracking Number(s) to a Permit (complete Sections A, B, H, I, J, K and L).

C. MODIFICATION TO PERMITTEE NAME, ADDRESS OR CONTACT PERSON: (complete entire section)

Permittee Organization: _____

Permittee Contact: _____ Title: _____

Street: _____

City/Town: _____ State: _____ ZIP Code: _____

Telephone: _____ Ext.: _____ FAX: (optional) _____

For disposal sites with more than one Permittee, each Permittee making a modification to name, address or contact person must separately submit any proposed changes.

D. CHANGE IN PRIMARY REPRESENTATIVE: (complete entire section)

A Primary Representative is required only for Sites having more than one Permittee.

☐ Check here if the Primary Representative is also a Permittee.

Primary Representative Name: _____ Title: _____

Primary Representative Organization: _____

Street: _____

City/Town: _____ State: _____ ZIP Code: _____

Telephone: _____ Ext.: _____ FAX: (optional) _____

Certification of Primary Representative:

I attest under the pains and penalties of perjury that I am fully authorized to act on behalf of all permittees holding this Tier I Permit for the purposes stated in 310 CMR 40.0703(7)(a):

- to receive oral and written correspondence from DEP with respect to the application;
- to receive oral and written correspondence from DEP with respect to performance of response actions upon issuance of a Tier I permit; and
- to receive any statement of fee required by 310 CMR 4.03(3) upon issuance of a Tier I permit.

I understand that any material received by the Primary Representative from DEP shall be deemed received by the Permittee(s), and I am aware that there are significant penalties, including, but not limited to, possible fines and imprisonment, for willfully submitting false, inaccurate or incomplete information.

Signature: _____ Date: _____

The person signing this certification MUST be the Primary Representative named above.



Massachusetts Department of Environmental Protection
Bureau of Waste Site Cleanup

BWSC-109

Release Tracking Number

2 - 10067

**TIER I MINOR PERMIT MODIFICATION TRANSMITTAL
FORM** Pursuant to 310 CMR 40.0725 (Subpart G)

Permit
Number 107471

E. CHANGE IN LSP-OF-RECORD: (the new LSP-of-Record must sign and stamp this section)

LSP Name: _____ LSP #: _____ Stamp: _____

Telephone: _____ Ext.: _____

FAX: (optional) _____

Signature: _____

Date: _____

F. CORRECTION OF TYPOGRAPHICAL ERRORS: (describe typographical errors below)

G. CORRECTION OF OMISSIONS:

Describe any omissions to be corrected by this Minor Permit Modification request. These omissions must not affect the nature or complexity of the permitted response action. Provide relevant information, including copies of applicable documentation.

H. OTHER MINOR PERMIT MODIFICATIONS:

Name, address and contact person for a new Owner who is NOT a Permittee:

Name of Organization: _____

Name of Contact: _____ Title: _____

Street: _____

City/Town: _____ State: _____ ZIP Code: _____

Telephone: _____ Ext.: _____ FAX: (optional) _____

Name, address and contact person for a new Operator who is NOT a Permittee:

Name of Organization: _____

Name of Contact: _____ Title: _____

Street: _____

City/Town: _____ State: _____ ZIP Code: _____

Telephone: _____ Ext.: _____ FAX: (optional) _____

SECTION H IS CONTINUED ON THE NEXT PAGE.



Massachusetts Department of Environmental Protection
Bureau of Waste Site Cleanup

BWSC-109

Release Tracking Number

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TIER I MINOR PERMIT MODIFICATION TRANSMITTAL
FORM Pursuant to 310 CMR 40.0725 (Subpart G)

Permit Number 107471

H. OTHER MINOR PERMIT MODIFICATIONS: (continued)

- ☒ Check here if linking an additional Release Tracking Number(s) to a Tier I Permit, where there has been NO change in conditions that requires the filing of a Major Permit Modification application (BWSC 10). List Release Tracking Number(s) below.

Describe any other Minor Permit Modifications proposed. Provide relevant information, including copies of applicable documentation.

Link RTN 2-13968 to Reference RTN 2-10067.

I. LSP OPINION:

An LSP Opinion is required only if this submittal is materially inconsistent with, or would otherwise serve to compromise or diminish the content or meaning of, an LSP Opinion previously submitted to DEP.

I attest under the pains and penalties of perjury that I have personally examined and am familiar with this transmittal form, including any and all documents accompanying this submittal. In my professional opinion and judgment based upon application of (i) the standard of care in 309 CMR 4.02(1), (ii) the applicable provisions of 309 CMR 4.02(2) and (3), and (iii) the provisions of 309 CMR 4.03(5), to the best of my knowledge, information and belief, this submittal has been developed in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000.

I am aware that significant penalties may result, including, but not limited to, possible fines and imprisonment, if I submit information which I know to be false, inaccurate or materially incomplete.

- ☒ Check here if the Response Action(s) on which this opinion is based, if any, are (were) subject to any order(s), permit(s) and/or approval(s) issued by DEP or EPA. If the box is checked, you MUST attach a statement identifying the applicable provisions thereof.

LSP Name: Peter M. King LSP #: 7413 Stamp:

Telephone: 603-668-0880 Ext.: 222

FAX: (optional) 603-668-1199

Signature: 

Date: 10/31/01



J. PERMITTEE SUBMITTING MINOR PERMIT MODIFICATION REQUEST:

Name of Organization: Domestic Bank

Name of Contact: Nathaniel Baker Title: President

Street: 815 Reservoir Avenue

City/Town: Cranston State: RI ZIP Code: 02910-0000

Telephone: 401-943-1600 Ext.: FAX: (optional) 401-943-6899

K. RELATIONSHIP TO SITE OF PERMITTEE SUBMITTING MINOR PERMIT MODIFICATION REQUEST: (check one)

☐ RP or PRP Specify: ☐ Owner ☐ Operator ☐ Generator ☐ Transporter Other RP or PRP: _____

☒ Fiduciary, Secured Lender or Municipality with Exempt Status (as defined by M.G.L. c. 21E, s. 2)

☐ Agency or Public Utility on a Right of Way (as defined by M.G.L. c. 21E, s. 5(j))

☐ Any Other Person Submitting Minor Permit Modification Request Specify Relationship: _____



Massachusetts Department of Environmental Protection
Bureau of Waste Site Cleanup

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**TIER I MINOR PERMIT MODIFICATION TRANSMITTAL
FORM** Pursuant to 310 CMR 40.0725 (Subpart G)

Permit
Number 107471

IF THIS MINOR PERMIT MODIFICATION AFFECTS A MULTI-PARTY PERMIT, ALL PERMITTEES MUST SIGN THE CERTIFICATION SHOWN IN SECTION L. ADDITIONAL PERMITTEES MAY MAKE A COPY OF THIS PAGE, SIGN THE CERTIFICATION AND PROVIDE A MAILING ADDRESS IN THE SPACES PROVIDED IN SECTION L.

L. CERTIFICATION OF PERMITTEE SUBMITTING MINOR PERMIT MODIFICATION:

I, Nathaniel Baker, attest under the pains and penalties of perjury (i) that I have personally examined and am familiar with the information contained in this submittal, including any and all documents accompanying this transmittal form, (ii) that, based on my inquiry of those individuals immediately responsible for obtaining the information, the material information contained in this submittal is, to the best of my knowledge and belief, true, accurate and complete, and (iii) that I am fully authorized to make this attestation on behalf of the entity legally responsible for this submittal. I/the person or entity on whose behalf this submittal is made am/is aware that there are significant penalties, including, but not limited to, possible fines and imprisonment, for willfully submitting false, inaccurate, or incomplete information.

By: (signature) Title: President

For: Domestic Bank Date: 10/23/01
(print name of person or entity recorded in Section J)

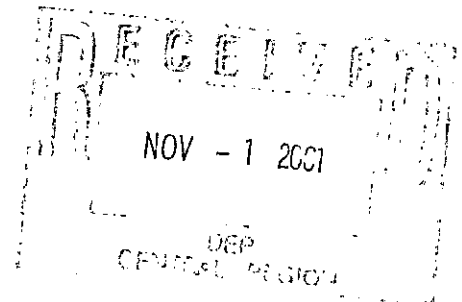
Enter address of the person providing certification, if different from address recorded in Section J:

Street: _____

City/Town: _____ State: _____ ZIP Code: _____

Telephone: _____ Ext.: _____ FAX: (optional) _____

YOU MUST COMPLETE ALL RELEVANT SECTIONS OF THIS FORM OR DEP MAY RETURN THE DOCUMENT AS INCOMPLETE. UNLESS YOU ARE CONTACTED BY DEP, THIS MINOR PERMIT MODIFICATION REQUEST IS PRESUMPTIVELY APPROVED 60 DAYS AFTER RECEIPT BY DEP, PURSUANT TO 310 CMR 40.0724(4).



ATTACHMENT TO BWSC-109

TIER I MINOR PERMIT MODIFICATION TRANSMITTAL FORM

for:

**FORMER ERNST AND TAVERAS PROPERTY
38 LANCASTER COUNTY ROAD
HARVARD, MASSACHUSETTS
MADEP RTN 2-10067 and Related RTN 2-13968**

RTN 2-10067 is subject to Administrative Consent Order (ACO) with Penalty ACOP-CE-3001.

RTN 2-10067 was issued Tier IB Permit Number 107471 on July 25, 1996. Domestic Bank requested a Permit Extension as a Tier IC site on May 15, 2001. The MADEP issued a Tier IC Permit Extension on October 5, 2001.

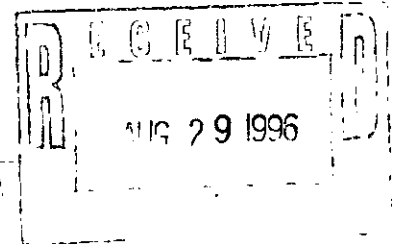
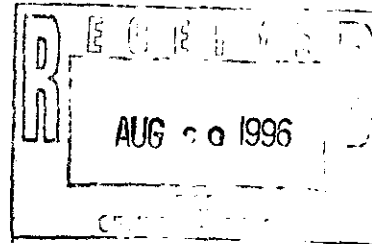
107 - 1

GROUND WATER ASSOCIATES, INC.

16 Commercial Drive, P.O. Box 280, Dracut, Massachusetts 01826 (508) 970-5388

August 28, 1996

Mr. Edmond G. Benoit
Department of Environmental Protection
Waste Site Cleanup
Central Regional Office
75 Grove Street
Worcester, Massachusetts 01605



Re: RTN #2-10067, 2-10667
Former Ernst and Taveras Property
38 Lancaster County Road
Harvard, Massachusetts

Dear Mr. Benoit:

Enclosed for your records is another copy of the Tier I Permit resigned by Nathaniel B. Baker of Domestic Bank on August 27, 1996, at the request of Rob Adler. Please feel free to call if you have any questions.

Very truly yours,

GROUND WATER ASSOCIATES, INC.

Blake A. Martin, LSP No. 5672
Environmental Coordinator

BAM/kap
Enclosure
S:\GWA\Clerical\9674540

cc: Robert Adler, DEP
Nathaniel Baker, Domestic Bank
Peter King, Ground Water Associates
Art Kreiger, Anderson & Kreiger

Massachusetts Department of Environmental Protection
Bureau of Waste Site Cleanup (BWSC)

TIER I PERMIT

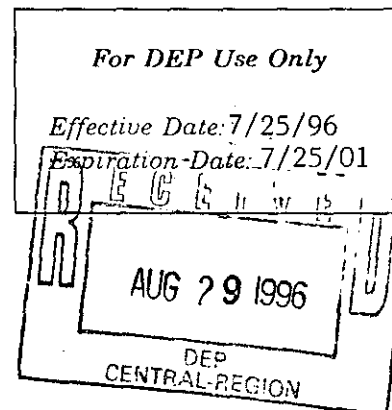
This Permit is Issued to:

☒ One Permittee

☐ More than One Permittee

One Permittee:

Name of Organization: Domestic Loan and Investment Bank
Permittee Name: Mr. Nathaniel Baker
Title or c/o: President
Street: 815 Reservoir Avenue
City/Town: Cranston State: R.I. Zip code: 02910
Telephone: (401) 943-1600



DEP Finding Concerning Tier Classification

☐ Tier IA (BWSC01) ☒ Tier IB (BSWC02) ☐ Tier IC (BWSC03) Permit No. 107471

This permit authorizes the performance of comprehensive remedial response actions at:

Release Tracking Numbers: 2 - 10067, 2 - 10667
Disposal Site Name: Former Ernst and Taveras Property
Street: 38 Lancaster County Road
City/Town: Harvard State: MA Zip code: 01451

Unless a request for an adjudicatory hearing is made pursuant to 310 CMR 40.0770, this permit shall be effective 21 days after the date of issuance by the Department and the receipt of the signed Permit Acceptance Statement, whichever is later. **The Permittee has 30 days from the date of issuance of this Tier I Permit to sign and submit the completed Permit Acceptance Statement to the Department.**

This permit shall expire 5 years from its effective date.

Permit Conditions; Pursuant to 310 CMR 40.0740:

- (1) The permittee(s) performing response actions pursuant to this Tier I Permit shall comply at all times with M.G.L. c. 21E, 310 CMR 40.0000, the terms and conditions of the permit and any other applicable federal, state or local law.
- (2) In every proceeding, the burden shall be on the Permittee to demonstrate compliance with the terms and conditions of a permit at all times.
- (3) Each Permittee shall comply with:
 - (a) submittal of a Class A, B or C Response Action Outcome Statement within five years of the effective date of the permit, unless otherwise provided in the permit;
 - (b) submittal of a copy of the signed and completed Permit Acceptance Statement required by 310 CMR 40.0750(2) to the Chief Municipal Officer(s) and the local boards of health for the communities where the disposal site is located, and to any member of the public identified in the Department's Statement of Basis.
 - (c) notification in writing to the Department:
 1. as required in 310 CMR 40.0500;
 2. upon gaining knowledge of any technical, financial or legal inability to perform any necessary response action, in accordance with 310 CMR 40.0172;
 3. upon a decision by a permittee who is performing response actions as an Other Person to not proceed as required by the permit; and
 4. of any change in the LSP of Record for the disposal site no later than ten days after the effective date of such change through the filing of a Minor Permit Modification by the permittee in accordance with 310 CMR 40.0725;
 - (d) compliance with:
 1. all applicable submittal requirements, including but not limited to, scopes of work, Status Reports, Completion Statements, Phase Reports, and RAOs;
 2. all requirements for record keeping and document retention, including but not limited to 310 CMR 40.0014, 310 CMR 40.0022 and 310 CMR 40.0023;
 3. the Notification Regulations, 310 CMR 40.0300, in the event of discovery of new releases located at the disposal site, threat of release or Imminent Hazard;
 4. the management procedures for excavated soils and wastes and requirements for remedial air emissions set forth in 310 CMR 40.0030 and 310 CMR 40.0040; and
 5. all public involvement activities required by 310 CMR 40.1400 through 40.1406;
 - (e) inclusion of the Disposal Site Number and the permit number on documents submitted to the Department with respect to the disposal site;
 - (f) certification of documents submitted to the Department as required by 310 CMR 40.0009;
 - (g) evaluation of the need to perform Immediate Response Actions in accordance with 310 CMR 40.0400 as new or additional information about the disposal site is obtained;

- (h) modification or cessation of any response action as necessary to maintain compliance with any permit condition or to prevent an actual or potential threat to health, safety, public welfare, or the environment;
- (i) notification, orally or in writing, to the Department within seventy-two hours of obtaining knowledge of the need to modify or cease any response actions for the reasons in 310 CMR 40.0740(3)(h); provided that any such oral notification shall be confirmed by the permittee in writing within sixty days of such oral notice and any written notice shall include a Status Report prepared by an LSP; and timely remediation of any adverse impacts to health, safety, public welfare or the environment that result from the performance of response actions;
- (j) at disposal sites where groundwater investigation is necessary, delineation of the vertical and horizontal extent of contamination, identification and confirmation of groundwater flow directions, identification of groundwater migration pathways, including but not limited to, the identification of possible partitioning of dissolved volatile organic compounds at the water table interface which may lead to vapor transport into subsurface structures, homes or other occupied or unoccupied buildings, and monitoring of groundwater wells, discharges and/or other monitoring points in a manner which provides for the timely development or representative information about conditions and changes in conditions at the disposal site;
- (k) acquisition of all required federal, state and local permits;
- (l) proper operation and maintenance of all treatment, storage, abatement or control systems and of all equipment required to continue or complete response actions;
- (m) authorization for personnel and authorized agents of the Department to enter, at reasonable times and upon the presentation of credentials, any premises owned or controlled by the permittee for the purpose of investigating, sampling, or inspecting any records, conditions, equipment, practice or property relating to response actions at the disposal site, or protecting health, safety, public welfare, or the environment; and
- (n) notification upon a change of the Primary representative as required by 310 CMR 40.0703(7), if one is designated.

(4) A Tier I Permit does not grant any property rights or exclusive privileges, nor does it authorize any injury to private property or invasion of property rights.

Special Conditions; Pursuant to 310 CMR 40.0740(3)(o):

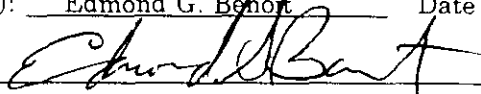
Each permittee shall comply with all **Special Conditions** if attached to this permit in **Attachment A**. Special Conditions are included within this permit:

☐ Yes* ☒ No

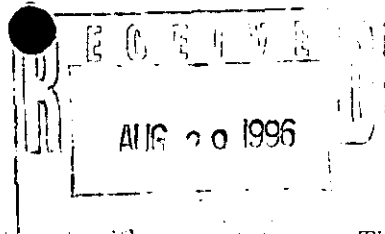
**Note: Pursuant to 310 CMR 40.0722(6)(c), a "Statement of Basis" for this permit decision has been prepared by DEP if special conditions are included with this Permit.*

DEP Authorization

Issued by the Department of Environmental Protection:

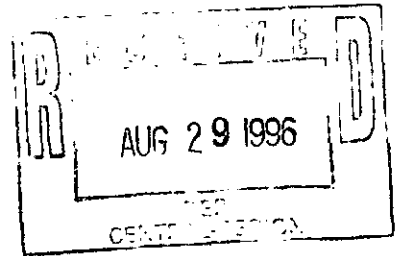
Name (Print): Edmond G. Benoit Date of Issuance: 6/18/96
Signature: 

Notice of Appeal Rights



Any person aggrieved by a decision of the Department with respect to any Tier I permit application may request an adjudicatory hearing before the Department in accordance with M.G.L. c. 21E and 310 CMR 40.0050 and 40.0770, within 21 days of the date of issuance of the Tier I permit, if:

- a) the Department issues a permit for a classification higher than that stated in the LSP Tier Classification Opinion; or
- b) the Department denies the applicant a permit, unless the Department notifies the applicant in the permit decision that the Department intends to undertake or arrange for the performance of necessary response actions at the disposal site; or
- c) The Department imposes conditions pursuant to 310 CMR 40.0730(1)(h) and 40.0740(3)(o) without the applicant's consent.



Permit Acceptance Statement and Certification of Submittal

Note: Each Permittee must complete this section and return the signed Permit Acceptance Statement and Certification of Submittal within 30 days of the date of issuance of this Permit decision. For disposal sites with more than one Permittee, make copies of this section, have each Permittee complete this information, and submit all copies to the Department along with the Acceptance Statement.

Permit Acceptance Statement

I accept this permit and agree to conduct all response actions at this disposal site in accordance with this Permit and the provisions of 310 CMR 40.0000. I am aware of the requirements set forth in 310 CMR 40.0172 for notifying the Department in the event that I am unable to proceed with such response actions⁽¹⁾

Name (Print):

NATHANIEL B. BAKER

Position or title:

PRESIDENT

Signature:

Date:

JULY 23, 1996

Certification of Submittal (The above permittee must also sign the following certification)

I, NATHANIEL B. BAKER attest under the pains and penalties of perjury (i) that I have personally examined and am familiar with the information contained in this submittal, including any and all documents accompanying this submittal, (ii) that, based on my inquiry of those individuals immediately responsible for obtaining the information, the material information contained in this submittal is, to the best of my knowledge and belief, true, accurate and complete, and (iii) that I am fully authorized to make this attestation on behalf of the person or entity legally responsible for this submittal⁽¹⁾. I/the person or entity on whose behalf this submittal is made am/is aware that there are significant penalties, including, but not limited to, possible fines and imprisonment, for willfully submitting false, inaccurate or incomplete information.

Name (Print):

NATHANIEL B. BAKER

Position or title:

PRESIDENT

Signature:

Date:

JULY 23, 1996

(1) Please Note:

If any person other than those who are legally responsible for this submittal are going to sign the above Acceptance Statement and the Certification of Submittal, a written authorization, from each person(s) or entity(ies) who is/are legally responsible for this submittal, must be attached to this permit.

This Attachment will be completed by DEP
ATTACHMENT A TO PERMIT NO. 107471

Each Permittee shall comply with the following special conditions:

[X] Check here if not applicable to this permit.



**COMPREHENSIVE RESPONSE ACTION TRANSMITTAL
FORM & PHASE I COMPLETION STATEMENT**

Pursuant to 310 CMR 40.0484 (Subpart D) and 40.0800 (Subpart H)

Release Tracking Number

2 - 10067

A. SITE LOCATION: Release Tracking Numbers 2-10067 and 2-10667

Site Name: (optional) (Former Ernst & Taveras Property)

Street: 38 Lancaster County Road

Location Aid: _____

City/Town: Harvard MA

ZIP Code: 01451

Related Release Tracking Numbers that this Form Addresses: 2-10667

Tier Classification: (check one of the following)

☐

Tier IA

☒

Tier IB

☐

Tier IC

☐

Tier II

☐

Not Tier Classified

If a Tier I Permit has been issued, state the Permit Number: _____

B. THIS FORM IS BEING USED TO: (check all that apply)

- ☒ Submit a Phase I Completion Statement, pursuant to 310 CMR 40.0484 (complete Sections A, B, C, G, H, I and J).
- ☐ Submit a Phase II Scope of Work, pursuant to 310 CMR 40.0834 (complete Sections A, B, C, G, H, I and J).
- ☐ Submit a final Phase II Comprehensive Site Report and Completion Statement, pursuant to 310 CMR 40.0836 (complete Sections A, B, C, D, G, H, I and J).
- ☐ Submit a Phase III Remedial Action Plan and Completion Statement, pursuant to 310 CMR 40.0862 (complete Sections A, B, C, G, H, I and J).
- ☐ Submit a Phase IV Remedy Implementation Plan, pursuant to 310 CMR 40.0874 (complete Sections A, B, C, G, H, I and J).
- ☐ Submit an As-Built Construction Report, pursuant to 310 CMR 40.0875 (complete Sections A, B, C, G, H, I and J).
- ☐ Submit a Phase IV Final Inspection Report and Completion Statement, pursuant to 310 CMR 40.0878 and 40.0879 (complete Sections A, B, C, E, G, H, I and J).
- ☐ Submit a periodic Phase V Inspection & Monitoring Report, pursuant to 310 CMR 40.0892 (complete Sections A, B, C, G, H, I and J).
- ☐ Submit a final Phase V Inspection & Monitoring Report and Completion Statement, pursuant to 310 CMR 40.0893 (complete Sections A, B, C, F, G, H, I and J).

You must attach all supporting documentation required for each use of form indicated, including copies of any Legal Notices and Notices to Public Officials required by 310 CMR 40.1400.

C. RESPONSE ACTIONS:

- ☐ Check here if any response action(s) that serves as the basis for the Phase submittal(s) involves the use of Innovative Technologies. (DEP is interested in using this information to create an Innovative Technologies Clearinghouse.)

Describe Technologies: _____

D. PHASE II COMPLETION STATEMENT:

Specify the outcome of the Phase II Comprehensive Site Assessment:

- ☐ Additional Comprehensive Response Actions are necessary at this Site, based on the results of the Phase II Comprehensive Site Assessment.
- ☐ The requirements of a Class A Response Action Outcome have been met and a completed Response Action Outcome Statement (BWSC-104) will be submitted to DEP.
- ☐ The requirements of a Class B Response Action Outcome have been met and a completed Response Action Outcome Statement (BWSC-104) will be submitted to DEP.
- ☐ Rescoring of this Site using the Numerical Ranking System is necessary, based on the results of the final Phase II Report.

E. PHASE IV COMPLETION STATEMENT:

Specify the outcome of Phase IV activities:

- ☐ Phase V operation, maintenance or monitoring of the Comprehensive Response Action is necessary to achieve a Response Action Outcome. (This site will be subject to a Phase V Operation, Maintenance and Monitoring Annual Compliance Fee.)
- ☐ The requirements of a Class A Response Action Outcome have been met. No additional operation, maintenance or monitoring is necessary to ensure the integrity of the Response Action Outcome. A completed Response Action Outcome Statement (BWSC-104) will be submitted to DEP.
- ☐ The requirements of a Class C Response Action Outcome have been met. No additional operation, maintenance or monitoring is necessary to ensure the integrity of the Response Action Outcome. A completed Response Action Outcome Statement (BWSC-104) will be submitted to DEP.

SECTION E IS CONTINUED ON THE NEXT PAGE



COMPREHENSIVE RESPONSE ACTION TRANSMITTAL
FORM & PHASE I COMPLETION STATEMENT

Release Tracking Number

Pursuant to 310 CMR 40.0484 (Subpart D) and 40.0800 (Subpart H)

2 - 10067

E. PHASE IV COMPLETION STATEMENT: (continued)

- ☐ The requirements of a Class C Response Action Outcome have been met. Further operation, maintenance or monitoring of the remedial action is necessary to ensure that conditions are maintained and that further progress is made toward a Permanent Solution. A completed Response Action Outcome Statement (BWSC-104) will be submitted to DEP.

Indicate whether the operation and maintenance will be Active or Passive. (Active Operation and Maintenance is defined at 310 CMR 40.0006.):

☐ Active Operation and Maintenance ☐ Passive Operation and Maintenance

(Active Operation and Maintenance makes the Site subject to a Post-RAO Class C Active Operation and Maintenance Annual Compliance Fee.)

F. PHASE V COMPLETION STATEMENT:

Specify the outcome of Phase V activities:

- ☐ The requirements of a Class A Response Action Outcome have been met and a completed Response Action Outcome Statement (BWSC-104) will be submitted to DEP.
- ☐ The requirements of a Class C Response Action Outcome have been met. No additional operation, maintenance or monitoring is necessary to ensure the integrity of the Response Action Outcome. A completed Response Action Outcome Statement (BWSC-104) will be submitted to DEP.
- ☐ The requirements of a Class C Response Action Outcome have been met. Further operation, maintenance or monitoring of the remedial action is necessary to ensure that conditions are maintained and that further progress is made toward a Permanent Solution. A completed Response Action Outcome Statement (BWSC-104) will be submitted to DEP.

Indicate whether the operation and maintenance will be Active or Passive. (Active Operation and Maintenance is defined at 310 CMR 40.0006.):

☐ Active Operation and Maintenance ☐ Passive Operation and Maintenance

(Active Operation and Maintenance makes the Site subject to a Post-RAO Class C Active Operation and Maintenance Annual Compliance Fee.)

G. LSP OPINION:

I attest under the pains and penalties of perjury that I have personally examined and am familiar with the information contained in this transmittal form, including any and all documents accompanying this submittal. In my professional opinion and judgment based upon application of (i) the standard of care in 309 CMR 4.02(1), (ii) the applicable provisions of 309 CMR 4.02(2) and (3), and (iii) the provisions of 309 CMR 4.03(5), to the best of my knowledge, information and belief,

> if Section B indicates that a Phase I, Phase II, Phase III, Phase IV or Phase V Completion Statement is being submitted, the response action(s) that is (are) the subject of this submittal (i) has (have) been developed and implemented in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, (ii) is (are) appropriate and reasonable to accomplish the purposes of such response action(s) as set forth in the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, and (iii) complies(y) with the identified provisions of all orders, permits, and approvals identified in this submittal;

> if Section B indicates that a Phase II Scope of Work or a Phase IV Remedy Implementation Plan is being submitted, the response action(s) that is (are) the subject of this submittal (i) has (have) been developed in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, (ii) is (are) appropriate and reasonable to accomplish the purposes of such response action(s) as set forth in the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, and (iii) complies(y) with the identified provisions of all orders, permits, and approvals identified in this submittal;

> if Section B indicates that an As-Built Construction Report or a Phase V Inspection and Monitoring Report is being submitted, the response action(s) that is (are) the subject of this submittal (i) is (are) being implemented in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, (ii) is (are) appropriate and reasonable to accomplish the purposes of such response action(s) as set forth in the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, and (iii) complies(y) with the identified provisions of all orders, permits, and approvals identified in this submittal.

I am aware that significant penalties may result, including, but not limited to, possible fines and imprisonment, if I submit information which I know to be false, inaccurate or materially incomplete.

- ☐ Check here if the Response Action(s) on which this opinion is based, if any, are (were) subject to any order(s), permit(s) and/or approval(s) issued by DEP or EPA. If the box is checked, you MUST attach a statement identifying the applicable provisions thereof.

LSP Name: Blake A. Martin LSP #: 5672 Stamp:

Telephone: 508 970 5388 Ext.: _____

FAX: (optional) 508 453 7667

Signature: _____

Date: 9/19/96





**COMPREHENSIVE RESPONSE ACTION TRANSMITTAL
FORM & PHASE I COMPLETION STATEMENT**

Pursuant to 310 CMR 40.0484 (Subpart D) and 40.0800 (Subpart H)

Release Tracking Number

2 - 10067

H. PERSON UNDERTAKING RESPONSE ACTION(S):

Name of Organization: Domestic Loan & Investment Bank
Name of Contact: Nathaniel Baker Title: President
Street: 815 Reservoir Avenue
City/Town: Cranston State: RI ZIP Code: 02910
Telephone: 401 943 1600 Ext.: _____ FAX: (optional) 401 943 6708

☐ Check here if there has been a change in the person undertaking the Response Action.

I. RELATIONSHIP TO SITE OF PERSON UNDERTAKING RESPONSE ACTION(S): (check one)

- ☐ RP or PRP Specify: ☐ Owner ☐ Operator ☐ Generator ☐ Transporter Other RP or PRP: _____
☒ Fiduciary, Secured Lender or Municipality with Exempt Status (as defined by M.G.L. c. 21E, s. 2)
☐ Agency or Public Utility on a Right of Way (as defined by M.G.L. c. 21E, s. 5(j))
☐ Any Other Person Undertaking Response Action Specify Relationship: _____

J. CERTIFICATION OF PERSON UNDERTAKING RESPONSE ACTION(S):

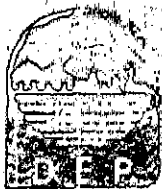
I, _____, attest under the pains and penalties of perjury (i) that I have personally examined and am familiar with the information contained in this submittal, including any and all documents accompanying this transmittal form, (ii) that, based on my inquiry of those individuals immediately responsible for obtaining the information, the material information contained in this submittal is, to the best of my knowledge and belief, true, accurate and complete, and (iii) that I am fully authorized to make this attestation on behalf of the entity legally responsible for this submittal. I/the person or entity on whose behalf this submittal is made am/are aware that there are significant penalties, including, but not limited to, possible fines and imprisonment, for willfully submitting false, inaccurate, or incomplete information.

By: _____ Title: President
(signature)
For: Domestic Loan & Investment Bank Date: _____
(print name of person or entity recorded in Section H)

Enter address of the person providing certification, if different from address recorded in Section H:

Street: _____
City/Town: _____ State: _____ ZIP Code: _____
Telephone: _____ Ext.: _____ FAX: (optional) _____

YOU MUST COMPLETE ALL RELEVANT SECTIONS OF THIS FORM OR DEP MAY RETURN THE DOCUMENT AS INCOMPLETE. IF YOU SUBMIT AN INCOMPLETE FORM, YOU MAY BE PENALIZED FOR MISSING A REQUIRED DEADLINE.



COMPREHENSIVE RESPONSE ACTION TRANSMITTAL
PHASE I COMPLETION STATEMENT

CMR 40.0484 (Subpart C) and 40.0800 (Subpart H)

2 10067

H. PERSON UNDERTAKING RESPONSE ACTION(S):

Name of Company: Domestic Loan & Investment Bank
Name of Contact: Nathaniel Baker Title: President
Street: 815 Reservoir Avenue
City/Town: Cranston State: RI Zip Code: 02910
Telephone: 401 943 1600 Fax (optional): 401 943 6708

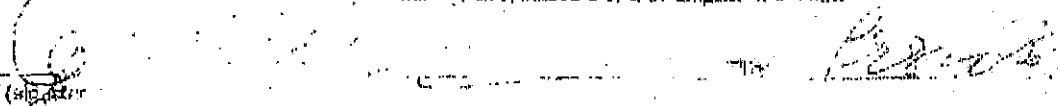
☐ Check box if the person undertaking the Response Action is:

RELATIONSHIP TO THE PERSON UNDERTAKING RESPONSE ACTION(S):

- ☐ RP or SP
☐ Generator
☐ Transporter
☒ Other RP or SP
☒ Fiduciary
☐ Agency
☐ Any other relationship. Specify Relationship:

I. CERTIFICATION BY PERSON UNDERTAKING RESPONSE ACTION(S):

Nathaniel Baker
I attest under the pains and penalties of perjury (i) that I have personally examined and am familiar with the information contained in this affidavit, including any and all documents accompanying this transmittal form; (ii) that, based on my inquiry of those individuals who provided the information, the material information contained in this submittal is, to the best of my knowledge and belief, true, complete, and (iii) that I am fully authorized to make this attestation on behalf of the entity legally responsible for this submittal. I understand that if I know or believe that this submittal is made only aware that there are significant penalties, including, but not limited to, possible fines and/or imprisonment, for providing false, inaccurate, or incomplete information.

By: 
(Signature)

For: 
(print name and title of person undertaking action)

Enter address if different from address recorded in Section H:

Street:
City/Town: State: Zip Code:
Telephone: Ex: Fax (optional):

YOU MAY RETURN ANY "IRRELEVANT" SECTIONS OF THIS FORM OR DEP MAY RETURN THE DOCUMENT AS
UNSUBMITTABLE. IF YOU SUBMIT AN INCOMPLETE FORM, YOU MAY BE PENALIZED FOR MISSING
A REQUIRED DEADLINE.

Commonwealth of Massachusetts
Executive Office of Environment

**Department of
Environment**

Central Regional Office



William F. Weld
Governor
Argeo Paul Cellucci
Lt. Governor

MASSACHUSETTS
SECRETARY
STUARTS
RECEIVED

Frank -
We probably should
get permit at least
to Dana's station
as we ed

107471
2-10067

Domestic 1
815 Res
Cra
The
the a
addi
can com
thereby
The \$2600
Annual Com
permit fee.
Application
It should be MSC01 7A, and a revision should be sent in
reflecting this change.
A corrected form and remaining payment to the DEP lock box must
have the Transmittal Number 107471 clearly marked upon them.
If you have any questions, please contact me at (508) 792-3730.

Previously was for the BMSC Tier IB
and can not be used as partial payment of a
tion, Part A of the Transmittal Form for
ayment has the incorrect code for a new permit.
It should be MSC01 7A, and a revision should be sent in
reflecting this change.

A corrected form and remaining payment to the DEP lock box must
have the Transmittal Number 107471 clearly marked upon them.
If you have any questions, please contact me at (508) 792-3730.

Yours truly,

Dana Samuelson

Dana Samuelson
Permit Administrator
Central Region

cc: Arthur Krelinger, Esq.
Blake Martin
Edmond Benoit
Robert Kalaghan

Transmittal Form for Application
and Payment

For DEP Use Only

Permit No. _____
Received Date _____
Reviewer _____
Permit ☐ Appr. ☐ Denied
Decision Date _____

107471

Transmittal #

2-10067 and
2-10667

Facility ID (if known)

A Application Information

B W S C 1 0 7 A

Permit, Approval or Other Category (seven character code from the first page of the directions on How to Apply). Examples: BWPAQ01, BRPWP01, etc.

Tier 1B Classification

Category Name

Oil Release (Site #2-10067) & DCE Release (Site #2-10667)

Brief Project Description

B Applicant or Legally Responsible Official

Domestic Loan & Investment Bank

Last Name

First Name

815 Reservoir Avenue

Address

Cranston

RI

02910

City/Town

State

Zip Code

(401) 943 - 1600 ext.

Telephone Number (including area code and extension)

Nathaniel Baker

Contact

C Facility, Site or Individual Requiring Approval

Former Ernst & Taveras Property

Name of Facility, Site or Individual

38 Lancaster County Road

Address

XXXXXX Harvard

MA

01451

City/Town

State

Zip Code

() - ext.

Telephone Number (including area code and extension)

D Application Prepared By (if different from section B)

Ground Water Associates, Inc.

Last Name

First Name

Middle Initial

PO Box 280

Address

Dracut

MA

01826

City/Town

State

Zip Code

(508) 970-5388 ext.

Telephone Number (including area code and extension)

Blake A. Martin

Contact

5672

LSP Number (for 21E only)

E Other Related Permits: If you are applying for other permits related to this application, please list them below.

Transmittal No.	Category	Description

F Amount Due

- Special Provisions: ☐ **Fee Exempt*** (city, town, district, or municipal housing authority) (state agency if permit fee is \$100 or less)
☐ **Hardship Request** (payment extension according to 310 CMR 4.04(3)(c))
☐ **Alternative Schedule Project Request** (according to 310 CMR 4.05 and 4.10)

* There are no fee exemptions for 21E sites, regardless of the applicant's status.

See attached copy of cancelled check for \$2,600.00.

Check No. _____ Dollar Amount \$ 950.00 Date _____

Make check payable to **Commonwealth of Massachusetts**. Please mail check and **yellow** copy of Transmittal Form to:
Department of Environmental Protection, P.O. Box 4062, Boston, MA, 02211

WHITE: must accompany application YELLOW: must accompany payment PINK: retain for your records

Rev 7/94

INSTRUCTIONS

1. Please type or print. Use a separate Transmittal Form for each application.

2. Use an **original**, 3-part Transmittal Form for each application. Photocopies **will not** be accepted for any application or payment. (You may use photocopies for reserve location, where applicable.)3. Make check payable to **Commonwealth of Massachusetts**. Please mail check and **yellow** copy of Transmittal Form to: Department of Environmental Protection, P.O. Box 4062, Boston, MA, 02211.4. Both fee exempt and non-exempt applicants **must mail yellow copy** of Transmittal Form to: Department of Environmental Protection, P.O. Box 4062, Boston, MA, 02211.

DOMESTIC
LOAN & INVESTMENT
BANK

815 RESERVOIR AVE.
CRANSTON, R.I. 02910
MEMBER FDIC

57-1
115

No 48733

DATE	CHECK NUMBER	AMOUNT
8-9-95	48733	\$950.00*

THE STATE OF MASSACHUSETTS

PAY TO
THE
ORDER OF

The Commonwealth of Massachusetts

[Signature]
AUTHORIZED SIGNATURE

Fleet National Bank
Providence, Rhode Island

⑈048733⑈ ⑆011500010⑆ 10 6920979⑈

PLEASE DETACH BEFORE PRESENTING FOR PAYMENT

DESCRIPTION	ACCOUNT NUMBER	DEBIT	CREDIT	BALANCE
-------------	-------------------	-------	--------	---------

Re: Sites 2-10067 & 2-10667

38 Lancaster County Rd
Providence, RI

ADVICE

DOMESTIC LOAN AND INVESTMENT BANK

DOMESTIC BANK

815 RESERVOR AVE
CRANSTON, RI 02910
MEMBER FDIC

57-1
115

NO 48712

July 13, 1995 48712 \$2,600.00

THE \$2,600.00

PAY TO
THE
ORDER OF

Department Environmental Protection
The Commonwealth of Massachusetts

First National Bank
Providence, Rhode Island

AUTHORIZED SIGNATURE
NON-NEGOTIABLE
AUTHORIZED SIGNATURE

PLEASE DETACH BEFORE PRESENTING FOR PAYMENT

DESCRIPTION	ACCOUNT NUMBER	DEBIT	CREDIT	BALANCE
-------------	----------------	-------	--------	---------

RE: Customer Number 1004774580010
Invoice Number REEQA3009QE2631
Annual Compliance Assurance Fee

ADVICE

DOMESTIC LOAN AND INVESTMENT BANK



**TIER CLASSIFICATION, TIER II EXTENSION &
TIER II TRANSFER TRANSMITTAL FORM**

Pursuant to 310 CMR 40.0510 and 40.0560 (Subpart E)

Release Tracking Number

2 - 10067

A. DISPOSAL SITE LOCATION:

Disposal Site Name: Release Tracking #2-10067 (Former Ernst & Tayeras Property
Street: 38 Lancaster County Road Location Aid: UTM 42° 31' 53" N Lat. 71° 35' E Long.
City/Town: Harvard MA ZIP Code: 01451
Related Release Tracking Numbers That This Submittal Will Address: 2-10667

B. THIS FORM IS BEING USED TO: (check all that apply)

- ☒ Submit a new or revised Tier Classification Submittal for a Tier I Site, including a Numerical Ranking Scoresheet (complete Sections A, B, C, I, J, K and L).
- ☐ Submit a new or revised Tier Classification Submittal for a Tier II Site, including a Numerical Ranking Scoresheet (complete Sections A, B, C, F, G, I, J, K and L).
- ☐ Submit a Notice that an additional Release Tracking Number(s) is (are) being linked to this Tier Classified Site and rescore is not required at this time (complete Sections A, B, J, K and L). If this submittal is for a Tier I Site, you must also submit a Minor Permit Modification Transmittal Form (BWSC-109).

List Additional Release Tracking Number(s): _____

- ☐ Submit a Phase I Completion Statement supporting a Tier Classification Submittal (complete Sections A, B, I, J, K and L).
- ☐ Submit a Tier II Extension Submittal for Response Actions at a Tier II Site (complete Sections A, B, D, F, G, I, J, K and L).
- ☐ Submit a Tier II Extension Submittal for Response Actions taken after expiration of a Waiver, pursuant to 310 CMR 40.0630(4) (complete Sections A, B, D, F, J, K and L, and also complete Sections G and I or Section H).*
- ☐ Submit a Tier II Transfer Submittal for a change in person(s) undertaking Response Actions at a Tier II Site (complete Sections A, B, E, F, G, I, J, K, L, M, N and O).
- ☐ Submit a Tier II Transfer Submittal for a change in person(s) undertaking Response Actions at a Waiver Site, pursuant to 310 CMR 40.0630(6) (complete Sections A, B, E, F, J, K, L, M, N and O, and also complete Sections G and I or Section H).*

You must attach all supporting documentation required for each use of form indicated, including copies of any Legal Notices and Notices to Public Officials required by 310 CMR 40.1400.

*NOTE: The Waiver expires on the effective date of this submittal and all further Response Actions must be taken as a Tier II Site.

C. TIER CLASSIFICATION SUBMITTAL:

Numerical Ranking Score for Disposal Site: (from Numerical Ranking Scoresheet) 482

Proposed Tier Classification of Disposal Site: (check one) ☐ Tier IA ☒ Tier IB ☐ Tier IC ☐ Tier II

Check which, if any, of the Tier I inclusionary criteria are met by the Disposal Site, pursuant to 310 CMR 40.0520:

- ☐ Groundwater is located within an Interim Wellhead Protection Area or a Zone II, and there is evidence of groundwater contamination by an Oil or Hazardous Material at the time of Tier Classification at concentrations equal to or exceeding the applicable RCGW-1 Reportable Concentration set forth in 310 CMR 40.0360.
- ☐ An Imminent Hazard is present at the time of Tier Classification.
- ☐ Check here if this Tier Classification revises a previous submittal for this Disposal Site. You must include a revised Numerical Ranking Scoresheet with this submittal. If a Tier I Permit has been issued, you may also need to submit a Major Permit Modification Application (BWSC 10).

If incorporating additional Release(s) into the Disposal Site, list Release Tracking Number(s): 2-10667

D. TIER II EXTENSION SUBMITTAL REQUIREMENTS:

(State the expiration date of the Tier II Classification or Waiver for the Disposal Site, whichever is applicable: _____)

Attach a statement summarizing why a Permanent or Temporary Solution has not been achieved at the Disposal Site.

A Tier II Extension is effective for a period of one year beyond the current expiration date of the Tier II Classification or Waiver.

E. TIER II TRANSFER SUBMITTAL REQUIREMENTS:

State the proposed effective date of the change in person(s) undertaking Response Actions at the Disposal Site: _____

Attach a statement summarizing the reasons for the proposed change in person(s) undertaking the Response Actions.

All Response Actions must be completed by the deadline applicable to the person who first filed either a Tier Classification Submittal for the Disposal Site or received a Waiver of Approvals.



**TIER CLASSIFICATION, TIER II EXTENSION &
TIER II TRANSFER TRANSMITTAL FORM**

Pursuant to 310 CMR 40.0510 and 40.0560 (Subpart E)

Release Tracking Number

2 - 10067

F. DISPOSAL SITE COMPLIANCE HISTORY SUMMARY:

- > If providing either a Tier Classification Submittal for a Tier II Site or a Tier II Extension Submittal for a Waiver Site, the person named in Section J must provide a Compliance History.
- > If providing a Tier II Extension Submittal for a Tier II Site, the person named in Section J must update their Compliance History since the effective date of the Tier II Classification.
- > If providing a Tier II Transfer Submittal for a Tier II or Waiver Site, the person named in Section M must provide a Compliance History.

Compliance History for (provide only one name per History): _____

☐ Check here if there has been no change to the Compliance History of the person named above (Extension Submittal for a Tier II Site ONLY).

List all permits or licenses that have been issued by the Department that are relevant to this Disposal Site:

PROGRAM:	PERMIT NUMBER:	PERMIT CATEGORY:	FACILITY ID:
Air Quality	_____	_____	_____
Hazardous Waste (M.G.L. c. 21C)	_____	_____	_____
Solid Waste	_____	_____	_____
Industrial Wastewater Management	_____	_____	_____
Water Supply	_____	_____	_____
Water Pollution Control/Surface Water	_____	_____	_____
Water Pollution Control/Groundwater	_____	_____	_____
Water Pollution Control/Sewer Connection	_____	_____	_____
Wetland & Waterways	_____	_____	_____

List all other Federal, state or local permits, licenses, certifications, registrations, variances, or approvals that are relevant to this Disposal Site:

ISSUING AUTHORITY OR PROGRAM, OR DOCUMENTATION TYPE:	IDENTIFICATION NUMBER:	DATE ISSUED:
_____	_____	_____
_____	_____	_____
_____	_____	_____

If needed, attach to this Transmittal Form a statement further describing the Compliance History of this Disposal Site. This statement must describe the compliance history of the person named above with the following:

- (1) DEP regulations; and
- (2) other laws for the protection of health, safety, public welfare and the environment administered or enforced by any other government agency.

Such a statement should identify information such as:

- (1) actions relevant to the Disposal Site taken by the Department to enforce its requirements including, but not limited to, a Notice of Noncompliance (NON), Notice of Intent to Assess Civil Administrative Penalty (PAN), Notice of Intent to Take Response Action (NORA), and an administrative enforcement order;
- (2) administrative consent orders;
- (3) judicial consent judgements;
- (4) similar administrative actions taken by other Federal, state or local agencies;
- (5) civil or criminal actions relevant to the Disposal Site brought on behalf of the DEP or other Federal, state, or local agencies; and
- (6) any additional relevant information.

For each action identified, provide the following information:

- (1) name of the issuing authority, type of action, identification number and date issued;
- (2) description of noncompliance cited;
- (3) current status of the matter; and
- (4) final disposition, if any.



**TIER CLASSIFICATION, TIER II EXTENSION &
TIER II TRANSFER TRANSMITTAL FORM**

Pursuant to 310 CMR 40.0510 and 40.0560 (Subpart E)

Release Tracking Number

2 - 10067

G. CERTIFICATION OF ABILITY AND WILLINGNESS:

- > If providing either a Tier II Classification Submittal or a Tier II Extension Submittal, the person who signs this certification **MUST** be the person named in Section J, or that person's agent.
- > If providing a Tier II Transfer Submittal, the person who signs this certification **MUST** be the person named in Section M, or that person's agent.

I attest under the pains and penalties of perjury that (i) I/the person(s) or entity(ies) on whose behalf this submittal is made has/have personally examined and am/is familiar with the requirements of M.G.L. c. 21E and 310 CMR 40.0000; (ii) based upon my inquiry of the/those Licensed Site Professional(s) employed or engaged to render Professional Services for the disposal site which is the subject of this Transmittal Form and of the person(s) or entity(ies) on whose behalf this submittal is made, and my/that person's(s') or entity's(ies') understanding as to the estimated costs of necessary response actions, that/those person(s) or entity(ies) has/have the technical, financial and legal ability to proceed with response actions for such site in accordance with M.G.L. c. 21E, 310 CMR 40.0000 and other applicable requirements; and (iii) that I am fully authorized to make this attestation on behalf of the person(s) or entity(ies) legally responsible for this submittal. I/the person(s) or entity(ies) on whose behalf this submittal is made is aware of the requirements in 310 CMR 40.0172 for notifying the Department in the event that I/the person(s) or entity(ies) on whose behalf this submittal is made learn(s) that it/they is/are unable to proceed with the necessary response actions.

By: _____ Title: _____
(signature)

For: _____ Date: _____
(print name of person or entity recorded in Section J or M, as appropriate)

If you are submitting either a Tier II Extension Submittal for a Waiver Site or a Tier II Transfer Submittal for a Waiver Site, you may choose to sign the alternative Ability and Willingness Certification found in Section H in place of providing the certification in Section G and the LSP Opinion in Section I.

H. ALTERNATIVE CERTIFICATION OF ABILITY AND WILLINGNESS:

- > If providing a Tier II Extension Submittal for a Waiver Site, the person who signs this certification **MUST** be the person named in Section J, or that person's agent
- > If providing a Tier II Transfer Submittal for a Waiver Site, the person who signs this certification **MUST** be the person named in Section M, or that person's agent.

I attest under the pains and penalties of perjury that (i) I/the person(s) or entity(ies) on whose behalf this submittal is made has/have personally examined and am/is familiar with the requirements of M.G.L. c. 21E and 310 CMR 40.0000; (ii) based upon my inquiry of the Consultant-of-Record for the disposal site which is the subject of this Transmittal Form and of the person(s) or entity(ies) on whose behalf this submittal is made, and my/that person's(s') or entity's(ies') understanding as to the estimated costs of necessary response actions, that/those person(s) or entity(ies) has/have the technical, financial and legal ability to proceed with response actions for such site in accordance with M.G.L. c. 21E, 310 CMR 40.0000 and other applicable requirements; and (iii) that I am fully authorized to make this attestation on behalf of the person(s) or entity(ies) legally responsible for this submittal. I/the person(s) or entity(ies) on whose behalf this submittal is made is aware of the requirements in 310 CMR 40.0172 for notifying the Department in the event that I/the person(s) or entity(ies) on whose behalf this submittal is made learn(s) that it/they is/are unable to proceed with the necessary response actions.

By: _____ Title: _____
(signature)

For: _____ Date: _____
(print name of person or entity recorded in Section J or M, as appropriate)

I. LSP OPINION:

I attest under the pains and penalties of perjury that I have personally examined and am familiar with this transmittal form, including any and all documents accompanying this submittal. In my professional opinion and judgment based upon application of (i) the standard of care in 309 CMR 4.02(1), (ii) the applicable provisions of 309 CMR 4.02(2) and (3), and (iii) the provisions of 309 CMR 4.03(5), to the best of my knowledge, information and belief,

- > if Section B of this form indicates that a Tier I or Tier II Classification Submittal which relies upon a previously submitted Phase I Completion Statement is being submitted, this Tier Classification Submittal has been developed in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000;
- > if Section B of this form indicates that a Phase I Completion Statement or a Tier I or Tier II Classification Submittal which does not rely upon a previously submitted Phase I Completion Statement is being submitted, the response action(s) that is (are) the subject of this submittal (i) has (have) been developed and implemented in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, (ii) is (are) appropriate and reasonable to accomplish the purposes of such response action(s) as set forth in the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, and (iii) complies(y) with the identified provisions of all orders, permits, and approvals identified in this submittal;

SECTION I IS CONTINUED ON THE NEXT PAGE



Massachusetts Department of Environmental Protection
Bureau of Waste Site Cleanup

BWSC-107A

TIER CLASSIFICATION, TIER II EXTENSION &
TIER II TRANSFER TRANSMITTAL FORM

Pursuant to 310 CMR 40.0510 and 40.0560 (Subpart E)

Release Tracking Number

2 - 10067

I. LSP OPINION: (continued)

> If Section B of this form indicates that a Tier II Extension Submittal or a Tier II Transfer Submittal is being submitted, the response action(s) that is (are) the subject of this submittal (i) is (are) being implemented in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, (ii) is (are) appropriate and reasonable to accomplish the purposes of such response action(s) as set forth in the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, and (iii) complies(y) with the identified provisions of all orders, permits, and approvals identified in this submittal.

I am aware that significant penalties may result, including, but not limited to, possible fines and imprisonment, if I submit information which I know to be false, inaccurate or materially incomplete.

☐ Check here if the Response Action(s) on which this opinion is based, if any, are (were) subject to any order, permit(s) and/or approval(s) issued by DEP or EPA. If the box is checked, you MUST attach a statement identifying the applicable order, permit(s) and/or approval(s).

LSP Name: Blake A. Martin LSP #: 5672 Stamp:

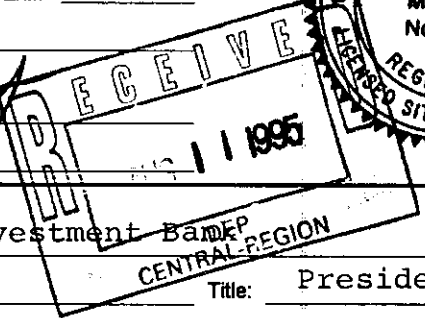
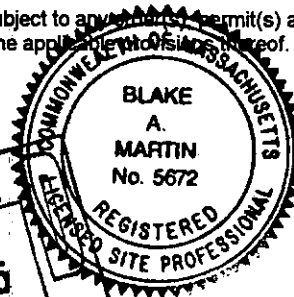
Telephone: 508 970 5388

Ext.: _____

FAX: (optional) 508 453 7667

Signature: [Signature]

Date: 8/8/95



J. PERSON MAKING SUBMITTAL:

Name of Organization: Domestic Loan & Investment Bank

Name of Contact: Nathaniel Baker

Title: President

Street: 815 Reservoir Avenue

City/Town: Cranston

State: RI ZIP Code: 02910

Telephone: 401 943 1600

Ext.: _____

FAX: (optional) 401 943 6708

K. RELATIONSHIP TO DISPOSAL SITE OF PERSON MAKING SUBMITTAL: (check one)

☐ RP or PRP Specify: ☐ Owner ☐ Operator ☐ Generator ☐ Transporter Other RP or PRP: _____

☒ Fiduciary, Secured Lender or Municipality with Exempt Status (as defined by M.G.L. c. 21E, s. 2)

☐ Agency or Public Utility on a Right of Way (as defined by M.G.L. c. 21E, s. 5(j))

☐ Any Other Person Making Submittal Specify Relationship: _____

L. CERTIFICATION OF PERSON MAKING SUBMITTAL:

I, Nathaniel Baker, attest under the pains and penalties of perjury (i) that I have personally examined and am familiar with the information contained in this submittal, including any and all documents accompanying this transmittal form, (ii) that, based on my inquiry of those individuals immediately responsible for obtaining the information, the material information contained in this submittal is, to the best of my knowledge and belief, true, accurate and complete, and (iii) that I am fully authorized to make this attestation on behalf of the entity legally responsible for this submittal. I/the person or entity on whose behalf this submittal is made am/is aware that there are significant penalties, including, but not limited to, possible fines and imprisonment, for willfully submitting false, inaccurate, or incomplete information.

By: [Signature]
(signature)

Title: President

For: Domestic Loan & Investment Bank

Date: 8/09/95

(print name of person or entity recorded in Section J)

Enter address of the person providing certification(s), including Ability and Willingness Certification where applicable, if different from address recorded in Section J:

Street: _____

City/Town: _____

State: _____

ZIP Code: _____

Telephone: _____

Ext.: _____

FAX: (optional) _____

YOU MUST COMPLETE ALL RELEVANT SECTIONS OF THIS FORM OR DEP MAY RETURN THE DOCUMENT AS INCOMPLETE. IF YOU SUBMIT AN INCOMPLETE FORM, YOU MAY BE PENALIZED FOR MISSING A REQUIRED DEADLINE, AND YOU MAY INCUR ADDITIONAL COMPLIANCE FEES.

MASSACHUSETTS DEPARTMENT OF ENVIRONMENTAL PROTECTION
Bureau of Waste Site Cleanup

NUMERICAL RANKING SYSTEM SCORESHEET
(310 CMR 40.1511)

CLASSIFICATION SUBMITTAL		DISPOSAL SITE SCORE					
Initial Submittal	Re-Classification	II	III	IV	V	VI	TOTAL
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>225</u>	<u>82</u>	<u>115</u>	<u>55</u>	<u> </u>	<u>477</u>

Disposal Site Tier Classification	<u>I</u>			II
Permit Category (Tier I Only)	A	<u>B</u>	C	


I. DISPOSAL SITE INFORMATION

DEP Release Tracking Number(s)	2-10067, 2-10667	UTM Coordinates	N: 42° 31' 53" Lat
DEP Disposal Site Number(s)			E: 71° 35' Long.

Disposal Site Name	Former Ernst & Taveras Property		
Disposal Site Address	38 Lancaster County Road		
	City: Harvard MA	Zip: 01451	

Is the Disposal Site classified Tier I because it is located within the boundaries of a Zone II or Interim Wellhead Protection Area and groundwater concentrations equal or exceed RCGW-I at the time of Tier Classification pursuant to 310 CMR 40.0520(2)(a)1.?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Is the Disposal Site classified Tier I because an Imminent Hazard is present at the time of Tier Classification pursuant to 310 CMR 40.0520(2)(a)2.?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>

I attest under the pains and penalties of perjury that I have personally completed this Numerical Ranking System Scoresheet, and have personally examined and am familiar with the information contained in this submittal, including any and all documents accompanying this submittal, and in my professional opinion an judgment based upon: (i) the standard of care in 309 CMR 4.02(1), (ii) the applicable provisions of 309 CMR 4.02(2) and (3), and (iii) the provisions of 309 CMR 4.03(5), to the best of my knowledge, information and belief, this Scoresheet was developed in accordance with the applicable provisions of M.G.L. c. 21E as 310 CMR 40.0000. I am aware that significant penalties may result, including, but not limited to, possible fines and imprisonment, if I submit information which I know to be false, inaccurate or materially incomplete.

 Licensed Site Professional Signature <u>Blake A. Martin</u> LSP Name (Printed) <u>Mr. Nathaniel B. Baker</u>	<u>5672</u> LSP Registration Number <u>Ground Water Assoc.</u> Company Name	<u>3/25/96</u> <i>BM</i> Date <u>508 970 5388</u> Telephone Number
--	--	---

Responsible Party, Potentially Responsible Party, or Other Person who will provide certification in accordance with 310 CMR 40.0009.

40.1511 (Continued)

II. EXPOSURE PATHWAYS

II. EXPOSURE PATHWAYS				
Score according to 40.1512 - Exposure Pathway Designation Criteria				
MEDIA	DESIGNATION			
	NONE or NOT APPLICABLE	EVIDENCE OF CONTAMINATION	POTENTIAL EXPOSURE PATHWAY	LIKELY OR CONFIRMED EXPOSURE PATHWAY
A. SOIL (Includes Sediment)	0	15	100	150
B. GROUNDWATER	0	20	100	150
C. SURFACE WATER (Includes Wetlands)	0	20	100	150
D. AIR	0	15	100	200

Note: Score only the highest value for each media, i.e., score None or Not Applicable or Evidence of Contamination or Potential Exposure Pathway or Likely or Confirmed Exposure Pathway.

II. (A - D)	Summary Rationale for Section II A - D Values and Phase I Report References
	Preliminary investigation information with soil borings, monitoring wells, test pit excavations, combined with RAM activities including soil removal indicate the following:
	-remnant TPH concentrations in soil exist.
	-ground water at the site also indicates remnant TPH contamination.
	-chlorinated solvents (most notably 1,2-Dichloroethane) in extremely low levels have been identified in two bedrock wells, although no potable supplies have been impacted. (RTN 2-10667)

II.E	OHM SOURCES		
Number of OHM Sources	1 0	2 25	≥ 3 50

SECTION II SCORE (A. + B. + C. + D. + E.)					
A. 100	B. 100	C. 0	D. 0	E. 25	TOTAL: (15 - 700) 225

Check here if Section VI has been used to amend the score for this Section of the NRS.	<input type="checkbox"/>
--	--------------------------

40.1511 (Continued)

III. DISPOSAL SITE CHARACTERISTICS

III.A. OHM TOXICITY SCORE <i>Highest OHM Toxicity Score</i> <i>From Table III.A. or Worksheet III.A.1. on Following Pages.</i>	
OHM Scored: <u>#2 Fuel Oil</u> Concentration and Media: <u>8,500 soil</u>	Toxicity Score (1 - 80) <u>25</u>

III.B. MULTIPLE OHMs		
More Than One OHM With an OHM Toxicity Score of ≥ 30	No <u>0</u>	Yes 30

III.C. OHM MOBILITY and PERSISTENCE <i>Score according to 40.1514 - OHM Mobility and Persistence</i>	
OHM Scored: <u>1,2 Dichloroethane</u>	Score (0 - 50) <u>45</u>

III.D. DISPOSAL SITE HYDROGEOLOGY <i>Score according to 40.1515 - Soil Permeability</i>			
DEPTH TO GROUNDWATER (in feet)	SOIL PERMEABILITY		
	Low	Medium	High
> 25	2	4	8
10.1 - 25	4	8	12
5.1 - 10	8	12	16
0 - 5	<u>12</u>	16	20

SECTION III SCORE (A + B + C + D)				
A. <u>25</u>	B. <u>0</u>	C. <u>45</u>	D. <u>12</u>	TOTAL: (3 - 180) <u>82</u>

Check here if Section VI has been used to amend the score for this Section of the NRS.	<input type="checkbox"/>
--	--------------------------

40.1511 (Continued)

Table III.A. OHM TOXICITY SCORE							
OHM	CONCENTRATION (soil/sediment: µg/g; surface/groundwater µg/l)						
	≤ 99	100 - 999	1,000 - 9,999	10,000 - 100,000	> 100,000 NAPL < 0.5"	NAPL 0.5" - 12"	NAPL > 12"
Arsenic	20	30	40	50	60		
Benzene	15	25	35	45	55	65	75
Bis(2-ethoxy)phthalate	10	20	30	40	50	60	70
Cadmium	10	20	30	40	50		
Carbon Tetrachloride	20	30	40	50	60	70	80
Chlorobenzene	5	15	25	35	45	55	65
Chromium III	1	10	20	30	40		
Chromium VI	10	20	30	40	50		
Coal Tar	5	15	25	35	45	55	65
Cyanide	5	15	25	35	45		
1,1 Dichloroethane	10	20	30	40	50	60	70
1,2 Dichloroethane	10	20	30	40	50	60	70
Ethylbenzene	5	15	25	35	45	55	65
Ethylene Dibromide	20	30	40	50	60	70	80
#2 Fuel Oil (cargu product)	5	15	25	35	45	55	65
Gasoline (virgin product)	10	20	30	40	50	60	70
Lead	20	30	40	50	60		
Mercury	20	30	40	50	60	70	80
Methylene Chloride	10	20	30	40	50	60	70
Methyl Ethyl Ketone	5	15	25	35	45	55	65
Methyl Tert Butyl Ether	10	20	30	40	50	60	70
Nickel	5	15	25	35	45		
Phenol	1	10	20	30	40	50	60
Petrol	10	20	30	40	50	60	70
PCBs	20	30	40	50	60	70	80
Tetrachloroethylene	10	20	30	40	50	60	70
Toluene	1	10	20	30	40	50	60
1,1,1 Trichloroethane	5	15	25	35	45	55	65

Table III.A. OHM TOXICITY SCORE

OHM	CONCENTRATION (soil/sediment: µg/g; surface/groundwater µg/l)						
	≤ 99	100 - 999	1,000 - 9,999	10,000 - 100,000	> 100,000 NAPL < 0.5"	NAPL 0.5" - 12"	NAPL > 12"
Trichloroethylene	15	25	35	45	55	65	75
Vinyl Chloride	15	25	35	45	55	65	75
Xylenes	1	10	20	30	40	50	60
Zinc	1	10	20	30	40		

Circle
Applicable
Soils

NON-TEXT PAGE

40.1511 (Continued)

Use Worksheet III.A.1. to determine the OHM Toxicity Score for OHM not listed in Table III.A.
See 40.1513 for Human Health-Based Toxicity Values for each OHM.

Worksheet III.A.1		OHM TOXICITY SCORE						
HUMAN HEALTH-BASED TOXICITY VALUE	CONCENTRATION							
	Use µg/g for Soil and µg/l for Surface Water and Groundwater							
	≤ 99	100 - 999	1,000 - 9,999	10,000 - 100,000	> 100,000 NAPL < 0.5"	NAPL 0.5" - 12"	NAPL > 12"	
< 5	1	10	20	30	40	50	60	
5 - 19	5	15	25	35	45	55	65	
20 - 29	10	20	30	40	50	60	70	
30 - 39	15	25	35	45	55	65	75	
40 - 50	20	30	40	50	60	70	80	

[illegible]

40.1511 (Continued)

IV. HUMAN POPULATION AND LAND USES

IV.A. HUMAN POPULATION				
Residential Population Within 1/2 Mile	None 0	1 - 99 <u>5</u>	100 - 999 10	≥ 1,000 15
Institutions Within 500 feet	None 0		One or More <u>10</u>	
On-Site Workers	None <u>0</u>	1 - 99 5	100 - 999 10	≥ 1,000 15

IV.B. AQUIFERS		
Sole Source Aquifer	No <u>0</u>	Yes 25
Name: _____		
Potentially Productive Aquifer	No <u>0</u>	Medium or High 15

IV.C. WATER USE					
Proximity of Disposal Site to Public Drinking Water Supply Source	Not Applicable (NA) 0			Zone A 20	Zone II, FWPA, or SW Intake ≤ 400' <u>50</u>
Persons Served by Public Drinking Water Supply	NA <u>0</u>	25 - 999 5	1,000 - 4,999 10	5,000 - 49,999 20	≥ 50,000 25
Private Water Supplies Within 500 Feet	None 0		Commercial Industrial 10	Agriculture Residential (Not Ingested) 15	Drinking Food Processing <u>25</u>
Alternative Public Water Supply Available (Viable Public Water Supply in Disposal Site Community and Public Water Connection ≤ 500 Feet from Site)	Yes 0			No <u>25</u>	

SECTION IV SCORE (A + B + C)			
A. <u>15</u>	B. <u>0</u>	C. <u>100</u>	TOTAL: (0 - 205) <u>115</u>

Check here if Section VI has been used to amend the score for this Section of the NRS.



40.1511 (Continued)

Table V.B. ENVIRONMENTAL TOXICITY SCORE					
OHM	CONCENTRATION (soil/sediment: µg/g; surface/groundwater µg/l)				
	< 1	1 - 99	100 - 999	1,000 - 9,999	≥ 10,000
Arsenic	5	10	15	20	25
Benzene	0	1	5	10	15
Bis(2-ethylhexyl)phthalate *	5	10	15	20	25
Cadmium	10	15	20	25	30
Carbon Tetrachloride	0	1	5	10	15
Chlorobenzene *	5	10	15	20	25
Chromium III	1	5	10	15	20
Chromium VI	5	10	15	20	25
Coal Tar *	5	10	15	20	25
Cyanide	5	10	15	20	25
1,1 Dichloroethane *	5	10	15	20	25
1,2 Dichloroethane	0	1	5	10	15
Ethylbenzene	0	1	5	10	15
Ethylene Dibromide *	5	10	15	20	25
#1 Fuel Oil (virgin product) *	1	5	10	15	20
Gasoline (virgin product) *	5	10	15	20	25
Lead	5	10	15	20	25
Mercury	15	20	25	30	35
Methylene Chloride *	5	10	15	20	25
Methyl Ethyl Ketone *	5	10	15	20	25
Methyl Tert Butyl Ether *	1	5	10	15	20
Nickel	1	5	10	15	20
Phenol	0	1	5	10	15
PAHs *	5	10	15	20	25
PCBs	15	20	25	30	35
Tetrachloroethylene	0	1	5	10	15
Toluene	0	1	5	10	15
1,1,1 Trichloroethane	0	1	5	10	15
Trichloroethylene	0	1	5	10	15

40.1511 (Continued)

V. ECOLOGICAL POPULATION

V.A. ENVIRONMENTAL RESOURCE AREAS			
RESOURCE	LOCATION		
Area of Critical Environmental Concern	> 500' from Site 0	≤ 500' from Site 20	On-Site 30
Species of Special Concern, Threatened or Endangered Species Habitat	> 500' from Site 0	On-Site or ≤ 500' from Habitat 30	
Wetlands, Certified Vernal Pool, or Outstanding Resource Water	> 100' from Site 0	≤ 100' from Site 20	On-Site 30
Fish Habitat	> 500' from Site 0	≤ 500' from Site 20	On-Site 30
Protected Open Space (Local/State/Federal/Trustee)	> 500' from Site 0	≤ 500' from Site 20	On-Site 30

SCORE SECTION V.B. ONLY IF SECTION V.A. SCORE IS ≥ 30.

V.B. ENVIRONMENTAL TOXICITY SCORE	
<i>Highest Environmental Toxicity Score From Table V.B. or Worksheet V.B.1. on Following Pages.</i>	
OHM Scored: #2 Fuel Oil (virgin product)	Toxicity Score (1 - 35)
Concentration and Media: Soil 1,800 ppm, 10/19/94	15

SECTION V. SCORE (A. + B.)		
A. 40	B. 15	TOTAL: (0 - 185) 55

Check here if Section VI has been used to amend the score for this Section of the NRS.	<input type="checkbox"/>
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NON-TEXT PAGE

Table V.B.		ENVIRONMENTAL TOXICITY SCORE				
OHM		CONCENTRATION (soil/sediment: µg/g; surface/groundwater µg/l)				
		< 1	1 - 99	100 - 999	1,000 - 9,999	≥ 10,000
Vinyl Chloride	*	5	10	15	20	25
Xylenes	*	5	10	15	20	25
Zinc		1	5	10	15	20

* Scores derived by default methods 40.1516(2).

40.1511 (Continued)

Use Worksheet V.B.1. to determine Environmental Toxicity Scores for OHM not listed in Table V.B.
See 40.1516 for Environmental Toxicity Values for each OHM.

Worksheet V.B.1 ENVIRONMENTAL TOXICITY SCORE					
ENVIRONMENTAL TOXICITY VALUE	CONCENTRATION				
	Use µg/g for Soil and µg/l for Surface Water or Groundwater				
	< 1	1 - 99	100 - 999	1,000 - 9,900	≥ 10,000
10	0	1	5	10	15
20	1	5	10	15	20
30	5	10	15	20	25
40	10	15	20	25	30
50	15	20	25	30	35

V.B.1. OHM and Concentrations Used in Section V.B.1.				
OHM	Environmental Toxicity Value	Concentration (Soil - µg/g)	Concentration (Water - µg/l)	Environmental Toxicity Score

40.1511 (Continued)

VI. MITIGATING DISPOSAL SITE-SPECIFIC CONDITIONS

[illegible]

To: Shu Lien Cheng@BAS FCO@DEP Boston
Cc:
Bcc: Margaret Stolfa@Legal@DEP Boston
From: Robert Adler@BWSC RR@DEP CERO
Subject:
Date: Thursday, February 29, 1996 15:42:57 EST
Attach:
Certify: N
Forwarded by:

Hi,

Thankyou for the phone mail message that you received the remaining payment for the Permit Application for the Former Ernst & Tavaras Property (Domestic Bank) Site in Harvard and that you entered a start date in PIMS for 2/27. Thanks very much for your attention and follow-up on this matter.

GROUND WATER ASSOCIATES, INC.

16 Commercial Drive, P.O. Box 280, Dracut, Massachusetts 01826 (508) 970-5388

April 23, 1996

Ms. Helen Murphy
Executive Office of Environmental Affairs
100 Cambridge Street, 20th Floor
Boston, Massachusetts 02202

Re: CORRECTION TO LETTER DATED 4/22/96

Dear Ms. Murphy:

Enclosed is an announcement for a Tier IB Classification for the property located at 38 Lancaster County Road in Harvard, Massachusetts. The Tier I Permit Application is being submitted to DEP's Worcester Regional Office. Please disregard the public notice included in the letter dated 4/22/96. Should you have any questions, please do not hesitate to contact me.

Very truly yours,

GROUND WATER ASSOCIATES, INC.

Blake A. Martin
Blake A. Martin
Regional Coordinator

BAM/kap
Enclosure
S:\GWA\Clerical\9674423

**Public Notice For
Tier Classification Application
38 Lancaster County Road
Harvard, Massachusetts**

This notice is to announce the proposed Tier IB Classification for the property located at 38 Lancaster County Road, Harvard, Massachusetts. The site is located on the north side of Lancaster County Road. The site includes RTN#2-10067 and 2-10667.

Copies of the NRS score sheet, LSP Evaluation Opinion Transmittal Form (BWSC 110) and the Tier Classification Forms (BWSC 02 - Tier 1B and BWSC 107A), along with Phase I information by Ground Water Associates are available (as of April 22, 1996) for review at the Central Regional Office of the DEP in Worcester.

The permit applicant is Domestic Loan & Investment Bank, 815 Reservoir Avenue, Cranston, Rhode Island 02910 (telephone: 401 943 1600). Public comments on the permit application can be mailed to Blake A. Martin, LSP, Ground Water Associates, Inc., PO Box 280, Dracut, MA 01826, and will be accepted until May 14, 1996.

A person who submits written comment during the public comment period may petition to intervene to become a party in the proceeding. Failure to submit such comment may result in waiver of any right to an adjudicatory hearing pursuant to 310 CMR 40.0770(2).

GROUND WATER ASSOCIATES, INC.

16 Commercial Drive, P.O. Box 280, Dracut, Massachusetts 01826 (508) 970-5388

April 23, 1996

Harvard Board of Selectmen
13 Ayer Road
Harvard, Massachusetts 01451

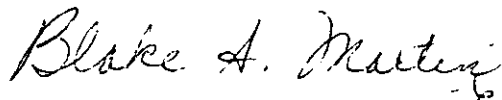
Re: **CORRECTION TO LETTER DATED 4/22/96**

Dear Board Members:

Enclosed is an announcement for a Tier IB Classification for the property located at 38 Lancaster County Road in Harvard, Massachusetts. The announcement will be published in the Harvard Post. The Tier I Permit Application is being submitted to DEP's Worcester Regional Office. Please disregard the public notice included in the letter dated 4/22/96. Should you have any questions, please do not hesitate to contact me.

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GROUND WATER ASSOCIATES, INC.



Blake A. Martin
Regional Coordinator

BAM/kap
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GROUND WATER ASSOCIATES, INC. ●

16 Commercial Drive, P.O. Box 280, Dracut, Massachusetts 01826 (508) 970-5388

April 23, 1996

Mr. Ira Grossman
Nashoba Board of Health
30 Central Avenue
Ayer, Massachusetts 01432

Re: **CORRECTION TO LETTER DATED 4/22/96**

Dear Mr. Grossman:

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Blake A. Martin

Blake A. Martin
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BAM/kap
Enclosure
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GROUND WATER ASSOCIATES, INC.

16 Commercial Drive, P.O. Box 280, Dracut, Massachusetts 01826 (508) 970-5388

April 23, 1996

Harvard Board of Selectmen
13 Ayer Road
Harvard, Massachusetts 01451

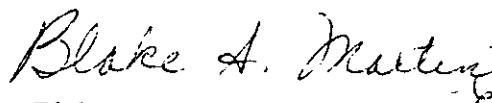
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Ground Water Associates
PO Box 280, 16 Commercial Drive
Dracut, MA 01826
508-970-5388 - Phone
508-453-7667 - Fax

FAX COVER SHEET

GWA Project # 322-652

DATE: 4-25-96

PHONE:

TO: Robert Adler

FAX: 508 792-7621

FROM: Blake Martin

RE: RTN 2-10067 & 2-10667

CC:

NUMBER OF PAGES INCLUDING COVER SHEET: 12

MESSAGE:

Following is a copy of the Supplemental Phase I
Information, text only (no Appendices included with
this fax transmittal).

GROUND WATER ASSOCIATES, INC.

16 Commercial Drive, P.O. Box 280, Dracut, Massachusetts 01826 (508) 970-5388

SUPPLEMENTAL PHASE I INFORMATION 38 LANCASTER COUNTY ROAD HARVARD, MASSACHUSETTS

DEP Release Tracking Numbers 2-10067 & 2-10667

April 19, 1996

Prepared for

Domestic Loan & Investment Bank
815 Reservoir Avenue
Cranston, Rhode Island

Prepared by

Ground Water Associates, Inc.
16 Commercial Drive
Dracut, Massachusetts

LSP Opinion

Ongoing Response Actions

RTN 10067, RTN 10667

In addition to the initial test pit excavations and monitoring well installations, a soil excavation program was undertaken as a RAM. Although the soil excavation was successful in removing a large percentage of the TPH-impacted soils, remnant levels remain in both the soil and ground water at the site. Additional assessment to properly characterize and remediate this concern is required.

Regarding the 1,2-Dichloroethane impacted ground water, additional assessment is needed and planned for April and May 1996.


Blake A. Martin

LSP 5672

Date: 4/22/96

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3.3 WASTE MANAGEMENT HISTORY	3
3.4 ENVIRONMENTAL PERMITS AND COMPLIANCE HISTORY	3
4.0 SITE HYDROGEOLOGY	3
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8.0 CONCLUSIONS	6
9.0 REFERENCES	7

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APPENDIX A: Immediate Response Action Status Report (TPH Release for 11/05/93-03/05/94)

APPENDIX B: Immediate Response Action Status Report (TPH Release for 03/05/94-09/05/94)

APPENDIX C: Immediate Response Action Status Report (TPH Release for 09/05/94-03/05/95)

APPENDIX D: Release Abatement Measure Status Report (TPH Release)

APPENDIX E: Immediate Response Action Plan (DCE Release)

APPENDIX F: Immediate Response Action Status Report (DCE)

APPENDIX G: Environmental FirstSearch Report

APPENDIX H: Information on Former and Current Disposal Systems

s:\Dracut\gwa\ops\jobs\652dom\ph1supt

1.0 INTRODUCTION

On behalf of our client, Domestic Loan & Investment Bank, Ground Water Associates, Inc. (GWA) has prepared the following Supplemental Phase I information. This report is intended to provide information not included in the previous site investigation reports which have been submitted to the Massachusetts Department of Environmental Protection (DEP) for the property located at 38 Lancaster Road, Harvard, Massachusetts (Site). The previously submitted reports, along with additional information which is described in this report are provided in the Appendices.

2.0 GENERAL SITE INFORMATION

The Site has been assigned DEP Release Tracking Numbers 2-10067 for an oil release, and 2-10667 for a 1,2, Dichloroethane release. The Site's geographical location is 42 degrees, 31 minutes, and 53 seconds North Latitude and 71 degrees, 35 minutes East Longitude. The Universal Transvers Mercator (UTM) coordinates are 4711508 m N and 287706 m E. Figure 1 provides a site location map depicting the 500 foot and one half mile radius from the boundaries of the Site. There are four persons living at the residential house located on the Site. There is an estimated population of approximately 600 persons within one half mile from the Site. There is one day time medical facility (Concord Hillside Medical Center) located within 500 feet from the Site. Previously the medical facility property was to be a location for a day care facility. The Site is located within 500 feet of an unnamed stream which feeds Bowers Brook to the east. A drinking water well is located on the Site. The Site is located in protected open space (see ACEC Map in Appendix G).

Figure 2 provides a Site Schematic showing the locations of monitoring wells and test pits completed to date and the known aerial extent of total petroleum hydrocarbon (TPH) impact.

3.0 SITE HISTORY

3.1 OWNERSHIP HISTORY

The property known as 38 Lancaster Road is currently owned by Mr. Donald Siegrist who purchased the property from Domestic Loan & Investment Bank. However, the adjacent parcels # 21.1, 21.2, and 21.3 on which the oil and hazardous materials have been identified, are currently owned by Domestic Loan & Investment Bank.

Prior to the purchase of the property by Mr. Siegrist, Domestic Loan and Investment Bank foreclosed on the approximate 40 acre tract of land from the Bell family. The Bell family maintained the property as a residence and did not use the underground storage tanks (USTs) which were found in 1993. The property was sold to the Bell family in 1991 by Dr. Taveras

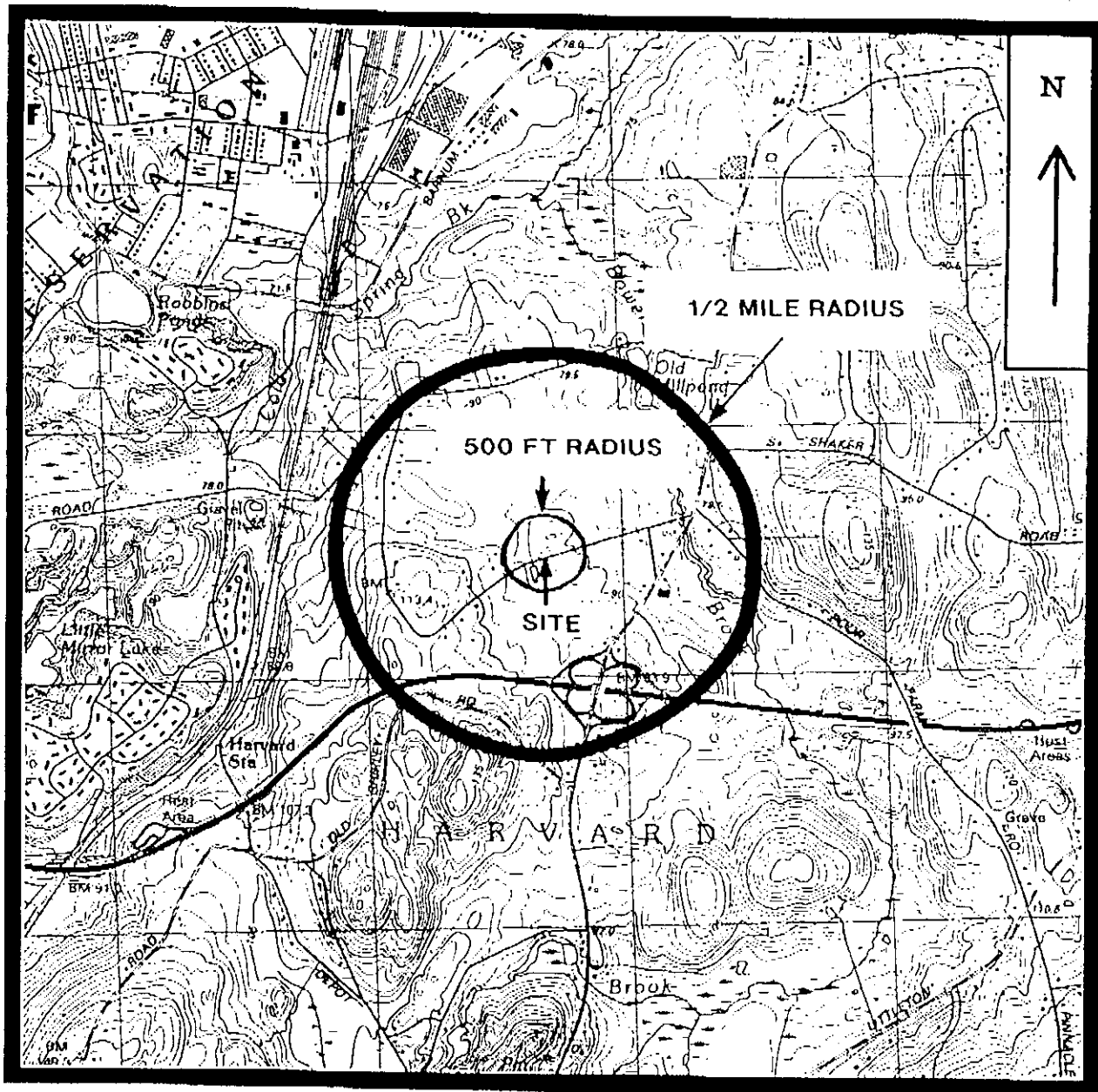


FIGURE 1. SITE LOCATION MAP

Base map adapted from U.S.G.S. 7.5 X 15 Minute Topographic Quadrangle for Ayer, Massachusetts, 1988.

Approximate Scale: 1 inch = 2,080 feet

who owned the lot since 1976. Dr. Taveras bought the property in 1976 from the Ernst family who operated the Harvard Home Heating Oil Service from some time in the 1950s until 1962.

3.2 RELEASE HISTORY

Reportedly the Site contained USTs for home heating oil as well as gasoline. On site dispensers and a wholesale commercial business was conducted approximately 150 to 200 feet southeast of the current home. As fire department records are incomplete, previous tank removals, spills, and releases are not well documented prior to 1975. However, closure of the gasoline dispensers and changes to the number and structure of USTs was undertaken.

The current (since 1993) release history for both petroleum products (RTN #2-10067) and for 1,2 Dichloroethane (RTN # 2-10667) is described in GWA IRA and RAM Status Reports provided in Appendices A, B, C, D, and F.

3.3 WASTE MANAGEMENT HISTORY

No verifiable records were kept at the subject property for the management of wastes related to oil and hazardous materials. However, primary interviews with local property owners indicated that household wastes and domestic septage would have been disposed in a septic system to the rear of the current house. Since 1989 the domestic waste system has been discharging to two holding tanks approximately 300 feet to the northeast of the house. The location of the former and current subsurface disposal systems are provided in Appendix H based upon a map by J.R. Henry Associates, 1994.

3.4 ENVIRONMENTAL PERMITS AND COMPLIANCE HISTORY

Prior to the discovery of oil and hazardous materials and the assigning of RTNs 2-10067 and 2-10667, no records of environmental permits or non-compliance issues could be located.

4.0 SITE HYDROGEOLOGY

The Site is located in an area which is mapped as Lower Silurian aged granites (E-an Zen, 1983). The surficial deposits are mapped as tills with minor deposits of sorted material (Brackley, 1977). Based upon the regional topography and surficial drainage patterns, the regional ground water flow direction is toward the north-northeast. The topography of the Site slopes moderately downward toward the northeast. Based upon the Site topography and the drainage pattern of the unnamed stream which flows through the Site, the ground water flow direction at the Site is expected to be toward the northeast. A Site subsurface characterization based upon test pit data is provided in the Ground Water Associates letter report to Domestic

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Bank dated June 27, 1994 (included as Attachment to IRA Status Report included in Appendix B).

5.0 NATURE AND EXTENT OF CONTAMINATION

Total petroleum hydrocarbon concentrations of a maximum of 1,800 milligrams per kilogram (mg/kg) remain in the subsurface soil based upon a post excavation sample collected from station Number 28 on October 19, 1994 and from test pit samples collected in 1993 and 1994. Field screening results of VOCs based upon photoionization detector readings from soil headspace samples indicates VOC headspace concentrations of up to 155 parts per million (ppm) remaining in the soil. A maximum 1,2 Dichloroethane concentration of 13 micrograms per liter (ug/l) has been detected in the bedrock aquifer based upon the ground water sample collected from a bedrock well on Lot 21.3 on September 7, 1994. The approximate extent of the TPH concentrations which exceed the Massachusetts Contingency Plan (MCP) Method 1, Soil-1/GW-1 Risk Characterization standard is shown on Figure 2. Based upon the TPH by EPA Method 418.1 results of ground water samples collected from eight monitoring wells on May 10, 1994, the extent of ground water exceeding the MCP Method 1 GW-1 Risk Characterization limits is in an area approximately 100 feet wide, east of the house which is on Site. The 1,2 Dichloroethane contamination has only been identified in the bedrock aquifer and not in the soils. The extent of the 1,2 Dichloroethane contamination has not yet been adequately characterized and will be addressed in current subsurface investigations.

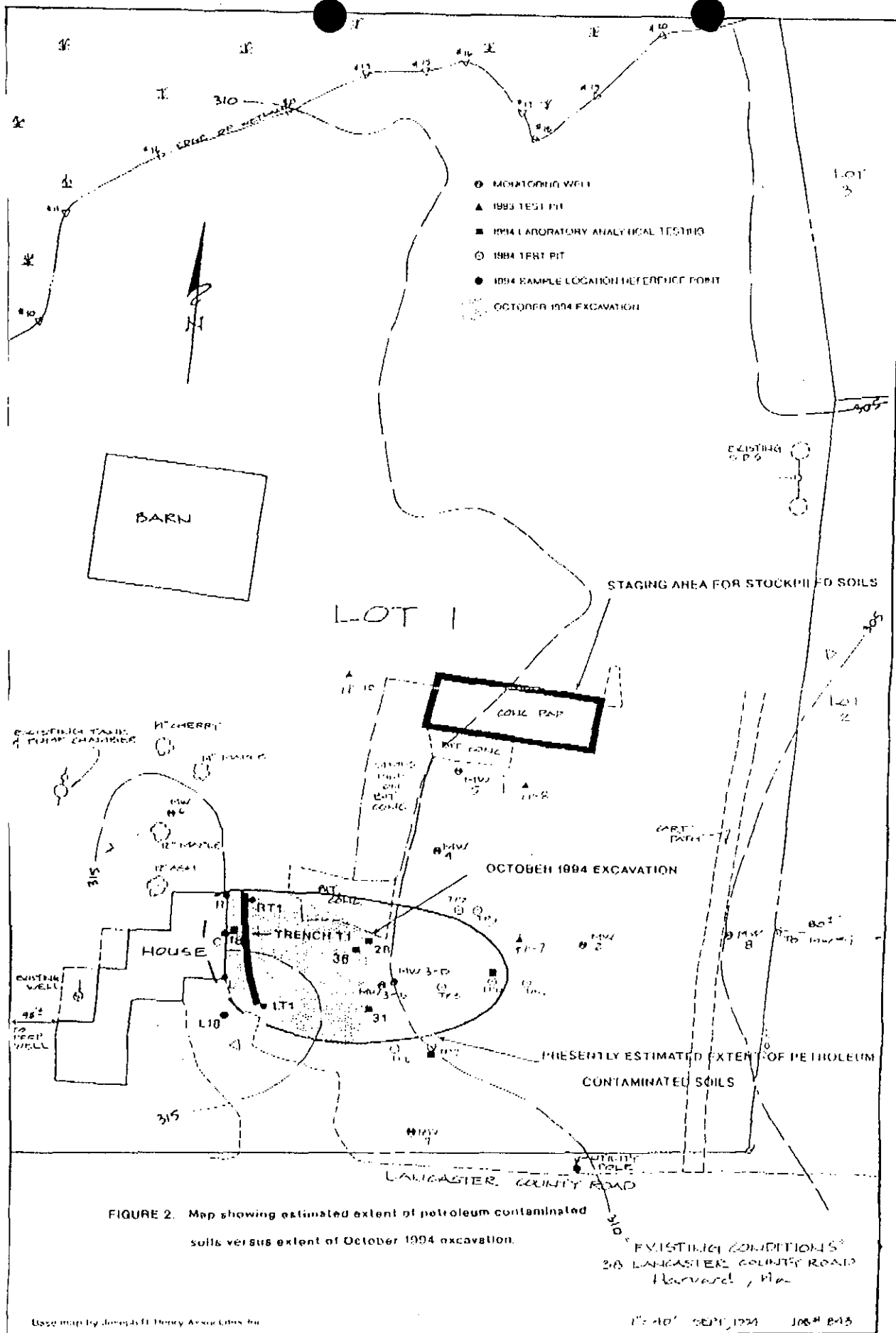
The concentrations of 1,2 Dichloroethane do not indicate the presence of a separate phase in the subsurface. The laboratory analytical results are included as Attachments to the previously submitted IRA and RAM Status Reports included the Appendices.

6.0 MIGRATION PATHWAYS AND EXPOSURE POTENTIAL

The dissolved 1,2 Dichloroethane and No. 2 fuel oil in the ground water would be expected to migrate down gradient toward the northeast.

Potential human exposure to the No. 2 fuel oil includes dermal contact or ingestion through the soil. However, this contact would require that the oil impacted soils be exposed through excavation as the field screening and laboratory results of surficial soil samples do not indicate the presence of TPH at the ground surface. Given the known ground water concentrations and the dilution and attenuation of the fuel oil compounds and 1,2 Dichloroethane as they migrate downgradient, it is extremely unlikely these compounds could exceed drinking water standards at the downgradient drinking water wells.

The Site is mapped as a location within 500 feet of protected open space on the ACEC map. The protected open space area is to the east and downgradient from the Site. Therefore, fuel oil or 1,2 Dichloroethane impacted ground water from the Site could potentially migrate to the



Ground Water Associates
PO Box 280, 16 Commercial Drive
Dracut, MA 01826
508-970-5388 - Phone
508-453-7667 - Fax

**FAX COVER SHEET**

GWA Project # 322-652

DATE: 4-25-96

PHONE:

TO: Robert Adler

FAX: 508 792-7621

FROM: Blake Martin

RE: ATN 2-10067 & 2-10667

CC:

NUMBER OF PAGES INCLUDING COVER SHEET: 3

MESSAGE:

pages 6 and 7 from
Following is a copy of the Supplemental Phase I
Information, text only (no Appendices included with
this fax transmittal).

IF THERE IS ANY PROBLEM WITH THIS TRANSMISSION, PLEASE CONTACT US AT
508-970-5388 AS SOON AS POSSIBLE

protected open space area. However, it is unlikely these compounds would exceed drinking water concentrations due to the dilution and attenuation of the compounds as they migrate downgradient.

7.0 EVALUATION FOR IMMEDIATE RESPONSE ACTIONS

Based upon the presence of ground water concentrations of 1,2 Dichloroethane at concentrations exceeding the ground water drinking standards, an Immediate Response Action Plan has been submitted for the Site.

8.0 CONCLUSIONS

1. Ground water with 1,2 Dichloroethane concentrations exceeding the MCP Method 1, GW-1 Risk Characterization Limits has been identified in two bedrock wells. Currently IRA plans to conduct pumping tests on these wells are scheduled for April and May 1996.
2. The soils containing the highest concentrations of TPH in the vicinity of the former USTs has been excavated and transported by Carney Brothers Inc., to the Northern Disposal Inc. landfill in East Bridgewater, Massachusetts where it was used as landfill cover.
3. Additional subsurface characterization is needed for the determination of current concentrations and the need for further remedial actions under the MCP.

Zen, E-an, Editor 1983, Bedrock Geologic Map of Massachusetts. U.S.G.S., prepared in cooperation with the Commonwealth of Massachusetts, Department of Public Works, and Joseph A. Sinnott, State Geologist.

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Supplemental Phase I Information
Domestic Loan & Investment Bank

-7-

4/22/96 [322-652]
Ground Water Associates, Inc.



Massachusetts Department of Environmental Protection
Bureau of Waste Site Cleanup

RTN 2-10067

Transmittal # 107471

Also RTN 2-10667

BWSC 01 - Tier IA
BWSC 02 - Tier IB
BWSC 03 - Tier IC

Initial Application for Response Action Permit for Tier I Disposal Sites

A: Disposal Site Information

☐ Check here if there is more than one applicant.

Note:

Tier IA=
NRS \geq 550;

Tier IB=
450 \leq NRS < 550;

Tier IC=
350 \leq NRS < 450

1. Which permit category are you applying for?

- ☐ Tier IA (Permit Category: BWSC 01)
☒ Tier IB (Permit Category: BWSC 02)
☐ Tier IC (Permit Category: BWSC 03)

APR 25 1996

2. Release Tracking #2-10067 and 2-10667 (Former Ernst & Taveras

Disposal Site Name Property)

38 Lancaster County Road

Street

Harvard, MA

01451

City/Town

Zip code

3. List each release tracking number and date of release notification for each release or threat of release that is the subject of this permit application. For those sites identified on the Transition List of Sites and Locations (the 1993 Transition List) and any addendum thereto (pursuant to 310 CMR 40.0600) provide the Disposal Site Number in place of the Release Tracking Number (attach additional pages if needed).

Release Tracking Number

Date of Notification

2-10067

11/05/93

2-10667

02/15/95

4. List the map(s) and parcel number(s) of each lot that is the subject of this permit application. Attach a copy of each tax assessor's map(s) showing these parcels:

Municipal Tax Assessor's Map(s)

Parcel Number(s)

Map #4 (revised through 1/1/94)

20.1.1, 21.2.1

Map #8 (revised through 1/1/94)

20.1.1, 21.1.1, 21.2, 21.3

5. Basis for Tier Classification:

a. ☒ Numerical Ranking Score (NRS) Score: 477

b. ☐ Inclusionary criteria:

Basis for inclusionary criteria (complete only if 5b is applicable):

- ☐ Evidence of groundwater contamination with OHM exceeding applicable RCGW-1 reportable concentrations and such groundwater is located within an Interim Wellhead Protection Area or Zone II.
- ☐ Disposal site at which an Imminent Hazard is present at the time of Tier Classification.



Massachusetts Department of Environmental Protection
Bureau of Waste Site Cleanup

BWSC 01 – Tier IA
BWSC 02 – Tier IB
BWSC 03 – Tier IC

Initial Application for Response Action Permit for Tier I Disposal Sites

RTN 2-10067

Also RTN 2-10667 Transmittal # 107471

Note:

1. If there is only one applicant, you do not need to complete this section.

2. If there is more than one applicant, then the Primary Representative should complete this page.

3. The Primary Representative for multiple applicants will receive the annual compliance assurance fee statement for the disposal site.

BE Primary Representative Information

1. Primary Representative

Is the Primary Representative also an applicant? ☐ Yes ☐ No

Name of Organization

Name

Title

Street

City/Town

State

Zip code

Telephone

Contact Name (if different)

Contact Telephone

2. Primary Representative Certification

"I certify under the penalties of law that I am fully authorized to act on behalf of all persons submitting this permit application for the following purposes:

- to receive oral and written correspondence from DEP with respect to this application;
- to receive oral and written correspondence from DEP with respect to the performance of response actions upon issuance of a Tier I permit; and
- to receive any statement of fee required by 310 CMR 4.03(3) upon issuance of a Tier I permit."

"I am aware that there are significant penalties, including, but not limited to, possible fines and imprisonment, for willfully submitting false, inaccurate or incomplete information."

Name (Print)

Position or title

Signature

Date



Massachusetts Department of Environmental Protection
Bureau of Water Site Cleanup

BWSC 01 – Tier IA
BWSC 02 – Tier IB
BWSC 03 – Tier IC

Initial Application for Response Action Permit for Tier I Disposal Sites

RTN 2-10067

Also RTN 2-10667 Transmittal # 107471

Note:

ALL applicants must complete this section. Where there is more than one APPLICANT, make copies of this page, have each applicant provide this information, and then attach all copies to this Permit Application.

C Applicant Information

1. Applicant:

Domestic Loan & Investment Bank
Name of Organization
Nathaniel Baker
Applicant Name
President
Title
815 Reservoir Avenue
Street
Cranston RI 02910
City/Town State Zip code
401 943 1600
Telephone
Contact Name (if different)
Contact Telephone

2. Type of applicant (check one):

- ☐ individual
- ☐ sole proprietorship
- ☐ partnership
- ☐ corporation
- ☐ realty trust
- ☐ state authority
- ☐ municipality
- ☐ state agency
- ☐ federal agency
- ☒ other, please specify: Fuduciary, Secured Lender

3. Relationship of applicant to disposal site (check all that apply):

- ☐ current owner (as defined in Section 5(a)(1) of M.G.L. c 21E)
- ☐ current operator (as defined in Section 5(a)(1) of M.G.L. c 21E)
- ☐ past owner (as defined in Section 5(a)(2) of M.G.L. c 21E)
- ☐ past operator (as defined in Section 5(a)(2) of M.G.L. c 21E)
- ☐ generator (as defined in Section 5(a)(3) of M.G.L. c 21E)
- ☐ transporter (as defined in Section 5(a)(4) of M.G.L. c 21E)
- ☐ other legally responsible party (as defined in Section 5(a)(5) of M.G.L. c 21E)
- ☐ other person (as defined in 310 CMR 40.0006(10))
- ☒ Fuduciary, Secured Lender



Massachusetts Department of Environmental Protection
Bureau of Waste Site Cleanup

BWSC 01 – Tier IA
BWSC 02 – Tier IB
BWSC 03 – Tier IC

Initial Application for Response Action Permit for Tier I Disposal Sites

RTN 2-10067

Also RTN 2-10667 Transmittal # 107471

D. Parcel Information

Note:
If the current owner(s) or operator(s) as defined in Section 5(a)(1) of M.G.L. c 21E, is not an applicant, provide the following information for the owner(s) and operator(s) for each parcel that is the subject of this application. Attach additional copies of this page as necessary.

Parcel:

Map Number: 8 Parcel Number: 20.1.1

Current Owner (if different from the applicant):

Mr. Donald Siegrist

Name

Position or title

Company or organization

38 Lancaster County Road

Street

Harvard

MA

01451

City/Town

State

Zip Code

508 772 4784

Telephone number

Current Operator (if different from the owner):

Name

Position or title

Company or organization

Street

City/Town

State

Zip Code

Telephone number



BWSC 01 – Tier IA

BWSC 02 – Tier IB

BWSC 03 – Tier IC

Initial Application for Response Action Permit for Tier I Disposal Sites

E Applicant's Compliance History

Note:

Each applicant must complete this section. For disposal sites with more than one APPLICANT, make copies of this section, have each applicant complete this information, and then attach all copies to this Permit Application.

1. List each Tier I permit held by the applicant for other disposal sites:

<u>Disposal Site Name</u>	<u>BWSC Permit Number</u>	<u>Release Tracking Number(s)*</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

2. List each Tier II disposal site where the applicant is conducting response actions:

<u>Disposal Site Name</u>	<u>Release Tracking Number(s)*</u>
_____	_____
_____	_____
_____	_____
_____	_____

*For those sites identified on the Transition List of Sites and Locations (the 1993 Transition List) and any addendum thereto (pursuant to 310 CMR 40.0600) provide the Disposal Site Number in place of the Release Tracking Number.

3. List all other permits or licenses issued by the Department and held by the applicant that are material to this disposal site:

<u>Program</u>	<u>Permit Code</u>	<u>Permit Category</u>	<u>Facility ID</u>
• Air Quality	_____	_____	_____
• Hazardous Waste (M.G.L. c. 21C)	_____	_____	_____
• Solid Waste	_____	_____	_____
• Industrial Wastewater Management	_____	_____	_____
• Water Supply	_____	_____	_____
• Water Pollution Control:			
Surface Water	_____	_____	_____
Groundwater	_____	_____	_____
Sewer Connection	_____	_____	_____
• Wetland & Waterways	_____	_____	_____



BWSC 01 - Tier IA

BWSC 02 - Tier IB

BWSC 03 - Tier IC

Initial Application for Response Action Permit for Tier I Disposal Sites

Applicant's Compliance History (cont.)

4. List all other permits, licenses, certifications, registrations, variances, or other approvals issued by other federal, state, or local authorities and held by applicant that are material to this disposal site:

Issuing Authority	Identification Number	Date Issued

5. Attach a statement which details the applicant's history of compliance with the Department's requirements, including, but not limited to, M.G.L. c. 21E, 310 CMR 40.0000, and other laws for the protection of health, safety, public welfare and the environment administered or enforced by federal, state and local government agencies, that are material to the disposal site. Such statement should identify information such as: action(s) material to the disposal site taken by the Department to enforce its requirements including, but not limited to Notice of Noncompliance (NON), Notice of Intent to Assess Civil Administrative Penalty (PAN), administrative enforcement order, Notice of Responsibility (NOR), Notice of Intent to Take Response Action (NORA); Administrative Consent Order; Judicial Consent Judgment; similar administrative actions taken by other states, federal, or local agencies; and/or civil or criminal actions material to the disposal site brought on behalf of the Department or other federal, state, or local agencies and any additional information relevant to the applicant's history of compliance. For each action identified, give the name of the issuing authority and identification number, if available, and a description of the noncompliance cited, the current status of the matter, and final disposition, if any, using the sample format below.

Administrative Consent Order

Action Commonwealth of Massachusetts
Executive Office of Environmental Affairs, DEP

Issuing Authority Date
NEC-CE-45 RTN 2-10067 and RTN 2-10667

ID Number

Description of Non-compliance Failure to notify a 72-hour notification condition, Failure to submit IRA Plan, IRA Status Report or IRAC, Conducting unapproved response actions, Failure to RAO or tier classify, Failure to properly manage and remove excavated soil, Failure to notify, Failure to conduct IRA

Current Status

Final Disposition

(Make additional copies of this page as needed.)



BWSC 01 - Tier IA

BWSC 02 - Tier IB

BWSC 03 - Tier IC

Initial Application for Response Action Permit for Tier I Disposal Sites

E Applicant's Compliance History (cont.)

4. List all other permits, licenses, certifications, registrations, variances, or other approvals issued by other federal, state, or local authorities and held by applicant that are material to this disposal site:

Issuing Authority	Identification Number	Date Issued
.....
.....
.....

5. Attach a statement which details the applicant's history of compliance with the Department's requirements, including, but not limited to, M.G.L. c. 21E, 310 CMR 40.0000, and other laws for the protection of health, safety, public welfare and the environment administered or enforced by federal, state and local government agencies, that are material to the disposal site. Such statement should identify information such as: action(s) material to the disposal site taken by the Department to enforce its requirements including, but not limited to Notice of Noncompliance (NON), Notice of Intent to Assess Civil Administrative Penalty (PAN), administrative enforcement order, Notice of Responsibility (NOR), Notice of Intent to Take Response Action (NORA); Administrative Consent Order; Judicial Consent Judgment; similar administrative actions taken by other states, federal, or local agencies; and/or civil or criminal actions material to the disposal site brought on behalf of the Department or other federal, state, or local agencies and any additional information relevant to the applicant's history of compliance. For each action identified, give the name of the issuing authority and identification number, if available, and a description of the noncompliance cited, the current status of the matter, and final disposition, if any, using the sample format below.

Notice of Responsibility

Action Commonwealth of Massachusetts

DEP

11/08/93

Issuing Authority

Date

RTN 2-10067

ID Number

Potentially responsible party for assessment, containment

Description of Non-compliance

and removal actions necessitated by release.

Current Status

Final Disposition

(Make additional copies of this page as needed.)



Department of Environmental Protection
Waste Cleanup

2-10067

Also RTN 2-10667

WWS 81 - Tier 1A
WWS 82 - Tier 1B
WWS 83 - Tier 1C

For more information, please contact the Permit Section at (609) 292-1000.

For more information, please contact the Permit Section at (609) 292-1000.

Note:

Each applicant must complete this section of the application, more than one copy of the application must be submitted, the applicant must complete the information then attach the copies to the Permit Application.



BWSC 01 - Tier IA

BWSC 02 - Tier IB

BWSC 03 - Tier IC

Initial Application for Response Action Permit for Tier I Disposal Sites

RTN 2-10067

Transmittal # 107471

Also RTN 2-10667

G Required Technical Submittals with Permit Application

1. Attach Tier I Classification Submittal to this application.
2. Please indicate which of the following response actions are in progress or have been completed at this disposal site at the time of this permit application:

Response Actions	Completed	In Progress
<i>Preliminary Response Actions</i>		
Limited Removal Action	<input type="checkbox"/>	<input type="checkbox"/>
Immediate Response Action (IRA)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Release Abatement Measure (RAM)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Utility Related Abatement Measures (URAM)	<input type="checkbox"/>	<input type="checkbox"/>
Phase I Initial Site Investigation	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>
<i>Comprehensive Response Actions</i>		
Phase II - Comprehensive Site Assessment	<input type="checkbox"/>	<input type="checkbox"/>
Phase III - Identification, Evaluation and Selection of Comprehensive Remedial Action Alternatives	<input type="checkbox"/>	<input type="checkbox"/>
Phase IV - Implementation of the Selected Remedial Action Alternative (Remedy Implementation Plan only)	<input type="checkbox"/>	<input type="checkbox"/>

3. Please indicate which of the following Status Reports, Phase Reports, or Completion Statements have been prepared for response actions that are in progress or have been completed at the disposal site at the time of this permit application. Any such report, other than LRA documentation, shall be submitted as part of this permit application even if previously submitted to DEP:

Document	Submitted with this application	
Limited Removal Action documentation	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Immediate Response Action (IRA) Plan(s)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
IRA Status Report(s)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
IRA Completion Report(s)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Release Abatement Measure (RAM) Plan(s)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
RAM Status Report(s)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
RAM Completion Report(s)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Utility Related Abatement Measures (URAM)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
URAM Status Report(s)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
URAM Completion Report(s)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Phase I Report	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Phase I Report Completion Statement	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Phase II Scope of Work	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Phase II Report	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Phase II Completion Statement	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Remedial Action Plan	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Phase III Completion Statement	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Remedy Implementation Plan (RIP)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Other:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No



BWSC 01 - Tier IA

BWSC 02 - Tier IB

BWSC 03 - Tier IC

Initial Application for Response Action Permit for Tier I Disposal Sites

RTN-2-10067

Transmittal #107471

Also RTN 2-10667

G. Required Technical Submittals with Permit Application (cont.)

4. Attach LSP Opinion regarding proposed or continuing response actions which describes all response actions that, in the opinion of the LSP, should continue, or which have Department approval, during the DEP's review of this permit application. Use the following format:

- Description of the response action
- Current status of the response action
- Rationale for continuance of the response action

5. Specify the pages of either the Phase I Report or Phase II Report (if completed) for purposes of supporting the following information:

	Report		Page(s)
	Phase I	Phase II	
<i>Supplemental</i>			
a. Disposal site location information	<input checked="" type="checkbox"/>	<input type="checkbox"/>	1
• Institutions within 500 feet of the disposal site	<input checked="" type="checkbox"/>	<input type="checkbox"/>	App.
• Listing of natural resource areas	<input checked="" type="checkbox"/>	<input type="checkbox"/>	App.
b. Disposal Site Locus Map	<input checked="" type="checkbox"/>	<input type="checkbox"/>	2
c. Disposal site history	<input checked="" type="checkbox"/>	<input type="checkbox"/>	3
• Release history & abatement measures	<input checked="" type="checkbox"/>	<input type="checkbox"/>	3
• OHM use and storage history	<input checked="" type="checkbox"/>	<input type="checkbox"/>	3
• Environmental permits and compliance history	<input checked="" type="checkbox"/>	<input type="checkbox"/>	3
d. Disposal site hydrogeological characteristics	<input checked="" type="checkbox"/>	<input type="checkbox"/>	3
• Groundwater depth and flow direction	<input checked="" type="checkbox"/>	<input type="checkbox"/>	3
• Soil and bedrock description	<input checked="" type="checkbox"/>	<input type="checkbox"/>	3
• Disposal site topography	<input checked="" type="checkbox"/>	<input type="checkbox"/>	3
e. Nature and extent of contamination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	4
• Thickness of non-aqueous phase liquid, if encountered	<input type="checkbox"/>	<input type="checkbox"/>	
• Approximate horizontal and vertical extent of contamination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	5
f. Migration pathways and exposure potential	<input checked="" type="checkbox"/>	<input type="checkbox"/>	4
• Contaminant migration potential	<input checked="" type="checkbox"/>	<input type="checkbox"/>	4
• Potential human exposure	<input checked="" type="checkbox"/>	<input type="checkbox"/>	4
• Potential environmental receptors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	4
g. Evaluation for Immediate Response Action(s)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	6
h. Other: _____	<input type="checkbox"/>	<input type="checkbox"/>	
i. Conclusions	<input checked="" type="checkbox"/>	<input type="checkbox"/>	6



Massachusetts Department of Environmental Protection
Bureau of Water Site Cleanup

BWSC 01 - Tier IA

BWSC 02 - Tier IB

BWSC 03 - Tier IC

Initial Application for Response Action Permit for Tier I Disposal Sites

RTN → Z-10067

Transmittal # 107471

Also RTN Z-10667

H Licensed Site Professional Opinion

"I attest that I have personally examined and am familiar with the information contained in this submittal, including any and all documents accompanying this attestation, and in my professional judgment, the material facts and data that are the subject of this permit application are true and accurate and comply with the provisions of M.G.L. c. 21A, §§ 19-19J, 309 CMR, M.G.L. c. 21E, 310 CMR 40.0000, and all other laws, regulations, orders, permits, and approvals applicable to such response action(s). I am aware that significant penalties may result, including, but not limited to, possible fines and imprisonment, if I willfully submit information which I know to be false, inaccurate, or incomplete."

Blake A. Martin

Name (Print)

5672

License Number

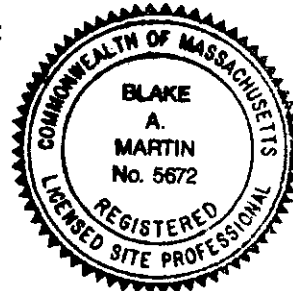
Blake A. Martin

LSP Signature

4/22/96

Date

LSP Seal:





Massachusetts Department of Environmental Protection
Bureau of Waste Site Cleanup

BWSC 01 - Tier IA

BWSC 02 - Tier IB

BWSC 03 - Tier IC

Initial Application for Response Action Permit for Tier I Disposal Sites

RTN 2-10067

Transmittal # 107471

Also RTN 2-10667

1 Application Completeness Checklist

☒ The DEP Transmittal Form is properly completed.

Certifications/Signatures/LSP Opinions

- ☒ Certification of submittal has been signed by ALL applicants and attached.
- ☒ Certification of ability and willingness has been signed by ALL applicants and attached.
- ☐ If applicable, the certification of the Primary Representative has been signed.
- ☒ A signed LSP Opinion regarding the information contained in this Permit Application (Section H) is included.
- ☐ An LSP Opinion regarding proposed or continuing response actions pursuant to 310 CMR 40.0704(1)(b) is included if applicable.

SECTIONS
OF
BWSC 01, 02, 03
FORM.
FORM MUST BE
UNALTERED

Reports and Other Submittals

- ☒ Copies of all Status Reports, Phase Reports, or Completion Statements pursuant to 310 CMR 40.0703(1)(f) are included.
- ☒ Tier Classification Submittal has been included pursuant to 310 CMR 40.0704(1)(a). - BWSC-107A - NRS sheet
- ☒ Compliance history pursuant to 310 CMR 40.0703(9)(b) completed by ALL applicants and attached.

BWSC 107A +
NRS sheet

Maps, letters, and affidavits

- ☒ A copy of the tax assessor's map(s) showing each parcel that comprises the disposal site has (have) been attached.
- ☐ Affidavit of publication of the legal notice required by 310 CMR 40.0703(8)(a)1, and a copy of such notice is included.
- ☒ Copy of the cover letter and notices submitted to the Chief Municipal Officer(s) and Board(s) of Health in the community(ies) in which the disposal site is located or in any other community(ies) which is, or is likely to be affected by the disposal site required by 310 CMR 40.0703(8)(a)2 are included.

PUBLIC NOTICE
REQUIREMENTS

To submit the application package:

- ☒ The Application Checklist has been completed.
- ☒ The white copy of the Transmittal Form along with the original and one copy of the Permit Application have been sent to the "DEP Permit Administrator" in the applicable DEP Regional office. (See the back cover of the Permit Application Kit for the addresses of DEP regional offices).
- ☒ The yellow copy of the Transmittal Form and the Permit Application Fee of \$3,550 payable to the Commonwealth of Massachusetts have been sent to:

TRANSMITTAL
FORM +
PAYMENT

Department of Environmental Protection
P.O. Box 4062
Boston, MA 02211

☐ LSP EVALUATION OPINION, BWSC-110 FOR TRANSITION SITES

GROUND WATER ASSOCIATES, INC.

16 Commercial Drive, P.O. Box 280, Dracut, Massachusetts 01826 (508) 970-5388

APR 25 1996

SUPPLEMENTAL PHASE I INFORMATION 38 LANCASTER COUNTY ROAD HARVARD, MASSACHUSETTS

DEP Release Tracking Numbers 2-10067 & 2-10667

April 19, 1996

Prepared for

Domestic Loan & Investment Bank
815 Reservoir Avenue
Cranston, Rhode Island

Prepared by

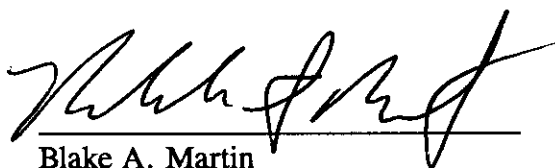
Ground Water Associates, Inc.
16 Commercial Drive
Dracut, Massachusetts

LSP Opinion
Ongoing Response Actions

RTN 10067, RTN 10667

In addition to the initial test pit excavations and monitoring well installations, a soil excavation program was undertaken as a RAM. Although the soil excavation was successful in removing a large percentage of the TPH-impacted soils, remnant levels remain in both the soil and ground water at the site. Additional assessment to properly characterize and remediate this concern is required.

Regarding the 1,2-Dichloroethane impacted ground water, additional assessment is needed and planned for April and May 1996.


Blake A. Martin

LSP 5672

Date: 4/22/96

S:\GWA\Clerical\9674425

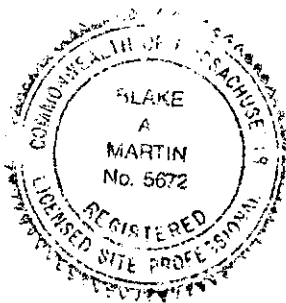


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LIST OF FIGURES

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APPENDIX A: Immediate Response Action Status Report (TPH Release for 11/05/93-03/05/94

APPENDIX B: Immediate Response Action Status Report (TPH Release for 03/05/94-09/05/94

APPENDIX C: Immediate Response Action Status Report (TPH Release for 09/05/94-03/05/95

APPENDIX D: Release Abatement Measure Status Report (TPH Release)

APPENDIX E: Immediate Response Action Plan (DCE Release)

APPENDIX F: Immediate Response Action Status Report (DCE)

APPENDIX G: Environmental FirstSearch Report

APPENDIX H: Information on Former and Current Disposal Systems

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1.0 INTRODUCTION

On behalf of our client, Domestic Loan & Investment Bank, Ground Water Associates, Inc. (GWA) has prepared the following Supplemental Phase I information. This report is intended to provide information not included in the previous site investigation reports which have been submitted to the Massachusetts Department of Environmental Protection (DEP) for the property located at 38 Lancaster Road, Harvard, Massachusetts (Site). The previously submitted reports, along with additional information which is described in this report are provided in the Appendices.

2.0 GENERAL SITE INFORMATION

The Site has been assigned DEP Release Tracking Numbers 2-10067 for an oil release, and 2-10667 for a 1,2, Dichloroethane release. The Site's geographical location is 42 degrees, 31 minutes, and 53 seconds North Latitude and 71 degrees, 35 minutes East Longitude. The Universal Transvers Mercator (UTM) coordinates are 4711508 m N and 287706 m E. Figure 1 provides a site location map depicting the 500 foot and one half mile radius from the boundaries of the Site. There are four persons living at the residential house located on the Site. There is an estimated population of approximately 600 persons within one half mile from the Site. There is one day time medical facility (Concord Hillside Medical Center) located within 500 feet from the Site. Previously the medical facility property was to be a location for a day care facility. The Site is located within 500 feet of an unnamed stream which feeds Bowers Brook to the east. A drinking water well is located on the Site. The Site is located in protected open space (see ACEC Map in Appendix G).

Figure 2 provides a Site Schematic showing the locations of monitoring wells and test pits completed to date and the known aerial extent of total petroleum hydrocarbon (TPH) impact.

3.0 SITE HISTORY

3.1 OWNERSHIP HISTORY

The property known as 38 Lancaster Road is currently owned by Mr. Donald Siegrist who purchased the property from Domestic Loan & Investment Bank. However, the adjacent parcels # 21.1, 21.2, and 21.3 on which the oil and hazardous materials have been identified, are currently owned by Domestic Loan & Investment Bank.

Prior to the purchase of the property by Mr. Siegrist, Domestic Loan and Investment Bank foreclosed on the approximate 40 acre tract of land from the Bell family. The Bell family maintained the property as a residence and did not use the underground storage tanks (USTs) which were found in 1993. The property was sold to the Bell family in 1991 by Dr. Taveras

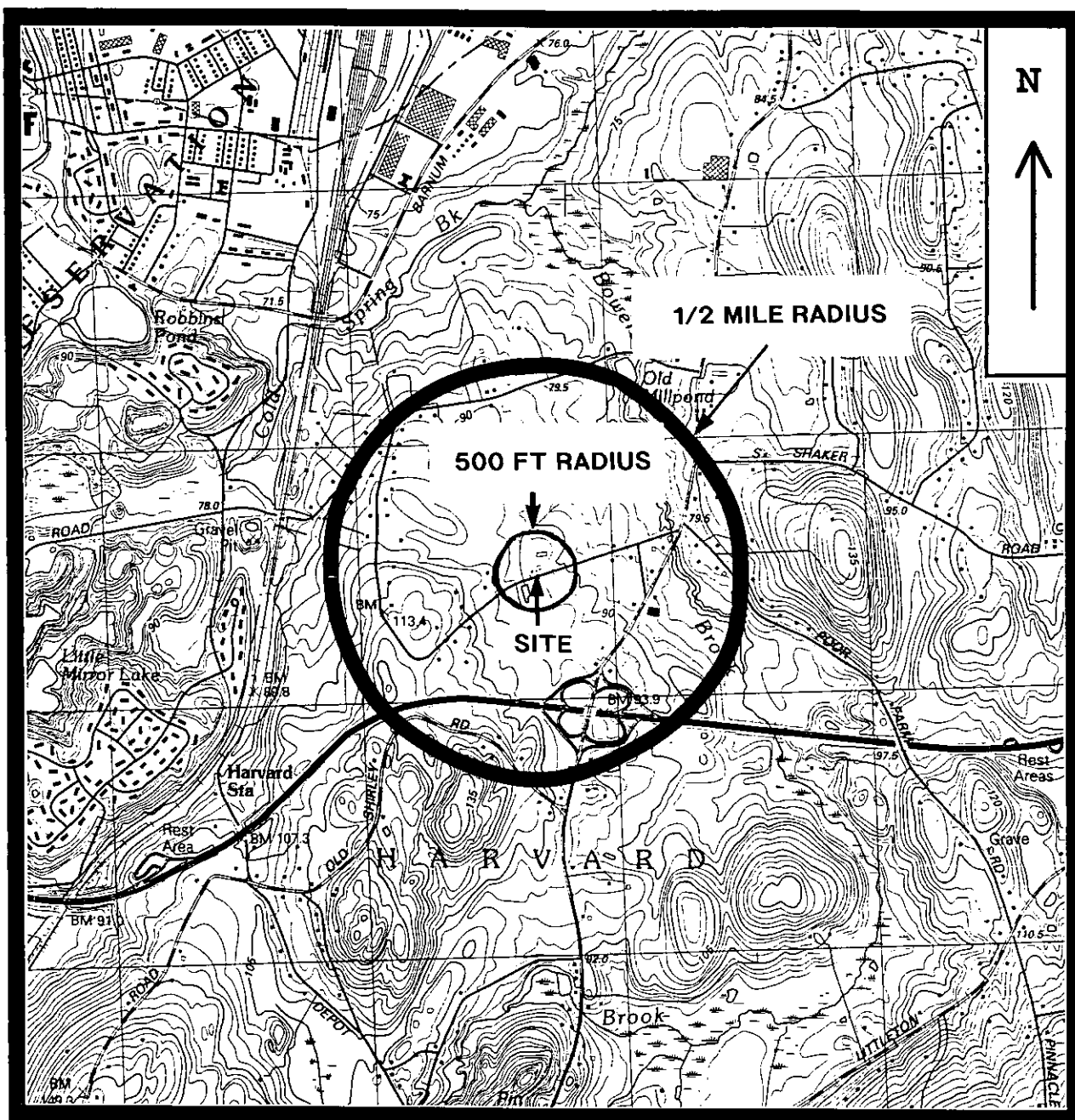


FIGURE 1. SITE LOCATION MAP

Base map adapted from U.S.G.S. 7.5 X 15 Minute Topographic Quadrangle for Ayer, Massachusetts, 1988.

Approximate Scale: 1 inch = 2,080 feet

who owned the lot since 1976. Dr. Taveras bought the property in 1976 from the Ernst family who operated the Harvard Home Heating Oil Service from some time in the 1950s until 1962.

3.2 RELEASE HISTORY

Reportedly the Site contained USTs for home heating oil as well as gasoline. On site dispensers and a wholesale commercial business was conducted approximately 150 to 200 feet southeast of the current home. As fire department records are incomplete, previous tank removals, spills, and releases are not well documented prior to 1975. However, closure of the gasoline dispensers and changes to the number and structure of USTs was undertaken.

The current (since 1993) release history for both petroleum products (RTN #2-10067) and for 1,2 Dichloroethane (RTN # 2-10667) is described in GWA IRA and RAM Status Reports provided in Appendices A, B, C, D, and F.

3.3 WASTE MANAGEMENT HISTORY

No verifiable records were kept at the subject property for the management of wastes related to oil and hazardous materials. However, primary interviews with local property owners indicated that household wastes and domestic septage would have been disposed in a septic system to the rear of the current house. Since 1989 the domestic waste system has been discharging to two holding tanks approximately 300 feet to the northeast of the house. The location of the former and current subsurface disposal systems are provided in Appendix H based upon a map by J.R. Henry Associates, 1994.

3.4 ENVIRONMENTAL PERMITS AND COMPLIANCE HISTORY

Prior to the discovery of oil and hazardous materials and the assigning of RTNs 2-10067 and 2-10667, no records of environmental permits or non-compliance issues could be located.

4.0 SITE HYDROGEOLOGY

The Site is located in an area which is mapped as Lower Silurian aged granites (E-an Zen, 1983). The surficial deposits are mapped as tills with minor deposits of sorted material (Brackley, 1977). Based upon the regional topography and surficial drainage patterns, the regional ground water flow direction is toward the north-northeast. The topography of the Site slopes moderately downward toward the northeast. Based upon the Site topography and the drainage pattern of the unnamed stream which flows through the Site, the ground water flow direction at the Site is expected to be toward the northeast. A Site subsurface characterization based upon test pit data is provided in the Ground Water Associates letter report to Domestic

Bank dated June 27, 1994 (included as Attachment to IRA Status Report included in Appendix B).

5.0 NATURE AND EXTENT OF CONTAMINATION

Total petroleum hydrocarbon concentrations of a maximum of 1,800 milligrams per kilogram (mg/kg) remain in the subsurface soil based upon a post excavation sample collected from station Number 28 on October 19, 1994 and from test pit samples collected in 1993 and 1994. Field screening results of VOCs based upon photoionization detector readings from soil headspace samples indicates VOC headspace concentrations of up to 155 parts per million (ppm) remaining in the soil. A maximum 1,2 Dichloroethane concentration of 13 micrograms per liter (ug/l) has been detected in the bedrock aquifer based upon the ground water sample collected from a bedrock well on Lot 21.3 on September 7, 1994. The approximate extent of the TPH concentrations which exceed the Massachusetts Contingency Plan (MCP) Method 1, Soil-1/GW-1 Risk Characterization standard is shown on Figure 2. Based upon the TPH by EPA Method 418.1 results of ground water samples collected from eight monitoring wells on May 10, 1994, the extent of ground water exceeding the MCP Method 1 GW-1 Risk Characterization limits is in an area approximately 100 feet wide, east of the house which is on Site. The 1,2 Dichloroethane contamination has only been identified in the bedrock aquifer and not in the soils. The extent of the 1,2 Dichloroethane contamination has not yet been adequately characterized and will be addressed in current subsurface investigations.

The concentrations of 1,2 Dichloroethane do not indicate the presence of a separate phase in the subsurface. The laboratory analytical results are included as Attachments to the previously submitted IRA and RAM Status Reports included the Appendices.

6.0 MIGRATION PATHWAYS AND EXPOSURE POTENTIAL

The dissolved 1,2 Dichloroethane and No. 2 fuel oil in the ground water would be expected to migrate down gradient toward the northeast.

Potential human exposure to the No. 2 fuel oil includes dermal contact or ingestion through the soil. However, this contact would require that the oil impacted soils be exposed through excavation as the field screening and laboratory results of surficial soil samples do not indicate the presence of TPH at the ground surface. Given the known ground water concentrations and the dilution and attenuation of the fuel oil compounds and 1,2 Dichloroethane as they migrate downgradient, it is extremely unlikely these compounds could exceed drinking water standards at the downgradient drinking water wells.

The Site is mapped as a location within 500 feet of protected open space on the ACEC map. The protected open space area is to the east and downgradient from the Site. Therefore, fuel oil or 1,2 Dichloroethane impacted ground water from the Site could potentially migrate to the

EXISTING CONDITIONS
38 LANCASTER COUNTY ROAD
Harvard, Ma.

soils versus extent of October 1994 excavation.

FIGURE 2. Map showing estimated extent of petroleum contaminated

LANCASTER COUNTY ROAD

CONTAMINATED SOILS
PRESENTLY ESTIMATED EXTENT OF PETROLEUM

OCTOBER 1994 EXCAVATION

CONC. PAD

LOT 1

STAGING AREA FOR STOCKPILED SOILS

BARN



- 1994 SAMPLE LOCATION REFERENCE POINT
- 1994 TEST PIT
- 1994 LABORATORY ANALYTICAL TESTING
- ▼ 1993 TEST PIT
- ⊙ MONITORING WELL
- OCTOBER 1994 EXCAVATION

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protected open space area. However, it is unlikely these compounds would exceed drinking water concentrations due to the dilution and attenuation of the compounds as they migrate downgradient.

7.0 EVALUATION FOR IMMEDIATE RESPONSE ACTIONS

Based upon the presence of ground water concentrations of 1,2 Dichloroethane at concentrations exceeding the ground water drinking standards, an Immediate Response Action Plan has been submitted for the Site.

8.0 CONCLUSIONS

1. Ground water with 1,2 Dichloroethane concentrations exceeding the MCP Method 1, GW-1 Risk Characterization Limits has been identified in two bedrock wells. Currently IRA plans to conduct pumping tests on these wells are scheduled for April and May 1996.
2. The soils containing the highest concentrations of TPH in the vicinity of the former USTs has been excavated and transported by Carney Brothers Inc., to the Northern Disposal Inc. landfill in East Bridgewater, Massachusetts where it was used as landfill cover.
3. Additional subsurface characterization is needed for the determination of current concentrations and the need for further remedial actions under the MCP.

9.0 REFERENCES

Brackley, R.A. and Hansen, B.P, 1977, Water Resources of the Nashua and Souhegan River Basins, Massachusetts, HA-276, U.S.G.S.

Zen, E-an, Editor 1983, Bedrock Geologic Map of Massachusetts. U.S.G.S., prepared in cooperation with the Commonwealth of Massachusetts, Department of Public Works, and Joseph A. Sinnott, State Geologist.

MASSACHUSETTS DEPARTMENT OF ENVIRONMENTAL PROTECTION

Bureau of Waste Site Cleanup

APR 25 1995

NUMERICAL RANKING SYSTEM SCORESHEET

(310 CMR 40.1511)

CLASSIFICATION SUBMITTAL		DISPOSAL SITE SCORE					
Initial Submittal	Re-Classification	II	III	IV	V	VI	TOTAL
<input checked="" type="checkbox"/>	<input type="checkbox"/>	225	82	115	55	—	477

Disposal Site Tier Classification	I			II
Permit Category (Tier I Only)	A	B	C	

I. DISPOSAL SITE INFORMATION

DEP Release Tracking Number(s)	2-10067, 2-10667	UTM Coordinates	N: 42° 31' 53" Lat
DEP Disposal Site Number(s)			E: 71° 35' Long.

Disposal Site Name	Former Ernst & Taveras Property		
Disposal Site Address	38 Lancaster County Road		
City:	Harvard MA	Zip:	01451

Is the Disposal Site classified Tier I because it is located within the boundaries of a Zone II or Interim Wellhead Protection Area and groundwater concentrations equal or exceed RCGW-I at the time of Tier Classification pursuant to 310 CMR 40.0520(2)(a)1?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Is the Disposal Site classified Tier I because an Imminent Hazard is present at the time of Tier Classification pursuant to 310 CMR 40.0520(2)(a)2?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>

I attest under the pains and penalties of perjury that I have personally completed this Numerical Ranking System Scoresheet, and have personally examined and am familiar with the information contained in this submittal, including any and all documents accompanying this submittal, and in my professional opinion and judgment based upon: (i) the standard of care in 309 CMR 4.02(1), (ii) the applicable provisions of 309 CMR 4.02(2) and (3), and (iii) the provisions of 309 CMR 4.03(5), to the best of my knowledge, information and belief, this Scoresheet was developed in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000. I am aware that significant penalties may result, including, but not limited to, possible fines and imprisonment, if I submit information which I know to be false, inaccurate or materially incomplete.

Blake A. Martin
 Licensed Site Professional Signature
Blake A. Martin
 LSP Name (Printed)
Mr. Nathaniel B. Baker

5672
 LSP Registration Number
Ground Water Assoc.
 Company Name

4/19/96
 Date
508 970 5388
 Telephone Number

Responsible Party, Potentially Responsible Party, or Other Person who will provide certification in accordance with 310 CMR



40.1511 (Continued)

II. EXPOSURE PATHWAYS

II. EXPOSURE PATHWAYS				
Score according to 40.1512 - Exposure Pathway Designation Criteria				
MEDIA	DESIGNATION			
	NONE or NOT APPLICABLE	EVIDENCE OF CONTAMINATION	POTENTIAL EXPOSURE PATHWAY	LIKELY OR CONFIRMED EXPOSURE PATHWAY
A. SOIL (Includes Sediment)	0	15	(100)	150
B. GROUNDWATER	0	20	(100)	150
C. SURFACE WATER (Includes Wetlands)	(0)	20	100	150
D. AIR	(0)	15	100	200

Note: Score only the highest value for each media, i.e., score None or Not Applicable or Evidence of Contamination or Potential Exposure Pathway or Likely or Confirmed Exposure Pathway.

II. (A - D)	Summary Rationale for Section II A - D Values and Phase I Report References
Preliminary investigation information with soil borings, monitoring wells, test pit excavations, combined with RAM activities including soil removal indicate the following:	
-remnant TPH concentrations in soil exist.	
-ground water at the site also indicates remnant TPH contamination.	
-chlorinated solvents (most notably 1,2-Dichloroethane) in extremely low levels have been identified in two bedrock wells, although no potable supplies have been impacted. (RTN 2-10667)	

II.E. OHM SOURCES			
Number of OHM Sources	1	2	≥ 3
	0	(25)	50

SECTION II SCORE (A. + B. + C. + D. + E.)					
A. 100	B. 100	C. 0	D. 0	E. 25	TOTAL: (15 - 700) 225

Check here if Section VI has been used to amend the score for this Section of the NRS.	<input type="checkbox"/>
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40.1511 (Continued)

III. DISPOSAL SITE CHARACTERISTICS

III.A. OHM TOXICITY SCORE <i>Highest OHM Toxicity Score</i> <i>From Table III.A. or Worksheet III.A.1. on Following Pages.</i>	
OHM Scored: <u>#2 Fuel Oil</u> Concentration and Media: <u>(See note below.)</u>	Toxicity Score (1 - 80) <u>25</u>

III.B. MULTIPLE OHMs		
More Than One OHM With an OHM Toxicity Score of ≥ 30	No <input checked="" type="radio"/> 0	Yes 30

III.C. OHM MOBILITY and PERSISTENCE <i>Score according to 40.1514 - OHM Mobility and Persistence</i>	
OHM Scored: <u>1,2 Dichloroethane at 13 ug/L in ground water from bedrock well drilled on lot #2 collected on 09/07/94</u>	Score (0 - 30) <u>45</u>

III.D. DISPOSAL SITE HYDROGEOLOGY <i>Score according to 40.1515 - Soil Permeability</i>			
DEPTH TO GROUNDWATER (in feet)	SOIL PERMEABILITY		
	Low	Medium	High
> 25	2	4	8
10.1 - 25	4	8	12
5.1 - 10	8	12	16
0 - 5	<input checked="" type="radio"/> 12	16	20

SECTION III SCORE (A + B + C + D)				
A. <u>25</u>	B. <u>0</u>	C. <u>45</u>	D. <u>12</u>	TOTAL: (3 - 180) <u>82</u>

Check here if Section VI has been used to amend the score for this Section of the NRS.	<input type="checkbox"/>
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Note: IIIA: Initial sampling efforts (11/15/93) indicated maximum TPH levels of 8,374 mg/kg of #2 fuel oil (from Soil-2, test pit location near UST). However, post RAM excavation activities, maximum TPH levels were 1,800 ppm (10/19/94, Station 28).

40.1511 (Continued)

Table III.A. OHM TOXICITY SCORE							
OHM	CONCENTRATION (soil/sediment: µg/g; surface/groundwater µg/l)						
	≤ 99	100 - 999	1,000 - 9,999	10,000 - 100,000	> 100,000 NAPL < 0.5"	NAPL 0.5" - 12"	NAPL > 12"
Arsenic	20	30	40	50	60		
Benzene	15	25	35	45	55	65	75
Bis(2-ethylhexyl)phthalate	10	20	30	40	50	60	70
Cadmium	10	20	30	40	50		
Carbon Tetrachloride	20	30	40	50	60	70	80
Chlorobenzene	5	15	25	35	45	55	65
Chromium III	1	10	20	30	40		
Chromium VI	10	20	30	40	50		
Coal Tar	5	15	25	35	45	55	65
Cyanide	5	15	25	35	45		
1,1 Dichloroethane	10	20	30	40	50	60	70
1,2 Dichloroethane	10	20	30	40	50	60	70
Ethylbenzene	5	15	25	35	45	55	65
Ethylene Dibromide	20	30	40	50	60	70	80
#2 Fuel Oil (vapor product)	5	15	25	35	45	55	65
Gasoline (virgin product)	10	20	30	40	50	60	70
Lead	20	30	40	50	60		
Mercury	20	30	40	50	60	70	80
Methylene Chloride	10	20	30	40	50	60	70
Methyl Ethyl Ketone	5	15	25	35	45	55	65
Methyl Tert Butyl Ether	10	20	30	40	50	60	70
Nickel	5	15	25	35	45		
Phenol	1	10	20	30	40	50	60
	10	20	30	40	50	60	70
PCBs	20	30	40	50	60	70	80
Tetrachloroethylene	10	20	30	40	50	60	70
Toluene	1	10	20	30	40	50	60
1,1,1 Trichloroethane	5	15	25	35	45	55	65

Table III.A. OHM TOXICITY SCORE							
OHM	CONCENTRATION (soil/sediment: µg/g; surface/groundwater µg/l)						
	≤ 99	100 - 999	1,000 - 9,999	10,000 - 100,000	> 100,000 NAPL < 0.5"	NAPL 0.5" - 12"	NAPL > 12"
Trichloroethylene	15	25	35	45	55	65	75
Vinyl Chloride	15	25	35	45	55	65	75
Xylenes	1	10	20	30	40	50	60
Zinc	1	10	20	30	40		

NON-TEXT PAGE

Use Worksheet III.A.1. to determine the OHM Toxicity Score for OHM not listed in Table III.A.

See 40.1513 for Human Health-Based Toxicity Values for each OHM.

Worksheet III.A.1		OHM TOXICITY SCORE					
HUMAN HEALTH-BASED TOXICITY VALUE	CONCENTRATION						
	Use µg/g for Soil and µg/l for Surface Water and Groundwater						
	≤ 99	100 - 999	1,000 - 9,999	10,000 - 100,000	> 100,000 NAPL < 0.5"	NAPL 0.5" - 12"	NAPL > 12"
< 5	1	10	20	30	40	50	60
5 - 19	5	15	25	35	45	55	65
20 - 29	10	20	30	40	50	60	70
30 - 39	15	25	35	45	55	65	75
40 - 50	20	30	40	50	60	70	80

[illegible]

40.1511 (Continued)

IV. HUMAN POPULATION AND LAND USES

IV.A. HUMAN POPULATION				
Residential Population Within 1/2 Mile	None 0	1 - 99 <u>5</u>	100 - 999 10	≥ 1,000 15
Institutions Within 500 feet	None 0		One or More <u>10</u>	
On-Site Workers	None <u>0</u>	1 - 99 5	100 - 999 10	≥ 1,000 15

IV.B. AQUIFERS		
Sole Source Aquifer	No <u>0</u>	Yes 25
Name: _____		
Potentially Productive Aquifer	No <u>0</u>	Medium or High 15

IV.C. WATER USE					
Proximity of Disposal Site to Public Drinking Water Supply Source	Not Applicable (NA) 0			Zone A 20	Zone II, IWPA, or SW Intake ≤ 400' <u>50</u>
Persons Served by Public Drinking Water Supply	NA <u>0</u>	25 - 999 5	1,000 - 4,999 10	5,000 - 49,999 20	≥ 50,000 25
Private Water Supplies Within 500 Feet	None 0		Commercial Industrial 10	Agriculture Residential (Not Ingested) 15	Drinking Food Processing <u>25</u>
Alternative Public Water Supply Available (Viable Public Water Supply in Disposal Site Community and Public Water Connection ≤ 500 Feet from Site)	Yes 0			No <u>25</u>	

SECTION IV SCORE (A + B + C)			
A. <u>15</u>	B. <u>0</u>	C. <u>100</u>	TOTAL: (0 - 205) <u>115</u>

Check here if Section VI has been used to amend the score for this Section of the NRS.



40.1511 (Continued)

V. ECOLOGICAL POPULATION

V.A. ENVIRONMENTAL RESOURCE AREAS			
RESOURCE	LOCATION		
Area of Critical Environmental Concern	> 500' from Site 0	≤ 500' from Site 20	On-Site 30
Species of Special Concern, Threatened or Endangered Species Habitat	> 500' from Site 0	On-Site or ≤ 500' from Habitat 30	
Wetlands, Certified Vernal Pool, or Outstanding Resource Water	> 100' from Site 0	≤ 100' from Site 20	On-Site 30
Fish Habitat	> 500' from Site 0	≤ 500' from Site 20	On-Site 30
Protected Open Space (Local/State/Federal/Trustee)	> 500' from Site 0	≤ 500' from Site 20	On-Site 30

SCORE SECTION V.B. ONLY IF SECTION V.A. SCORE IS ≥ 30.

V.B. ENVIRONMENTAL TOXICITY SCORE	
<i>Highest Environmental Toxicity Score From Table V.B. or Worksheet V.B.1. on Following Pages.</i>	
OHM Scored: <u>#2 Fuel Oil (virgin product)</u>	Toxicity Score (1 - 35)
Concentration and Media: <u>Soil 1,800 ppm, 10/19/94</u>	<u>15</u>

SECTION V. SCORE (A. + B.)		
A. <u>40</u>	B. <u>15</u>	TOTAL: (0 - 185) <u>55</u>

Check here if Section VI has been used to amend the score for this Section of the NRS.	<input type="checkbox"/>
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40.1511 (Continued)

Table V.B. ENVIRONMENTAL TOXICITY SCORE					
OHM	CONCENTRATION (soil/sediment: µg/g; surface/groundwater µg/l)				
	< 1	1 - 99	100 - 999	1,000 - 9,999	≥ 10,000
Arsenic	5	10	15	20	25
Benzene	0	1	5	10	15
Bis(2-ethylhexylphthalate) *	5	10	15	20	25
Cadmium	10	15	20	25	30
Carbon Tetrachloride	0	1	5	10	15
Chlorobenzene *	5	10	15	20	25
Chromium III	1	5	10	15	20
Chromium VI	5	10	15	20	25
Coal Tar *	5	10	15	20	25
Cyanide	5	10	15	20	25
1,1 Dichloroethane *	5	10	15	20	25
1,2 Dichloroethane	0	1	5	10	15
Ethylbenzene	0	1	5	10	15
Ethylene Dibromide *	5	10	15	20	25
#2 Fuel Oil (virgin product) *	1	5	10	15	20
Gasoline (virgin product) *	5	10	15	20	25
Lead	5	10	15	20	25
Mercury	15	20	25	30	35
Methylene Chloride *	5	10	15	20	25
Methyl Ethyl Ketone *	5	10	15	20	25
Methyl Tert Butyl Ether *	1	5	10	15	20
Nickel	1	5	10	15	20
Phenol	0	1	5	10	15
PAHs *	5	10	15	20	25
PCBs	15	20	25	30	35
Tetrachloroethylene	0	1	5	10	15
Toluene	0	1	5	10	15
1,1,1 Trichloroethane	0	1	5	10	15
Trichloroethylene	0	1	5	10	15

Table V.B. ENVIRONMENTAL TOXICITY SCORE					
OHM	CONCENTRATION (soil/sediment: µg/g; surface/groundwater µg/l)				
	< 1	1 - 99	100 - 999	1,000 - 9,999	≥ 10,000
Vinyl Chloride *	5	10	15	20	25
Xylenes *	5	10	15	20	25
Zinc	1	5	10	15	20

* Scores derived by default methods 40.1516(2).

NON-TEXT PAGE

4

Use Worksheet V.B.1. to determine Environmental Toxicity Scores for OHM not listed in Table V.B.

See 40.1516 for Environmental Toxicity Values for each OHM.

Worksheet V.B.1		ENVIRONMENTAL TOXICITY SCORE				
ENVIRONMENTAL TOXICITY VALUE	CONCENTRATION					
	Use µg/g for Soil and µg/l for Surface Water or Groundwater					
	< 1	1 - 99	100 - 999	1,000 - 9,900	≥ 10,000	
10	0	1	5	10	15	
20	1	5	10	15	20	
30	5	10	15	20	25	
40	10	15	20	25	30	
50	15	20	25	30	35	

[illegible]

40.1511 (Continued)

VI. MITIGATING DISPOSAL SITE-SPECIFIC CONDITIONS

[illegible]



**TIER CLASSIFICATION, TIER II EXTENSION &
TIER II TRANSFER TRANSMITTAL FORM**

Pursuant to 310 CMR 40.0510 and 40.0560 (Subpart E)

Release Tracking Number

2 - 10067

A. DISPOSAL SITE LOCATION:

Disposal Site Name: Release Tracking #2-10067 (Former Ernst & Tayeras Property)
Street: 38 Lancaster County Road Location Aid: UTM 42 31 53" N Lat. 71 0 35' E Long.
City/Town: Harvard MA ZIP Code: 01451
Related Release Tracking Numbers That This Submittal Will Address: 2-10667

B. THIS FORM IS BEING USED TO: (check all that apply)

- ☒ Submit a new or revised Tier Classification Submittal for a Tier I Site, including a Numerical Ranking Scoresheet (complete Sections A, B, C, I, J, K and L).
- ☐ Submit a new or revised Tier Classification Submittal for a Tier II Site, including a Numerical Ranking Scoresheet (complete Sections A, B, C, F, G, I, J, K and L). APR 25 1996
- ☐ Submit a Notice that an additional Release Tracking Number(s) is (are) being linked to this Tier Classified Site and rescoring is not required at this time (complete Sections A, B, J, K and L). If this submittal is for a Tier I Site, you must also submit a Minor Permit Modification Transmittal Form (BWSC-109).
- List Additional Release Tracking Number(s): _____
- ☐ Submit a Phase I Completion Statement supporting a Tier Classification Submittal (complete Sections A, B, I, J, K and L).
- ☐ Submit a Tier II Extension Submittal for Response Actions at a Tier II Site (complete Sections A, B, D, F, G, I, J, K and L).
- ☐ Submit a Tier II Extension Submittal for Response Actions taken after expiration of a Waiver, pursuant to 310 CMR 40.0630(4) (complete Sections A, B, D, F, J, K and L, and also complete Sections G and I or Section H).*
- ☐ Submit a Tier II Transfer Submittal for a change in person(s) undertaking Response Actions at a Tier II Site (complete Sections A, B, E, F, G, I, J, K, L, M, N and O).
- ☐ Submit a Tier II Transfer Submittal for a change in person(s) undertaking Response Actions at a Waiver Site, pursuant to 310 CMR 40.0630(6) (complete Sections A, B, E, F, J, K, L, M, N and O, and also complete Sections G and I or Section H).*

You must attach all supporting documentation required for each use of form indicated, including copies of any Legal Notices and Notices to Public Officials required by 310 CMR 40.1400.

*NOTE: The Waiver expires on the effective date of this submittal and all further Response Actions must be taken as a Tier II Site.

C. TIER CLASSIFICATION SUBMITTAL:

Numerical Ranking Score for Disposal Site: (from Numerical Ranking Scoresheet) 477

Proposed Tier Classification of Disposal Site: (check one) ☐ Tier IA ☒ Tier IB ☐ Tier IC ☐ Tier II

Check which, if any, of the Tier I inclusionary criteria are met by the Disposal Site, pursuant to 310 CMR 40.0520:

- ☐ Groundwater is located within an Interim Wellhead Protection Area or a Zone II, and there is evidence of groundwater contamination by an Oil or Hazardous Material at the time of Tier Classification at concentrations equal to or exceeding the applicable RCGW-1 Reportable Concentration set forth in 310 CMR 40.0360.
- ☐ An Imminent Hazard is present at the time of Tier Classification.
- ☐ Check here if this Tier Classification revises a previous submittal for this Disposal Site. You must include a revised Numerical Ranking Scoresheet with this submittal. If a Tier I Permit has been issued, you may also need to submit a Major Permit Modification Application (BWSC 10).

If incorporating additional Release(s) into the Disposal Site, list Release Tracking Number(s): 2-10667

D. TIER II EXTENSION SUBMITTAL REQUIREMENTS:

State the expiration date of the Tier II Classification or Waiver for the Disposal Site, whichever is applicable: _____

Attach a statement summarizing why a Permanent or Temporary Solution has not been achieved at the Disposal Site.
A Tier II Extension is effective for a period of one year beyond the current expiration date of the Tier II Classification or Waiver.

E. TIER II TRANSFER SUBMITTAL REQUIREMENTS:

State the proposed effective date of the change in person(s) undertaking Response Actions at the Disposal Site: _____

Attach a statement summarizing the reasons for the proposed change in person(s) undertaking the Response Actions.
All Response Actions must be completed by the deadline applicable to the person who first filed either a Tier Classification Submittal for the Disposal Site or received a Waiver of Approvals.



**TIER CLASSIFICATION, TIER II EXTENSION &
TIER II TRANSFER TRANSMITTAL FORM**

Pursuant to 310 CMR 40.0510 and 40.0560 (Subpart E)

Release Tracking Number

2 - 10067

F. DISPOSAL SITE COMPLIANCE HISTORY SUMMARY:

- > If providing either a Tier Classification Submittal for a Tier II Site or a Tier II Extension Submittal for a Waiver Site, the person named in Section J must provide a Compliance History.
- > If providing a Tier II Extension Submittal for a Tier II Site, the person named in Section J must update their Compliance History since the effective date of the Tier II Classification.
- > If providing a Tier II Transfer Submittal for a Tier II or Waiver Site, the person named in Section M must provide a Compliance History.

Compliance History for (provide only one name per History): _____

☐ Check here if there has been no change to the Compliance History of the person named above (Extension Submittal for a Tier II Site ONLY).

List all permits or licenses that have been issued by the Department that are relevant to this Disposal Site:

PROGRAM:	PERMIT NUMBER:	PERMIT CATEGORY:	FACILITY ID:
Air Quality	_____	_____	_____
Hazardous Waste (M.G.L. c. 21C)	_____	_____	_____
Solid Waste	_____	_____	_____
Industrial Wastewater Management	_____	_____	_____
Water Supply	_____	_____	_____
Water Pollution Control/Surface Water	_____	_____	_____
Water Pollution Control/Groundwater	_____	_____	_____
Water Pollution Control/Sewer Connection	_____	_____	_____
Wetland & Waterways	_____	_____	_____

List all other Federal, state or local permits, licenses, certifications, registrations, variances, or approvals that are relevant to this Disposal Site:

ISSUING AUTHORITY OR PROGRAM, OR DOCUMENTATION TYPE:	IDENTIFICATION NUMBER:	DATE ISSUED:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

If needed, attach to this Transmittal Form a statement further describing the Compliance History of this Disposal Site. This statement must describe the compliance history of the person named above with the following:

- (1) DEP regulations; and
- (2) other laws for the protection of health, safety, public welfare and the environment administered or enforced by any other government agency.

Such a statement should identify information such as:

- (1) actions relevant to the Disposal Site taken by the Department to enforce its requirements including, but not limited to, a Notice of Noncompliance (NON), Notice of Intent to Assess Civil Administrative Penalty (PAN), Notice of Intent to Take Response Action (NORA), and an administrative enforcement order;
- (2) administrative consent orders;
- (3) judicial consent judgements;
- (4) similar administrative actions taken by other Federal, state or local agencies;
- (5) civil or criminal actions relevant to the Disposal Site brought on behalf of the DEP or other Federal, state, or local agencies; and
- (6) any additional relevant information.

For each action identified, provide the following information:

- (1) name of the issuing authority, type of action, identification number and date issued;
- (2) description of noncompliance cited;
- (3) current status of the matter; and
- (4) final disposition, if any.



**TIER CLASSIFICATION, TIER II EXTENSION &
TIER II TRANSFER TRANSMITTAL FORM**

Pursuant to 310 CMR 40.0510 and 40.0560 (Subpart E)

Release Tracking Number

2 - 10067

G. CERTIFICATION OF ABILITY AND WILLINGNESS:

- > If providing either a Tier II Classification Submittal or a Tier II Extension Submittal, the person who signs this certification **MUST** be the person named in Section J, or that person's agent.
- > If providing a Tier II Transfer Submittal, the person who signs this certification **MUST** be the person named in Section M, or that person's agent.

I attest under the pains and penalties of perjury that (i) I/the person(s) or entity(ies) on whose behalf this submittal is made has/have personally examined and am/is familiar with the requirements of M.G.L. c. 21E and 310 CMR 40.0000; (ii) based upon my inquiry of the/those Licensed Site Professional(s) employed or engaged to render Professional Services for the disposal site which is the subject of this Transmittal Form and of the person(s) or entity(ies) on whose behalf this submittal is made, and my/those person(s)' or entity's(ies)' understanding as to the estimated costs of necessary response actions, that/those person(s) or entity(ies) has/have the technical, financial and legal ability to proceed with response actions for such site in accordance with M.G.L. c. 21E, 310 CMR 40.0000 and other applicable requirements; and (iii) that I am fully authorized to make this attestation on behalf of the person(s) or entity(ies) legally responsible for this submittal. I/the person(s) or entity(ies) on whose behalf this submittal is made is aware of the requirements in 310 CMR 40.0172 for notifying the Department in the event that I/the person(s) or entity(ies) on whose behalf this submittal is made learn(s) that it/they is/are unable to proceed with the necessary response actions.

By: _____ Title: _____
(signature)

For: _____ Date: _____
(print name of person or entity recorded in Section J or M, as appropriate)

If you are submitting either a Tier II Extension Submittal for a Waiver Site or a Tier II Transfer Submittal for a Waiver Site, you may choose to sign the alternative Ability and Willingness Certification found in Section H in place of providing the certification in Section G and the LSP Opinion in Section I.

H. ALTERNATIVE CERTIFICATION OF ABILITY AND WILLINGNESS:

- > If providing a Tier II Extension Submittal for a Waiver Site, the person who signs this certification **MUST** be the person named in Section J, or that person's agent
- > If providing a Tier II Transfer Submittal for a Waiver Site, the person who signs this certification **MUST** be the person named in Section M, or that person's agent.

I attest under the pains and penalties of perjury that (i) I/the person(s) or entity(ies) on whose behalf this submittal is made has/have personally examined and am/is familiar with the requirements of M.G.L. c. 21E and 310 CMR 40.0000; (ii) based upon my inquiry of the Consultant-of-Record for the disposal site which is the subject of this Transmittal Form and of the person(s) or entity(ies) on whose behalf this submittal is made, and my/those person(s)' or entity's(ies)' understanding as to the estimated costs of necessary response actions, that/those person(s) or entity(ies) has/have the technical, financial and legal ability to proceed with response actions for such site in accordance with M.G.L. c. 21E, 310 CMR 40.0000 and other applicable requirements; and (iii) that I am fully authorized to make this attestation on behalf of the person(s) or entity(ies) legally responsible for this submittal. I/the person(s) or entity(ies) on whose behalf this submittal is made is aware of the requirements in 310 CMR 40.0172 for notifying the Department in the event that I/the person(s) or entity(ies) on whose behalf this submittal is made learn(s) that it/they is/are unable to proceed with the necessary response actions.

By: _____ Title: _____
(signature)

For: _____ Date: _____
(print name of person or entity recorded in Section J or M, as appropriate)

I. LSP OPINION:

I attest under the pains and penalties of perjury that I have personally examined and am familiar with this transmittal form, including any and all documents accompanying this submittal. In my professional opinion and judgment based upon application of (i) the standard of care in 309 CMR 4.02(1), (ii) the applicable provisions of 309 CMR 4.02(2) and (3), and (iii) the provisions of 309 CMR 4.03(5), to the best of my knowledge, information and belief,

> If Section B of this form indicates that a Tier I or Tier II Classification Submittal which relies upon a previously submitted Phase I Completion Statement is being submitted, this Tier Classification Submittal has been developed in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000;

> if Section B of this form indicates that a Phase I Completion Statement or a Tier I or Tier II Classification Submittal which does not rely upon a previously submitted Phase I Completion Statement is being submitted, the response action(s) that is (are) the subject of this submittal (i) has (have) been developed and implemented in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, (ii) is (are) appropriate and reasonable to accomplish the purposes of such response action(s) as set forth in the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, and (iii) complies(y) with the identified provisions of all orders, permits, and approvals identified in this submittal;

SECTION I IS CONTINUED ON THE NEXT PAGE



**TIER CLASSIFICATION, TIER II EXTENSION &
TIER II TRANSFER TRANSMITTAL FORM**

Pursuant to 310 CMR 40.0510 and 40.0560 (Subpart E)

Release Tracking Number

2 - 10067

I. LSP OPINION: (continued)

> If Section B of this form indicates that a Tier II Extension Submittal or a Tier II Transfer Submittal is being submitted, the response action(s) that is (are) the subject of this submittal (i) is (are) being implemented in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, (ii) is (are) appropriate and reasonable to accomplish the purposes of such response action(s) as set forth in the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, and (iii) complies(y) with the identified provisions of all orders, permits, and approvals identified in this submittal.

I am aware that significant penalties may result, including, but not limited to, possible fines and imprisonment, if I submit information which I know to be false, inaccurate or materially incomplete.

☐ Check here if the Response Action(s) on which this opinion is based, if any, are (were) subject to any order(s), permit(s) and/or approval(s) issued by DEP or EPA. If the box is checked, you MUST attach a statement identifying the applicable provisions thereof.

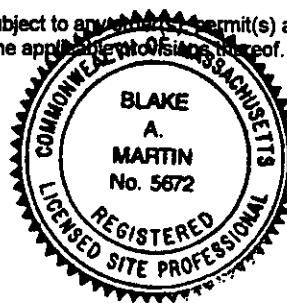
LSP Name: Blake A. Martin LSP #: 5672 Stamp:

Telephone: 508 970 5388 Ext.: _____

FAX: (optional) 508 453 7667

Signature: [Signature]

Date: 8/8/95



J. PERSON MAKING SUBMITTAL:

Name of Organization: Domestic Loan & Investment Bank

Name of Contact: Nathaniel Baker Title: President

Street: 815 Reservoir Avenue

City/Town: Cranston State: RI ZIP Code: 02910

Telephone: 401 943 1600 Ext.: _____ FAX: (optional) 401 943 6708

K. RELATIONSHIP TO DISPOSAL SITE OF PERSON MAKING SUBMITTAL: (check one)

☐ RP or PRP Specify: ☐ Owner ☐ Operator ☐ Generator ☐ Transporter Other RP or PRP: _____

☒ Fiduciary, Secured Lender or Municipality with Exempt Status (as defined by M.G.L. c. 21E, s. 2)

☐ Agency or Public Utility on a Right of Way (as defined by M.G.L. c. 21E, s. 5(d))

☐ Any Other Person Making Submittal Specify Relationship: _____

L. CERTIFICATION OF PERSON MAKING SUBMITTAL:

I, Nathaniel Baker, attest under the pains and penalties of perjury (i) that I have personally examined and am familiar with the information contained in this submittal, including any and all documents accompanying this transmittal form, (ii) that, based on my inquiry of those individuals immediately responsible for obtaining the information, the material information contained in this submittal is, to the best of my knowledge and belief, true, accurate and complete, and (iii) that I am fully authorized to make this attestation on behalf of the entity legally responsible for this submittal. I/the person or entity on whose behalf this submittal is made am/is aware that there are significant penalties, including, but not limited to, possible fines and imprisonment, for willfully submitting false, inaccurate, or incomplete information.

By: [Signature] Title: President

For: Domestic Loan & Investment Bank Date: 8/09/95
(print name of person or entity recorded in Section J)

Enter address of the person providing certification(s), including Ability and Willingness Certification where applicable, if different from address recorded in Section J:

Street: _____

City/Town: _____ State: _____ ZIP Code: _____

Telephone: _____ Ext.: _____ FAX: (optional) _____

YOU MUST COMPLETE ALL RELEVANT SECTIONS OF THIS FORM OR DEP MAY RETURN THE DOCUMENT AS INCOMPLETE. IF YOU SUBMIT AN INCOMPLETE FORM, YOU MAY BE PENALIZED FOR MISSING A REQUIRED DEADLINE, AND YOU MAY INCUR ADDITIONAL COMPLIANCE FEES.

Immediate Response Action Status Report

For Activities Conducted November 5, 1993 through March 5, 1994

DEP Release Tracking Number 2-10067

38 Lancaster County Road

Harvard, Massachusetts

Prepared for:

Domestic Bank

815 Reservoir Avenue

Cranston, Rhode Island

By:

Ground Water Associates, Inc.

Dracut, Massachusetts

July 24, 1995

Status of Assessment:

Upon the completion of test pitting activities and review of laboratory analytical results of soil samples collected and the assessment that the actual water table had not been encountered during the test pitting operations it was determined that a test boring/monitoring well survey would be necessary to accurately define the lateral and vertical extent of the soil contamination and to determine the extent of potential ground water contamination. The soil boring/monitoring well survey had not been completed by March 5, 1994.

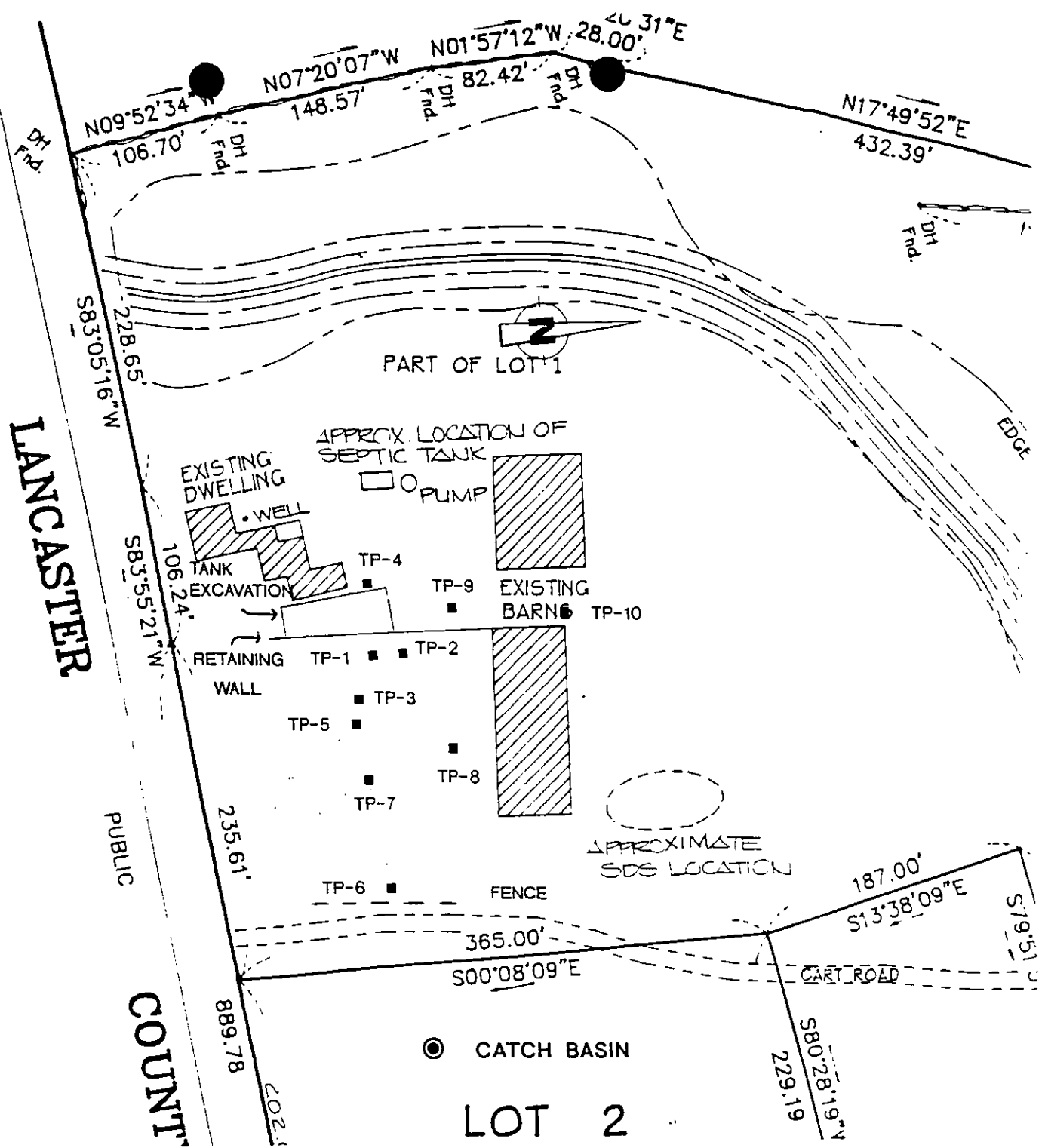
Additional Site Information and Data:

The test pit survey was conducted between November 12, and November 18, 1993. Included in the attachments are a site figure showing the test pit locations, a cross sectional sketch of a test pit which was excavated at the location of the former tank farm, a table summarizing the field screening and laboratory analytical results, and copies of the laboratory reports.

Management of Oil Impacted Soils Excavated During Test Pit Survey:

Heavily contaminated soils from the test pit survey were staged on a concrete pad to the east of the house. The soils were placed on and covered by two sheets of 6 mil plastic sheeting.

s:\gwa\ops\jobs\652dom\irastat1



TEST PIT LOCATIONS

Key

- 1-Inch = 100 Feet
- = Test Pit
- ⊙ = Catch Basin

After: Joseph R. Henry & Associates, Inc., 1993.
Plan of Land in Harvard, Massachusetts.

3 Lancaster Road
Harvard, Massachusetts
North-South Cross Section
Tank Pit Excavation

South : front of garage

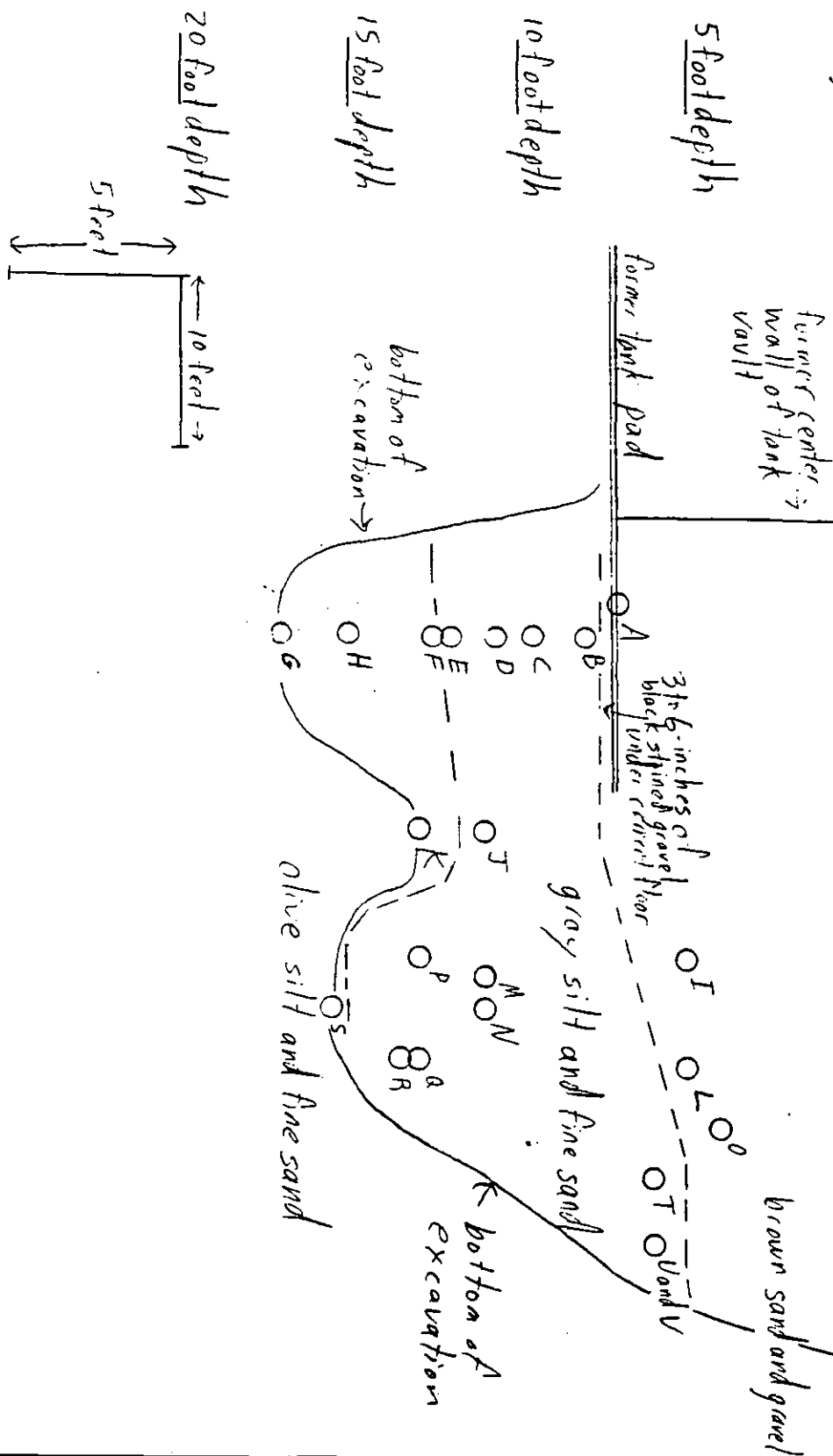
back of garage

North

0 ft depth

column = ground surface

GARAGE



10

Field and Laboratory Results of Tank Pit Excavation Soil Samples
Domestic Bank Property

at

38 Lancaster Road, Harvard Massachusetts

Sample ID	Depth (feet)	Field PID Headspace (ppm)	Field Colorimetric Extraction (ppm)	Laboratory TPH-IR (ppm)	Laboratory GC-Fingerprint (ppm)
A	7	44	200-400		33,0000 fuel oil #2/diesel
B	8	100		197	
C	9.5	100			
D	10.6	104			
E	12	108			
F	12.5	104			
G	17	8			
H	15	90	1	8,374	
I	5	15.8			
J	11	114			
K	13	3			
L	5	9.2			
M	11	180			
N	11	106			
O	4	1.4			
P	13	120			
Q	13	112			
R	13.5	100			
S	15.5	1.6			
T	6	74			
U	6	94			
V	6	66			

Field and Laboratory Results of Test Pit Soil Samples
Domestic Bank Property

at
38 Lancaster Road, Harvard Massachusetts

Test Pit ID	Depth (feet below ground surface)	Field PID Headspace (ppm)	Field Colorimetric Extraction (ppm)	Laboratory TPH-IR Analysis (ppm)	Laboratory GC-Fingerprint (ppm)
TP-1	3		1-10		
TP-4	3.4-4.4		25		33 motor oil / hydraulic oil
TP-5	4.5	120			
	7	96			
	10	196		815	
	14.5	2		105	
TP-6	2.5	0.2			
	5.5	0.1			
	14	0.0		71	
TP-7B	4	0.0			
	5	0.0		25	
	5.5	120			
TP-9	5	104			
	6.5	3.2		111	
TP-10	6			84	



November 18, 1993

Mr. Joseph Cerutti
Ground Water Associates, Inc.
16 Commercial Drive
P.O. Box 280
Dracut, MA 01826

Dear Joe:

Enclosed please find the results for the sample (your project 322-652 Harvard, MA) received on November 12, 1993. No quality control problems were encountered during the analysis of this sample. This project was assigned AMRO Project Number 5676. If you have any questions regarding this project in the future, please refer to this number.

This letter is an integral part of your data report.

Please do not hesitate to call if you have any questions.

Sincerely,

A handwritten signature in cursive script that reads "Nancy Stewart".

Nancy Stewart
Vice President

encl.
NS/db

LABORATORY REPORT

Petroleum Hydrocarbons by Gas Chromatography
EPA Method 8100 (Modified)

Client: Groundwater Associates, Inc
Client I.D.: 322-652 Harvard, MA
TP-4 (3.4 - 4.4 ft.)
AMRO I.D.: 5676-01
Date sampled: 11/11/93 Date received: 11/12/93
Date prepared: 11/15/93 Date analyzed: 11/16/93
Sample Qty/Type: 1/Solid

Test Parameter	Results (mg/kg)	Reporting Limit(mg/kg)
Gasoline	ND	9.1
Kerosene	ND	9.1
Mineral Spirits	ND	9.1
Fuel Oil #2/Diesel	ND	9.1
Fuel Oil #4	ND	9.1
Fuel Oil #6	ND	18
Motor Oil/Hydraulic Oil*	33	9.1

Results are in wet weight.

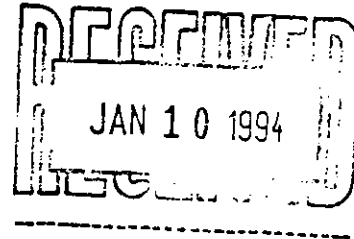
Comments: * = Carbon range C16-C32

ND = Not Detected at or above the reporting limit.

Approved by Nancy Stewart
Nancy Stewart



December 7, 1993



Mr. Joseph Cerutti
Ground Water Associates, Inc.
16 Commercial Drive
P.O. Box 280
Dracut, MA 01826

Dear Joe:

Enclosed please find the results for the sample (your project Harvard, MA) received on November 15, 1993. No quality control problems were encountered during the analysis of this sample. This project was assigned AMRO Project Number 5691. If you have any questions regarding this project in the future, please refer to this number.

This letter is an integral part of your data report.

Please do not hesitate to call if you have any questions.

Sincerely,

Nancy Stewart
Vice President

encl.
NS/db

LABORATORY REPORT

Petroleum Hydrocarbons by Gas Chromatography
EPA Method 8100 (Modified)

Client: Ground Water Associates, Inc.

Client I.D.: Harvard, MA

Sludge-1

AMRO I.D.: 5691-01

Date sampled: 11/15/93 Date received: 11/15/93

Date prepared: 12/03/93 Date analyzed: 12/06/93

Sample Qty/Type: 1/Solid

Test Parameter	Results (mg/kg)	Reporting Limit (mg/kg)
Gasoline	ND	430
Kerosene	ND	430
Mineral Spirits	ND	430
Fuel Oil #2/Diesel	33,000	430
Fuel Oil #4	ND	430
Fuel Oil #6	ND	860
Motor Oil/Hydraulic Oil	ND	430

Solid Content = 71.2%. Results are in wet weight.
Comments:

ND = Not Detected at or above the reporting limit.

Approved by Nancy Stewart
Nancy Stewart

CHAIN OF CUSTODY RECORD

[illegible]

The Commonwealth of Massachusetts



*Department of Environmental Protection
Division of Environmental Analysis*

Certifies

Laboratory ID #: M-NH012

Amro Environmental Lab
11 Herrick St.
Merrimack, NH 03054

for the Chemical Analysis of Potable and Non-Potable Water

pursuant to 310 CMR 42.00

*Laboratory
Director:*

Nancy Stewart

*Expiration
Date:*

12/31/94

This certificate supercedes all previous Massachusetts certificates issued to this laboratory. The laboratory is regulated by and shall be responsible for being in compliance with Massachusetts regulations at 310 CMR 42.00.

This certificate is valid only when accompanied by the latest dated Certified Parameter List as issued by the Massachusetts D.E.P.

Certification is no guarantee of the validity of the data. This certification is subject to unannounced laboratory inspections.

Dea C. Fancorbo

Director, Division of Environmental Analysis

01/01/94
Issued

COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF ENVIRONMENTAL PROTECTION

Certified Parameter List

12/14/93

EXPIRES: 12/31/94

M-NH012 Amro Environmental Lab
Merrimack, NH

NON-POTABLE WATER

- 201 Aluminum
- 202 Antimony
- 203 Arsenic
- * 204 Beryllium
- 205 Cadmium
- 206 Chromium
- 208 Copper
- 209 Iron
- 210 Lead
- 211 Manganese
- 213 Molybdenum
- 214 Nickel
- 215 Selenium
- 216 Silver
- 218 Thallium
- 221 Zinc
- 222 pH
- 223 Specific Conductivity
- 224 Total Dissolved Solids
- 226 Calcium
- 227 Magnesium
- 228 Sodium
- 229 Potassium
- 230 Total Alkalinity
- 231 Chloride
- 232 Fluoride
- 233 Sulfate
- 234 Ammonia-N
- 235 Nitrate-N
- 237 Orthophosphate
- 238 Total Phosphorus
- * 239 Chemical Oxygen Demand
- 240 Biochemical Oxygen Demand
- 242 Total Cyanide
- 243 Non-Filterable Residue

* Provisional Certification

NON-POTABLE WATER

- 244 Total Residual Chlorine
- 245 Oil and Grease
- 246 Total Phenolics
- 247 Volatile Halocarbons
- 248 Volatile Aromatics
- * 249 Chlordane
- 250 Aldrin
- 251 Dieldrin
- 252 DDD
- 253 DDE
- 254 DDT
- 255 Heptachlor Epoxide
- 256 Heptachlor Epoxide
- 258 Polychlorinated Biphenyls (oil)

* Provisional Certification

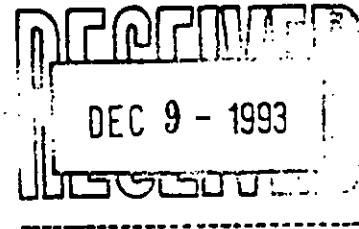
POTABLE WATER

- 101 Antimony
- 102 Arsenic
- 103 Barium
- * 104 Beryllium
- 105 Cadmium
- 106 Chromium
- 107 Copper
- 108 Lead
- 109 Mercury
- 110 Nickel
- 111 Selenium
- 112 Silver
- 113 Thallium
- 114 Nitrate-N
- 115 Nitrite-N
- 116 Fluoride
- 117 Sodium
- 118 Sulfate
- 119 Cyanide
- 120 Turbidity
- 121 Residual Free Chlorine
- 122 Calcium
- 123 Total Alkalinity
- 124 Total Dissolved Solids
- 125 pH
- 126 Langelier Index
- 136 Chlordane
- 137 Endrin
- 138 Heptachlor
- 139 Heptachlor Epoxide
- 142 Lindane
- 143 Methoxychlor
- 145 Toxaphene
- 153 Trihalomethanes
- * 154 Volatile Organic Compounds

* Provisional Certification



December 6, 1993



Mr. Joseph Cerutti
Ground Water Associates, Inc.
16 Commercial Drive
P.O. Box 280
Dracut, MA 01826

Dear Joe:

Enclosed please find the results for the samples (your project 322 Harvard, MA) received on November 15, 1993. No quality control problems were encountered during the analyses of these samples. This project was assigned AMRO Project Number 5690. If you have any questions regarding this project in the future, please refer to this number.

This letter is an integral part of your data report.

Please do not hesitate to call if you have any questions.

Sincerely,

Maria N. Borduz
President

encl.
MNB/db

AMRO Environmental Laboratory Report

Client:
Ground Water Associates, Inc.
16 Commercial Drive
P.O. Box 280
Dracut, MA 01826
Attn: Mr. Joseph Cerutti

Client Designation:
322 Harvard, MA

Samples Qty/Type: 2/Solid

AMRO Designation: 5690
Date Sampled: 11/15/93
Date Rec'd: 11/15/93
Date Complete: 11/16/93
COC #: 5497

Sample Identity	AMRO Identity	Test Parameter	Results	Units	Date of Analysis	Run by	EPA Method
Soil-1	5690-01	TPH by IR	197.	mg/kg	11/16/93	LB	418.1Mod
Soil-2	5690-02	TPH by IR	8,374.	mg/kg	11/16/93	LB	418.1Mod

All analyses performed in accordance with:

USEPA Methods of Chemical Analysis for Water & Waste.

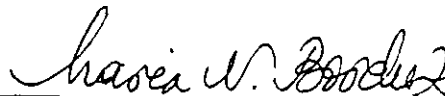
Standard Methods for the Examination of Water and Wastewater.

USEPA SW846 Manual, 3rd. ed.

The following standard abbreviations and conventions apply throughout all sections:

< = 'Less than' followed by the detection limit.

Certified by:


Maria N. Borduz, Ch.E.

