

Massachusetts Department of Environmental Protection Bureau of Waste Site Cleanup

RELEASE AMENDMENT FORM

BWSC 102

Release Tracking Number

- 29708

A. KELEASE OK THI	KEAT OF KELEA	SE LUCATION:							
1. Release Name/Locat	ion Aid: MAY	FLOWER MOBILE HON	ME PARK						
2. Street Address:	ress: 25 PATRIOT CIRCLE, LOT 22								
3. City/Town:	PLYMOUTH	4. ZIP	ZIP Code:						
B. THIS FORM IS BE	EING USED TO: (check all that apply	y)						
1. Date of Response(s)): <u> </u>)/2/2023	Start Tin	ne:	09:00	▼ AM	□ PM		
		(mm/dd/yyyy)			(hh:mm))			
2.Record Field Visits: a. Initial Complia	ınce Field Respon	se – Announced	ī	d. Con	ıpliance Field I	Response – Una	nnounced		
☐ b. Initial Complia	ance Field Respon	se – Unannounce	d F	▼ e. Foll	ow-up or Other	· Field Respons	e		
☐ c. Compliance Field Response – Announced			ſ	☐ f. Field Response - Direct Oversight					
3.Record an Activity:	ce Response		Г	b. Mee	ting with PRP	or PRP Repres	entative		
4.Record IRA Activitie	` -	ection D, if applical	_	e. IRA	Written Plan A	Approved			
☐ b. IRA Oral Plan	Г	☐ f. IRA Written Plan Denied							
☐ c. IRA Oral Plan	Denied and/or Re	equest for Writter	n Plan	□ g. Iı	mminent Hazar	d Termination	Approved		
□ d. IRA Oral Modi	ified Plan Approve	ed							
5.Record IRA Departm a. IRA-D Work S		ight Activities:	Г	d. IRA	-D Modification	n Plan Recorde	d		
□ b. IRA-D Assessment Only				e. IRA-D Work Completed					
☐ c. IRA-D Plan Re	ecorded								
6.Record URAM Activ		AM		c. URA	M Notification	of a Previously	Existing RTN		
□ b. URAM Work S	Started								
☐ 7. Correct or Add	l Data to WSC Da	tabase otherwise 1	not specifie	d on this	form. (Record i	n Section F)			
8. Identify or Upd	late a PRP or Oth	er Person Associa	ited with R	Release (F	Fill out Section C	C)			
□ 9 Record Other	· Staff Activities n	ot specified above	(Record in	Section	F)				

Revised: 07/19/2013 Page 1 of 3



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C. PRP OR OT	THER PER	SON ASSOCIA	ATED WIT	TH RELEAS	SE:						
1. Check all that apply: \Box a. change in contact name \Box b. change of address \Box c. new person associated with release											
2. Name of Orga	anization:										
3. Contact First	Name:	JOSEPH M			4.	Last Name:	JAMMALLO)			
5. Street:	PO BOX 32	2			6.	Title:					
7. City/Town:	AYER			8. State:	MA		9. ZII	P Code: 014320322			
10. Telephone:	978368632	0	11. Ex	t:		12. EMail:					
13. Relationship	of Person	to Release:	□ PRP	▼ OTHER	c. Type	e.g. Current	Owner):	Licensed Site Professional			
☐ 14. No Perso	on associate	ed with activity	specified i	n Section B.							
D. ENTER OR	AL RESPO	ONSE ACTION	V PLAN (if	applicable)	: (check a	ıll that apply))				
☐ 1. Assessment and/or Monitoring only						☐ 6. Temporary Evacuation or Relocation of Residents					
2. Temporary Covers or Caps						7. Product or NAPL Recovery					
☐ 3. Deployment of Absorbent or Containment Materials						☐ 8. Fencing and Sign Posting					
4. Temporary Water Supplies						☐ 9. Groundwater Treatment Systems					
☐ 5. Structure Venting Systems						☐ 10. Soil Vapor Extraction					
☐ 11. Check here if modifying amount of authorized excavated soils:											
Amount not to exceed ☐ cubic yards ☐ tons											
□ 12. Other	r Response	Actions									
Describe	e:										
E. MassDEP ST	TAFF AND	FORM PREPA	ARER:								
1. MassDEP Staff: MURPHY BOB											
2. Preparer Sign	nature:	ROBERT MURPHY	<u>, </u>		3.	Date:		9/6/2023			
								(mm/dd/yyyy)			

Revised: 07/19/2013 Page 2 of 3



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F. DESCRIPTION OF ACTIVITIES RECORDED BY THIS FORM:

INSPECTED LOCATION AND COORDINATED ON-SITE WITH TRAILER OCCUPANT. TRAILER UNIT HAS NOT BEEN MOVED NOR ARE ANY STRUCTURAL SUPPORTS OBSERVED. SOIL EXCAVATION APPEARS 1/2 BACKFILLED WITH POLY SHEETING ON TOP. WATER ON TOP OF POLY. CAN SMELL FUEL OIL IN AMBIENT AIR NEXT TO POLYED UP EXCAVATION. OBSERVED COVERED ROLL-OFF IN LOT BEHIND TRAILER. ROLL-OFF APPEARS TO CONTAIN EXCAVATED SOIL FROM SITE (TIMELINE?). ROLL-OFF APPEARS TO POSSIBLY CONTAIN SOME ACCUMULATED RAINWATER. AT THE TIME OF THE INSPECTION, THE ROLL-OFF DID NOT APPEAR TO BE LEAKING RAINWATER WITH ANY OIL SHEEN.

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Revised: 07/19/2013 Page 3 of 3