



ACTIVITY & USE LIMITATION (AUL) TRANSMITTAL FORM

Pursuant to 310 CMR 40.1056 & 40.1070 - 40.1084 (Subpart J)

Release Tracking Number

2 - 3000173

A. DISPOSAL SITE LOCATION:

- 1. Disposal Site Name: BUCKLEY & MANN
- 2. Street Address: 17 LAWRENCE ST
- 3. City/Town: NORFOLK 4. ZIP Code: 020560000
- 5. Check here if the disposal site that is the source of the release is Tier Classified. Check the current Tier Classification Category.
 - a. Tier I
 - b. Tier ID
 - c. Tier II

B. THIS FORM IS BEING USED TO: (check one)

- 1. Submit a Registry copy of a **Notice of Activity and Use Limitation**, pursuant to 310 CMR 40.1074.
- 2. Submit an **Evaluation of Changes in Land Uses/Activities and/or Site Conditions after a Permanent or Temporary Solution Statement** has been filed pursuant to 310 CMR 40.1080.
- 3. Submit a Registry copy of an **Amended Notice of Activity and Use Limitation**, pursuant to 310 CMR 40.1081.
- 4. Submit a Registry copy of a **Partial Termination of a Notice of Activity and Use Limitation**, pursuant to 310 CMR 40.1083(3).
- 5. Submit a Registry copy of a **Termination of a Notice of Activity and Use Limitation**, pursuant to 310 CMR 40.1083(1).
- 6. Submit a Registry copy of a **Grant of Environmental Restriction**, pursuant to 310 CMR 40.1071.
- 7. Submit a Registry copy of an **Amendment of a Grant of Environmental Restriction**, pursuant to 310 CMR 40.1081(3).
- 8. Submit a Registry copy of a **Partial Release of a Grant of Environmental Restriction**, pursuant to 310 CMR 40.1083(2).
- 9. Submit a Registry copy of a **Release of a Grant of Environmental Restriction**, pursuant to 310 CMR 40.1083(1)(d).
- 10. Submit a Registry copy of a **Confirmatory Activity and Use Limitation**, pursuant to 310 CMR 40.1085(4).
- 11. Submit a Registry copy of a **Deed, referencing a Notice of Activity and Use Limitation**, following the recording or registering of said deed conveying the record title for the property, pursuant to 310 CMR 40.1074(5). (Section D and H are not required).
- 12. Provide Additional RTNs:
 - a. Check here if this AUL Submittal covers additional Release Tracking Numbers (RTNs).
 - b. Provide the additional Release Tracking Number(s) covered by this AUL Submittal. - -

(All sections of this transmittal form must be filled out unless otherwise noted above)

C. AUL INFORMATION:

- 1. Document (per Section B) Recording and/or Registration Information:
 - a. Name of Registry of Deeds and/or Land Registration Office: NORFOLK COUNTY REGISTRY DISTRICT OF THE LAND COURT
 - b. Book and Page Number and/or Document Number: DOCUMENT NUMBER 1400369, BOOK 774, PAGE 153
 - c. Date of recording and/or registration: 5/14/2018
mm/dd/yyyy
- 2. Is the address of the property subject to AUL different from the disposal site address listed above?
 - a. No
 - b. Yes If yes, then fill out address section below.
- 3. Street Address: _____
- 4. City/Town: _____ 5. ZIP Code: _____



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D. LSP SIGNATURE AND STAMP:

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 309 CMR 4.03(2), and (iii) the provisions of 309 CMR 4.03(3), to the best of my knowledge, information and belief,

> if Section B indicates that a **Notice of Activity and Use Limitation** has been registered and/or recorded, the Activity and Use Limitation that is the subject of this submittal (i) is being provided in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000 and (ii) complies with 310 CMR 40.1074;

> if Section B indicates that an **Evaluation of Changes in Land Uses/Activities and/or Site Conditions after a Permanent or Temporary Solution** is being submitted, this evaluation was developed in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000 and (ii) complies with 310 CMR 40.1080;

> if Section B indicates that an **Amended Notice of Activity and Use Limitation or Amendment to a Grant of Environmental Restriction** has been registered and/or recorded, the Activity and Use Limitation that is the subject of this submittal (i) is being provided in accordance with the applicable provisions of M.G.L. c. 21E and 310CMR 40.0000 and (ii) complies with 40.1081;

> if Section B indicates that a **Termination or a Partial Termination of a Notice of Activity and Use Limitation, or a Release or Partial Release of a Grant of Environmental Restriction** has been registered and/or recorded, the Activity and Use Limitation that is the subject of this submittal (i) is being provided in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000 and (ii) complies with 310 CMR 40.1083;

> if Section B indicates that a **Grant of Environmental Restriction** has been registered and/or recorded, the Activity and Use Limitation that is the subject of this submittal (i) is being provided in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000 and (ii) complies with 310 CMR 40.1071;

> if Section B indicates that a **Confirmatory Activity and Use Limitation** has been registered and/or recorded, the Activity and Use Limitation that is the subject of this submittal (i) is being provided in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000 and (ii) complies with 310 CMR 40.1085(4);

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.

1. LSP#: 3507

2. First Name: STEPHENA

3. Last Name: VETERE

4. Telephone: 9787036029

5. Ext.: _____

6. Email: _____

7. Signature: STEPHENA VETERE

8. Date: 5/14/2018

mm/dd/yyyy

9. LSP Stamp:





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E. PERSON SUBMITTING AUL TRANSMITTAL FORM:

1. Check all that apply: a. change in contact name b. change of address c. change in the person undertaking response actions

2. Name of Organization: BUCKLEY & MANN, INC.

3. Contact First Name: LOIS 4. Last Name: MANN

5. Street: 205 LINDEN PONDS WAY 6. Title: PRESIDENT

7. City/Town: HINGHAM 8. State: MA 9. ZIP Code: 020430000

10. Telephone: 0000000000 11. Ext.: 12. Email:

13. Is the person described in this section the owner of the property?

a. Yes b. No, if checked then Section H must be filled out by at least one owner unless submitting a Deed referencing a Notice of Activity and Use Limitation in accordance with 310 CMR 40.1074(4).

c. Check here if providing names and addresses of any additional owners in an attachment.

F. RELATIONSHIP TO DISPOSAL SITE OF PERSON SUBMITTING AUL TRANSMITTAL FORM: (check one)

Check here to change relationship

1. RP or PRP a. Owner b. Operator c. Generator d. Transporter

e. Other RP or PRP Specify:

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

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

4. Any Other Person Submitting AUL Specify:



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G. REQUIRED ATTACHMENT AND SUBMITTALS:

- 1. Check here to certify that notice of the proposed Activity and Use Limitation (AUL) was given to all record-interest holders, if any, via certified mail, in accordance with 310 CMR 40.1074(1)(d) or 310 CMR 40.1081(4)(c) for a Notice of AUL or Notice of Amended AUL .
 - a. Check here if there were no record interest holders.
 - b. Date of certified mailing: _____
mm/dd/yyyy
 - c. Check here to certify that names and addresses of all record holders notified is attached.
- 2. Check here to certify that within 30 days of recording and/or registering the AUL, including amending, releasing or terminating the AUL, a copy of the AUL was/will be provided to the Chief Municipal Officer, the Board of Health, the Zoning Official, and the Building Code Enforcement Official in the community(ies) where the the property subject to such Activity and Use Limitation is located.
- 3. Check here to certify that within 30 days of recording and/or registering the AUL, including amending, releasing or terminating the AUL, a Legal Notice was/will be published in a newspaper with circulation in the community(ies) where the property subject to the AUL is located.
- 4. Check here to certify that within 7 days of publishing a Legal Notice in a newspaper with circulation in the community(ies) where the property subject to the AUL is located, a copy of the notice was/will be submitted to DEP.
- 5. If an AUL Compliance Fee is required for this AUL, check here to certify that an AUL Compliance Fee was submitted to DEP, P.O. Box 4062, Boston, MA 02211.
- 6. Check here if any non-updatable information provided on this form is incorrect, e.g. Site Address/Location Aid. Send corrections to bwsc.edep@state.ma.us.
- 7. Check here to certify that the LSP Opinion containing the material, facts, data, and other information is attached.

H. CERTIFICATION OF OWNER OF PROPERTY, IF NOT PERSON SUBMITTING AUL TRANSMITTAL FORM:

1. I, _____, attest under the pains and penalties of perjury that I am the owner of said property(ies), subject to the AUL

2. _____ 3. date: _____
Signature mm/dd/yyyy

4. Name of Organization: _____

5. Contact First Name: _____ 6. Last Name: _____

7. Street: _____ 8. Title: _____

9. City/Town: _____ 10. State: _____ 11. ZIP Code: _____

12. Telephone: _____ 13. Ext.: _____ 14. Email: _____



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I. CERTIFICATION OF PERSON MAKING SUBMITTAL:

1. I, LOISH MANN, 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.

Pursuant to 310 CMR 40.1074 (1)(e), I also hereby certify under penalties of perjury, that either I (if person submitting the AUL Transmittal Form is the property owner), or

2. Name of Property Owner

am/is identified on the Notice of AUL as the owner of the property subject to the AUL, owned such property on the date that the AUL was recorded and /or registered

3. By: LOISH MANN
Signature

4. Title: PRESIDENT

5. For: BUCKLEY & MANN, INC.
(Name of person or entity recorded in Section E)

6. Date: 5/14/2018
mm/dd/yyyy

7. Check here if the address of the person providing certification is different from address recorded in Section E.

8. Street: _____

9. City/Town: _____ 10. State: _____ 11. ZIP Code: _____

12. Telephone: _____ 13. Ext.: _____ 14. Email: _____

YOU ARE SUBJECT TO AN ANNUAL COMPLIANCE ASSURANCE FEE OF UP TO \$10,000 PER BILLABLE YEAR FOR THIS DISPOSAL SITE. YOU MUST LEGIBLY 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.

Date Stamp (DEP USE ONLY:)

Received by DEP on 5/14/2018 12:37:50
PM