



**TRANSMITTAL FORM FOR RECORDING THE RECEIPT
AND/OR ISSUANCE OF BWSC DOCUMENTS**

4 - 27576

A. RELEASE OR THREAT OF RELEASE LOCATION:

1. Release Name/Location Aid: RESIDENTIAL DEVELOPMENT
2. Street Address: 20 KRASEMAN ST
3. City/Town: DARTMOUTH 4. ZIP Code: _____

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

1. Record and Attach a Notice of Responsibility or related Document: (check one)
- a. **Notice of Responsibility (NOR)** d. **One-year Anniversary Letter**
- b. **Field NOR** e. **Retraction of an NOR**
- c. **Notice of Obligation/Notice of Requirements**
2. Record and Attach a **Denial of a Release Notification Retraction**
3. Record and Attach: a. **Request for Access Letter** b. **Signed Access Agreement**
4. Record and Attach a Lower-level Enforcement and/or Audit Related Document(s): (check all that apply)
- a. **Notice of Audit** g. **Request for Information**
- b. **Request for Information Relating to an Audit** h. **Notice of Noncompliance**
- c. **Notice of Audit Findings - No Violations** i. **Notice of Need to Conduct Field Work**
- d. **Notice of Audit Findings - Violations without Follow-up** j. **Interim Deadline Letter**
- e. **Notice of Audit Findings/Notice of Noncompliance**
- f. **Interim Deadline Letter Relating to an Audit**
5. Record and Attach an Executed Higher-level Enforcement Related Document: (check one)
- a. **Penalty Assessment Notice** e. **Administrative Consent Order with Penalty**
- b. **Unilateral Administrative Order** f. **Amendment of a Higher-level Enforcement Document**
- c. **Demand Notice** g. **Notice of Response Action**
- d. **Administrative Consent Order** h. **Notice of Intent to Mobilize**
6. Record and Attach MassDEP Initiated Response Action (RA) related Document and/or Activity: (check one)
- a. **Technical Screen Audit (L1)** c. **Audit Inspection (L2)** e. **Comprehensive Audit (L3)**
- b. **Written Plan Approval** d. **Written Plan Denial** f. **Audit Memorandum**
- g. Other RA related **Document and/or Activity** Specify: _____
- h. A **Submittal that has been Invalidated or Terminated by** Specify: _____
7. **MassDEP** Select Response Actions Associated with Activity checked in B6: (check all that apply)
- a. **Release Notification** d. **Downgradient Property Status (DPS)**
- b. **Immediate Response Action (IRA)** e. **Utility-related Abatement Measure (URAM)**
- c. **Release Abatement Measure (RAM)** f. **Tier Classification /Phase I**



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7. Select Response Actions Associated with Activity checked in B6 (cont.): (check all that apply)

- g. Comprehensive Response Actions
- i. Permanent or Temporary Solution
- h. Activity and Use Limitation (AUL)
- j. Other Response Actions Describe: _____

8. Record and Attach any other **MassDEP Document** Specify: _____

9. Record Date of Document(s) and/or Activity(ies) from B1 thru B8: 1/29/2019
(mm/dd/yyyy)

Check here to confirm that these are final document(s) intended for public viewing (do not use for internal only documents).

10. Record and Attach a Special Project Activity or Submittal: (check all that apply)

- a. **Special Project Permit**
- b. **Special Project Extension**
- c. Other **Special Project Activity** Describe: _____

11. Attach any other **Submittal received by MassDEP** Specify: _____

12. Record Date of Activity(ies) and/or Submittal from B10 or B11: _____
(mm/dd/yyyy)

13. Record Additional Information: _____

C. PRP OR OTHER PERSON ASSOCIATED WITH DOCUMENT:

1. Check all that apply: a. change in contact name b. change of address c. new person associated with release

2. Name of Organization: ROCKWOOD PROPERTIES, LLC

3. Contact First Name: _____ 4. Last Name: _____

5. Street: 286 UNION STREET 6. Title: _____

7. City/Town: NEW BEDFORD 8. State: MA 9. ZIP Code: 027400000

10. Telephone: _____ 11. Ext: _____ 12. EMail: _____

13. Relationship of Person to Release: PRP OTHER c. Type(e.g. Current Owner): Current Owner

14. No Person associated with activity or document specified in Section B.

D. MassDEP STAFF AND FORM PREPARER:

1. MassDEP Staff: JONES ANDY b. Check here, if Unassigned. (or staff name not applicable)

2. Preparer Signature: ANDREW L. JONES 3. Date : 2/19/2019
(mm/dd/yyyy)