Improving MCP Compliance – Navigating eDEP and Managing RTNs

Bureau of Waste Site Cleanup
January 2009

Stephanie Macleod
Randi Augustine
Susan Fessenden
BWSC.eDEP@state.ma.us



Training Agenda

- 9:00 -- Introduction
- 9:10 -- New Graphic User Interface (GUI)
- 9:50 -- eDEP Transaction Overview
- **10:15 -- RTN Standard Operating Procedures**
- 10:45 -- Questions and Answers

Why eDEP?

Business, developers, environmental professionals, and the public need information about hazardous waste sites to increase the Commonwealth's advantage.

- Easily
- From anywhere
- In real time



Project Background

- 2001 2002 Project Design and Development
- 2003 2004 BWSC Rollout
 - Majority of BWSC forms available in eDEP (except BOL)
 - Registration process streamlined

Project Background (cont)

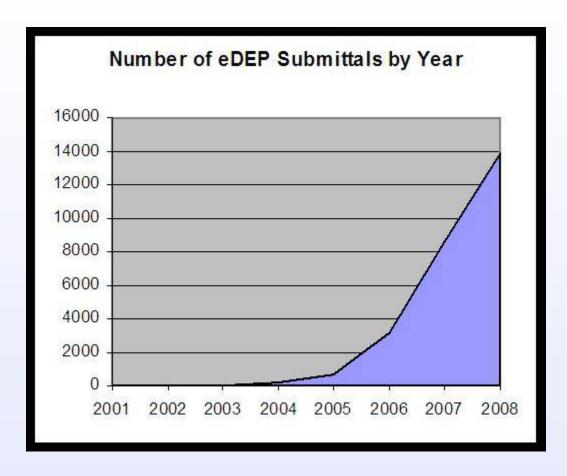
- 2005 2006 Development of Plan to increase eDEP Usage
 - Regulatory change introducing Remedial Monitoring Report in electronic format only
 - Email box createdBWSC.eDEP@state.ma.us
- 2007 RMR required electronically

Project Background (cont)

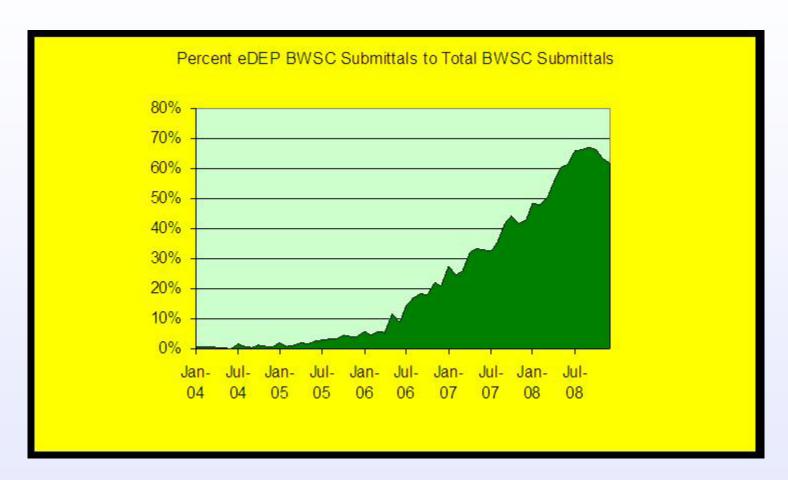
- 2008 Regulatory change 1/1/2009 all-electronic BWSC submittals.
 - Printed copy no longer required if supporting documentation submitted with eDEP transmittal form.
 - Site File Viewer available.
 - First program of its type in the country to be all electronic.



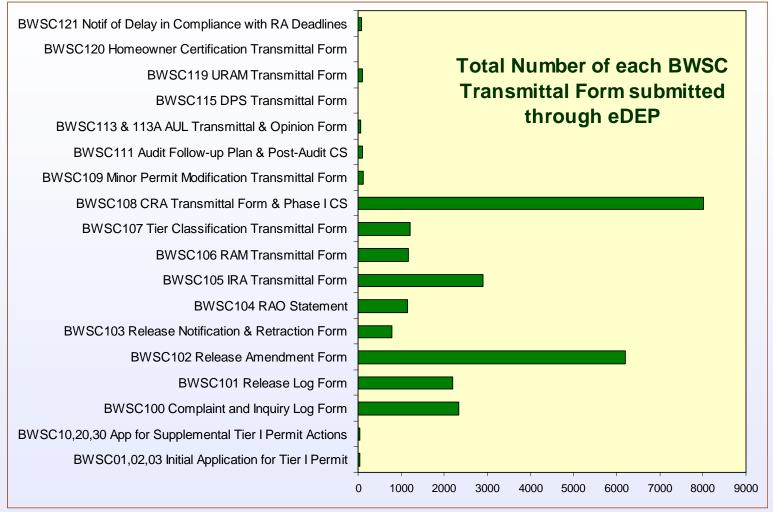
Number of eDEP Submittals by Year



Percent eDEP BWSC Submittals to Total BWSC Submittals



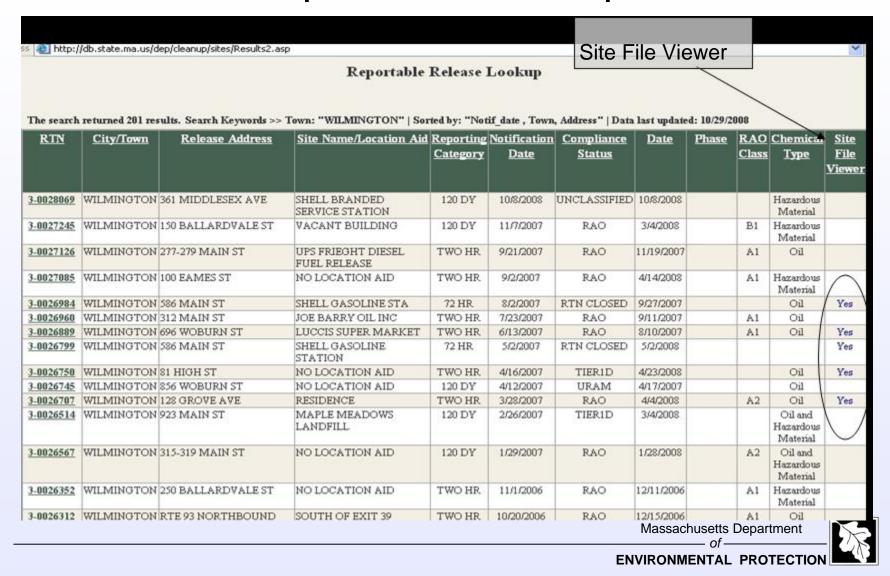
Total Submitted BWSC Forms through eDEP



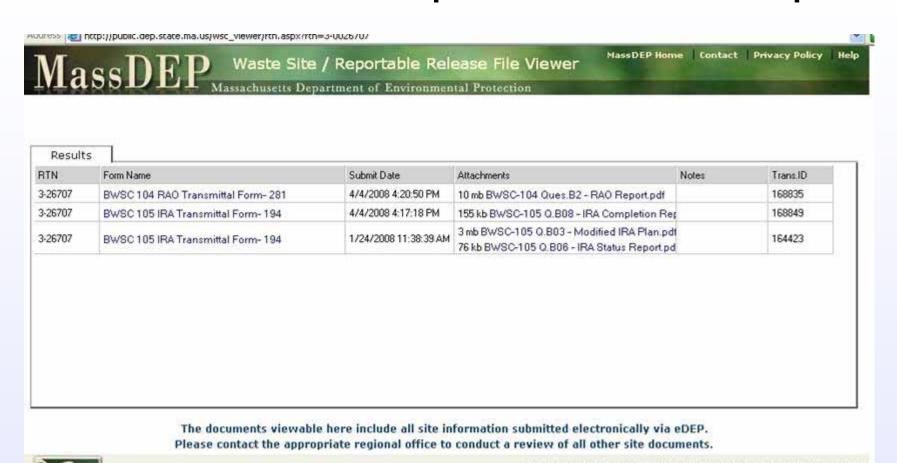
Site File Viewer

Region Tracking ID BWSC 101 Release Log Form BWSC 102 Release Amendment Form BWSC 103 Release Notification & Retraction Form BWSC 104 RAO Transmittal Form BWSC 105 IRA Transmittal Form BWSC 106 RAM Transmittal Form BWSC 107 Tier Classification Transmittal Form BWSC 107 Tier Classification Transmittal Form BWSC 109 Minor Permit Modification Transmittal Form BWSC 111 Audit Follow-up Plan & Post-Audit CS BWSC 113 & 113A AUL Transmittal & Opinion Form BWSC 115 DPS Transmittal Form BWSC 119 URAM Transmittal Form Your search produced 203 records. Records 1 to 203 appear below.				Select Searc	h Criteria			
Bwsc 10,20,30 App for Supplemental Tier I Permit Action Bwsc 101 Release Log Form Bwsc 101 Release Log Form Bwsc 103 Release Amendment Form Bwsc 103 Release Notification & Retraction Form Bwsc 104 RAO Transmittal Form Bwsc 105 IRA Transmittal Form Bwsc 107 Tier Classification Transmittal Form Bwsc 107 Tier Classification Transmittal Form Bwsc 109 Minor Permit Modification Transmittal Form Bwsc 111 Audit Follow-up Plan & Post-Audit CS Bwsc 113 & 113A AUL Transmittal & Opinion Form Bwsc 115 DPS Transmittal Form Bwsc 115 DPS Transmittal Form Wasser 115 DPS Transmittal Form Bwsc 115 DPS Transmittal Form Bwsc 119 URAM Transmittal Form Wasser 119 URAM Tra				Form	Name:			
Submit Date (MM/DD/MM): 10/1/2008 BWSC 104 RAO Transmittal Form BWSC 105 IRA Transmittal Form BWSC 105 IRA Transmittal Form BWSC 105 IRA Transmittal Form BWSC 107 Tier Classification Transmittal Form BWSC 107 Iler Classification Transmittal Form BWSC 108 CRA Transmittal Form & Phase I CS BWSC 109 Minor Permit Modification Transmittal Form BWSC 111 Audit Follow-up Plan & Post-Audit CS BWSC 113 & 113A AUL Transmittal & Opinion Form BWSC 115 DPS Transmittal Form BWSC 115 DPS Transmittal Form BWSC 119 URAM Transmittal Form WIND BWSC 1	Release Tracking Number (RTN):			o ID	BWSC 10,20,30 App for Supplemental Tier I Permit Action BWSC 101 Release Log Form			
Transaction ID: BWSC 111 Audit Follow-up Plan & Post-Audit CS BWSC 113 & 113A AUL Transmittal & Opinion Form BWSC 115 DPS Transmittal Form BWSC 119 URAM Transmittal Form WITH	ş	Submit Date (MM/DD/YYY):	10/1/2008 To:		WSC 104 RAO Transmittal Form WSC 105 IRA Transmittal Form WSC 106 RAM Transmittal Form WSC 107 Tier Classification Transmittal For WSC 108 CRA Transmittal Form & Phase I (m cs		
Your search produced 203 records. Records 1 to 203 appear below. Volume		Transaction ID:	County 1	e	WSC 111 Audit Follow-up Plan & Post-Audit WSC 113 & 113A AUL Transmittal & Opinion WSC 115 DPS Transmittal Form	cs		
BWSC 108 CRA Transmittal Form & Phase I CS- 24 > BWSC Remedial Monitoring Report A- 195 10/31/2008 4:58:57 PM 8 mb BWSC-108 Ques.B18 - ROS Status Repo 2 mb BWSC-108 Ques.F1 - Statement of Provis 211156 2 mb BWSC-108 Ques.B08 - Revised Phase III 175418	ults		Your search prod	uced 203 records.	Records 1 to 203 appear below.			
> BWSC Remedial Monitoring Report A- 195 > BWSC Remedial Monitoring Report B- 196 10/31/2008 4:58:57 PM 2 mb BWSC-108 Ques.B18 - ROS Status Repo 2 mb BWSC-108 Ques.F1 - Statement of Provis 8 mb BWSC-108 Ques.B18 - ROS Status Repo 2 mb BWSC-108 Ques.F1 - Statement of Provis 10/31/2008 4:44:25 PM 4 mb BWSC-108 Ques.B08 - Revised Phase III 175418	N	Form Nam	e	Submit Date	Attachments	Notes	Trans.ID	2
RWSC 108 CRA Transmittal Form & Phase I CS- 24 10/31/2008 4:44:25 PM		> BWSC Remedial Monitorin	ng Report A-195	10/31/2008 4:58:57 PM		Total Graves	211156	
		BWSC 108 CRA Transmittal F	orm & Phase I CS- 24	10/31/2008 4:44:25 PM			175418	

Reportable Release Lookup



Site File Viewer from Reportable Release Lookup

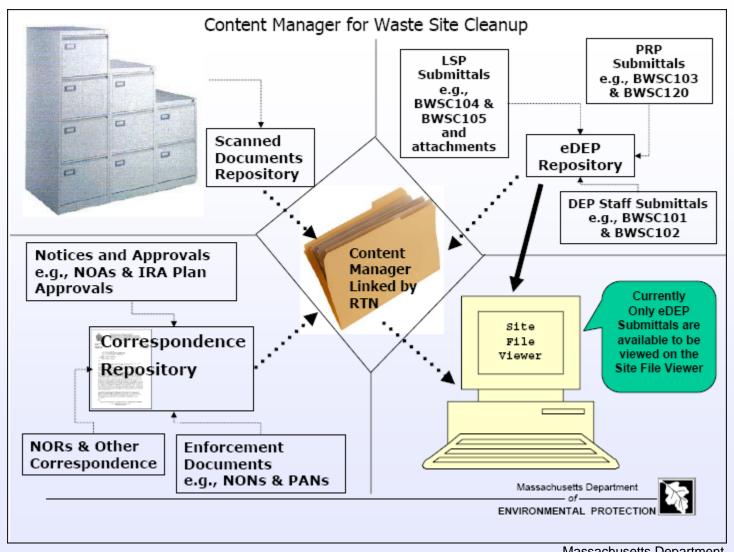


One Winter Street - Boston Massachusetts 02108 - 617-292-5500

Waste Site / Reportable Release File Viewer ver. 1.3 © 2008 MassDEP

Massachusetts Department





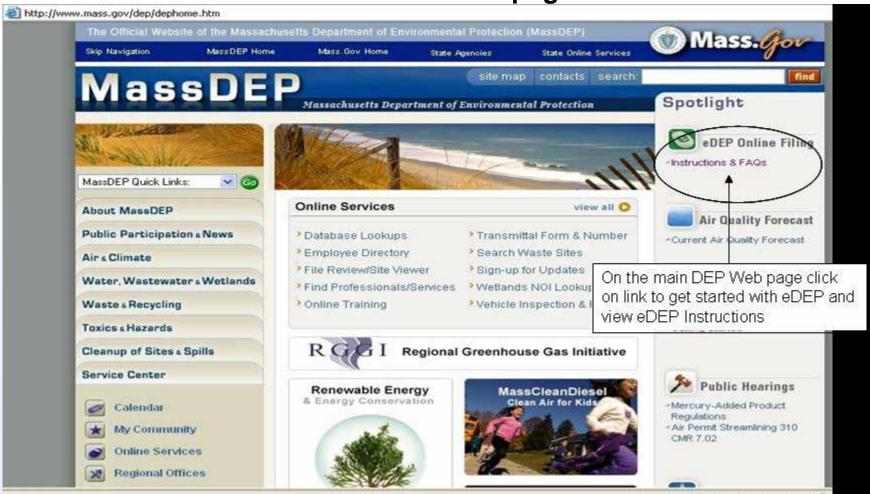
Massachusetts Department



New Look to eDEP

Graphic User Interface (GUI)

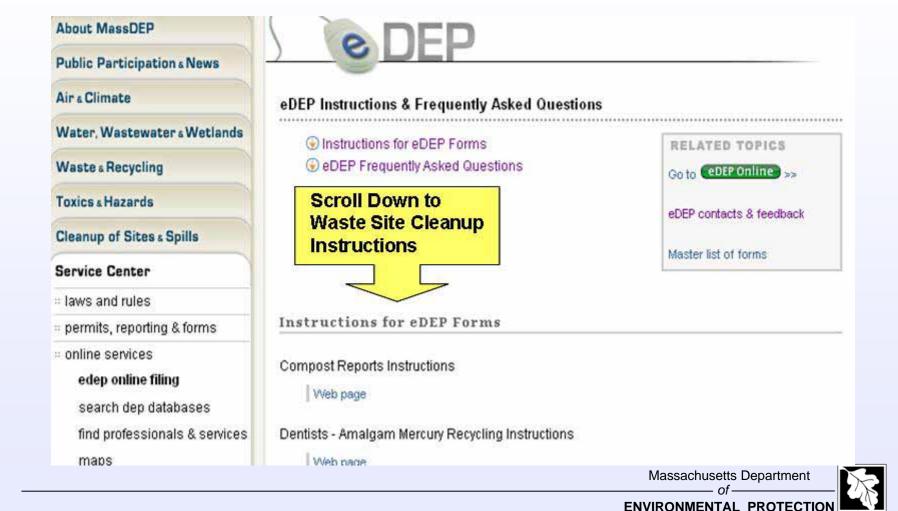
MassDEP Homepage



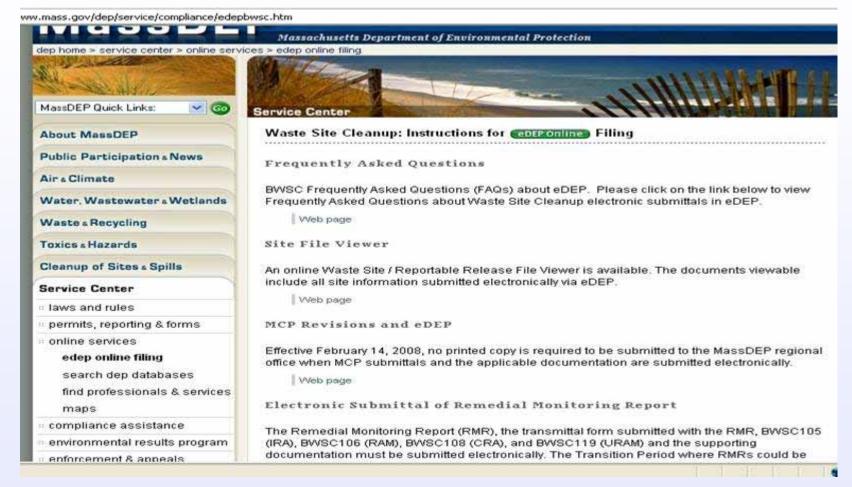
Massachusetts Department of —————



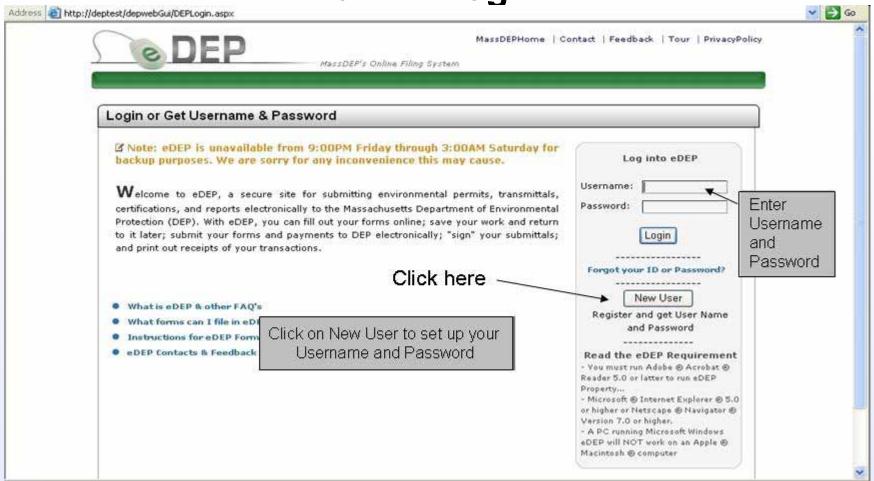
Accessing eDEP



Waste Site Cleanup Instructions for eDEP Filing http://www.mass.gov/dep/service/compliance/edepbwsc.htm



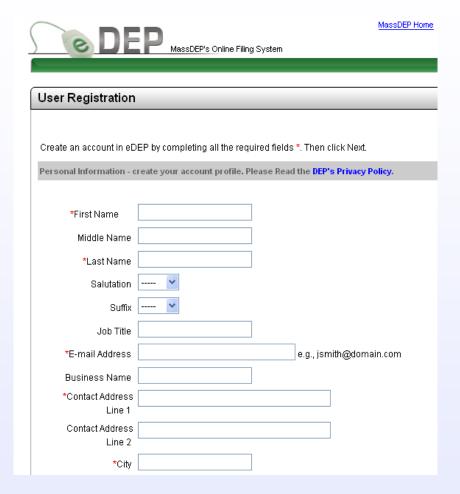
eDEP Login



Massachusetts Department
of



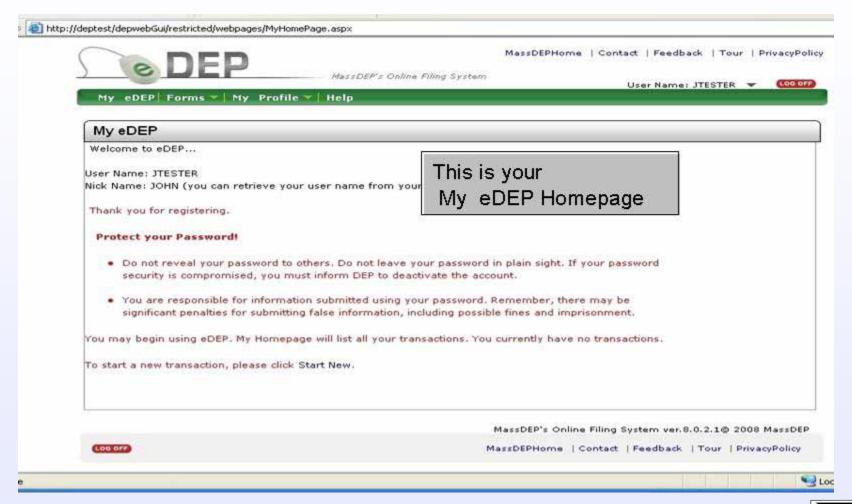
Create Your Account



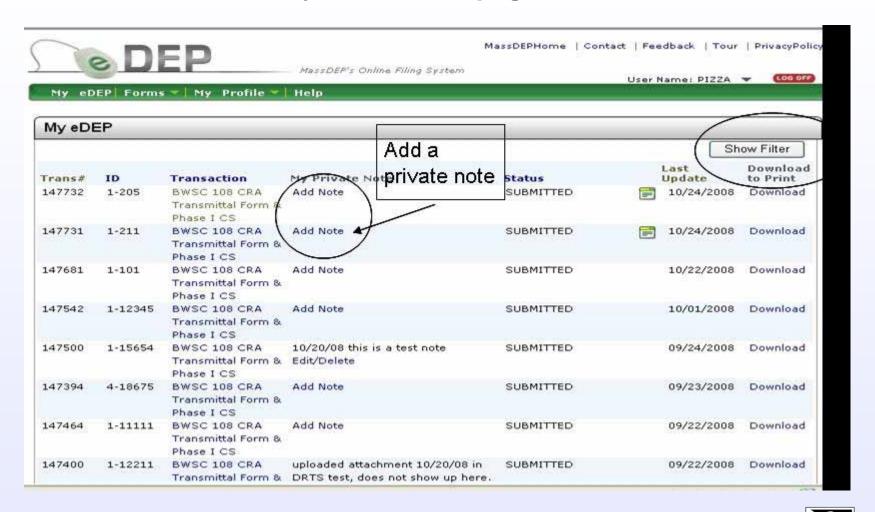
Fax						
rax						
ogin and Security Info	rmation - create your	login and security	profile.			
	9		me with at least 5			
*Username	jtester	characters but	t with NO spaces			
de la companya de la	tester2		ne DIFFERENT from your			
*Nickname	testerz		sharing in eDEP			
** 1		Pick a password				
*Password		characters BOTE	H letters & numbers			
*Retype Password	•••••					
* Security Question	What is your pet's r	name?	v			
Security Question	Pick any question fro					
*Answer Security	, ,					
Question	roxy					
V	Type your answer. Allows you to retrieve lost passwords.					
Terms	To register with eDE	9 vou must review as	nd agree to the eDEP Terms			
& Conditions		se indicate your agree				
				Click here to		
	O I do not agree			create your		
	O I do not agree			new accou		
				11011 40000		
	back to login	Clear	Create my New Account			
			MassDEP's Online Filing System v	er.8.0.2.1@ 2008 MassDEP		
				Supplemental Local intranet		



My eDEP Homepage



My eDEP Homepage



Massachusetts Department



My eDEP Homepage - Filter

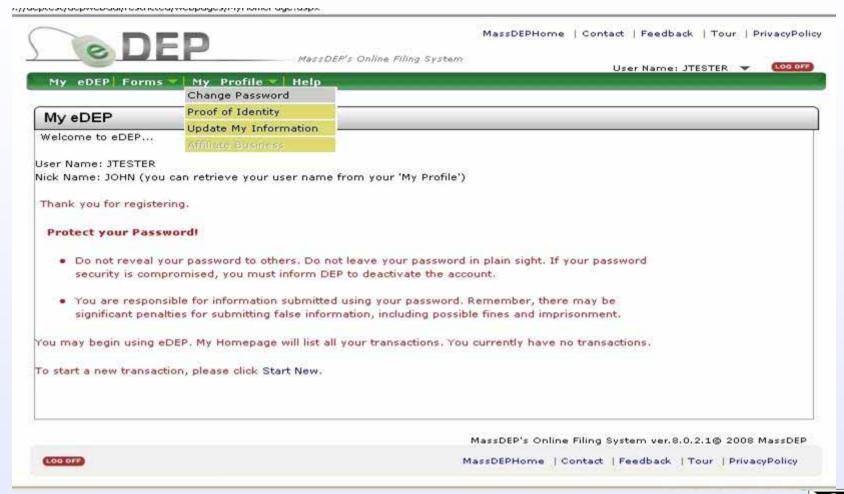
>://deptest/depwebGui/Restricted/Webpages/MyHomePage.aspx

MassDEPHome | Contact | Feedback | Tour | PrivacyPolicy MassDEP's Online Filing System User Name: PIZZA -My eDEP Forms W My Profile W Help My eDEP Hide Filter Transaction #: ID: Status: Instruction: SIGNATURE(S) REQUIRED 11486 100038344 You can filter a transaction by 18330 100060533 SIGNED selecting any of the field displayed 30611 100060544 SUBMITTED i.e.Transaction #, ID, Status, Form Form: or Specific Date. You can also do a multiple filter by selecting multiple Last Update: Start Date: 100 fields at a time and then clicking the filter button. 1111 End Date: Filter Clear Last Download Trans# ID Transaction My Private Note Status Updateto Print 147732 1-205 BWSC 108 CRA Add Note SUBMITTED Download 10/24/2008 Transmittal Form & Phase I CS 10/24/2008 147731 1-211 BWSC 108 CRA Add Note SUBMITTED Download Transmittal Form & Phase I CS 147681 1-101 BWSC 108 CRA Add Note SUBMITTED 10/22/2008 Download Transmittal Form & Phase I CS 147542 1-12345 BWSC 108 CRA Add Note SUBMITTED 10/01/2008 Download Transmittal Form & Phase I CS 147500 1-15654 BWSC 108 CRA 10/20/08 this is a test note SUBMITTED 09/24/2008 Download Transmittal Earn 0. Edit/Dalata

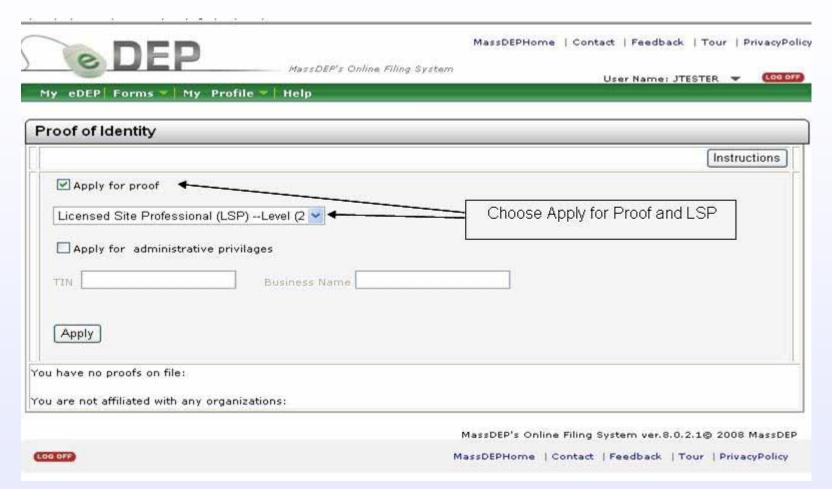
Massachusetts Department



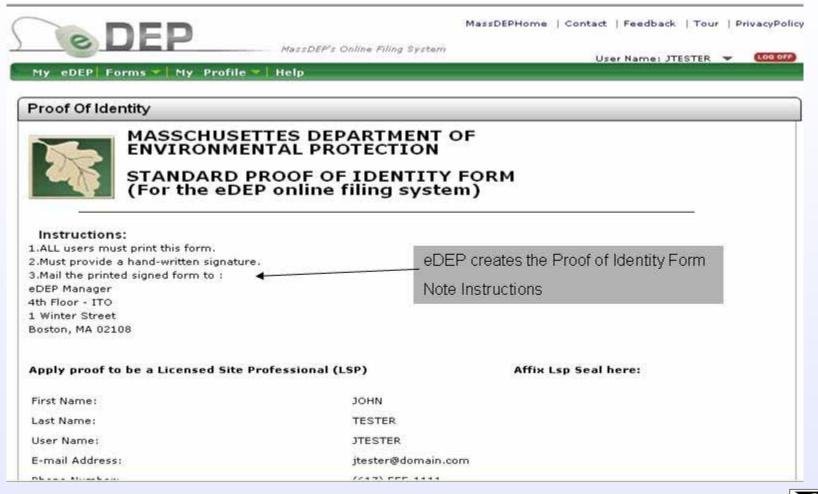
My Profile – To Update Information and Add Proofs



Apply for LSP Proof of Identity



LSP Proof of Identity Form

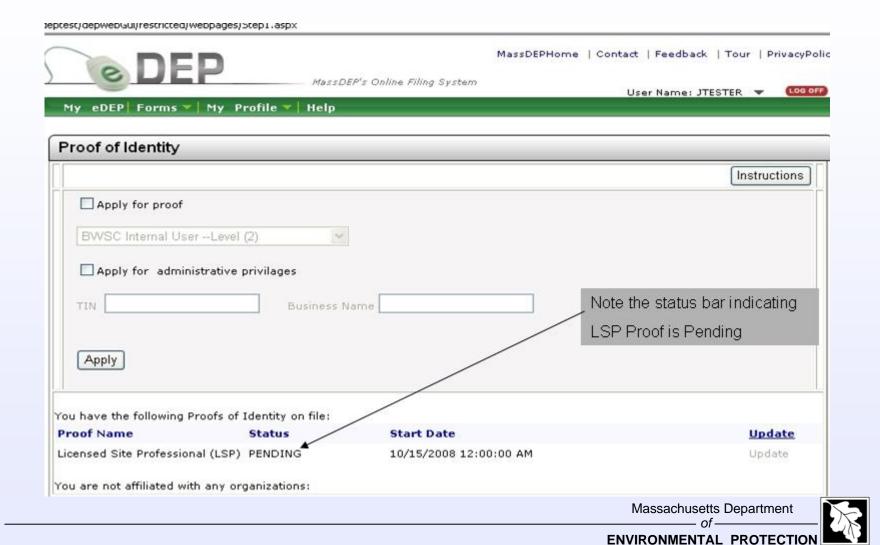


Massachusetts Department

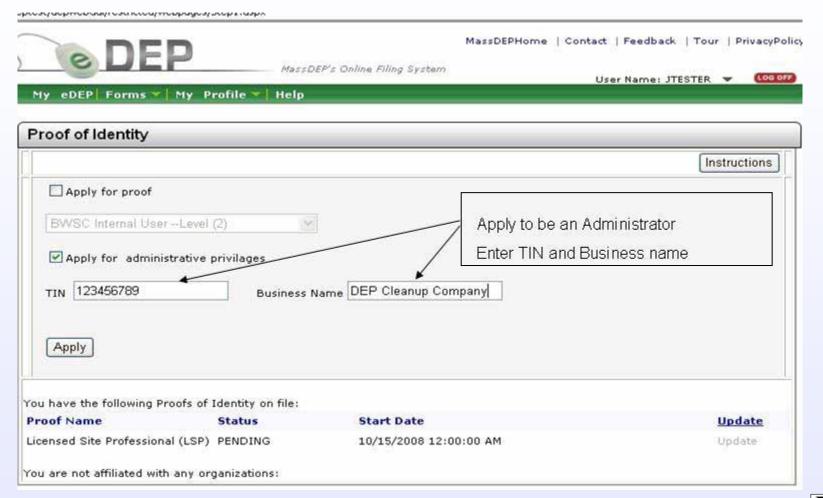




LSP Proof Pending



Apply to be Administrator

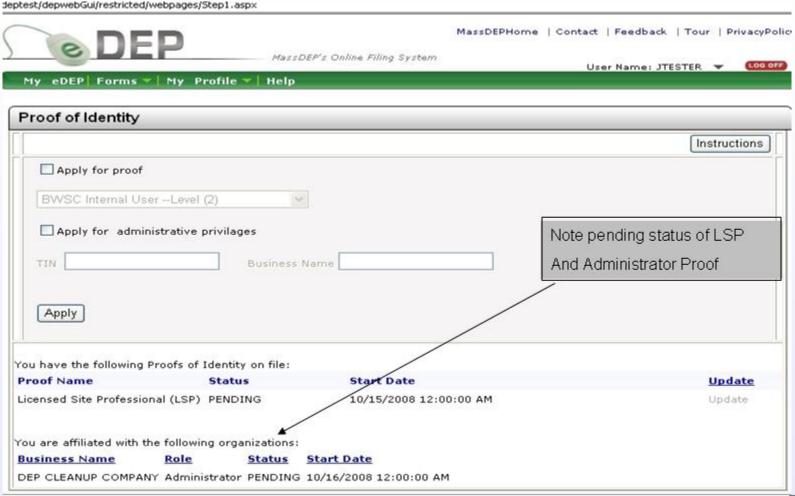


Massachusetts Department

of



Administrator and LSP Proof of Identity Pending



Massachusetts Department
of

ENVIRONMENTAL PROTECTION

MassDEPHome | Contact | Feedback | Tour | PrivacyPolic MassDEP's Online Filing System User Name: JTESTER 🔻 My eDEP Forms My Profile Help Air & Climate My eDEP Business Sectors Cleanup of Sites & Spills Welcome to Drinking Water This is where forms are found User Name: J Toxics & Hazards Nick Name: J(Waste & Recycling user name from your 'My Profile') Wastewater Thank you fo Wetlands Protect yo All Forms Recent Forms . Do not reveal your password to others. Do not leave your password in plain sight. If your password security is compromised, you must inform DEP to deactivate the account. · You are responsible for information submitted using your password. Remember, there may be significant penalties for submitting false information, including possible fines and imprisonment.

You may begin using eDEP. My Homepage will list all your transactions. You currently have no transactions.

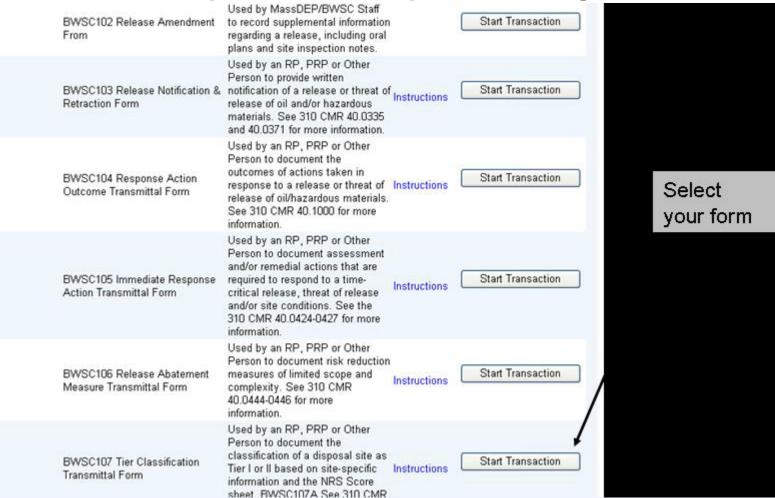
To start a new transaction, please click Start New.

Massachusetts Department





Cleanup of Sites and Spills Form Page

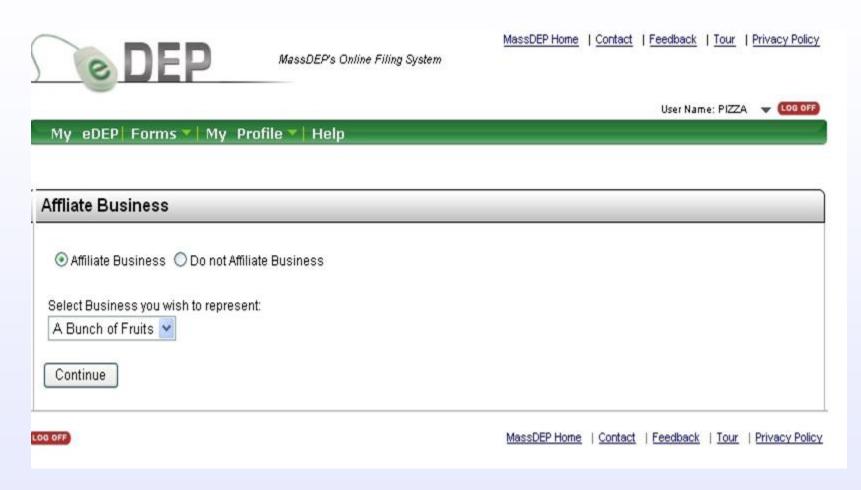


Massachusetts Department

of



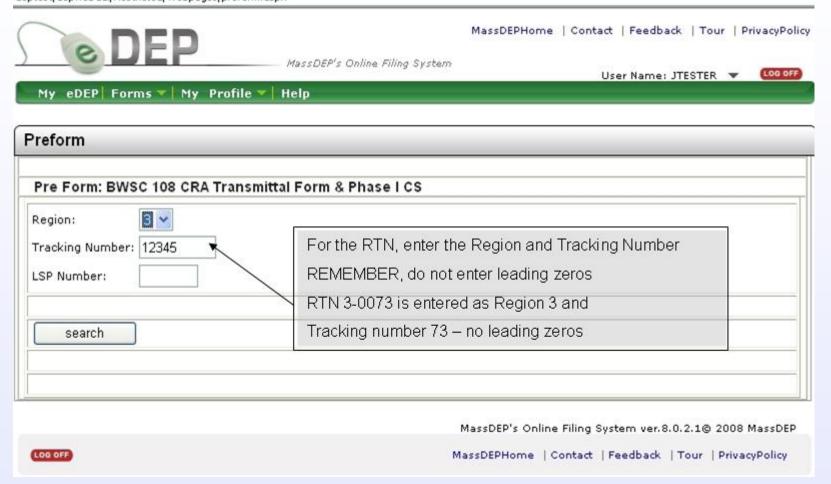
Affiliate Business





Pre Form Page

(deptest/depwebGui/Restricted/Webpages/preform.aspx



Massachusetts Department

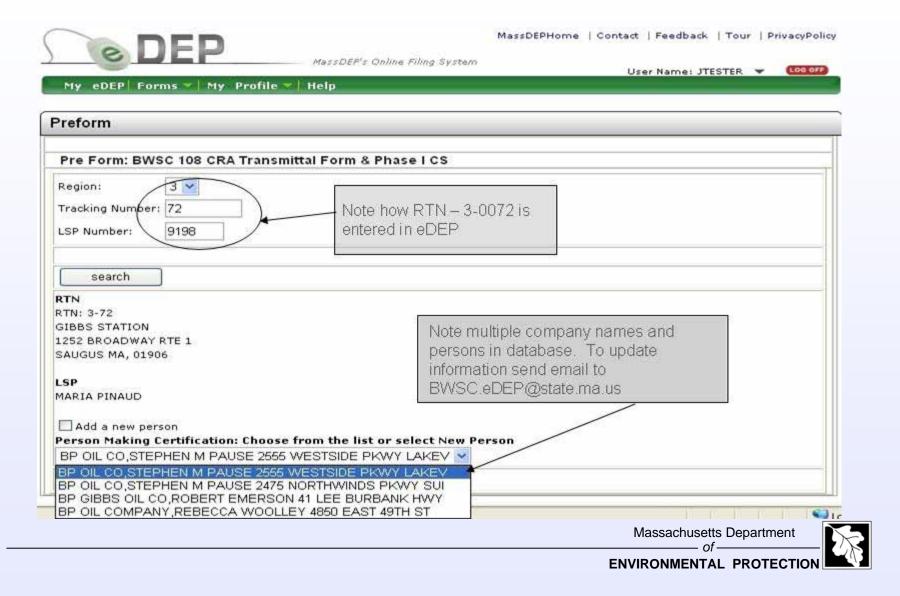




Preform -- DEP Database Information

My eDEP Forms My	MassDEP's Online Filing System User Name: JTESTER ▼ Loo Profile ▼ Help
reform	
Pre Form: BWSC 108 CR	A Transmittal Form & Phase I CS
Region: 3 💌	
racking Number: 12345 SP Number: 9198	Check that the site information is up to date. If not, send an email to BWSC.eDEP@state.ma.us to update database
search	
TN TN: 3-12345 O LOCATION AID	
7 BRIDGE ST VILLERICA MA, 018210000 SP	Check persons involved with this release. To add a new person, check off Add box. Send email with new information to BWSC.eDEP@state.ma.us
Add a new person	

Preform—DEP Database Information (cont.)



eDEP Transaction Overview

Transaction Overview – Navigation Page

//edeptest/Pages/RelatedForms.aspx MassDEPHome | Contact | Feedback | Tour | Privacy Policy MassDEP's Online Filing System Nick Name: TESTER2 V LOG OFF My eDEP Forms ▼ My Profile ▼ Help Transaction Overview Trans# 147709 ID#3-72 BWSC 108 CRA Transmittal Form & Phase I CS Steps progress bar Forms Signature Forms in this transaction Print Transaction Delete Transaction Share Transaction Exit Errors Checked/ Fill out the following forms for this transaction: Validated BWSC 108 CRA Transmittal Form & Phase I CS () Next MassDEPHome | Contact | Feedback | Tour | Privacy Policy LOG OFF



Sharing an eDEP submittal

User Name: HAMBURGEI My eDEP Forms Wy Profile Help Share Submittal This page enables you to share this submittal with other eDEP users. To add a user with whom you would like to share the submittal, click on the Add a User button (below). To share with another eDEP user, you must know that user's eDEP nickname. Once you have indicated the eDEP nickname of the user with whom you would like to share the submittal, you must specify the role (i.e., the privileges) that you would like to grant to that user. You may also put a limit on the time period for which the role is valid for the user. If you give the user the Owner role, you will lose the ability to add further users for sharing of this submittal, because only the Owner possesses that privilege. Transaction # 147931 Select Add Form Name Shared with add

Sharing an eDEP submittal (cont.)

are Submittal			
like to share the submi must know that user's whom you would like to like to grant to that use If you give the user the	ittal, click on the Add a User butt eDEP nickname. Once you have o share the submittal, you must r. You may also put a limit on the	er eDEP users. To add a user with won (below). To share with another et indicated the eDEP nickname of the specify the role (i.e., the privileges) the time period for which the role is validity to add further users for sharing o	DEP user, you e user with hat you would id for the user,
Transaction #	147931		
Form Name			
Shared with			
Share With	mushroom	Enter a valid eDEP nicknam	e
	Please enter a valid eDEP nic	kname	Select Add
Role	Editor&Signer 💌		
From	11/14/2008 To (e.g., 11/14/2008) Please enter a valid US Date	Format(e.g., 12/30/2003)	
	back cance	add	

eDEP Sharing Roles

- Viewer
- Editor
- Signer
- Editor & Signer
- Owner (Creator of the form gives ownership of the form to someone else)

BWSC108 Form

Bureau of Waste Site Cleanup	BWSC108
COMPREHENSIVE RESPONSE ACTION TRANSMITTAL FORM & PHASE I COMPLETION STATEMENT Pursuant to 310 CMR 40.0484 (Subpart D) and 40.0800 (Subpart H)	Release Tracking Num 4 - 88888
A. SITE LOCATION:	
1. Site Name: MACLEOD ENTERPRISES	
2. Street Address: 1 MAIN ST	
3. City/Town: BRIDGEWATER 4. ZIP Code:	
5. UTM Coordinates: a. UTM N: b. UTM E:	ly Location of Site
✓ 6. Check here if a Tier Classification Submittal has been provided to DEP for this disposal sit	e
a. Tier IA b. Tier IB c. Tier IC d. Tier II	**
7. If applicable, provide the Permit Number:	
B. THIS FORM IS BEING USED TO: (check all that apply)	
D. The Fermi of Delite Cold Fermi and Cappy)	
1. Submit a Phase I Completion Statement, pursuant to 310 CMR 40.0484.	

Massachusetts Department
of

ENVIRONMENTAL PROTECTION



BWSC108 – Section B

out the following form. You cannot save data typed into this form. It your completed form if you would like a copy for your records.
Bureau of Waste Site Cleanup Busc 108
COMPREHENSIVE RESPONSE ACTION TRANSMITTAL Release Tracking Number FORM & PHASE I COMPLETION STATEMENT 4 - 88888
Pursuant to 310 CMR 40.0484 (Subpart D) and 40.0800 (Subpart H)
B. THIS FORM IS BEING USED TO (cont.): (check all that apply)
14. Submit a Revised Phase IV Completion Statement, pursuant to 310 CMR 40.0878 and 40.0879.
15. Submit a Phase V Status Report, pursuant to 310 CMR 40.0892.
16. Submit a Remedial Monitoring Report. (This report can only be submitted through eDEP.)
a. Type of Report: (check one) 🔲 i. Initial Report 🔽 ii. Interim Report 🔲 iii. Final Report
b. Frequency of Submittal: (check all that apply)
i. A Remedial Monitoring Report(s) submitted monthly to address an Imminent Hazard.
ii. A Remedial Monitoring Report(s) submitted monthly to address a Condition of Substantial Release Migration.
iii. A Remedial Monitoring Report(s) submitted concurrent with a Status Report.
c. Status of Site: (check one) i. Phase V ii. Remedy Operation Status iii. Class C RAO
d. Number of Remedial Systems and/or Monitoring Programs: 1
A separate BWSC108A, CRA Remedial Monitoring Report, must be filled out for each Remedial System and/or Monitoring Program addressed by this transmittal form.
17. Submit a Remedy Operation Status, pursuant to 310 CMR 40.0893.
18 Submit a Status Report to maintain a Remedy Operation Status pursuant to 310 CMR 40 0893(2)

Massachusetts Department
of

ENVIRONMENTAL PROTECTION



Person Undertaking Response Actions

ut the following form. You cannot save data typed into this form. your completed form if you would like a copy for your records.	
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: MACLEOD ENTERPRISES	
3. Contact First Name: Stephanie 4. Last Name: MacLeod	
5. Street: 1 Main Street 6. Title: President	
7. City/Town: Bridgewater 8. State: MA 9. ZIP Code: 01555-0000	
10. Telephone: (508) 555-1111 11. Ext.: 12. FAX:	
E. RELATIONSHIP TO SITE OF PERSON UNDERTAKING RESPONSE ACTIONS:	
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 Undertaking Response Actions Specify Relationship:	
F. REQUIRED ATTACHMENT AND SUBMITTALS:	
1. Check here if the Response Action(s) on which this opinion is based, if any, are (were) subject to any order(s), permit(s)	

Massachusetts Department of —



Person Undertaking Response Actions Information (cont.)

- If the user wants to update the Contact Name and/or Address for the person selected on the Pre Form and auto-filled here, check off the applicable box(es) 1.a. and 1.b. and fill in the new information.
- Permanent edits need to be sent to the BWSC.eDEP@state.ma.us mail box.

Person Undertaking Response Actions Information

- The Person Undertaking the Response Action information is auto-filled from MassDEP's database based on the user's selection made on the Pre Form.
- If "Add a New Person" was selected on the Pre Form, Fill in "Person" Section and indicate the relationship of the party to the release/site in the relationship section.

Relationship to Site of Person Undertaking Response Actions

ut the following form. You cannot save data typed into this form. your completed form if you would like a copy for your records.	
1. Check all that apply: a. change in contact name b. change of address c. change in the person undertaking response actions	
Name of Organization: MACLEOD ENTERPRISES	
3. Contact First Name: Stephanie 4. Last Name: MacLeod	
5. Street: 1 Main Street 6. Title: President	
7. City/Town: Bridgewater 8. State: MA 9. ZIP Code: 01555-0000	
10. Telephone: (508) 555-1111 11. Ext.: 12. FAX:	
E. RELATIONSHIP TO SITE OF PERSON UNDERTAKING RESPONSE ACTIONS:	
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 Undertaking Response Actions Specify Relationship:	
F. REQUIRED ATTACHMENT AND SUBMITTALS:	
1. Check here if the Response Action(s) on which this opinion is based, if any, are (were) subject to any order(s), permit(s)	

Massachusetts Department of —



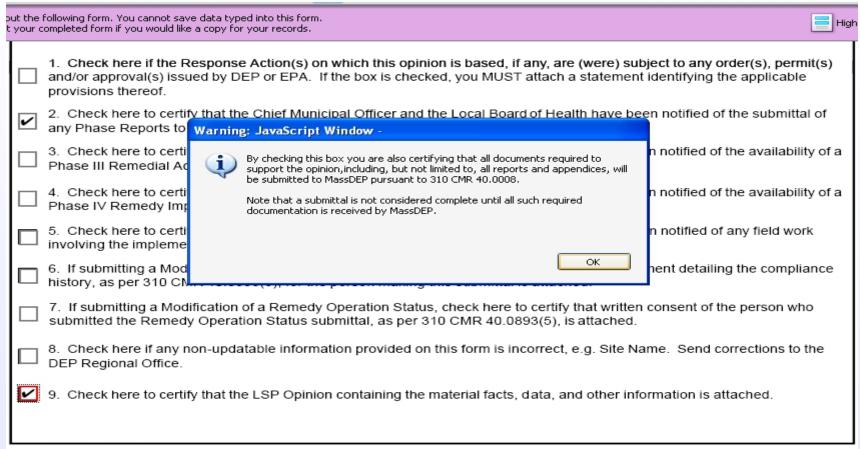
Upcoming New Check off Box in Relationship to Site Section

2. Name of Organization:		
3. Contact First Name:4. Last Name:		
5. Street:6. Title:		
7. City/Town: 9. ZIP Code:		
10. Telephone: 11. Ext.: 12. FAX:		
E. RELATIONSHIP TO SITE OF PERSON UNDERTAKING RESPONSE ACTIONS: Check here to change relationship		
1. RP or PRP a. Owner b. Operator c. Generator 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 Undertaking Response Actions Specify Relationship:		
F. REQUIRED ATTACHMENT AND SUBMITTALS:		
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.		
Check here to certify that the Chief Municipal Officer and the Local Board of Health have been notified of the submittal of any Phase Reports to DEP.		
3. Check here to certify that the Chief Municipal Officer and the Local Board of Health have been notified of the availability of a Phase III Remedial Action Plan.		
4. Chack have to cortifue that the Chief Municipal Officer and the Legal Board of Health have been notified of the quailability of a		

Massachusetts Department of —



Attachments Section



Revised: 2/15/2005 Page 4 of 5

Massachusetts Department
of———



Updated Attachments Section Box – eMail Address

	4 / / 95.1% * 5 Find
	Any Other Person Undertaking Response Actions Specify Relationship:
F. RE	EQUIRED ATTACHMENT AND SUBMITTALS:
ΙП	 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.
	Check here to certify that the Chief Municipal Officer and the Local Board of Health have been notified of the submittal of any Phase Reports to DEP.
	Check here to certify that the Chief Municipal Officer and the Local Board of Health have been notified of the availability of a Phase III Remedial Action Plan.
	4. Check here to certify that the Chief Municipal Officer and the Local Board of Health have been notified of the availability of a Phase IV Remedy Implementation Plan.
	Check here to certify that the Chief Municipal Officer and the Local Board of Health have been notified of any field work involving the implementation of a Phase IV Remedial Action.
	6. If submitting a Transfer of a Remedy Operation Status (as per 310 CMR 40.0893(5)), check here to certify that a statement detailing the compliance history for the person making this submittal (transferee) is attached.
	 If submitting a Modification of a Remedy Operation Status (as per 310 CMR 40.0893(5)), check here to certify that a statement detailing the compliance history for each new person making this submittal is attached.
	Check here if any non-updatable information provided on this form is incorrect, e.g. Site Name. Send corrections to: BWSC.eDEP@state.ma.us.
	9. Check here to certify that the LSP Opinion containing the material facts, data, and other information is attached.
Povis	Page 4 of 5

Massachusetts Department of



Certification Section on BWSC108 Form

t your completed form if you would like a copy for your records.	Highli
Bureau of Waste Site Cleanup	BWSC108
COMPREHENSIVE RESPONSE ACTION TRANSMITTAL FORM & PHASE I COMPLETION STATEMENT	Release Tracking Number 3 - 12345
Pursuant to 310 CMR 40.0484 (Subpart D) and 40.0800 (Subpart H)	
G. CERTIFICATION OF PERSON UNDERTAKING RESPONSE ACTIONS:	
1. I, George Porter , attest under the pains and penalties of perexamined and am familiar with the information contained in this submittal, including any and all detransmittal form, (ii) that, based on my inquiry of those individuals immediately responsible for obtinaterial information contained in this submittal is, to the best of my knowledge and belief, true, and that I am fully authorized to make this attestation on behalf of the entity legally responsible for this entity on whose behalf this submittal is made am/is aware that there are significant penalties, including possible fines and imprisonment, for willfully submitting false, inaccurate, or incomplete information. 2. By: 3. Title: TR	ocuments accompanying this taining the information, the ccurate and complete, and (iii) submittal. I/the person or luding, but not limited to,
Signature	
4. For: JOAN PORTER ESTATE 5. Date:	
(Name of person or entity recorded in Section D)	(mm/dd/yyyy)
6. Check here if the address of the person providing certification is different from address rec. 7. Street:	
8. City/Town: 9. State: 10. 2	ZIP Code:

Massachusetts Department of



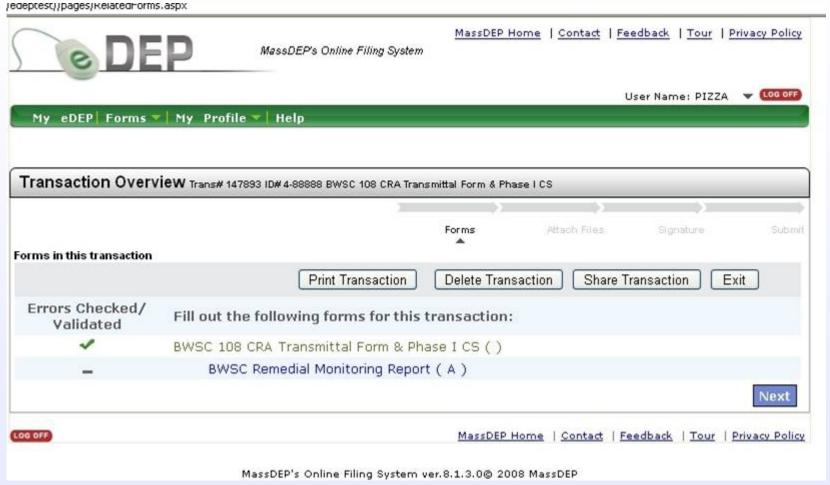
New Certification Section on BWSC108 Form

out the following form. You cannot save data typed into this form. t your completed form if you would like a copy for your records.
FORM & PHASE I COMPLETION STATEMENT COMPREHENSIVE RESPONSE ACTION TRANSMITTAL 4 - 88888
Pursuant to 310 CMR 40.0484 (Subpart D) and 40.0800 (Subpart H)
G. CERTIFICATION OF PERSON UNDERTAKING RESPONSE ACTIONS:
1. I, 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 important information contained in this submittal is, to the best of my keep that I am fully authorized to make this attestation on behalf of the entity on whose behalf this submittal is made am/is aware that there the pains and penalties of perjury (i) that I have personally and all documents accompanying this betaining the information, the accurate and complete, and (iii) is submittal. I/the person or cluding, but not limited to,
possible fines and imprisonment, for willfully submitting false, inaccurate, or incomplete information.
2. By:
Signature
4. For: MACLEOD ENTERPRISES 5. Date:
(Name of person or entity recorded in Section D) (mm/dd/yyyy)
6. Check here if the address of the person providing certification is different from address recorded in Section D.
7. Street:
8. City/Town: 9. State: 10. ZIP Code:
11. Telephone: 12. Ext.: 13. FAX:

Massachusetts Department of —



Transaction Overview BWSC108 with RMR (A)

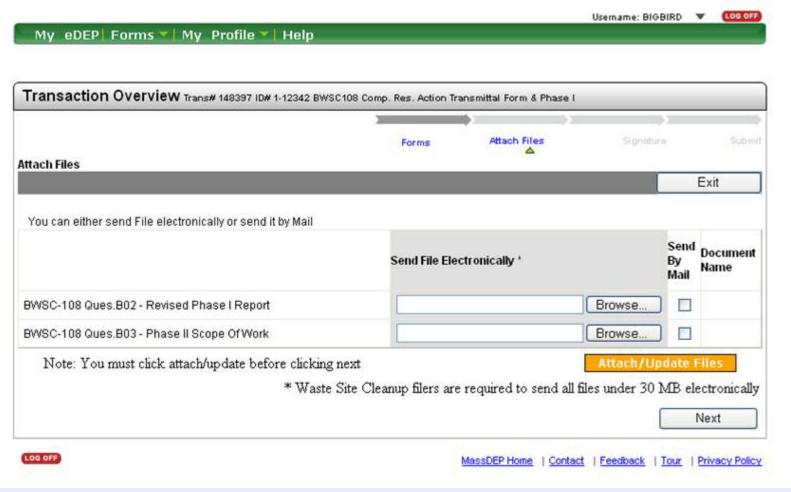


Transaction Overview BWSC108 with RMR (B)





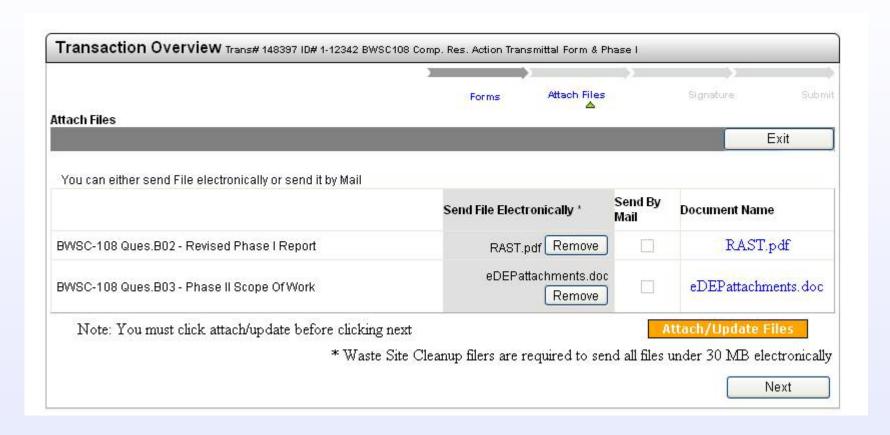
Transaction Overview – Attach Files Page



Massachusetts Department
of

ENVIRONMENTAL PROTECTION

Transaction Overview – Attach Files Page (cont.)





Client Certification

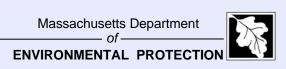
/edeptest/Pages/Acceptance.aspx

Ple	se check the form(s) you wish to accept.
ви	C 108 CRA Transmittal Form & Phase I CS - 1 Form(s)
l, a su res act	CERTIFICATION OF PERSON UNDERTAKING RESPONSE ACTIONS est under the pains and penalties of perjury (i) that I have personally examined and am familiar with the information contained in this nittal, including any and all documents accompanying this transmittal form, (ii) that, based on my inquiry of those individuals immediately onsible for obtaining the information, the material information contained in this submittal is, to the best of my knowledge and belief, true, rate and complete, and (iii) that I am fully authorized to make this attestation on behalf of the entity legally responsible for this submittal. person or entity on whose behalf this submittal is made am/is aware that there are significant penalties, including, but not limited to, lible fines and imprisonment, for willfully submitting false, inaccurate, or incomplete information.
(EYSFA.)	ss specifically authorized pursuant to 310 CMR 40,0009(2), LSPs must not sign this section.
NA	Stephanie Macleod Date 11/12/2008
Е	SP SIGNATURE
do CN	st under the pains and penalties of perjury that I have personally examined and am familiar with this transmittal form, including any and all ments accompanying this submittal. In my professional opinion and judgment based upon application of (i) the standard of care in 309 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 of my knowledge, information and belief,
act of	ection B indicates that a Phase I, Phase II, Phase III, Phase IV or Phase V Completion Statement is being submitted, the response n(s) that is (are) the subject of this submittal (i) has (have) been developed and implemented in accordance with the applicable provisions 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 in the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, and (iii) comply(ies) with the identified provisions of all orders, permits,

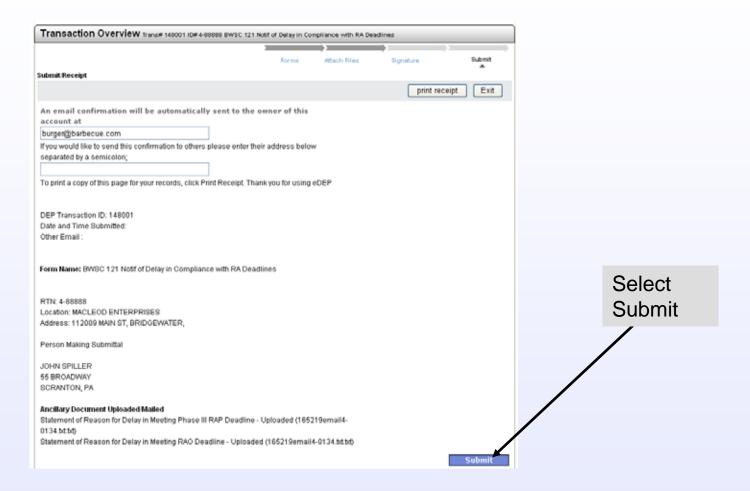
BWSC108 Ready to Submit

/edeptest/Pages/RelatedForms.aspx MassDEP Home | Contact | Feedback | Tour | Privacy Policy MassDEP's Online Filing System User Name: PIZZA V LOG OFF My eDEP Forms | My Profile | Help Transaction Overview Trans# 147893 ID# 4-88888 BWSC 108 CRA Transmittal Form & Phase I CS Forms Signature Attach Files Submit Forms Print Transaction Delete Transaction Share Transaction Exit Errors Checked/ Fill out the following forms for this transaction: Validated BWSC 108 CRA Transmittal Form & Phase I CS () BWSC Remedial Monitoring Report (A) BWSC Remedial Monitoring Report B () Next LOG OFF MassDEP Home | Contact | Feedback | Tour | Privacy Policy

MassDEP's Online Filing System ver. 8.1.4.0 @ 2008 MassDEP



Transaction Submit Page



Useful Facts Relating to Forms

Form Facts

- UTMs only required on BWSC103 and BWSC107A. Optional for all other forms.
- Child forms are dependent on Section B
 Check Boxes and will not appear until
 parent form is validated.

LSP Opinion Not Required

- BWSC103 Release Notification Form
- BWSC113 AUL (except Evaluation of Change in Land Use)
 - 113A LSP Opinion Submitted with AUL to Registry
- BWSC119 Certain URAMs of limited scope
- BWSC120 Homeowners Certification
- BWSC121 Notification of Delay (Response Action Deadlines)



eDEP Supporting Documentation Dos

- Do read "Managing BWSC eDEP Attachments."
- Do turn off auto update for dates in Word.
- Do proof your documents for errors before submitting. (Once they are submitted, we can not edit them.!)

eDEP Supporting Documentation Don'ts



include copies of checks!!!!

submit scanned documents upside down or in non-standard print size.

password protect documents

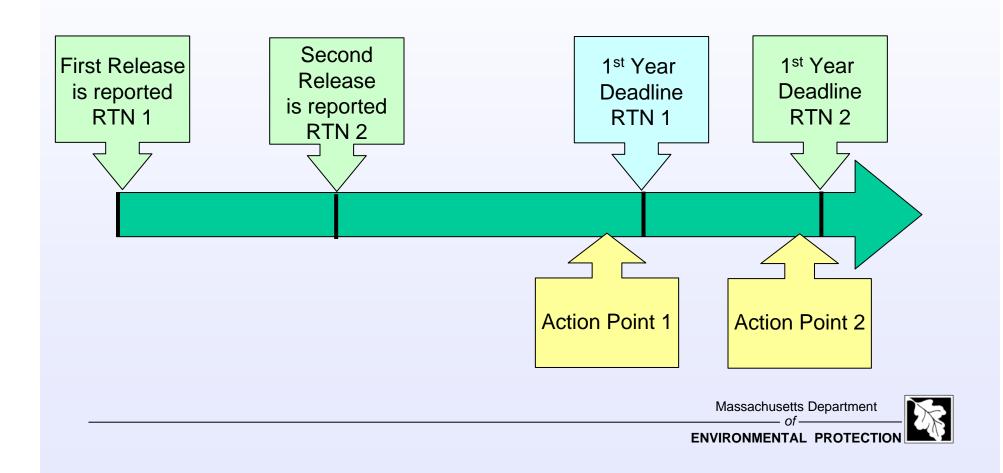
submit eDEP >30 mb (If greater than 30 mb, submit on CD with copy of submitted transmittal form next business day)

RTN Standard Operating Procedures

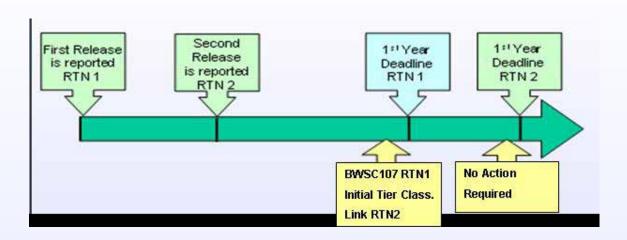
Release Tracking Numbers (RTNS)

- Are assigned to reporting conditions and to other scenarios that have specific deadlines.
- Allow for easier and more flexible management of complicated sites.

Handling Multiple Releases/RTNs (typical scenario)

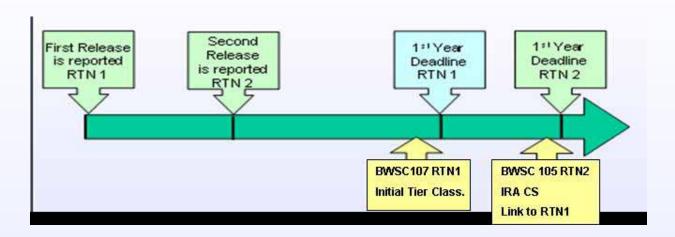


Linking Options for Combining RTNs Option1



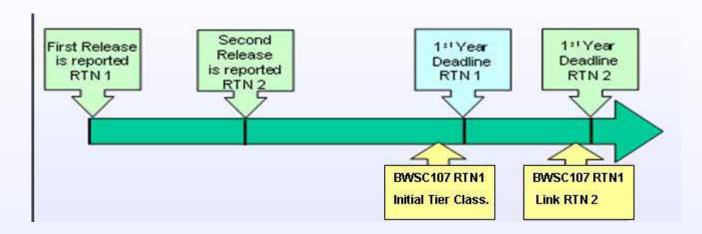
 Submit a Initial Tier Classification for RTN1 at Action Point 1 and link RTN2 at the same time.

Option 2



 Submit a Tier Classification for RTN1 at Action Point 1. Submit an IRA Completion Statement for RTN2 at Action Point 2 linking RTN2 to RTN1.

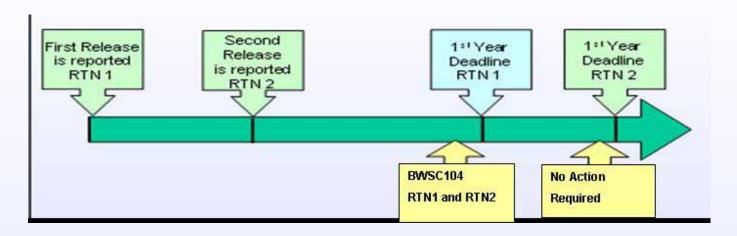
Option 3



 Submit a Tier Classification for RTN1 at Action Point 1. Submit a "Revised" Tier Classification for RTN1 at Action Point 2 linking RTN2 to RTN1.



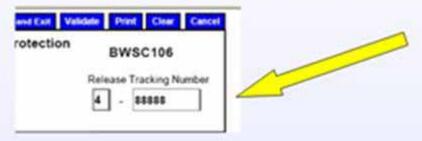
Option 4



 Submit an RAO Statement at Action Point 1 for both RTN1 and RTN2. The RTNs using this option are not linked.

Linking Summarized

 Primary RTN always goes in the upper right hand corner of the form.



 Linking can only be done after or concurrent with a Tier Classification of a Primary RTN.

Linking summarized (cont.)

- Use the Secondary RTN for those Response Actions started under Secondary RTN until they are completed, even after Linking to a Primary RTN.
- Use Primary RTN for Response Actions Started after Linking including all Comprehensive Response Actions.
- Properly Linked Secondary RTN appears on the Waste Site Web Look up as "RTN Closed"

Relating RTNs Release Abatement Measures (RAMs) BWSC106

- The RTNs are being related for just the applicable RAM.
- A Response Action Outcome (RAO)
 Statement listing all the RTNs, or a separate RAO Statement for each RTN, or any combination thereof, must be submitted at some point for each RTN.
- The same RTN should be entered in the preform of BWSC106.

RAO Partial Statements (RAO-P)

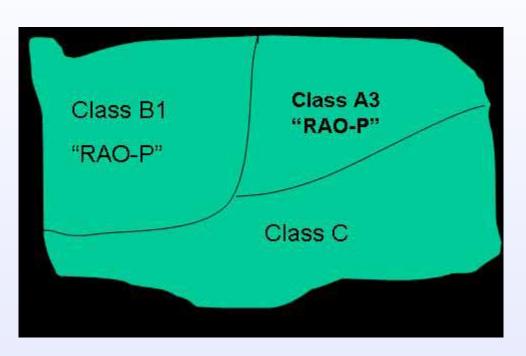
- One or more RAO-P(s) submitted do not apply to the entire release (RTN) nor do they shut off deadlines for the RTN.
- Even though some portions of the site may be at a higher level of cleanup, the summary RAO Statement class represents conditions that are accurate for the "least clean" most restricted/encumbered portions of the site.

RAO Partial Statements (cont.)

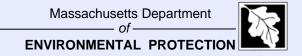
- When the entire area of the release location poses no substantial hazard an RAO Statement Class C may be submitted.
- When the entire area of the release location poses no significant risk an RAO Statement Class A or B may be submitted.

Example of Site with RAO Partial Statements

RTN1

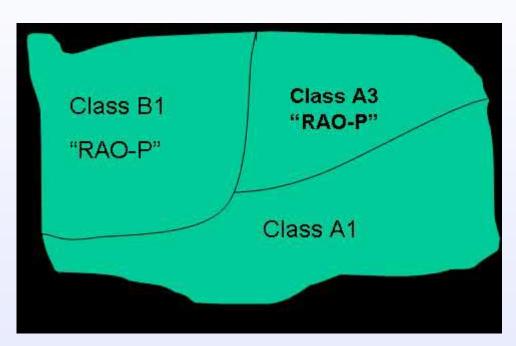


Class C RAO Statement (reference the "RAO-P" areas)



Example 2 of Site with RAO Partial Statements

RTN2



Class A3 RAO Statement (reference "RAO-P" areas)



Downgradient Property Status (DPS) BWSC115

- DPS RTNs are assigned to a Person and a Property.
- DPS RTNs appear on the Waste Site Web Look up with a current status of "DPS"
- Closure Options: A DPS RTN may be linked to a Tier Classified source RTN or an RAO Statement may be submitted.

Utility-related Abatement Measures (URAMs) BWSC119

- Do not use a pre-existing RTN for a new URAM unless directed by the region.
- Call Region with an "Intent" to do a URAM.
- URAM RTNs appear on the Waste Site Web Look up with a current status of "URAM"
- Closure options: Submit RAO Statement or Link to a Tier Classified RTN.

January and February 2009

- A streamlined process for getting RTNs for 120 Day Notification in the short term.
- A hardship checklist and instructions for noneDEP submittals.
- A revised BWSC108 with Phase IV RMR included.
- Improvements to new GUI interface and high priority form fixes.

Questions & Answers

BWSC.eDEP@state.ma.us 617-556-1100