

DEP BWSC PRA LEVEL 1 AUDIT FORM

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Lead RTN:										
SUBMITTAL TYPE (Circle)	Release Notification (circle one) 2-Hour / 72-Hour / 120-Dav	Date PRA Rcvd ____/____/____ Date Screened ____/____/____								
	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">IRA</td> <td style="width:33%;">RAM</td> <td style="width:33%;">URAM</td> </tr> <tr> <td>Plan/ Modification</td> <td>Status/ Monitor</td> <td>Completion Statement</td> </tr> <tr> <td>Phase I</td> <td>T-Class (NRS)</td> <td></td> </tr> </table>	IRA	RAM	URAM	Plan/ Modification	Status/ Monitor	Completion Statement	Phase I	T-Class (NRS)	
IRA	RAM	URAM								
Plan/ Modification	Status/ Monitor	Completion Statement								
Phase I	T-Class (NRS)									
		Related RTNs:								

Town:	Site Name:
Address:	LSP Name/No.:
PRP/OP:	Consulting Firm:

TECHNICAL SCREENING CHECKLIST

Condition		Page #
I. SITE CONCERNS		
A. Indoor Air (Based upon information contained within submittal)	Yes No ?	
1. <input type="checkbox"/> Applicable GW-2 standard exceeded@ residence/school with no soil gas/indoor air sampling	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
2. <input type="checkbox"/> Site contaminants impacting indoor air	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
B. Groundwater/Drinking Water (Based upon information contained within submittal)	Yes No ?	
1. <input type="checkbox"/> More than 0.5" NAPL observed in any monitoring well	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
2. Site within potential drinking water source area (PDWSA)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
3. Site located within IWPA/mapped Zone II	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
4. Private/Non-municipal public well(s) (TNC, NTNC) located within 500 feet of site	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
5. Municipal well(s) located within 1000 feet of site	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
6. <input type="checkbox"/> Private well contaminated as a result of site	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
7. <input type="checkbox"/> Public water supply contaminated as a result of site	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
C. Soil (Based upon information contained within submittal)	Yes No ?	
1. IH levels of Arsenic (40), Cadmium (60), Chromium (200), Cyanide (100), Mercury (300), Methyl Mercury (10), or PCBs (10) in surface soil (< 1 foot)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
D. Environmental Concerns (Based upon information contained within submittal)	Yes No ?	
1. Site within 500 feet of surface water and/or wetlands	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
2. Endangered species habitat, ACEC and/or certified vernal pool within 500 feet	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
3. Confirmed contamination of surface water, sediments, and/or wetlands with site contaminants	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
E. Site & Area Use (Choose all that apply)	Yes No ?	
1. School/Institution/Playground	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
2. Residential	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
F. Released OHM (Primary Contaminant Type(s))	Yes No ?	
1. Petroleum Fuel Oils (#2, #4, #6, Jet fuel, kerosene, lube oil, MODF, etc.)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
2. Gasoline, waste oil	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
3. Metals, coal tar, PCBs, pesticides/herbicides, asbestos, PAHs, cyanide	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
4. Chlorinated solvents or other organic compounds	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
G. Site Complexity (Based upon information contained within submittal)	Yes No ?	
1. Co-mingled plumes (i.e., different sources from one or more sites co-mingled)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
2. Bedrock contamination	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
If <input type="checkbox"/> conditions currently exist, see supervisor to discuss.		

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II. ADMINISTRATIVE ADEQUACY		Citations	Yes	No	?	NA	Page
A. Regulatory Deadlines							
1. Notification made on time	Date: _____	40.0300	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Phase I/TC within 1 yr of notification; Effective Date: _____ Tier: _____		40.0406	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Phase II submitted within 2 years of Tier Classification/Permit Effective Date		40.0550, 40.0560	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Phase III submitted with 2 years of Tier Classification/Permit Effective Date		40.0550, 40.0560	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Phase IV submitted within 3 years of Tier Classification/Permit Effective Date		40.0550, 40.0560	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. RAO submitted within 5 years of Tier Classification/Permit Effective Date		40.0550, 40.0560	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Tier II Extension or Permit Extension submitted; # of Extensions _____		40.0560(7), 40.0720	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. For IRAs, submittal deadlines have been met (Plan within 60 days, Status Report within 120 days and every 6 months from approval or receipt of Plan, Completion Report within 60 days following completion of IRA activities, Remedial Monitoring Report monthly for IH/SRM or every 6 months for non-IH/SRM)		40.0404(2), 40.0420(7), 40.0425(1)(2)(6).40.0427(2)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. For RAMs, submittal deadlines have been met (Status Report within 120 days and every 6 months from approval or receipt of Plan, Completion Report within 60 days following completion of RAM activities, Remedial Monitoring Report every 6 months)		40.0404(2), 40.0445(1)(5), 40.0446(1)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. For URAMs, submittal deadlines have been met (Letter of Intent within 7 days, Status Report within 120 days and every 6 months from notification, Completion Report within 60 days following completion of URAM activities, Remedial Monitoring Report every 6 months)		40.0404(2), 40.0462, 40.0465(1)(5), 40.0466(1)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
III. TECHNICAL ADEQUACY							
A. Response Action Type							
1. Assessment Only			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Innovative Technology			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Soil Excavation: Volume _____			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
a. Recycle			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Landfill			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Reuse			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Treat/Stabilize			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Cap/Cover/Engineered Barrier			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
a. Ph III completed when cap/engineered barrier was proposed or constructed as part of a Permanent Solution		40.0414(7)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Construction of Building in Contaminated Area			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Groundwater Treatment			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
a. Pump & Treat			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Removal (Vacuum)			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Free Product Recovery			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Bioremediation			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
i. Application within 50' surface water/100' private well/800' public well		40.0046(3)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Venting/Sub Slab Depressurization System			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Soil Vapor Extraction/Air Sparging			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Chemical Oxidation			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
a. Application within 50' surface water/100' private well/800' public well		40.0046(3)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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B. Description of Response Actions – Indication That:		Yes	No	?	N/A	Page
1. Plan/Status Report/Completion Report is adequate/complete	40.0420, 40.0440, 40.0460	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Response actions taken were in accordance with MassDEP approvals (i.e., special conditions, Interim deadlines, etc.)	40.0404(1), 40.0420(2), 40.0443(3), 40.0463(2)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Response actions proposed or taken demonstrate the level of diligence necessary, consider relevant policies, methods or practices, or have been technically justified	40.0191, 40.0193	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Monitoring of response actions is adequate (soil, groundwater, air, dust, etc.)	40.0041	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Analytical or environmental monitoring data is scientifically valid and defensible, and of a level of precision and accuracy commensurate with its stated or intended use	40.0017	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. System shutdown/operational problems	40.0041	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
C. Remediation Waste – Indication That:						
1. Remediation waste has been managed appropriately	40.0030	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Water/air discharges are within discharge limitations	40.0040	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
IV. Preliminary Response Action Type						
A. Immediate Response Actions (required for 2/72-hr release) – Indication That:						
1. Release/TOR has been adequately assessed or additional assessment is planned	40.0405, 40.0414(2)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. An Imminent Hazard condition has been eliminated/controlled	40.0427	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. A condition of Substantial Release Migration has been mitigated	40.0414	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Critical Exposure Pathway has been eliminated and/or mitigated	40.0414(3)&(4),40.0427(1)(c)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Excavation and stockpiling of >100 cyds (cum.) UST-related oil- or waste oil-contaminated soil before notification	40.0421(3)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
B. Release Abatement Measures – Indication That:						
1. Off-site disposal of > 500 cubic yards (cumulative) of OHM-contaminated soil	40.0442(2)(a)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. On or off-site treatment, recycling, or reuse of > 1500 cubic yards (cum.) of OHM contaminated soil	40.0442(2)(b)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Certification of sufficient financial resources if excavation of >1500 cyds (cum.) OHM contaminated soil	40.0442(5)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. RAM was initiated within one year of receipt of RAM Plan	40.0443(5)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. RAM fee paid, if prior to Tier Classification/RAO	40.0444(2)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
C. Utility-related Abatement Measures – Indication That:						
1. During emergency repair, notification provided within 72-hours of conducting URAM	40.0462(3)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. A 2-hour or 72-hour reporting condition likely exists	40.0461(3)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Excavation of >100 cyds (cum) oil- or waste oil-contaminated soil (LSP required)	40.0462(4)(a)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Excavation of >20 cyds (cum.) haz. mat.-contaminated soil or mix (LSP required)	40.0462(4)(b)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Temporary relocation of soil is returned to site or otherwise managed within 14 days	40.0462(6)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Reasonable attempt made to notify property owner, except during non-business-hour emergency repairs	40.462(7)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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		Yes	No	?	N/A	Page
V. Phase I – Initial Site Investigation – Information Regarding:						
A. General site information including:						
1. Address and Geographical Location (Street, Lat./Long. and UTM Coordinates)	40.0483(1)(a)(2)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Disposal Site Locus Map with 500 foot and ½ mile radii	40.0483(1)(a)(3)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Estimated number of workers on-site	40.0483(1)(a)(4)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Estimated residential population within ½ mile	40.0483(1)(a)(5)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. General description of land uses surrounding the disposal site	40.0483(1)(a)(6)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Number of Institutions within 500 feet	40.0483(1)(a)(7)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Natural Resources within 500' (surface waters, wetlands, drinking water supplies, ACECs, etc.)	40.0483(1)(a)(8)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
B. Disposal Site Map, including:						
1. Disposal Site Boundaries	40.0483(1)(b)(1)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Property boundaries located within the disposal site boundaries	40.0483(1)(b)(2)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. On-site buildings	40.0483(1)(b)(3)(a)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Floor and storm drains	40.0483(1)(b)(3)(b)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Subsurface utilities	40.0483(1)(b)(3)(c)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. OHM storage and disposal structures	40.0483(1)(b)(3)(d)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Location of known OHM releases	40.0483(1)(b)(3)(e)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Monitoring wells, borings, test pits, and other screening and/or sampling points	40.0483(1)(b)(3)(f)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
C. Disposal Site History, including:						
1. Owner/Operator and Operations History	40.0483(1)(c)(1)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Release History (source and locations, cause, approx. date and duration, type of OHM, volume, etc.)	40.0483(1)(c)(2)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. OHM Use and Storage History (type, chemical name, uses, quantities, periods, storage locations)	40.0483(1)(c)(3)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Waste Management History (land disposal, subsurface, surface water, WWTP, etc.)	40.0483(1)(c)(4)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Environmental Permits and Compliance History (21E, OHM, WW, GW, Air, RCRA, NPDES permits)	40.0483(1)(c)(5)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Potentially Responsible Parties (names and addresses of all PRPs)	40.0483(1)(c)(6)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
D. Site Hydrogeological Characteristics, including:						
1. Concise description of all subsurface investigations and assessments to date	40.0483(1)(d)(1)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Documentation of boring advancement, well construction and development, including drilling logs	40.0483(1)(d)(2)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Characterization of general site topography (slope, bedrock outcrops, surface drainage features)	40.0483(1)(d)(3)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Characterization of geologic and stratigraphic conditions	40.0483(1)(d)(4)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Description and graphical depiction of groundwater flow direction including monitoring well locations	40.0483(1)(d)(5)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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E. Nature and Extent of Contamination, including:		Yes	No	?	NA	Page
1. Evidence of releases (visual, olfactory, field screening, lab analysis, historical knowledge)	40.0483(1)(e)(1)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Names, concentrations, and volumes of released OHM	40.0483(1)(e)(2)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Laboratory data sheets	40.0483(1)(e)(3)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Details on approximate horizontal and vertical extent	40.0483(1)(e)(4)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Details on presence and thickness of non-aqueous phase liquids	40.0483(1)(e)(5)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
F. Migration Pathways and Exposure Potential, including						
1. Description and evaluation of known and potential migration by air, soil, groundwater, surface water	40.0483(1)(f)(1)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Description of known and potential human exposure by inhalation, dermal contact, or ingestion of OHM	40.0483(1)(f)(2)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Description of known and potential impacts to environmental receptors, especially ACECs, etc.	40.0483(1)(f)(3)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
G. Evaluation of the need for Immediate Response Actions						
1. Evaluated the need for Immediate Response Actions	40.0483(1)(g)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
H. Conclusions						
1. Presented a summary of findings and a statement of conclusions	40.0483(1)(h)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
I. Technical Justification for the omission of categories						
1. Presented technical justification for omission of any of the above categories	40.0483(2)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
VI. Tier Classification – Numerical Ranking System:						
1. A Phase I Report (or equivalent) was prepared in support of the NRS	40.0510(1)(a)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Tier I Inclusionary Criteria (Zone II, IWPA, GW > RCGW-1) are present at the site	40.0520(2)(a), 40.1504(2)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. The site is Tier I as a result of an Imminent Hazard	40.0520(2)(a)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Modifications in Section VI resulted in a lower Tier Classification	40.1509(2)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Modifications in Section VI were within the allowable ranges for each Subsection	40.1509(3),(4) &(5)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. The site Classification was correct	40.0520(3)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. The site score was added correctly	40.1503(5)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. DEP review raised the original classification	40.1503(2), (3), 40.1509(2)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	