**CHECKLIST FOR**

**REMOVAL/PRE-REMEDIAL SITES**

[This document is not an official EPA form and its use is not mandatory. It is intended as a sample that outlines types of information that PRP search personnel may find useful for determining whether a PRP qualifies for an ATP settlement. To the extent this form and/or its contents are used, you may wish to delete from, add to, or otherwise modify them, depending on PRP- or site-specific information needs.]

Completion of this form is not mandatory, nor is it directed solely towards a specific type of responder. The first on-site responder may begin the checklist which may include contributions from any of the following: EPA site assessment manager (SAM), on-scene coordinator (OSC), civil investigator (CI), remedial project manager (RPM), EPA contractor, state staff, or state contractor. This form should be filled out for future use by EPA or state staff in preservation of evidence related to the identification of potentially responsible parties. This form may be filled out at any point during the site discovery, assessment/investigation, or response phase.

It may not be possible to provide information for each of the items on this form but, providing information on as many of the items as possible will improve the overall efficiency of the site remediation and enforcement processes. When you have completed it to the extent feasible, please distribute copies of this form to the appropriate EPA and state personnel (e.g., civil investigators, EPA or state attorney, OSC, RPM, etc.), and place the original in the site file.

1. **Potential Site referred:**

**Region:** **Site Name:**

**Location:**

1. **Referred by:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Department/Agency** | | **Contact Name** | **Phone #** |
|  | **State** |  |  |
|  | **National Response Center** |  |  |
|  | **Other:** |  |  |

1. **Basic site information was requested to be submitted to the regional office from the above referral contact:**

**Yes**  **No**

1. **Identification of person completing this checklist:**

**Organization**: **Name:**

**Title:** **Phone:**

**Mailing Address:**

1. **The OSC (or other First Responder) determines the urgency of the situation at the site, assessing the factual information referred against the criteria set forth in the National Contingency Plan.**
2. **Site Team formed, OSC, Attorney, Enforcement Specialist, Civil Investigator, Site Assessment Manager, Remedial Project Manager, EPA contractor, state staff, etc.**
3. **Site Team reviews information to ascertain responsible corporate officers, registered agents, and principal environmental and/or health and safety contacts. Examples of information to be reviewed and source, include but are not limited to the following:**

U.S. EPA media files (NPDES permits, RCRA information, EPCRA releases, CAA permits)

State media files

Local health department files

Historical society information/historical photos

Newspaper archives

Local university archives

Sanborn fire insurance maps

Other: [**insert information type here**]

1. **Obtain access agreement(s) with last known owner(s) of site property:**

**Yes**  **No Date obtained:**

1. **Identification of the property to be visited:**

Copy of deed

Address:

Plat #:

Cross Street Location:

1. **Identification of possible contacts that may be a source of information in the future, including complete names, titles, addresses, and telephone numbers. Include all people you encounter on the site, and anyone volunteering information about the site: [\*Owners/operators, prior owners/operators, generators, transporters, local authorities, state and other federal agencies, local libraries, other]**

| **Association with Site and Number of Years\*** | **Contact Name** | **Address** | **Phone No.** |
| --- | --- | --- | --- |
| *Owner/25 yr* | *Joe Smith* | *123 Any Street*  *City, State 12345* | *012-345-6789* |
|  |  |  |  |
|  |  |  |  |

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1. **Interviews were conducted with the following contacts:**

| **Interviewee** | **Association with Site and Number of Years** | **Date Interview Conducted** | **Interviewer** | **Transcript Available**  **Yes/No** |
| --- | --- | --- | --- | --- |
| *John Smith* | *Owner/29 yrs* | *03/21/20XX* | *Jane Jones* | *Yes* |
|  |  |  |  |  |
|  |  |  |  |  |

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1. **Information about records located onsite:**

| **Type of Records\*** | **Location of Records** | **Condition of Records\*\*** | **Name of Person in Possession of Records** |
| --- | --- | --- | --- |
| *Letterhead* | *File cabinet* | *Good quality* | *Joe Smith* |
|  |  |  |  |
|  |  |  |  |

(Select “Tab” in last cell of row to add new row.)

**\* Types of records, to include but not limited to: log books, driver’s tickets, utility bills, payroll records, letterheads, or other specific correspondence or records.**

**\*\* Please identify if: contaminated, damaged, poor quality, good quality, other**

1. **Are there file cabinets on site?** *If yes, complete table below.*

|  |  |  |
| --- | --- | --- |
| **Number of File Cabinets** | **Location of File Cabinets** | **Condition of Cabinets/Files** |
|  |  |  |
|  |  |  |

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1. **Were photographs taken? *[Note: photographs should conform to accepted photographic record protocol. Refer to TAT, site assessment, and criminal investigators for EPA photographic protocol]***

**Yes**  **No**

**List photographs taken:**

1. **Were drums found at the Site?  Yes  No**

**Number of Drums:**

**Number of Drums with Labels:**

1. **Was sampling done?  Yes  No**
2. **Neighbors near the site:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name** | **Association With Site and Number of Years** | **Address** | **Phone No.** | **Interviewed and Date**  **Yes/No** |
| *Joe Smith* | *Neighbor/12 yrs* | *123 Street*  *City, State, Zip* | *123-456-7890* | *Yes (8/29/17)* |
|  |  |  |  |  |
|  |  |  |  |  |

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1. **Additional potential sources for gathering site information:**

Neighboring Businesses

County Recorder:

Deed Information

Past Tax Information

Sidwell Maps

Financial Information

Financial Institutions

Accountant Information

Commerce Clearing House (CCH) Publications (Capital Transactions)

PRP Information on EPA Databases

CERCLIS

IDEA

FINDS

ERNS

Electronic Database Review

Choice Point

Dun & Bradstreet

Lexis/Nexis (or Westlaw)

Corporate Information

Prior lawsuits, bankruptcy filings, SEC filings

Internet sources

1. **OSC plans for:**

Removal action

Removal scoping

Public participation

Establish administrative record

1. **Based on information gathered to date, appropriate enforcement activities should be taken:**

Issue information request

State an opportunity, in the information request, for the PRPs to provide information on additional PRPs

Initiate title search

Review relevant site records

Initiate PRP search report

Oral/written general notice letters issued to known PRPs

1. **OSC prepares Action Memorandum**

Develop negotiation strategy

Prepare draft administrative order on consent (AOC)

Negotiate AOC or issue unilateral administrative order (UAO)

***[Note: When issuing UAOs, the enforcement team should follow guidance on Administrative Reforms. The UAO should be issued equitably to the largest manageable number of parties and the team should document the reasons why the UAO is not issued to all PRPs, if appropriate.]***

**22.** **Site cleanup:**

PRP-lead

Fund-lead

**23. Cost recovery phase:**

**Complete enforcement investigations:**

Follow-up on earlier PRP search

Update title search if necessary Cost recovery activities:

Itemized cost summary

Send demand letters

Cost recovery referral

Close-out memorandum (where appropriate, if case is not referred to DOJ)

Cost documentation package

Work performed documents

**Please use the following space to provide additional noteworthy information regarding this checklist and the site:**

**Please attach all relevant information that has been referenced in this checklist and distribute to the appropriate regional civil investigator, site file, and other EPA or state personnel as appropriate.**