# DEEPLogoCIRCLEBoldtextaroundcircleDepartment of Energy & Environmental Protection

**Bureau of Water Protection and Land Reuse
Remediation Division**

RCRA CORRECTIVE ACTION VERIFICATION

This verification must be signed by a Connecticut Licensed Environmental Professional and the (DEEP use only)

Party that certified the Environmental Condition Assessment Form. Print or type unless otherwise

Ver#:

Rem#:

noted. Retain a copy for your records.

## Part I: Site Information

|  |
| --- |
| Facility now or formerly known as:      Facility Address:      City/Town:       State:    Zip Code:      Description in Property Deed: Recorded on page       of volume      , of the Town of:      Land records as lot      , block       on map       Acreage of Establishment:       |

Part II: Verification

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| "I verify, in accordance with §22a-449(c)-105 and in accordance with Section 22a-133v-1(z) of the Regulations of Connecticut State Agencies (RCSA), that an investigation has been performed at the subject facility in accordance with prevailing standards and guidelines and that **all actions to remediate any pollution caused by any release at the facility have been taken in accordance with the remediation standards**, RCSA Section 22a-133k-1 through 3.”I further verify compliance with the following”* Ecological Risk Assessment has been completed;
* The concentration of Lead (Pb) at the site is conssistent with EPA and DEEP risk-based standards;
* Site-specific QAPP have been fully documented; and
* Public participation has been provided.

(Check if applicable)[ ]  an environmental land use restriction (ELUR) was executed and recorded in accordance with RCSA Section 22a-133q-1.Date ELUR Approved by Commissioner:       Date ELUR Recorded:      Provide the date the ECAF was filed with the Department:      Provide the date the verification fo remediation was delegated by the Commissioner to an LEP:       |
|  |  LEP Seal |
| Signature of Licensed Environmental Professional License #:       |
|  |
|       |
| Name of Licensed Environmental Professional (print or type) |
| **Date of signature/verification**:      Phone Number:      e-mail:        |

This completed form should be submitted to: Remediation Division, 2nd Floor

 Bureau of Water Protection and Land Reuse

 Department Of Energy & Environmental Protection

 79 Elm Street

 Hartford, CT 06106-5127