

PRE-CERCLIS SCREENING ASSESSMENT CHECKLIST/DECISION FORM

This checklist can assist the site investigator during the Pre-CERCLIS screening. It will be used to determine whether further steps in the site investigation process are required under CERCLA. Use additional sheets for the narrative.

Checklist Preparer:

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(Name / Title)

8/17/11
(Date)

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Site Name: Milwaukee Die Casting Co., Inc.

Other Names (if any): _____

Site Location: 4132 N. Holton Street
(Street)

<u>Milwaukee</u> (City)	<u>Milwaukee</u> (County)	<u>Wisconsin</u> (State)	<u>53212-</u> (Zip+4)
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Congressional District 4

Latitude: N 43° 5' 31" or . **Longitude:** W -87° 54' 14" or - .

With regards to the Latitude and Longitude, please provide the following information: **Accuracy (in meters):** +/- 1, **Collection Method:** GPS Code (Pseudo Range) Differential, **Reference Datum:** NAD 83, **Reference Point:** Facility Center / Centroid, **Source Map Scale:** (blank), **Point/Line/Area:** Point; **Collection Date:** 5/5/2004; **Verification Method:** Ground Truth Verified

Complete the following checklist. If "yes" is marked, please explain below.

	YES	NO
1. Does the site already appear in CERCLIS?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Is the release from products that are part of the structure of, and result in exposure within, residential buildings or businesses or community structures?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. Does the site consist of a release of a naturally occurring substance in its unaltered form, or altered solely through naturally occurring processes or phenomena, from a location where it is naturally found?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. Is the release into a public or private drinking water supply due to deterioration of the system through ordinary use?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Is some other program actively involved with the site (i.e., another Federal, State, or Tribal program)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Are the hazardous substances potentially released at the site regulated under a statutory exclusion (i.e., petroleum, natural gas, natural gas liquids, synthetic gas usable for fuel, normal application of fertilizer, release located in a workplace, naturally occurring, or regulated by the NRC, UMTRCA, or OSHA)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7. Are the hazardous substances potentially released at the site excluded by policy considerations (e.g., deferral to RCRA Corrective Action)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8. Is there sufficient documentation that clearly demonstrates that there is no potential for a release that could cause adverse environmental or human health impacts (e.g., comprehensive remedial investigation equivalent data showing no release above ARARs, completed removal action, documentation showing that no hazardous substance releases have occurred, EPA approved risk assessment completed)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

9. Is there documentation indicating that a target (e.g., drinking water wells, drinking surface water intakes, etc.) has been exposed to a hazardous substance released from the site?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10. Is there an apparent release at the site with no documentation of exposed targets, but there are targets on-site or immediately adjacent to the site or nearby (within 1 mile)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11. Are there no releases or potential to release?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Please explain all "yes" answer(s), attach additional sheets or refer to narrative: Regarding #1 & #5, the site's CERCLIS number is WIN 000510552 (established 3/14/11). The site is currently undergoing an EPA Removal Site Assessment. Field sampling activities were conducted 5/31-6/2/11 and included installation and sampling of soil borings, temporary groundwater monitoring wells, sampling of existing wells, sediment and water sampling of an underground tunnel system, surface wipe and dust sampling, and indoor air and sub-slab vapor sampling. Weston Solutions, Inc. (EPA START contractor) is currently preparing a documentation report.

Site Determination: Enter the site into CERCLIS. Further assessment is recommended (explain below).
 The site is not recommended for placement into CERCLIS (explain below).

DECISION/DISCUSSION/RATIONALE:

The site is a former aluminum & zinc die casting facility located in an industrial / commercial area on the east side of the City of Milwaukee. The site was (may be an ongoing) source of PCB release to the environment (soil, groundwater) and the Milwaukee sanitary sewer system. PCB-impacted sediments may exist in a storm sewer that discharges directly to the Milwaukee River.

High levels of PCBs (ranging to 2,200 mg/kg) and CVOCs (TCE to 1,100 mg/kg, PCE to 429 mg/kg) contamination occur in shallow soil (<3 ft bgs), as well as in deeper soil, and in groundwater monitoring wells (PCB to 203 ug/L, TCE to 200,000 ug/L, PCE to 18,000 ug/L, etc.). Areas/features that require additional sampling include, but are not limited to: 1) a local storm sewer that directly discharges to the Milwaukee River ~550 ft east of the site (and potentially the river itself), 2) soil immediately beneath/adjacent to the building foundation & floor and surrounding underground tunnels & sumps that accessed & collected fluids draining from the die casting machines above, and 3) areas where the degree and extent of contamination have not been determined (including a continuous sand layer at an approx. depth of 10-15 feet beneath and east of the site).

EPA Regional Review and Site Assessment Decision

Check the box(es) that apply:

- Not a Valid Site or Incident
- Incident for Further Action Under CERCLA

Recommended Further Action:

- APA
- Full PA
- SI

Defer/Refer to:

- Removal Program
- State/Tribal Program
- RCRA
- Brownfields
- Other: _____

Regional EPA Reviewer:

Print Name/Signature

Date

State Agency/Tribe:

Print Name/Signature

Date

STEPHEN D. MUELLER / *[Signature]* 9/7/11