Tony Evers, Governor Preston D. Cole, Secretary Telephone 608-266-2621 Toll Free 1-888-936-7463 TTY Access via relay - 711



April 6, 2020

Michael Zacker Talman Ventures LLC 4515 Washington Rd. Kenosha, WI 53144

RE: Approval of Additional Site Investigation Funding

PECFA # 53142-3443-18A DNR BRRTS # 03-30-409382 FID # 230058620 Heimes Garage, 3418 66th St., Kenosha

Site Investigation Exceedance Request Received: March 30, 2020

The Wisconsin Department of Natural Resources (Department) received a request to exceed the \$20,000 investigation cost cap for the site referenced above. The Department is approving costs that your consultant requested to complete the investigation.

The SOW includes costs for conducting a vapor assessment. A copy of the Department worksheet for the chapter NR 747, Wisconsin Administrative Code, Usual and Customary Cost Schedule (Cost Schedule) tasks is enclosed for your reference.

Site Investigation Cap:	\$39,784.15
Additional Site Investigation Costs Approved:	<u>\$769.75</u>
Site Investigation Cost (Excluding Interest) Cap:	\$40,553.90

Note: A claim for PECFA reimbursement must be submitted within 180 days of incurring costs (i.e., completing a task) or by June 30, 2020, whichever is earlier. If a claim for costs incurred is not submitted within this deadline, the costs will not be eligible for PECFA reimbursement.

Usual and customary costs for activities included in this approval will only be reimbursed at a rate equal to or less than what is allowed on the Cost Schedule and are reimbursed based upon the Cost Schedule that is in effect at the time the activity is performed. Costs for activities not included in this approval are not reimbursable without prior Department authorization.

Regulatory Correspondence (Task 7, Activity RC05), Claim Submittal (Task 27, Activity CS05) and Standardized Invoice (Task 28, Activity SI05) costs are not included in the cap approved above. These activities will be reimbursed according to the task specifications and with submittal of proper supporting documentation at claim review time.

The Department approves a variance from the Cost Schedule for Vapor Intrusion Screening. Do not

include these costs (\$376.52) on the standardized invoice for usual and customary cost activities. The approval is based on an estimate of 4 hours at the staff professional rate of \$94.13/hour. Include these



Heimes Garage BRRTS # 03-30-409382

costs on a separate company invoice. When you submit the claim for these costs, please attach a copy of this letter and the attached worksheet for the claim reviewer's reference.

Upon completion of the investigation, you must submit a complete site investigation report with a request for closure or a request that the report be evaluated for public bidding. In addition, ch. NR 700 semi-annual progress reporting is required until this case is closed.

The Department considers the consultant the primary controller of costs during the site investigation. This approval does not guarantee eligibility of any specific costs that have been incurred or that may be incurred in the future. Final determination regarding the eligibility of costs will be made by the claim reviewer when the entire claim, including all invoices and reports, is submitted for payment.

Thank you for your efforts to protect Wisconsin's environment. If you have any questions, please contact me in writing at the letterhead address or by telephone at (920) 893-8524.

Sincerely,

Ly R. Delcone

Lee R. Delcore Hydrogeologist Remediation and Redevelopment Program

Enclosure: Usual and Customary Cost Schedule Worksheet

cc: Sean Cranley, Midwest Environmental Consulting, LLC (via email)

Usual & Customary Cost Schedule Worksheet #27 (January 2020 - June 2020) for Form RR-113a-E										
PECFA #:				53142-3443-18A						
	BRRTS #:			03-30-409382			Cost Schedule Total		\$393.23	
Site Name:				Heimes Garage	Variance 1			al	\$376.52	
Site Address:				3418 66th St., Kenosha, WI 53142	WI 53142				\$769.75	
Date:				April 6, 2020						
Task #	Task Description	Services	Activity Code	Activity Reference Code Description	Unit	Units	Max Unit Cost	Total Cost	Notes	
36	Change Order Request		COR05	Change Order Request	Change Order	1	\$ 393.23	\$ 393.23		
	Variance	Consultant		Vapor Assessment/Screening	Hour	4	\$94.13	<u>\$</u> 376.52		