

BRRTS Number: 02-41-552635

**Remediation & Redevelopment
 Continuing Obligation Review**

Form 4400-232 (Revised 2/11)

Reviewer: **Steve Mueller**
 Site Name: **Crestwood Area Project - Glendale Medical BI**

Review Date: **8/27/12**
 Region: **SER**

See RR-5242 for instructions. Steps with an *denote DNR follow up; ** denote RP/property owner follow up.

FILE REVIEW:

1. Review the file and BRRTS, identify the following:

Address/ City/Zip Code: **5650 N. Green Bay Ave., Glendale 53209**

County Parcel Identification Number (PIN): **1689021000**

FID Number: **341167420**

Current Property Owner: **Glendale Medical Center (Siegel-Gallagher, Inc.)**

Original RP: **St. Francis Bank**

Has the property been transferred since the restriction was recorded/condition applied? No Yes

How was site selected for audit? (AC = BRRTS Action Code)

- Vapor Mitigation AC 226 Green Space Grant AC 605 Age of Remedy
 VPLE with AC 56 AC 220, 222, 224, 228 or 230 Complaint Received
 Enforcement Follow-up Deed Restriction AC 52 or 696 (LGU) Regional Priority
 Other: _____

Date of:

- Final Closure **October 13, 2008** Remedial Action Plan Approval
 Certificate of Completion _____ General Liability Clarification Letter _____
 Green Space Grant _____ Local Gov't Unit (LGU) letter _____

*Check all continuing obligations applied (at case closure or RAP approval or letter to LGU):

Add to BRRTS	AC in BRRTS	Action Code	Action Code Meaning
		51	Deed notice
		52	Deed restriction for soil
		730	Groundwater use restriction
		95	Deed instrument conditions met (for audits, use if deed restriction was updated by filing a deed notice)
		101	GIS Registry PDF modified – date DNR letter sent
		104	Site removed from GIS Registry – date DNR letter sent
		696	Continuing obligation required of LGU to maintain liability exemption
		605	Green Space Grant awarded (deed restriction)
	X	56	Continuing Obligation applied (use with codes 220-238)
		220	Soil at industrial use level
	X	222	Cover/engineered containment system (pavement, soil cover, etc.)
		224	Structural impediment (buildings or other structures)
	X	226	Vapor mitigation/response
		228	Site-specific (identify in comment field)
		230	LGU was directed to take a protective action
	X	232	Residual soil contamination > RCLs/SS RCLs (use with AC 222,224)
		234	Monitoring well needs to be abandoned
	X	236	Site closed with groundwater contamination > ES
		238	Maintenance and inspection documentation required to be submitted
X		185	Closure Compliance Review completed
X		186	Closure Compliance Review – RP follow up needed
		187	Closure Compliance Review follow up completed

Describe any site-specific requirements that the site owner and/or responsible party needed to address. _____

Is the site on the GIS Registry? Yes No - *Add it to the GIS Registry**

Were neighboring properties affected?

No

Yes - Are these properties listed on the GIS Registry and in BRRTS?

Yes No *Update the GIS Registry/BRRTS, use form 4400-246*.*

Was a maintenance plan required at closure?

NA

No

Yes Is it in the file or PDF or missing ?

If no maintenance plan was required, offer the property owner the template model with inspection log, and note in the follow up section of the audit that one was provided on the audit date.

Was/were the appropriate restriction(s) recorded with the Register of Deeds?

NA

No

Yes

Has a restriction been amended, or been nullified by DNR?

No

Yes

If Yes: Was BRRTS updated? (95)

No *

Yes

Was the GIS Registry PDF updated?

No *

Yes

Site Visit:

2. Contact the site owner for access. Contacted property owner representative, Dan Walsh, to follow up after facility inspection. .

3. Walk the site (ideally with the owner or responsible party) to review the site conditions against the conditions documented at closure/other to verify or change answers to questions in #1. Observed passive vent pipes/wind turbines from roof of neighboring Heiser Ford building. Inspected pavement & landscape covers on my own.

4. With the site owner/RP (if possible), answer the following for DNR RR records:

Did the site owner know about the continuing obligation(s)?

Yes

No

Have site conditions changed since closure that would affect either a deed restriction or other restrictions or requirements associated with the site?

No

Yes Explain. _____

Examples: 1) a building has been razed and investigation and remediation occurred. 2) excavation or residential development has occurred in a restricted area.

Is an asphalt cover or soil cover removed or in disrepair?

No/NA

Yes Should it be replaced or repaired? No Yes **

If a performance standard was the final remedy, has it been altered?

No/NA

Yes Describe _____

If Yes - Was DNR notified? Yes No

Have local zoning changes occurred since closure?

No/NA

Yes If Yes - Does it appear to impact the effectiveness of the restriction?

No

Yes Describe: _____

Is soil sampling needed to determine if the final remedy has been modified such that a direct contact threat exists?

No

Yes** Describe: _____

For example, an asphalt cover has been removed or is in disrepair, or a new contaminated site is present upgradient, etc.

Has additional monitoring or remediation been done since the site was closed?

No

Yes Describe: _____

Does a new threat to public health or the environment exist (e.g. new sources or exposure routes)?

No

Yes If Yes - Does sampling need to be performed?

No

Yes** Describe what should be done to address the problem, and by whom:

Is the vapor mitigation system or sub-slab depressurization system (SSDS) operating as designed? (pressure gradient being maintained)

NA

Yes

No** – if not, describe any follow up needed. **As observed from the roof of the neighboring Heiser Ford building, the wind turbines on the vent pipes on the Glendale Medical bldg. roof were non-rotating and, therefore, likely rusted/fused.**

Have any of the exposure assumptions used for closure changed at this site?

NA

No

Yes - if yes, describe any follow up needed.

Has the land use at this site changed such that a vapor intrusion pathway may now exist?

No

Yes - If Yes, describe any follow up needed. _____

COMPLIANCE AND FOLLOW-UP:

5. Identify compliance and any follow up needed.

Is the site in compliance with the continuing obligations/closure approval document?

Yes

No - Describe what's not in compliance: **Wind turbines on roof-top vent pipes appear to be inoperable, and areas of the pavement cover are deteriorating, esp. to the east of the facility building.**

(May depend on extent of non-compliance, non-maintenance of remedy or changed ownership or conditions. If case is out of compliance, it should be prioritized by the region, for new casework or enforcement, as needed.)

If the site is not in compliance, what are the reasons? _____

Has the maintenance agreement required at closure been followed?

NA

Yes

No Describe: **See above comments. The landscaping barrier cover appears healthy and in good condition with no significant areas where residual contamination might be exposed.**

6. **Are additional actions by the RP or property owner warranted at the site? *(The intent is to return the site to compliance with continuing obligation. If further remedial action is needed, determine if the site meets the NR 726 reopening criteria.)*

No

Yes Describe any actions needed to return the site to compliance, and identify who's responsible: (Add AC 186, use AC 99 for actions not listed under AC186)

Repair or replace wind turbines on roof vents and conduct required routine inspection and complete log. Deteriorating areas of pavement should be repaired or replaced before pot holes & exposed soils develop. Property manager provided a new copy of the maintenance plan & inspection log.

7. *Does the site require follow up by DNR?

No

Yes

contact or enforcement to return site to compliance with continuing obligation

updating BRRTS *(check all codes that apply on pg. 1)*

updating the GIS Registry (adding or modifying a packet)

reopen site (add ACs 186 and 13)

other: _____

8. *Attach photographs of the site, documenting site conditions.

9. *Identify and update any applicable action codes (Table on page 1).

10. *Add a copy of this audit to the case file. Follow the instructions in RR-5242, (<http://intranet.dnr.state.wi.us/int/aw/rr/Guidance/RR5242.pdf>). Send a copy electronically (PDF) to Central Office, using the following naming convention: BRRTS#_COAUDIT_Year.pdf (example: 0365001149_COAUDIT_2008.pdf)



Looking SE at medical building.



Looking S along W side of facility.



Looking ENE along N driveway into facility.



Looking ESE at drive-through at N end of medical building.



Looking S along W side of medical building.



Looking N along W side of medical building.



Looking at landscaping at SW corner of medical building.



Looking at landscaping at SE corner of medical building.



Looking NW at parking area E of medical building.



Looking W along drive-through at N end of medical building.



Looking S along pavement on E (back) side of facility.



Looking N along pavement on E (back) side of facility.